Graduate Program Major Curriculum Change Request Kansas State Board of Nursing 60-17-105 (d) (2) (A) (B) – Graduate Must be received by KSBN at least 30 days before the board meeting

Date:		9-19-202	0								
Name of Program:	MSN-F	MSN-FNP and Post Masters FNP Certification Program									
Program Administrator including credentials:	Bella M	Bella Michelle Birdashaw, DNP,APRN,FNP-C,ENP-C									
Parent Institution:	Unive	University of Saint Mary									
Address of Institution:	4100 8	4100 South 4th Street, Leavenworth, KS									
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Level of the Program for which the change Is being requested	Maste	rs									
Briefly describe the Change being requested:	Increas	se clini	ical practice hours	in the N	ISN-FNP and Pos	t Masters					
	FNP p	rogra	m from 540 to 72	0. lmp	lementation date	Jan, 2021					
			Action Taken								
Education Committee Rev	iew			ate							
Action Taken:	oved		Not Approved		Deferred						
Board of Nursing Review			Di	ate							
Action Taken:	oved		Not Approved		Deferred						
Nursing Education Compli	ance O	fficer		D	ate	_					
11/04, Rev 3/11, 6/16, 10/17											

Graduate Program Major Curriculum Change Request 60-17-105 (d)(2) (A)(B)

The following shall be considered major revisions to the curriculum:
☐ Any significant change in the plan of curriculum organization
 • Written documentation that includes a comparison of old to new, this may be in the form of a table • Address any changes needed in resources and the adequacy of resources, if resources are involved in the change
□ any change in content

Provide:

- Rationale for the change
- Show faculty involvement in process –may use statements of support from faculty and/or evidence of understanding of the change
- A table that shows the differences between the old and new curriculum.
- Include single page course descriptions. <u>Do Not submit entire course</u> syllabus

Instructions:

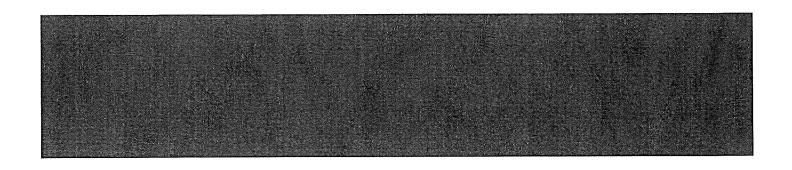
- 1. Submit any major revision to the curriculum of advanced nursing courses for board approval at least 30 days before a board meeting.
- 2. Submit 1 paper copy of the request form and all addenda on white paper, loose leaf and single-sided pages.
- 3. Major curriculum change requests are reviewed by the Education Committee and Board of Nursing at their scheduled meetings. The request will be approved/not approved/deferred.
- 4. Following the Education Committee and Board Review and action, a copy of the form will be returned to you indicating Board action.
- 5. The program must receive board approval before implementation
- 6. Notify Education Specialist to request Word document version of this form to complete electronically, print and mail to KSBN with requested information, if desired.

11/04, Rev 3/11, 6/16, 10/17

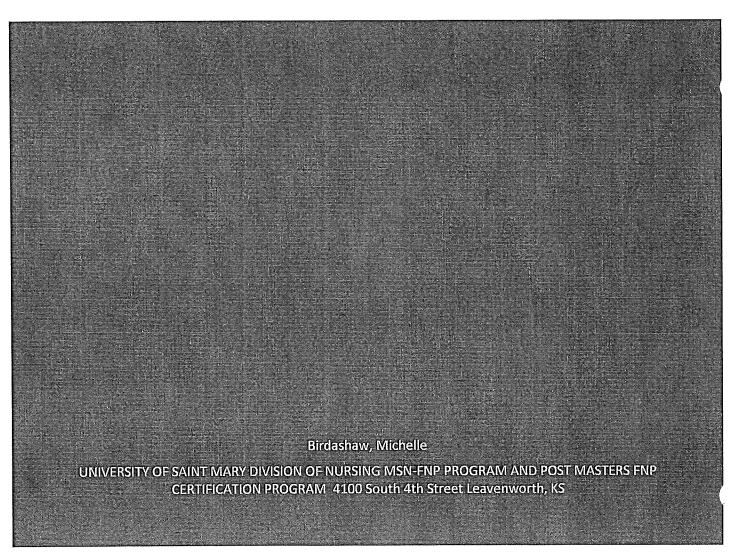
Change Being requested:

The University of Saint Mary is requesting an increase in the clinical hours for the MSN-FNP program and Post-Licensure Program. Currently total program hours are 540 which is barely above the 500 minimum requirement to sit for the licensure exam. Our Graduate and FNP faculty feel this is an insufficient number of clinical hours to support students in the transition to an advanced practice role. One of our challenges with this change was to increase program hours without increasing the cost to students. During our onsite visit with KSBN and CCNE this past Jan, 2020 we discussed this challenge and CCNE suggested increasing the clinical ratio to 1:60 from our 1:45. With implementing this change our program can successfully increase direct clinical practice hours required to 720 from 540 which would allow a healthier ratio of clinical practice hours in the program. Each practice would increase hours required in the eight week course to 45 which would equal 180 hours for each practicum experience and an average of 22.5 hours of clinical a week.

The change would not have any impact on program learning outcomes, or cost to the program.



MSN-FNP AND POST MASTERS FNP CERTIFICATION PROGRAM CLINICAL PRACTICE HOURS-MAJOR CURRICULUM CHANGE REQUEST



Course & Course Description	Objectives
Course & Course Description	Upon completion of this course the learner will be able to:
NUFP 780 (6) 3 didactic and 3 clinical hours 180 hour direct clinical time. Primary Care I Management of the Adult/Geriatric Population This course, which includes 3 credit hours of clinical experience, provides the FNP student with the knowledge, practical skills, and clinical reasoning to manage the adult and geriatric patient populations. The primary care management of these populations will be emphasized in this course, including both acute and chronic health conditions. The clinical component of this course will expose the FNP student to a health care setting that manages the adult and geriatric populations. Students will conduct assessments and develop a plan of care, under the direct supervision of the preceptor. In addition, students will complete on-campus clinical hours under the supervision of NP clinical faculty. NUFP 782(6) 3 didactic and 3 clinical hours 180 hour direct clinical time.	 Interpret history and physical examination data to develop a plan of care for the management of commonly encountered acute and chronic conditions in the primary care setting. Formulate differential diagnoses for the adult/geriatric patient using clinical and diagnostic reasoning skills. Develop an evidence-based clinical management plan for the adult/geriatric patient. Display evidence of knowledge of acute and chronic conditions in the adult/geriatric populations in the primary care setting Analyze data obtained from a comprehensive history and physical examination to determine a plan of care for
Primary Care II Management of Childbearing Families This course provides the FNP student with the knowledge and clinical skills necessary to manage adult patients in a primary care setting, with particular emphasis on family planning, women's health, gender-related care, and the pregnant or lactating patient. The clinical component of this course allows the FNP student to gain experience in the management of adult patients, particularly women, in the primary care setting. A preceptor(s) and clinical faculty will guide and facilitate the student's clinical experiences.	the adult patient. 2. Determine differential diagnoses based on clinical data. 3. Develop an evidence-based plan of care for commonly encountered acute and chronic conditions for the adult patient, emphasizing those related to women's health. 4. Demonstrate the knowledge, skills, and diagnostic reasoning expected of a family nurse practitioner in a primary care setting.
NUFP 784 (6) 3 didactic and 3 clinical hours 180 hour direct clinical time. Primary Care III Management of Children, families, and Populations This course provides the FNP student with the knowledge and clinical skills necessary to manage adult and pediatric patients in a primary care setting, with particular emphasis on families, children, and populations. The clinical component of this course allows the FNP student to gain	 Evaluate health disorders for pediatric patients. Evaluate growth, development, and psychosocial issues that commonly affect pediatric patients. Examine differential diagnoses for pediatric patients. Examine strategies to manage health disorders, growth issues, and developmental problems in pediatric patients. Examine strategies to educate pediatric patients and their families about health disorders, growth issues, and developmental problems.

- 6. Assess the impact of culture on the treatment and management of disorders, growth issues, and developmental problems.
- 7. Comprehend and relate key terms, principles, and concepts related to the primary care of pediatric patients.
- 8. Analyze data obtained from a comprehensive history and physical examination to determine a plan of care for the adult and pediatric patient.
- 9. Determine differential diagnoses based on clinical data.
- 10. Develop an evidence-based plan of care for commonly encountered acute and chronic conditions for the adult and pediatric patient.
- 11. Demonstrate the knowledge, skills, and diagnostic reasoning expected of a family nurse practitioner in a primary care setting

NUFP (6) 3 didactic and 3 clinical hours 180 hour direct clinical time.

presentation.

786 Primary Care IV Clinical Capstone & Practicum for FNP Students Students in this synthesis course will focus on clinical competence in primary care settings by building on knowledge and skills gained in previous of nurse practitioners. courses. Through clinical practice, students will build confidence as they begin the transition from the role of registered nurse to advanced practice nurse. Classroom activities and case studies will enable students to explore the salient nurse practitioner practice issues involved in the delivery of safe, competent, quality and cost-effective care of patients in a dynamic healthcare system. Clinical experiences in primary care settings will provide students with the continued opportunity to develop, implement, and evaluate management plans for patients with complex health conditions. The application of knowledge in the management of patients and collaboration among the advanced practice nurse and the patient, family, and interprofessional healthcare team are emphasized. In addition, this course serves as a culminating experience in the program. Students develop a scholarly written clinical project proposal (Capstone) that registered nurse to APRN-nurse practitioner.

The purpose of the Capstone project is to demonstrate synthesis and application of all MSN/FNP program outcomes and integrate NONPF competencies in a systematic and scholarly manner. This is accomplished through the development of a scholarly written Capstone project, development of a poster Power Point presentation, a follow-up oral poster presentation of the Capstone project, and finalization of the NP portfolio.

addresses a significant gap in clinical practice. The project proposal (Capstone) will be disseminated by students via a professional oral project

- 1. Synthesize the role and responsibilities of the APRNnurse practitioner.
- 2. Analyze issues related to the certification and licensing
- 3. Summarize challenges that impact clinical practice fc APRN-nurse practitioners.
- 4. Analyze the evolving role of the APRN-nurse practitioner.
- 5. Apply interprofessional practice in providing care to patients with complex health conditions.
- 6. Synthesize the process for transitioning from the role of
- 7. Analyze ethical and legal issues of nurse practitioner practice.
- 8. Synthesize process for measuring quality performance of nurse practitioners.
- 9. Synthesize competencies that demonstrate integration of program outcomes.
- 10. Synthesize competencies of evidence-based practice, culturally appropriate patient-centered care, disease prevention and health promotion, social equity and health disparities, role of the advanced practice nurse.

University St. Mary

MSN-FNP and Post Master Certification program Clinical Site Description

A clinical practicum is a distinctly defined supervised on site experience in which students develop applied skills and integrate professional knowledge in the provision of "hands- On" primary care. Students in the FNP specialization must complete 4 courses (NUFP780, NUFP782, NUFP784, and NUFP786) that include a clinical practicum, with a minimum of 720 hours of supervised clinical experience (180) per course). Qualifications of Preceptor:

1)Shall be licensed as an advanced practice registered nurse or shall be licensed as a physician in the state in which the individual is currently practicing.

2) May not be: relative, immediate supervisor, employee or subordinate of student.

As part of your admission process to the FNP program, St. Mary requires that you identify potential clinical sites appropriate to the courses you will be taking. Identification of a field site on this form does not guarantee the approval of a practicum application /facility agreement at this clinical site. Practicum applications are due one semester prior to the start of each practicum course. Students may not register for a practicum course without an approved practicum site.

I understand the clinical requirements and have identified potential clinical sites:

Course	Potential Site information
NUFP 780 (6) 3 didactic and 3 clinical hours 180 hour direct clinical time. Primary Care I – Management of the Adult/Geriatric Population Possible Preceptors: FNP, AGNP, Family practice MD or DO, Internal Medicine MD or DO Possible Sites: Family practice, primary care clinic, health department, internal	Site Name: Site Address: Site Type:
medicine practice NUFP782 (6) 3 didactic and 3 clinical hours 180 hour direct clinical time. Primary Care II – Management of Childbearing Families Possible Preceptors: FNP, AWHNP, Obstetrician/gynecologist Family practice MD or DO Possible Sites: Family Practice, OBGYN practice, primary care clinic, health department	Site Name: Site Address: Site Type:

NUFP 784 (6) 3 didactic and 3 clinical hours	Site Name:
180 hour direct clinical time.	Site Address:
Primary Care III – Management of Children, families, and	
Populations	Site Type:
Possible Preceptors:	
FNP, PNP, Family practice MD or DO, pediatrician MD or DO	
Possible Sites:	
Family practice, primary care clinic (with large child/adolescent	
population), health department, pediatric office	
NUFP 786 (6) 3 didactic and 3 clinical hours	Site Name:
180 hour direct clinical time.	Site Address:
Clinical Capstone & Practicum for FNP Students	
Possible Preceptors:	Site Type:
FNP, AGNP	
Possible Sites:	
Family practice, primary care clinic, health department, internal	
medicine practice	

Objectives Course & Course Description Upon completion of this course the learner will be able to: 1. Interpret history and physical examination data to NUFP 780 (6) 3 didactic and 3 clinical hours develop a plan of care for the management of commonly 135 hour direct clinical time. encountered acute and chronic conditions in the primary Primary Care I Management of the Adult/Geriatric Population care setting. This course, which includes 3 credit hours of clinical experience, provides the FNP student with the knowledge, practical skills, and clinical reasoning 2. Formulate differential diagnoses for the adult/geriatric to manage the adult patient using clinical and diagnostic reasoning skills. and geriatric patient populations. The primary care management of these populations will be emphasized in this course, including both acute and 3. Develop an evidence-based clinical management plan chronic health conditions. for the adult/geriatric patient. The clinical component of this course will expose the FNP student to a health care setting that manages the adult and geriatric populations. Students 4. Display evidence of knowledge of acute and chronic will conduct assessments and develop a plan of care, under the direct conditions in the adult/geriatric populations in the primary supervision of the preceptor. In addition, students will complete on-campus care setting clinical hours under the supervision of NP clinical faculty. 1. Analyze data obtained from a comprehensive history NUFP 782(6) 3 didactic and 3 clinical hours and physical examination to determine a plan of care for 135 hour direct clinical time. the adult patient. Primary Care II Management of Childbearing Families This course provides the FNP student with the knowledge and clinical skills 2. Determine differential diagnoses based on clinical data. necessary to manage adult patients in a primary care setting, with particular emphasis on family planning, women's health, gender-related care, and the 3. Develop an evidence-based plan of care for commonly pregnant or lactating patient. encountered acute and chronic conditions for the adult The clinical component of this course allows the FNP student to gain patient, emphasizing those related to women's health. experience in the management of adult patients, particularly women, in the primary care setting. A preceptor(s) and clinical faculty will guide and 4. Demonstrate the knowledge, skills, and diagnostic facilitate the student's clinical experiences. reasoning expected of a family nurse practitioner in a primary care setting. 1. Evaluate health disorders for pediatric patients. NUFP 784 (6) 3 didactic and 3 clinical hours 135 hour direct clinical time. Primary Care III Management of Children, families, and Populations 2. Evaluate growth, development, and psychosocial issues that commonly affect pediatric patients. This course provides the FNP student with the knowledge and clinical skills necessary to manage adult and pediatric patients in a primary care setting, 3. Examine differential diagnoses for pediatric patients. with particular emphasis on families, children, and populations. The clinical component of this course 4. Examine strategies to manage health disorders, growth allows the FNP student to gain issues, and developmental problems in pediatric patients.

5. Examine strategies to educate pediatric patients and their

families about health disorders, growth issues, and

developmental problems.

- 6. Assess the impact of culture on the treatment and management of disorders, growth issues, and developmental problems.
- 7. Comprehend and relate key terms, principles, and concepts related to the primary care of pediatric patients.
- 8. Analyze data obtained from a comprehensive history and physical examination to determine a plan of care for the adult and pediatric patient.
- 9. Determine differential diagnoses based on clinical data.
- 10. Develop an evidence-based plan of care for commonly encountered acute and chronic conditions for the adult and pediatric patient.
- 11. Demonstrate the knowledge, skills, and diagnostic reasoning expected of a family nurse practitioner in a primary care setting

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presentation.

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The purpose of the Capstone project is to demonstrate synthesis and application of all MSN/FNP program outcomes and integrate NONPF competencies in a systematic and scholarly manner. This is accomplished through the development of a scholarly written Capstone project, development of a poster Power Point presentation, a follow-up oral poster presentation of the Capstone project, and finalization of the NP portfolio.

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- 3. Summarize challenges that impact clinical practice for APRN-nurse practitioners.
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- 6. Synthesize the process for transitioning from the role of
- 7. Analyze ethical and legal issues of nurse practitioner practice.
- 8. Synthesize process for measuring quality performance of nurse practitioners.
- 9. Synthesize competencies that demonstrate integration of program outcomes.
- 10. Synthesize competencies of evidence-based practice, culturally appropriate patient-centered care, disease prevention and health promotion, social equity and health disparities, role of the advanced practice nurse.

University St. Mary

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As part of your admission process to the FNP program, St. Mary requires that you identify potential clinical sites appropriate to the courses you will be taking. Identification of a field site on this form does not guarantee the approval of a practicum application /facility agreement at this clinical site. Practicum applications are due one semester prior to the start of each practicum course. Students may not register for a practicum course without an approved practicum site.

I understand the clinical requirements and have identified potential clinical sites:

Course	Potential Site information
NUFP 780 (6) 3 didactic and 3 clinical hours	Site Name:
135 hour direct clinical time Primary Care I – Management of the	Site Address:
Adult/Geriatric Population	
	Site Type:
Possible Preceptors:	
FNP, AGNP, Family practice MD or DO, Internal Medicine MD or	
DO	
Possible Sites:	
Family practice, primary care clinic, health department, internal	
medicine practice	
NUFP782 (6) 3 didactic and 3 clinical hours	Site Name:
135 hour direct clinical time Primary Care II - Management of	Site Address:
Childbearing Families	
Possible Preceptors:	Site Type:
FNP, AWHNP, Obstetrician/gynecologist Family practice MD or	
DO	
Possible Sites:	
Family Practice, OBGYN practice, primary care clinic, health	
department	
NUFP 784 (6) 3 didactic and 3 clinical hours	Site Name:
135 hour direct clinical time Primary Care III – Management of	Site Address:

Children, families, and Populations Possible Preceptors: FNP, PNP, Family practice MD or DO, pediatrician MD or DO Possible Sites: Family practice, primary care clinic (with large child/adolescent population), health department, pediatric office	Site Type:
NUFP 786 (6) 3 didactic and 3 clinical hours 135 hour direct clinical time Clinical Capstone & Practicum for FNP Students Possible Preceptors: FNP, AGNP Possible Sites: Family practice, primary care clinic, health department, internal medicine practice	Site Name: Site Address: Site Type:

CLINICAL PRACTICUM EXPERIENCE HANDBOOK

MSN-FNP and Post Masters Certification Program

• Overview of Clinical Practicum Experience

The goal of the nurse practitioner clinical practicum experience is to engage students in varied, quality clinical experiences in primary care settings. Clinical practicum experiences are embedded in primary care courses (135 hours each) Students must complete a total of 540 practicum hours in primary care to meet the requirements for graduation. The expectation is that students will progress from requiring close supervision in the first practicum experience to seeing a schedule of clients independently with their preceptor's support by the end of their last clinical class. Section B: Requirements for Clinical Practicum Experience

In order to maintain the highest standards possible and meet requirement of our clinical partners all students participating in a laboratory, simulation or clinical practicum hours will be required to submit data for a certified background check and drug screen, at their expense. All background checks and drug screen results are reviewed by St. Mary faculty and designated staff, should there be a positive background check finding, or a positive drug screen finding, the Chair of the Division of Nursing will determine if the student is eligible to participate in the Program. Eligibility is based on the nature of the finding as well as clinical site requirements. In addition to the Background Check and Drug Screen the following documents must be submitted and be up to date for the student to participate in the clinical practicum experience. In the event the following documents are not submitted or up to date, the student is not allowed to start practicum or is removed from the practicum until all documents are updated. All documents must be uploaded into Typhon & CastleBranch: the semester before starting your practicum experience.

Section A: Students must submit and maintain the following documents in Typhon and CastleBranch:

- 1. RN license (current copy throughout the program)
- 2. CPR certification-BLS level provider course through American Heart Association. The card must be current when beginning clinical hours. If the card expires during the semester the student is responsible to renew CPR in order to continue with clinical hours.
- 3. Proof of Health Insurance 4. Immunization Records Required a. Dates for two MMR immunizations or documentation of positive titers of ALL three diseases.

Section B: CastleBranch

- a. Dates of three Hepatitis B immunizations or titer demonstrating immunity.
- b. Date of last Tdap which must be within the past 10 years.

- c. Dates of two Varicella immunizations or titer demonstrating immunity
- d. Date and result of annual TB Test. If a student has had a positive PPD a copy of the last chest x-ray report is needed. If a student is unable to take PPD a copy of QuantiFERON® can be substituted for the PPD. Annual TB testing is required.
- e. Current annual flu vaccine is required. It is the responsibility of the student to enter the above documents into CastleBranch and Typhon, the electronic tracking system that maintains clinical and evaluation data for students doing practicum hours.

Section C: Expectations for the Clinical Practicum

The following sections list the general expectations for the clinical practicum experience. If you have questions about the clinical practicum that are not answered in this handbook, please contact the The FNP Program director.

- 1. Students are required to complete 720 practicum hours, not including Health Assessment clinical lab hours, to graduate.
- 2. Students should expect one two clinical site visit for each clinical practicum rotation.
- 3. Additional site visits are at the discretion of the lead faculty and/or site visitors.
- 4. Telephone calls, or email contact will be made with preceptors who are working with students who are in practicum experiences that are distant from Leavenworth, KS.
- 5. Preceptors can be NPs or physicians, however may not be physician assistants. Preceptors as well as students must be licensed in the state where the student is completing clinical hours. Military healthcare providers must be licensed in a state regardless of where they are assigned.
- 7. Each student is required to spend a minimum of 180 hours with a nurse practitioner during their clinical practicum experience. The rationale for this is to help the NP student appreciate the nuances of the NP role and to meet the requirements for certification by the American Nurse Credentialing Center or the American Association of Nurse Practitioners.
- 8. Students who are unable to complete all of the clinical practicum hours that they registered for in a given semester will receive an incomplete grade for their clinical course. Students are expected to complete the remainder of the clinical hours during the following semester. Be aware that completing these clinical hours in the following semester may potentially delay the expected graduation date.

Section D: Attendance at Clinical Practicum

If a student has to be absent for a scheduled clinical day, due to illness or emergency, the preceptor should be notified prior to the beginning of that clinical day. Prior to beginning any clinical rotation, students should identify the procedure for contacting the preceptor in case of absence. It is the student's responsibility to also notify the faculty, and faculty site visitor, if applicable, of the absence and then negotiate with the preceptor regarding make-up time.

Students are expected to schedule clinical time with the preceptor consistent with the preceptor's availability/schedule.

Section E: Professional Behavior & Dress at Clinical Practicum

Students are expected to dress appropriately and behave in a professional manner at all times in keeping with the standards set forth by Occupational Safety and Health Administration (OSHA). Student identification badges must be worn when practicing as a student. Because of the professional expectations of students in clinical sites it is expected that students respond promptly to communication from faculty, site visitors and or preceptor. It is imperative that students conduct themselves in a professional manner. Students should verify with the office manager within the site if there is a specific dress code and may wear attire that is consistent with the clinical site. Most office dress is business casual with or without lab coats. If lab coats are required, students must supply their own. Scrub clothes are not appropriate attire during clinical hours. Please avoid strong scented lotions and perfumes.

CLINICAL COURSES

Several courses in the curriculum include a Lab or Practicum component with the DIDACTIC portion. These courses include:

- 1. NUFP 771 Adv. Health Assessment & Diagnostic Reasoning Lab only
- 2. NUFP 780 Primary Care I Management of the Adult/Geriatric Population
- 3. NUFP 782 Primary Care II Management of Childbearing Families
- 4. NUFP 784 Primary Care III Management of Children, families, and Populations
- 5. NUFP 786 Clinical Capstone & Practicum for FNP Students

1. NUFP 771 Adv. Health Assessment & Diagnostic Reasoning

- a. Gather comprehensive or interval health history from patient and/or family
- b. Review Medical Record
- c. Conduct physical examination utilizing techniques appropriate for comprehensive and /or focused examinations. Prioritize presenting patient problems and clinical findings.
- d. Present findings to preceptor in an organized, concise manner
- e. Complete accurate and legible SOAP documentation
- f. Maintain patient confidentiality

g. HIPPA Information

- 2. NUFP 780 Primary Care I Management of the Adult/Geriatric Population, NU 782 Primary Care II Management of Childbearing Families & NU 784 Primary Care III Management of Children, families, and Populations
 - a. Improve use of time and resources
 - b. Increase efficiency in obtaining focused history and physical examination
 - c. Develop broader differential diagnoses
 - d. Identify diagnostic test(s) if relevant to presenting problem
 - e. Identify evidenced-based interventions
 - f. Utilize appropriate referrals and practice guidelines in the care of the patient
 - g. Develop greater depth and breadth of clinical knowledge
 - h. Improve ability to prioritize and coordinate care
- 3. NUFP 786 Clinical Capstone & Practicum for FNP Students
 - a. Perform all role functions in an efficient, organized, and independent manner
 - b. Demonstrate an understanding of nurse practitioner role
 - c. Engage in interdisciplinary collaboration and consultation

Section C: Requirements for Primary Care Courses

Each primary care course will require the student to do clinical practicum hours. Faculty will require the student to reflect on clinical objectives that the student will attempt to meet during the semester with clinical practicum experiences. These are different from objectives for the course.

- a. Contact a preceptor and arrange to work with the preceptor in their clinical setting.
- b. Develop a list of clinical practicum objectives that are measurable.
- c. Complete the Clinical Site Information Sheet for each clinical site (See Appendix A).
- d. Ensure that all requirements for the Clinical Practicum Experience (Refer to Article I-Section B) are up to date.

Finding a preceptor may occur in several ways:

a. Talk to a physician or nurse practitioner that you know about the possibility of being a preceptor, at least 3 to 6 months before you plan to start your practicum course.

- b. Consult other students who have completed clinical rotations in the program and in programs in your area.
- c. Contact and participate in the advanced practice group in your area.
- d. Contact Schools/Colleges of Nursing Faculty in your state.

Qualifications of Preceptor

- 1) Shall be licensed as an advanced practice registered nurse or shall be licensed as a physician in the state in which the individual is currently practicing.
- 2) May not be: relative, immediate supervisor, employee or subordinate of student.

*Students may not use family (by blood or marriage) or close friends as preceptors. Likewise, students may not do clinical hours within the setting where they work or where family members work without approval of faculty. It is not recommended to use a clinical practice where a student is seen as a patient. Students may not do more than 205 clinical hours within the same site or with the same preceptor. The intent is that students have a wide range of exposure to different preceptors and different sites.

• Suggested Clinical Sites

Since this Program is a Primary Care Program, clinical hours need to be done in out-patient settings. Family Practice and Internal Medicine sites are excellent for clinical experience in primary care. Health clinics in businesses or manufacturing sites also may provide clinical opportunities.

• Clinical Education Agreement/Clinical Site Sheet

A fully executed clinical education agreement (the legal contract) and a signed preceptor agreement letter for every health care agency is required for each student rotation. Clinical education agreements and preceptors letters are legal documents produced and tracked by the Nursing Department.

At times, there may be legal issues that need to be resolved before an agreement can be signed by USM and the health care agency. This may slow down the process of completing the agreement. It often takes a number of weeks to accomplish the contract if legal issues are involved. Occasionally the legal issue cannot be resolved and the site cannot be used by the student. It is important to get the complete and correct information requested the semester before your practicum experience will start whenever possible. Incorrect or incomplete Clinical Site Information Sheets will delay the start of clinical hours.

- 1. Once you have contacted a potential preceptor and she/he has agreed to be your preceptor:
 - a. Complete the Clinical Site Information Sheet that was sent at the beginning of the semester.

- b. The Clinical site Sheet is completed by the student and does not need to be signed by the preceptor of the site.
- c. A Clinical Site Information Sheet is required for each site and each preceptor includes the exact number of hours to be done at the site. This must be done every semester for each clinical site. If multiple preceptors are used at the same site, the number of hours with each preceptors needs to be included.
- d. Forms need to be completely filled out with correct information in every area.
- e. Forms with incorrect or incomplete information will be returned to the student for the correction of errors thus delaying the process of getting the clinical experience set up.
- f. Completed Clinical Site Information Sheets should be submitted to: Clinical Coordinator and approved by the FNP program director
- g. Each clinical site must be approved by the Practicum Coordinator.

2. Important information regarding Clinical Education Agreements:

- a. The Clinical Site Information Sheet is used to create the Clinical Education Agreement and must be completed before the Practicum Education can be started.
- b. The student may not begin any clinical hours until the Agreement and a signed preceptor letter are returned to USM nursing department.
- c. The student will be notified by email when the clinical agreement process has been initiated and again when it is completed.
- d. Students are notified by email when clinical hours can be started.
- e. Students cannot do clinical hours prior to the start of the semester nor during time between semesters due to professional liability and Workmen's Compensation requirements.
- f. Students may only do clinical hours when registered for clinical credit hours.
- g. The information from the Clinical Site Information Sheet is provided to the Practicum Site Coordinator.

Documentation of Clinical Experiences

Students are expected to keep a log of clinical activity in Typhon.

- a. The intent of the log is to have a record of the types of patients, ages of patients and management plans for patients seen.
- b. Typhon is the electronic tracking system that is used by the College for a clinical log. Information about signing up for Typhon is included in the course syllabi for those classes requiring Typhon use.

- c. Students will log their clinical hours within Typhon, documenting diagnosis codes (ICD-10), treatments, medications ordered and briefly the overall plan of care.
- d. The documentation in the clinical log needs to include a brief note to include presenting symptoms, diagnosis, diagnostics, and plan of care.
- e. Demographic information will be requested by the system.
- f. Reports can be prepared by Typhon for a student profile summarizing the types and ages of patients that have been seen. However, diagnosis codes must be included in the clinical log to run this report.
- h. In addition to the clinical log, Typhon is used to complete all evaluations by the student, preceptors and site visitors.

Clinical Practicum Evaluation

Students will be evaluated by several different individuals during their clinical practicum rotations. Preceptors will be evaluating the student's performance and progress. Site visitors who are University Faculty will also help to assess how the student is progressing in their knowledge, experience, critical thinking, and clinical management. The grade for the clinical practicum is based on these evaluations and on other assignments related to the role of the APRN by the Faculty. (See Appendix A). Section A: Typhon

- 1. Preceptors who have been with a student for more than 24 clinical hours will be asked to fill out an evaluation form evaluating the student at the end of the rotation. This evaluation will be factored into the student's final grade.
- 2. Preceptors may be contacted by graduate faculty at any time to discuss a student's performance.
- 3. Telephone calls or email contact will be made with preceptors who are working with students who are in practicum experiences that are distant from Leavenworth, KS.
- 4. It is the student's responsibility to ensure that all clinical/practicum paperwork, including the preceptor evaluation, student self-evaluation, and clinical log are completed by the dates listed

• Site Visitor Evaluation

- 1. Site visitors complete an evaluation on the student when a site visit is made. This evaluation is factored into the student's final grade.
- 2. Students should expect one site visit per for up to 180 clinical hours in a course/semester.

- 3. Site visitors may request a copy of your clinical objectives before they arrange a visit or other form of communication with the student and the preceptor.
- 4. Phone calls or email contact will be made by the site visitor with the student's preceptor for those students who are in practicum experiences that are at a distant.
- 5. Additional site visits are at the discretion of the lead faculty.

• Students not meeting the minimum requirements

Occasionally it is apparent that although a student is passing the didactic portion of their clinical class, the performance in the clinical area does not meet the requirements for the level of student performance or their clinical judgement is impaired as documented by the preceptor and/or site visitor evaluation. Since the clinical hours are imbedded in the clinical course the students would then fail the clinical course and need to repeat the clinical course and the clinical hours.

Appendix

University St. Mary

MSN (FNP Track) Clinical Site Description

A clinical practicum is a distinctly defined supervised on site experience in which students develop applied skills and integrate professional knowledge in the provision of "hands- On" primary care. Students in the FNP specialization must complete 4 courses (NU780, NU782, NU784, and NU786) that include a clinical practicum, with a minimum of 540 hours of supervised clinical experience (180) per course).

As part of your admission process to the FNP program, St. Mary requires that you identify potential clinical sites appropriate to the courses you will be taking. Identification of a field site on this form does not guarantee the approval of a practicum application /facility agreement at this clinical site. Practicum applications are due one semester prior to the start of each practicum course. Students may not register for a practicum course without an approved practicum site.

I understand the clinical requirements and have identified potential clinical sites:

Course	Potential Site information
NUFP 780 – Primary Care I – Management of the Adult/Geriatric	Site Name:
Population	Site Address:
Possible Preceptors:	
FNP, AGNP, Family practice MD or DO, Internal Medicine MD or DO	Site Type:
Possible Sites:	
july practice, primary care clinic, health department, internal	
licine practice	
NUFP 782 – Primary Care II – Management of Childbearing	Site Name:
Families	Site Address:
Possible Preceptors:	
FNP, AWHNP, Obstetrician/gynecologist Family practice MD or DO	Site Type:
Possible Sites:	
Family Practice, OBGYN practice, primary care clinic, health	
department	
	C'L N
NUFP 784 – Primary Care III – Management of Children, families,	Site Name:
and Populations	Site Address:
Possible Preceptors:	Cita Tomas
FNP, PNP, Family practice MD or DO, pediatrician MD or DO	Site Type:
Possible Sites:	
Family practice, primary care clinic (with large child/adolescent	
population), health department, pediatric office	
NUFP 786 — Clinical Capstone & Practicum for FNP Students	Site Name:
Possible Preceptors:	Site Address:
FNP, AGNP	
Possible Sites:	Site Type:
Family practice, primary care clinic, health department, internal	
medicine practice	
l	

Appendix

Practicum I

Student Name:
Preceptor Name:
Clinical Site:
Hours completed by this student in my clinical setting:
Types of Patients seen in clinic
Key: 1= Unsatisfactory at NP role (C< 80%)
2= Novice at NP role (B- 80%-84%)
3= Competent at NP role (B 84%-89%)
4= Proficient at NP role (A- 90%-94%)
5= Mastery of NP Role (A 95%-100%) NA/O= Not applicable, Not observed

COMPETENCY	E	VAL	UA'	ΓΙΟΙ	Ň		COMMENTS		
Patient Management	1	2	3	4	5	NA/O			
Obtains age-appropriate history									
for comprehensive of focused									
exam to include health									
maintenance history.									
Performs appropriate									
examination using correct									
techniques.						,			
 Begins to develop differential 									
diagnoses for presenting problem									
while prioritizing care									
Considers evidence-based non-									
pharmacologic and pharmacologic									
interventions for presenting									
problem									
Begins to demonstrate critical									
thinking in clinical decision-									
making and adjust intervention as						The state of the s			
needed based on outcomes									

Communicates effectively using							
ofessional terminology, format							
and technology							
Documents visit thoroughly and							
accurately							
NP-Patient Relationship	1	2	3	4	5	NA/O	
Prioritizes care and negotiates							
plan of care with patient							
Maintains professional boundaries							
and patient confidentiality							
Patient Education	1	2	3	4	5	NA/O	
Assesses patient's educational							
needs							
Provides age and education-							
appropriate information about							
condition management and health							
promotion							
Professional role	1	2	3	4	5	NA/O	
• Begins to incorporate the roles							
of provider and educator in the							
NP role and articulates role to							
public and other health care			1				
professionals							
teracts collaboratively with							
team members							
Appropriately seeks assistance							
from preceptor		<u> </u>					
Participates in clinical discussions							
and contributes relevant							
knowledge of recent research							
Culturally sensitive care	1	2	3	4	5	NA/O	
Demonstrate respect for patients							
and delivers culturally sensitive							
care			ļ				
Recognizes spiritual and							
emotional needs of patient	<u> </u>		<u></u>	<u></u>	<u> </u>		

Rating Scale: 1-unsatisfactory, 2-minimally satisfact excellent Preceptor Serve			-highly sati	sfactory, 5	
Communication Skills/ Facilitates communication	1	2	3	4	5

Comments:

Time Management	1	2	3	4	5						
Interaction with Patients	1	2	3	4	5						
Shares knowledge & techniques	1	2	3	4	5						
Preceptor's Teaching Style											
Selects appropriate learning experiences	1	2	3	4	5						
Respects student	1	2	3	4	5						
Asks questions in non-threatening way	1	2	3	4	5						
Receptive to students questions	1	2	3	4	5						
Provides relaxed atmosphere	1	2	3	4	5						
Validates student's clinical skills & provides	1	2	3	4	5						
ongoing feedback											
Shows enthusiastic for teaching	1	2	3	4	5						
Willing to work with novice students	1	2	3	4	5						

Preceptor Signature :	
Student Signature :	
Course Clinical faculty Signature :	

Appendix

2nd Clinical Couse

Student Name:
Preceptor Name: Clinical Site:
Types of Patients seen at clinical site:
Key: 1= Unsatisfactory at NP role (C< 80%)
2= Novice at NP role (B- 80%-84%)
3= Competent at NP role (B 84%-89%)
4= Proficient at NP role (A- 90%-94%)
5= Mastery of NP Role (A 95%-100%)
NA/O= Not applicable. Not observed

COMPETENCY	EVALUATION						COMMENTS		
Patient Management	1	2	3	4	5	NA/O			
Obtains age-appropriate history for									
comprehensive of focused exam to									
include health maintenance history.				ļ					
• Performs appropriate examination			İ						
using correct techniques.					<u> </u>				
 Orders and correctly interprets 									
cost-effective diagnostic and health									
screening tests.					ļ				
• Develops and analyzes appropriate									
differential diagnoses for presenting									
problem while prioritizing care	$oxed{oxed}$	ļ		ļ					
 Begins to independently suggest 									
evidence-based non-pharmacologic									
and pharmacologic interventions for									
acute and chronic conditions.			-						
 Demonstrates critical thinking in 									
clinical decision making and adjusts									
interventions as needed based on									
outcomes	1	-	_	ļ					
 Documents visit thoroughly and 									
ccurately						<u> </u>			

Communicates effectively with							
preceptor using professional terminology, format and technology							
NP-Patient Relationship	1	2	3	4	5	NA/O	
Prioritizes care and negotiates plan of care with patient							
Maintains professional boundaries and patient confidentiality							
Patient Education	1	2	3	4	5	NA/O	
Assesses patient's educational needs							
Provides age and education- appropriate information about condition management and health promotion							
Professional role	1.	2	3	4	5	NA/O	
• Incorporates the roles of provider, educator, consultant, administrator and researcher in NP role as appropriate and articulates role to public and other health care professionals.					and the state of t		
Interacts collaboratively with team members			·				
Appropriately seeks assistance from preceptor							
Participates in clinical discussions and contributes relevant knowledge of recent research							
Negotiating health care systems	55.00						
• Practices within authorized scope of practice							
Culturally sensitive care	1	2	3	4	5	NA/O	
Demonstrate respect for patients and delivers culturally sensitive care							
• Provides care that meets spiritual and emotional needs of patient							

Rating Scale: 1-unsatisfactory, 2-minimally satisfactory, excellent Preceptor Serve			/		,,,
Communication Skills/ Facilitates communication	1	2	3	4	5
Time Management	1	2	3	4	5
Interaction with Patients	1	2	3	4	5
Shares knowledge & techniques	1	2	3	4	5

Comments:

Preceptor	's Teachin	g Style			
Selects appropriate learning experiences	1	2	3	4	5
Respects student	1	2	3	4	5
Asks questions in non-threatening way	1	2	3	4	5
Receptive to students questions	1	2	3	4	5
Provides relaxed atmosphere	1	2	3	4	5
Validates student's clinical skills & provides	1	2	3	4	5
ongoing feedback Shows enthusiastic for teaching	1	2	3	4	5
Willing to work with novice students	1	2	3	4	5

Preceptor Signature :	
Student Signature <u>:</u>	
Course Clinical faculty Signature:	

Appendix

3nd Clinical Couse

Student Name:
Preceptor Name: Clinical Site:
Types of Patients seen at clinical site:
Key: 1= Unsatisfactory at NP role (C< 80%)
2= Novice at NP role (B- 80%-84%)
3= Competent at NP role (B 84%-89%)
4= Proficient at NP role (A- 90%-94%)
5= Mastery of NP Role (A 95%-100%)
NA/O= Not applicable, Not observed

COMPETENCY	EVALUATION						COMMENTS
Patient Management	1	2	3	4	5	NA/O	
Obtains age-appropriate history for							
comprehensive of focused exam to							
include health maintenance history.							
• Performs appropriate examination	İ		i.				
using correct techniques.							
Orders and correctly interprets							
cost-effective diagnostic and health							
screening tests.			ļ				
 Independently develops and 		ļ					
analyzes appropriate differential				1			
diagnoses for presenting problem							
while prioritizing care							
 Independently suggests evidence- 							
based non pharmacologic and							
pharmacologic interventions for							
presenting problem					ļ		

Demonstrates critical thinking in			I					
hical decision making and adjusts								
interventions as needed based on								
outcomes								
Documents visit thoroughly and								
accurately								
Communicates effectively with								
preceptor using professional								
terminology, format and technology								
NP-Patient Relationship	1	2	3	4	5	NA/O		
Prioritizes care and negotiates plan of								
care with patient								
Maintains professional boundaries								
and patient confidentiality								
Prioritizes care and negotiates plan of								
care with patient								
Begins to assists patient in adapting								
to acute/chronic conditions by								
developing an understanding of the								
patient's lifestyle, personal beliefs								
and priorities.			ļ					
Facilitates decision-making linked to								
patient's concerns		1.19/10/20			345532		44/45056-0	
Patient Education	1	2	3	4	5	NA/O	102.58	
Provides effective learning								
nvironment for patient based on							ļ	
assessment of patient's knowledge								
base, readiness to learn, patient's								
developmental and emotional level								
and motivation	<u> </u>	<u> </u>		<u> </u>	ļ			
Provides age and education-								
appropriate information about								
condition management and health								
promotion		-	_					
Uses community assessment								
information to evaluate client needs,								
initiate referrals, and coordinate care							Ì	
when applicable	-		-	-	-			
Assesses patient's response to							Ì	
teaching strategies and modifies								
approach based on outcomes	104	_		 a		TNIA/O	52583	
Professional role	1	2	3	4	5	NA/O		
• Incorporates the roles of provider,								
educator, consultant, administrator								
and researcher in NP role as							ļ	
appropriate and articulates role to								
public and other health care								
professionals.								

Interacts collaboratively with team members							
Negotiating health care systems							
• Practices within authorized scope of practice							
Manages patient care and refers to specialty services as appropriate within the existing heath care delivery system							
Incorporates professional and legal standards into practice							
Culturally sensitive care	1	2	3	4	5	NA/O	
Demonstrate respect for patients and delivers culturally sensitive care							
Provides care that meets spiritual and emotional needs of patient							

Rating Scale: 1-unsatisfactory, 2-minimally satisfactory	tory, 3-sati	sfactory, 4	-highly sati	sfactory, 5	-
Preceptor Serve	es as Role I	Model .			
Communication Skills/ Facilitates communication	1	2	3	4	5
Time Management	1	2	3	4	5
Interaction with Patients	1	2	3	4	5
Shares knowledge & techniques	1	2	3	4	5
Preceptor's	Teaching S	tyle			
Selects appropriate learning experiences	1	2	3	4	5
Respects student	1	2	3	4	5
Asks questions in non-threatening way	1	2	3	4	5
Receptive to students questions	1	2	3	4	5
Provides relaxed atmosphere	1	2	3	4	5
Validates student's clinical skills & provides	1	2	3	4	5
ongoing feedback					
Shows enthusiastic for teaching	1	2	3	4	5
Willing to work with novice students	1	2	3	4	5

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\sim	111	111	C	11	ιJ	

Preceptor Signature :

Student Signature :
Course Clinical faculty Signature :
Appendix
Capstone Practicum
Student Name:
Preceptor Name: Clinical Site:
Types of Patients seen at clinical site:
Key: 1= Unsatisfactory at NP role (C< 80%)
2= Novice at NP role (B- 80%-84%)
3= Competent at NP role (B 84%-89%)
4= Proficient at NP role (A- 90%-94%)
5= Mastery of NP Role (A 95%-100%)

NA/O= Not applicable, Not observed

COMPETENCY	E	VAL	UA'	TIO	N		COMMENTS
Patient Management	1	2	3	4	5	NA/O	
Manages patient visit effectively by							
obtaining appropriate history and							
performs appropriate examination							
with correct technique							
 Appropriately orders and correctly 		ŀ				·	
interprets cost effective diagnostic	ļ						
and health screening tests.							
 Independently develops and 							
analyzes appropriate differential							
diagnoses for presenting problem							
while prioritizing care							

					Т		
Considers complementary and							
alternative therapy options in plan of							
care when appropriate							
 Independently presents evidence- 					ļ		
based non pharmacologic and							
pharmacologic interventions for					1		
presenting problem							
Demonstrates critical thinking in							
clinical decision making and adjusts			:		İ		
interventions as needed based on							
outcomes							
 Assesses, diagnoses, monitors, 							
coordinates and manages the							
health/illness status of patients over							
a period of time when applicable							
Applies principles of research (
EBP)and diagnostic reasoning skills in							
clinical decision making							
NP-Patient Relationship	1	2	3	4	5	NA/O	
• Assists patient in adapting to	* (, = (;	2		1447 B (447)			
acute/chronic conditions by							
developing an understanding of the							
patient's lifestyle, personal beliefs							
and priorities. Facilitates decision-making linked to	 	 					
patient's concerns while prioritizing							
care	-						
Maintains professional boundaries		Ì					
and patient confidentiality	-	l A		1	-	NTA/O	
Patient Education	1	2	3	4	5	NA/O	
• Provides patient with information							
that is scientifically grounded and							
appropriate to the health condition	<u> </u>	ļ	ļ	ļ.			
Provides effective learning				1			
environment for patient based on							
assessment of patient's knowledge							
base, readiness to learn, patient's							
developmental and emotional level							
and motivation			_	-			
Continues to reassess, negotiate and							
coach patient based on new data,							
motivation and response to teaching	_		<u> </u>	<u> </u>			
 Uses community assessment 		1					
information in evaluating patient							
needs, initiating referrals, and							
coordinating care			1	. Lytha tade		en (V) in turbor en pala Otoria no arron e	
Professional role	1	2	3	4	5	NA/O	
			_	-			

Applies/develops a theory-based aceptual framework to guide			**				
practice							
Develops a base for personal ethics in practice as related to patient issues and scope of practice							
• Demonstrates skills in negotiating, consensus building and partnering with health care team members.							
Negotiating health care systems							
Understands basic business and management strategies to function as manager for the provision of quality care and efficient use of resources.							
Articulates progressive awareness of legislative and policy making activities which influence health services and practice							
Culturally sensitive care	1	2	3	4	5	NA/O	
lexbyrd00@yahoo.com							
emonstrate respect for patients and elivers culturally sensitive care	APARTO		10043211	U	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
• Provides care that meets spiritual and emotional needs of patient							

excellent Preceptor Serve	es as Rol	e Model			
Communication Skills/ Facilitates communication	1	2	3	4	5
Time Management	1	2	3	4	5
Interaction with Patients	1	2	3	4	5
Shares knowledge & techniques	1	2	3	4	5
Preceptor's ī	Teaching	Style			
Selects appropriate learning experiences	1	2	3	4	5
Respects student	1	2	3	4	5
Asks questions in non-threatening way	1	2	3	4	5
Receptive to students questions	1	2	3	4	5
Provides relaxed atmosphere	1	2	3	4	5

Validates student's clinical skills & provides ongoing feedback	1	2	3	4	5	
Shows enthusiastic for teaching	1	2	3	4	5	
Willing to work with novice students	1	2	3	4	5	

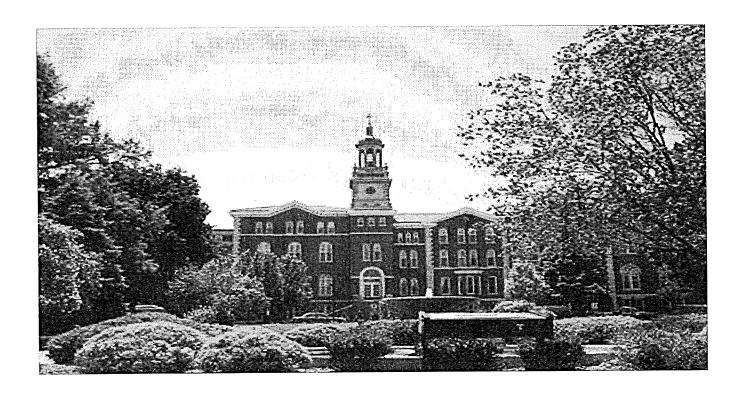
omments:	
receptor Signature :	
tudent Signature <u>:</u>	
Course Clinical faculty Signature :	

MSN FNP Clinical Rotation Verification Sheet

NOTE: Form must be comple	eted and signed by all parties prior to roto	ation start.
Student Name:		
Clinical Rotation (circle one):	Primary Care I Management of the Adult/O	Geriatric Population
	Primary Care II Management of Childbean	ring Families
	Primary Care III Management of Children	families, and Populations
	Primary Care IV Clinical Capstone & Pra	cticum for FNP Students
•	dgment of receipt of the MSN-FNP precep	tor hand book and resources:
Clinical Preceptor Specialty:		
Clinical Preceptor Name:		
Signature:		
Clinical Preceptor Contact Inf	formation (Email and/or Phone):	
	·	
Student Signature:		
Date:	-	
Program Director Approval: _		
Date:	_	
Clinical Placement Coordinat	or:	
Date:		

UNIVERSITY OF SAINT MARY FAMILY NURSE PRACTITIONER PROGRAM Spring and Summer Semesters





Preceptor Packet for:

Primary Care I Management of the Adult/Geriatric Population

Primary Care II Management of Childbearing Families

Primary Care III Management of Children, families, and Populations

Primary Care IV Clinical Capstone & Practicum for FNP Students

Overview

Thank you for agreeing to precept this year. As a preceptor you have a unique opportunity to facilitate a student's professional development. This information is intended to assist you in helping your student to meet clinical competency goals. Since evaluation is an ongoing process, it is recommended that both the preceptor and the student participate in open discussion throughout the semester regarding progress made towards meeting clinical objectives. At the end of the semester you will be asked to perform an evaluation of the student. This will be done electronically, and you will be sent information during the semester regarding how to access the online evaluations. Please include validating and constructive comments in the sections provided. We recognize that it is impossible to be outstanding in all areas and hope to use the evaluation tool to build on the areas the student excels in and assist him/her to build strengths in other areas. Your input is a vital tool enabling the student to reach their potential.

Faculty Information

Chair, Division of Nursing: Birdashaw, DNP, APRN, FNP-C, ENP-C, CCRN

• Phone: 913-758-6108 | Office : Berchmans 312

• email:michelle.birdashaw@stmary.edu

Instructor Name: Kirsten McGuire, MSN, APRN, FNP-C

Phone:913-758-6105| Office: Berchmans 323

• email: kirsten.mcguire@stmary.edu

Instructor Name Liana Roberts, MSN, APRN, FNP-C

Phone:913-758-6177| Office: Berchmans 323

• email: liana.roberts@stmary.edu

Instructor Name: Lezlee Price, MSN, APRN, FNP-C

Phone:913-758-6177 Office: Berchmans 323

• email: <u>lezlee.price@stmary.edu</u>

Practicum Courses

Course & Course Description Objectives Upon completion of this course the learner will be able to: 1. Interpret history and physical examination data to NUFP 780 Primary Care I Management of the Adult/Geriatric Population develop a plan of care for the management of commonly This course, which includes 3 credit hours of clinical experience, provides encountered acute and chronic conditions in the primary the FNP student with the knowledge, practical skills, and clinical reasoning care setting. to manage the adult and geriatric patient populations. The primary care management of these 2. Formulate differential diagnoses for the adult/geriatric populations will be emphasized in this course, including both acute and patient using clinical and diagnostic reasoning skills. chronic health conditions. The clinical component of this course will expose the FNP student to a 3. Develop an evidence-based clinical management plan health care setting that manages the adult and geriatric populations. Students for the adult/geriatric patient. will conduct assessments and develop a plan of care, under the direct supervision of the preceptor. In addition, students will complete on-campus 4. Display evidence of knowledge of acute and chronic clinical hours under the supervision of NP clinical faculty. conditions in the adult/geriatric populations in the primary care setting NUFP 782 Primary Care II Management of Childbearing Families 1. Analyze data obtained from a comprehensive history and physical examination to determine a plan of care for This course provides the FNP student with the knowledge and clinical skills the adult patient. necessary to manage adult patients in a primary care setting, with particular emphasis on family planning, women's health, gender-related care, and the 2. Determine differential diagnoses based on clinical data. pregnant or lactating patient. The clinical component of this course allows the FNP student to gain 3. Develop an evidence-based plan of care for commonly experience in the management of adult patients, particularly women, in the encountered acute and chronic conditions for the adult primary care setting. A preceptor(s) and clinical faculty will guide and patient, emphasizing those related to women's health. facilitate the student's clinical experiences. 4. Demonstrate the knowledge, skills, and diagnostic reasoning expected of a family nurse practitioner in a primary care setting. NUFP 784 Primary Care III Management of Children, families, and 1. Evaluate health disorders for pediatric patients. **Populations** 2. Evaluate growth, development, and psychosocial issues This course provides the FNP student with the knowledge and clinical skills that commonly affect pediatric patients. necessary to manage adult and pediatric patients in a primary care setting, with particular emphasis on 3. Examine differential diagnoses for pediatric patients. families, children, and populations. The clinical component of this course allows the FNP student to gain 4. Examine strategies to manage health disorders, growth issues, and developmental problems in pediatric patients. 5. Examine strategies to educate pediatric patients and their families about health disorders, growth issues, and developmental problems.

-38-

7. Comprehend and relate key terms, principles, and concepts related to the primary care of pediatric patients.

6. Assess the impact of culture on the treatment and management of disorders, growth issues, and

developmental problems.

8. Analyze data obtained from a comprehensive history and physical examination to determine a plan of care for the adult and pediatric patient.

Education OS 38

9. Determine differential diagnoses based on clinical data.

- 10. Develop an evidence-based plan of care for commonly encountered acute and chronic conditions for the adult and pediatric patient.
- 11. Demonstrate the knowledge, skills, and diagnostic reasoning expected of a family nurse practitioner in a primary care setting

NUFP 786 Primary Care IV Clinical Capstone & Practicum for FNP Students

Students in this synthesis course will focus on clinical competence in primary care settings by building on knowledge and skills gained in previous 2. Analyze issues related to the certification and licensing courses. Through clinical practice, students will build confidence as they begin the transition from the role of registered nurse to advanced practice nurse. Classroom activities and case studies will enable students to explore the salient nurse practitioner practice issues involved in the delivery of safe, competent, quality and cost-effective care of patients in a dynamic healthcare system. Clinical experiences in primary care settings will provide students with the continued opportunity to develop, implement, and evaluate management plans for patients with complex health conditions. The application of knowledge in the management of patients and collaboration among the advanced practice nurse and the patient, family, and interprofessional healthcare team are emphasized.

In addition, this course serves as a culminating experience in the program. udents develop a scholarly written clinical project proposal (Capstone) that 6. Synthesize the process for transitioning from the role of

dresses a significant gap in clinical practice. The project proposal (Capstone) will be disseminated by students via a professional oral project presentation.

The purpose of the Capstone project is to demonstrate synthesis and application of all MSN/FNP program outcomes and integrate NONPF competencies in a systematic and scholarly manner. This is accomplished through the development of a scholarly written Capstone project, development of a poster Power Point presentation, a follow-up oral poster presentation of the Capstone project, and finalization of the NP portfolio.

- 1. Synthesize the role and responsibilities of the APRNnurse practitioner.
- of nurse practitioners.
- 3. Summarize challenges that impact clinical practice for APRN-nurse practitioners.
- 4. Analyze the evolving role of the APRN-nurse practitioner.
- 5. Apply interprofessional practice in providing care to patients with complex health conditions.
- registered nurse to APRN-nurse practitioner.
- 7. Analyze ethical and legal issues of nurse practitioner bractice.
- 8. Synthesize process for measuring quality performance of nurse practitioners.
- 9. Synthesize competencies that demonstrate integration of program outcomes.
- 10. Synthesize competencies of evidence-based practice, culturally appropriate patient-centered care, disease prevention and health promotion, social equity and health disparities, role of the advanced practice nurse.

Course Evaluation:

Clinical practicum, case study presentations, and (Standardized Patient) SP exams comprise the methodology for the clinical practicum.

- 1. Clinical practicum direct patient care
 - Spring semester 360 hours (pass/fail)
 - Summer Semester 360 hours (pass/fail)
- 2. Objective Standardized Patient Examination (OSPE) (pass/fail)
- 3. Case Studies/SOAP notes and Typhon documentation (pass/fail)
- 4. Submission of all course related evaluations (including self, site, preceptor, faculty and course evaluations).

Students must pass all evaluation methods to successfully complete this course.

**A student must pass the clinical and theoretical portions of NUFP 780, NUFP 782, NUFP 784, NUFP 786.

Nursing Program and Curriculum

University of Saint Mary Masters of Science in Nursing FNP Specialization Program Mission

The Master of Science in Nursing (MSN) Degree program is designed for students who have a Bachelor of Science (BSN) in Nursing degree and a current, unrestricted license as a Registered Nurse (RN) in the United States. The program is built upon The Essentials of Master's Education in Nursing from the American Association of Colleges of Nursing (AACN). The MSN program concentrations of Nurse Educator and Nurse Administrator are offered online. The MSN concentration of Family Nurse Practitioner (FNP) is offered on ground.

Committed to the mission and values of the University and building upon the knowledge, skills, and values of the baccalaureate-prepared nurse, the mission of the MSN program is to prepare students for advanced nursing practice who are leaders, change agents, and innovators in the specialty areas of administration, education, and practice.

Students in the MSN concentration of Family Nurse Practitioner (FNP) program will complete 12 semester hours of graduate course work in the MSN core and 38 semester hours of specialty (FNP) core. The minimum total semester hours required for graduation in the Masters of Science in nursing FNP program is 50 semester hours. Student educational experiences includes classroom, clinical/laboratory experiences as well as standardized patient experiences.

Values

USM nursing supports the following values:

- 1. All persons deserve support, respect, and kindness.
- 2. Each person is a unique individual with special talents, abilities, needs, and goals.
- 3. Faculty and students are a part of an inclusive and respectful environment.
- 4. Individuals are responsible for their own lifelong learning to support their goals and the profession.
- 5. Nursing is a profession that epitomizes caring defined as competence, compassion, commitment, conscience, and confidence.

Philosophy

At the University of Saint Mary, our Nursing programs create an environment where safe, competent, confident, conscientious, compassionate, and committed nursing care is required, fostered, and modeled by all. A faculty and staff approach of positive regard for each other, and students, serves as a model for the profession and nurse-client relationship. This supportive environment assists students to realize their full God-given potential.

The unique perspective of the adult learner is valued and respected by all faculty. Relevant assignments provide opportunities to acquire the knowledge, skills, and attitudes necessary to develop a rewarding role in the profession. Students must be actively involved in their own learning process in order to acquire professional knowledge and develop clinical competence. Students must assume primary responsibility for learning, while faculty provide educational opportunities for learning and practicing professional role development. We believe that an atmosphere of shared growth and inquiry offers the maximum potential for development for development of all.

MSN Program Learning Outcomes:

Graduates of the MSN Program will:

- 1. Integrate comprehensive assessment, theory, evidence, clinical judgment, research, patient values, and interprofessional perspectives in advanced nursing practice for diverse populations and environments.
- 2. Utilize information and technology to communicate, educate, manage knowledge, mitigate error, and support decision making for quality improvement processes.
- 3. Synthesize ethical, economic, legal, and political factors that influence health care to influence the organization and financing of health care and educational delivery systems.
- 4. Collaborate to design, coordinate, and evaluate patient centered health care as a leader or member of an interprofessional team.
- 5. Contribute to nursing practice to improve health care outcomes by translating evidence into practice.
- 6. Integrate evidence based findings for patient centered and culturally responsive strategies for clinical prevention and health promotion for diverse populations and environments.
- 7. Advocate for policies to improve population health, access to quality care, and the profession of nursing.
- 8. Provide evidence of professional and personal goal development and activities.
- 9. Integrate the 5 Cs of caring commitment, conscience, competence, compassion, and confidence in advanced nursing practice (Roach, 1992).

Roach, M. S. (1992). The human act of caring: A blueprint for the health professions. Ottawa, Ontario: The Canadian Hospital Association Press.

FNP Specialization Learning Outcomes:

The FNP graduate student will demonstrate the ability to:

- 1. Analyze and differentiate complex data sets for independent and collaborative health care decision making for patients across the lifespan.
- 2. Communicate in both verbal and written form to provide clear, concise, and complete performance and documentation of patient care.
- 3. Apply theory and research in managing and providing care for patients from diverse backgrounds across the lifespan.
- 4. Use various technologies to provide optimal care in various settings.
- 5. Practice within the scope of the advanced practice role of their state.
- 6. Evaluate and function in complex environments.

- 7. Articulate laws, policies, and procedures within micro and macro environments of the advanced practice nurse.
- 8. Participate in development of relationships that demonstrate and appreciate interdisciplinary care.
- 9. Apply advanced knowledge of teaching processes to foster new knowledge, skills, attitudes, and behaviors in patients across the lifespan.

Masters of Science in Nursing Family Nurse Practitioner Program Admission Requirements

General University admission requirements for all students are the same as those listed under the Admissions section of the catalog.

Formal admission to the Masters of Science in Nursing (Family Nurse Practitioner Track) is completed during the Summer II term. Admission decisions are competitive and are based on an overall ranking of the applicant in each of the following areas:

- Bachelor of Science in Nursing (BSN) from a CCNE or NLNAC/ACEN/CNEA accredited nursing program.
- Verification of current unrestricted RN license in the state of Kansas and state of intended clinical practicum.
- Undergraduate cumulative GPA of at least 3.0 or a GPA of at least 3.0 in the last two years of undergraduate nursing study.
- Official transcript(s) from undergraduate/professional school.
- Two professional or academic letters of recommendation. The letter should attest to the applicant's potential to successfully complete a graduate program of study, with emphasis on professional nursing competency, relationship with team members, leadership skills, and personal responsibility/accountability.
- Current curriculum vitae.
- A 300 word statement describing the applicant's professional goals and reasons for seeking graduate education.
- Recommend 1 year of clinical experience as a registered nurse prior to clinical practicum.
- Personal interview with FNP Program Admissions Committee.
- Applicants must also meet the requirements for USM's Graduate Programs Admission.

Guidelines for Clinical hours:

Students should expect to be in clinical 18-23 hours per week for a total of 360 hours per semester for the spring and an additional 360 hours for the summer semester with a program total of 720 hours. Students are expected to keep up with clinical hours. It is easy to fall behind. Problems with keeping up with clinical hours should be reported to the clinical instructor promptly so that a remediation plan can be instituted.

Student Clinical Expectations:

- 1. The student will develop clinical objectives and share with their preceptor at the beginning of the clinical practicum. A copy of these objectives is to be given to the clinical faculty instructor. Objectives are to be reviewed over the course of the practicum to evaluate how they are being met. Objectives may need to be revised throughout the semester.
- 2. The number of patients seen by the student daily will be determined by the preceptor in collaboration with the student. This decision will be guided by both patient acuity and the student's current skill level with that patient population. Concerns regarding this can be readdressed with the clinical faculty instructor responsible for the student. As a guide, the student will begin with observation of preceptor for 1st 1-2 clinical days. The student will then be expected to see 2 patients in morning (am session) and 2 patients in afternoon (pm session). As determined by preceptor and student competency, the student may progress to seeing a maximum of 4 patients per 4-hour session in the first semester and 4-5 patients per 4-hour session in the second semester.
- 3. Students should see patients throughout the lifespan and according to the scope of practice of the preceptor.
- 4. Students are expected to document patient visits in Typhon and if they are unable to document in the clinical setting they are expected to create a Soap note with each patient encounter.
- 5. If the student is unable to attend a scheduled clinical day due to illness or weather, the student is expected to notify the preceptor, the site and their clinical instructor prior to the session (phone or email is acceptable). Please identify the preceptors preferred contact at the beginning of each rotation.

Guide to number of patient visits/encounters spring semester

Spring Semester (360 hours)	Patient encounters per week:	Average # of patient encounters per month:
Week 1	2-4	week $1 = 2-4$
Week 2	4-6	weeks $2-3 = 12-18$
Week 3 - 6	6-8	Week 3-4= 24-32
Week 7 - 15	8-10	Week5-6 = 48-60
Number of patient visits by student has with a preceptor is dependent on number of days per week student is with preceptor/clinical sites during the semester.	Exceptions to the above need to be reported to clinical faculty with explanation.	Students are expected to complete Minimally 100 patient visits for the semester

Guide to number of patient visits summer semester

Spring Semester (270 hours)	Patient encounters per week:	Average # of patient encounters per month:
Week 1	4	12
Week 2	8	32
Week 3 - 6	8-10	32
Week 7 - 15	8-10	64
Number of patient visits by student has with a preceptor is dependent on number of days per week student is with preceptor/clinical sites during the semester.	Exceptions to the above need to be reported to clinical faculty with explanation.	Students are expected to complete Minimally 140 patient visits for a 16 week semester

Patient Care Expectations:

- 1. Expectations of the patient assessment includes performing histories (including pertinent HPI, medical history, surgical history, allergies, medications, family history, social history, ROS), physical exam, and laboratory or other diagnostic testing.
- 2. The student will then make an Assessment/Diagnosis of the medical problem(s) and needs based on the H &P which will be presented in the history/physical exam format as described above to the preceptor for review.
- 3. The student will formulate appropriate plan(s) of care with their preceptor. Plans should include: Diagnostic testing, Therapeutic interventions, Education, and Follow-up pertinent to the patient and their visit.
- 4. The student will document a note of the patient interview/assessment based on whether the assessment is episodic or routine. All notes are to be reviewed in clinical by the preceptor. The preceptor is expected to see the patient after reviewing the findings with the student.

Clinical Logs:

Clinical logs will be maintained through the Typhon electronic clinical tracking system. Follow this link for an overview of Typhon. https://www.typhongroup.com/npst.html

Typhon is designed specifically for advanced practice nursing programs. Typhon Nurse Practitioner Student Tracking (NPST) System functions as a complete electronic student tracking system, including comprehensive collection of each student's patient encounter logs that need to be tracked during clinical rotations.

Each student is expected to maintain the Typhon logs on a weekly basis. Clinical weeks are from Sunday through Saturday. Data entry should be completed no later than 9:00 am each Tuesday for the prior clinical week.

Evaluation of clinical performance:

Each preceptor, USM Clinical faculty, and student is expected to complete and sign an evaluation form and submit this towards the end of the semester. The semester grade cannot and will not be submitted

until all properly completed evaluations are returned to the faculty. Evaluation is an ongoing process; therefore, it is recommended that both the preceptor and student participate in open discussion throughout the semester regarding progress made towards meeting the clinical objectives. The clinical faculty determines the student's grade for the clinical component.

The pass-fall behaviors are critical elements of the program. Failure to pass a critical element constitutes failure of the student to pass the course.

Clinical Site Visits:

Each student will be visited by the USM Clinical faculty twice during the semester, once per term. The preceptor may also be contacted via phone or e-mail to discuss student progression in clinical. The preceptor is encouraged to contact the clinical instructor with any concerns or questions related to the clinical experience.

During the site visit the student <u>may</u> be expected to perform the following activities under the observation of the visiting faculty member:

- 1. Take a comprehensive history depending on pt. visit (episodic vs. annual exam)
- 2. Physical examination
- 3. Formulate hypotheses about the above findings
- 4. Present the above information to preceptor in an organized manner
- 5. Implement a plan of care, incorporating education and health promotion strategies

During an initial visit to a site, time will be set aside to:

- 1. Meet with the preceptor privately
- 2. Tour the facility
- 3. Review the program and/or objectives for the course
- 4. Meet with the preceptor and student together to discuss progress being made towards meeting clinical objectives

NONPF Resources for NP preceptors

National Organization of Nurse Practitioner Faculties (NONPF) has provided a preceptor portal that houses FAQ's for preceptors as well as video vignettes to demonstrate student and preceptor interactions in order to support you as a preceptor. Below is the link to the portal and videos.

https://www.nonpf.org/page/PreceptorPortal Main

A Checklist for Faculty & Preceptor

to Enhance the Nurse Practitioner Student Clinical Experience

In early 2018, the National Organization of Nurse Practitioner Faculties (NONPF) and the American Association of Nurse Practitioners (AANP) collaborated to develop a tool that addressed the inconsistent relationships between NP faculty and clinical preceptors. This tool resulted in the development of guidance checklists that outlined expectations when establishing clinical rotations for NP students. The **Preceptor Expectation Checklist and the Faculty Expectation Checklist** include evidence-based suggestions to promote a healthy, ongoing relationship and reduce barriers experienced by the clinical preceptor, NP faculty, or NP student.

The article that presented this checklist can be found in the October 2019 issue of Journal of the American Association of Nurse Practitioners.

Faculty Expectations of Preceptors					
Establishing Clinical Rotation	Completed				
Review NP Program policies regarding student placement guidelines.					
Communicate start date and time with student.					
Review documents related to the clinical course (welcome letter, clinical hours requirement, syllabus, course objectives, etc.) and seek clarification, if needed.					
Review Family Educational Rights and Privacy Act (FERPA).					
Orientation					
Orient student to clinical site, clinical site policies, EHR, and clinical team prior to student's patient experiences.					
Discuss course objectives, course requirements, student learning goals, and clinical experience expectations with the student.					
Discuss with student his/her experience/background.					
Outline appropriate tasks, patient cases, and caseload for each clinical day.					
Establish plan for student progression from observing to conducting visits with minimal intervention.					

Clinical Experience	
Model clinical skills and professional/ethical behaviors for student learning.	
Be present to observe all student clinical activities	
Include student as a pertinent part of the healthcare team and encourage interprofessional collaboration between student and other team members.	
Encourage learning using direct questioning methods and allowing reflection on feedback.	
Verify student clinical hours.	
Communication	
Guide, counsel, and encourage active student learning through clinical	
Communicate to faculty pertinent feedback regarding student performance and learning progression related to course expectations and requirements.	
Be available for virtual or face-to-face site visits.	
Evaluation	
Complete appropriate evaluation forms at intervals as outlined in course	
Discuss evaluation(s) with student providing constructive feedback on strengths, weaknesses, and a plan for improvement.	
Participate in faculty-initiated plans of remediation, if necessary.	
Completion of Clinical Rotation	
Submission of all documents as outlined in the course.	

Preceptor Expectations of Faculty	
Establishing Clinical Rotation	Completed
Communicate start date and time with preceptor/clinical site point of contact.	
Identify preceptor's preferred method of communication.	
Send documents related to the clinical course (welcome letter, preceptor handbook, clinical hours requirement, syllabus, course objectives, etc.) to preceptor/clinical site point of contact via mail or email.	
Provide preceptor/clinical site point of contact with student's credentials and clinical clearance paperwork.	
Discuss course objectives, course requirements, student learning goals, and clinical experience expectations with the preceptor.	
Orientation	
Provide the contact number/information to the clinical faculty responsible for the student.	
Discuss the purpose, frequency, length, and number of site visits with the preceptor.	
Offer face-to-face or online orientation opportunities addressing adult learning/teaching strategies and how to serve as an effective preceptor.	
Clinical Experience	
Assume primary responsibility of the student throughout the clinical experience.	
Assess student's clinical skills, knowledge and competencies throughout clinical experience and assess for appropriate progression as it relates to course and	
Support students in connecting knowledge obtained in academic setting with their clinical experiences.	
Review and confirm student clinical hours.	

Communication ,	
Engage in open communication with preceptor regarding student performance and learning progression related to course expectations and requirements.	
Schedule virtual or face-to-face site visits.	
Evaluation	
Collect and review evaluation forms completed by the preceptor at intervals, as outlined in course requirements.	
Collect and review preceptor evaluation forms completed by the student.	
Discuss evaluation(s) with student providing constructive feedback on strengths, weaknesses, and a plan for improvement.	
Initiate plans of remediation based on evaluations, if necessary.	
Completion of Clinical Rotation	
Review final evaluation submitted by preceptor, as outlined in the course.	
Send preceptor and/or clinical site a thank you letter and/or token of appreciation, per program and/or university policy. <i>Including but not limited to continuing education credits, monetary compensation, adjunct faculty positions, access to school library resources</i> .	
Provide preceptor with documentation of preceptorship for national certification renewal or dossier.	
Provide preceptor with feedback about preceptorship performance based on student evaluation(s).	

The article that presented this checklist can be found in the October 2019 issue of Journal of the American Association of Nurse Practitioners.

Pitts, Courtney; Padden, Diane; Knestrick, Joyce; Bigley, Mary Beth. A checklist for faculty and preceptor to enhance the nurse practitioner student clinical experience. Journal of the American Association of Nurse Practitioners. 31(10):591-597, October 2019.

With permission from Wolters Kluwer, publisher of Journal of the American Association of Nurse Practitioners, the checklist is available for you to download.

University St. Mary

MSN (FNP Track) Clinical Site Description

A clinical practicum is a distinctly defined supervised on site experience in which students develop applied skills and integrate professional knowledge in the provision of "hands- On" primary care. Students in the FNP specialization must complete 4 courses (NUFP780, NUFP782, NUFP784, and NUFP786) that include a clinical practicum, with a minimum of 720 hours of supervised clinical experience (180) per course). Qualifications of Preceptor:

1)Shall be licensed as an advanced practice registered nurse or shall be licensed as a physician in the state in which the individual is currently practicing.

2)May not be: relative, immediate supervisor, employee or subordinate of student.

As part of your admission process to the FNP program, St. Mary requires that you identify potential clinical sites appropriate to the courses you will be taking. Identification of a field site on this form does not guarantee the approval of a practicum application /facility agreement at this clinical site. Practicum applications are due one semester prior to the start of each practicum course. Students may not register for a practicum course without an approved practicum site.

I understand the clinical requirements and have identified potential clinical sites:

Course	Potential Site information
NUFP 780 – Primary Care I – Management of the Adult/Geriatric Population Possible Preceptors: FNP, AGNP, Family practice MD or DO, Internal Medicine MD or DO Possible Sites: Family practice, primary care clinic, health department, internal medicine practice	Site Name: Site Address: Site Type:
NUFP782 – Primary Care II – Management of Childbearing Families Possible Preceptors: FNP, AWHNP, Obstetrician/gynecologist Family practice MD or DO Possible Sites: Family Practice, OBGYN practice, primary care clinic, health department	Site Name: Site Address: Site Type:
NUFP 784 – Primary Care III – Management of Children, families, and Populations Possible Preceptors: FNP, PNP, Family practice MD or DO, pediatrician MD or DO Possible Sites: Family practice, primary care clinic (with large child/adolescent population), health department, pediatric office	Site Name: Site Address: Site Type:
NUFP 786 – Clinical Capstone & Practicum for FNP Students Possible Preceptors: FNP, AGNP Possible Sites: Family practice, primary care clinic, health department, internal medicine practice	Site Name: Site Address: Site Type:
_ -	50 - Education OS 50

Appendix Practicum I

Student Name:
Preceptor Name:
Clinical Site:
Hours completed by this student in my clinical setting:
Types of Patients seen in clinic
Key: 1= Unsatisfactory at NP role (C< 80%)
2= Novice at NP role (B- 80%-84%)
3= Competent at NP role (B 84%-89%)
4= Proficient at NP role (A- 90%-94%)
5= Mastery of NP Role (A 95%-100%) NA/O= Not applicable, Not observed

COMPETENCY	E			rio:	N		COMMENTS
Patient Management	1	2	3	4	5	NA/O	
Obtains age-appropriate							
history for							
comprehensive of							
focused exam to include							
health maintenance							
history.							
• Performs appropriate							
examination using							
correct techniques.							
Begins to develop							
differential diagnoses							
for presenting problem							
while prioritizing care							
Considers evidence-							
based non-							
pharmacologic and							
pharmacologic							
interventions for							
presenting problem							
Begins to demonstrate							
critical thinking in							
clinical decision-making					1		
and adjust intervention							
as needed based on							
outcomes							
Communicates							
effectively using							
professional							
terminology, format and							
technology							
Documents visit							
thoroughly and							
accurately						-51-	Education OS 51

		- 1	n 1		5	NA/O	
NP-Patient Relationship	1	2	3	4	_ر	TAVA	
Prioritizes care and							
negotiates plan of care							
with patient							
Maintains professional							
boundaries and patient							
confidentiality			Carrier Pro		onawaya.		
Patient Education	1	2	3	4	5	NA/O	
Assesses patient's							
educational needs							
Provides age and							
education-appropriate							
information about							
condition management							
and health promotion							
Professional role	1	2	3	4	5	NA/O	
Begins to incorporate							
the roles of provider and							
educator in the NP role							
and articulates role to							
public and other health							
care professionals							
Interacts collaboratively		<u> </u>					
with team members							
Appropriately seeks							
assistance from							
preceptor							
Participates in clinical					1		
discussions and							
contributes relevant							
knowledge of recent							
research							
Culturally sensitive care	1	2	3	4	5	NA/O	
Demonstrate respect for	1	-	-				
patients and delivers							
culturally sensitive care	-	-	-	-	+		
Recognizes spiritual and							
emotional needs of							
patient							

excellent Preceptor Serve	s as Ro	le Model			
Communication Skills/ Facilitates communication	1	2	3	4	5
Time Management	1	2	3	4	5
Interaction with Patients	1	2	3	4	5
Shares knowledge & techniques	1	2	3	4	5

Selects appropriate learning experiences	1	2	3	4	5
Respects student	1	2	3	4	5
Asks questions in non-threatening way	1	2	3	4	5
Receptive to students questions	1	2	3	4	5
Provides relaxed atmosphere	- $ $ 1	2	3	4	5
Validates student's clinical skills & provides ongoing feedback	1	2	3	4	5
Shows enthusiastic for teaching	1	2	3	4	5
Willing to work with novice students	1	2	3	4	5

Commonio.	Com	me	ents	:
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Preceptor Signature :
Student Signature :
Course Clinical faculty Signature :

Appendix 2nd Clinical Couse

	2nd Clinical Cou
Student Name:	

Preceptor Name: Clinical Site:	
Types of Patients seen at clinical site:	

Key: 1= Unsatisfactory at NP role (C < 80%)

2= Novice at NP role (B- 80%-84%)

3= Competent at NP role (B 84%-89%)

4= Proficient at NP role (A- 90%-94%)

5= Mastery of NP Role (A 95%-100%)

NA/O= Not applicable, Not observed

COMPETENCY	E	AL	UA'	[OI]	V		COMMENTS		
Patient Management	1	2	3	4	5	NA/O			
Obtains age-appropriate									
history for comprehensive of									
focused exam to include									
health maintenance history.									
Performs appropriate									
examination using correct									
techniques.									
Orders and correctly									
interprets cost-effective									
diagnostic and health									
screening tests.									
Develops and analyzes	 								
appropriate differential									
diagnoses for presenting									
problem while prioritizing									
-									
care	-		-		-				
Begins to independently									
suggest evidence-based non-									
pharmacologic and									
pharmacologic interventions									
for acute and chronic									
conditions.	 			-	-				
Demonstrates critical									
thinking in clinical decision									
making and adjusts				1					
interventions as needed			Ì						
based on outcomes	_		-	 	 		10.1.1		
• Documents visit	Ì								
thoroughly and accurately	-	-	-	-	-				
Communicates effectively									
with preceptor using									
professional terminology,									
format and technology		201230	11	er Laterales	,				
NP-Patient Relationship	1	2	3	4	5	NA/O			
Prioritizes care and									
negotiates plan of care with									
patient						-			
Maintains professional									
boundaries and patient									
confidentiality						-54-	Education OS 54		

Patient Education	1	2	3	4	5	NA/O	
Assesses patient's							
educational needs							
• Provides age and							
education-appropriate							
information about condition							
management and health							
promotion	-110/6/2015			14-21	TEST COM		
Professional role		2	3	4	5	NA/O	
• Incorporates the roles of							
provider, educator,							
consultant, administrator and							
researcher in NP role as							
appropriate and articulates							
role to public and other							
health care professionals.							
Interacts collaboratively with							
team members	_	 	<u> </u>	-	-		
Appropriately seeks							
assistance from preceptor	-	ļ	-	1		i	
Participates in clinical							
discussions and contributes							
relevant knowledge of recent research							
Negotiating health care							
systems							
• Practices within authorized	1849/	S CERCUS				E. C. Carlotte and C. Carlotte and C. Carlotte and C. Carlotte and C. Carlotte and C. Carlotte and C. Carlotte	S Note that the state of the st
scope of practice							
Culturally sensitive care	1	2	3	4	5	NA/O	
Demonstrate respect for	i in the last		To Take	1	e per (Table)	TOTAL STREET, THE	
patients and delivers							
culturally sensitive care							
Provides care that meets							
spiritual and emotional needs							
of patient				<u> </u>			

Rating Scale: 1-unsatisfactory, 2-minimally satisfactory Preceptor Se	ory, 3-sati rves as Ro	sfactory, 4 ole Model	1-highly sa	itisfactory,	5- excellent
Communication Skills/ Facilitates communication	1	2	3	4	5
Time Management	1	2	3	4	5
Interaction with Patients	1	2	3	4	5
Shares knowledge & techniques	1	2	3	4	5
Preceptor	s Teachin	g Style			
Selects appropriate learning experiences	1	2	3	4	5
Respects student	1	2	3	4	5
Asks questions in non-threatening way	1	2	3	4	5
Receptive to students questions	1	2	3	4	5
Provides relaxed atmosphere	1	2	3	4	5
Validates student's clinical skills & provides	1	2	3	4	5
ongoing feedback Shows enthusiastic for teaching	155_	2	3	4	5 Education OS 5

Last revised Summer 2020

Willing to work with novice students	1	2	3	4	5	
Comments:						
Preceptor Signature :				potential and the second		
Student Signature :						
Course Clinical faculty Signature :						

Appendix

3nd Clinical Couse

Preceptor Name: Clinical Site:

Types of Patients seen at clinical site:

Key: 1= Unsatisfactory at NP role (C< 80%)

2= Novice at NP role (B- 80%-84%)

3= Competent at NP role (B 84%-89%)

4= Proficient at NP role (A- 90%-94%)

5= Mastery of NP Role (A 95%-100%)

NA/O= Not applicable, Not observed

COMPETENCY	E	AL	UA]	[OI	N		COMMENTS
Patient Management	1	2	3	4	-5	NA/O	
Obtains age-appropriate							
history for comprehensive of							
focused exam to include							
health maintenance history.							
 Performs appropriate 							
examination using correct							
techniques.							
 Orders and correctly 		l k					
interprets cost-effective							
diagnostic and health							
screening tests.							
 Independently develops and 							
analyzes appropriate							
differential diagnoses for							
presenting problem while							
prioritizing care							
 Independently suggests 				ĺ			
evidence-based non							
pharmacologic and					ļ		
pharmacologic interventions							
for presenting problem							
 Demonstrates critical 							
thinking in clinical decision					ļ		
making and adjusts							
interventions as needed based							
on outcomes	<u> </u>				ļ		
 Documents visit thoroughly 							
and accurately		ļ	ļ				
Communicates effectively							
with preceptor using							
professional terminology,							
format and technology	(9955	Short rise 4	1000000	273 500 022	S ESSENTIAL AND		
NP-Patient Relationship	1	2	3	4	5	NA/O	
Prioritizes care and negotiates							
plan of care with patient	<u> </u>		<u> </u>				
Maintains professional							
boundaries and patient							
confidentiality			l	<u> </u>	<u> </u>		

Prioritizes care and negotiates			T				
plan of care with patient	ĺ						
Begins to assists patient in							
adapting to acute/chronic	1						
conditions by developing an			1				
	l			-			
understanding of the patient's			ļ				
lifestyle, personal beliefs and							
priorities.							
Facilitates decision-making						İ	
linked to patient's concerns							
Patient Education	1	2	3	4	5	NA/O	
Provides effective learning							
environment for patient based							
on assessment of patient's			1				
knowledge base, readiness to							
learn, patient's developmental							
and emotional level and							
motivation							
Provides age and education-							
appropriate information about							
condition management and							
health promotion							
Uses community assessment							
information to evaluate client							
needs, initiate referrals, and							
coordinate care when							
applicable	-						
Assesses patient's response to							
teaching strategies and							
modifies approach based on							
outcomes					<u> </u>		
Professional role	1	2	3.	4	5	NA/O	
• Incorporates the roles of							
provider, educator,							
consultant, administrator and							
researcher in NP role as							
appropriate and articulates							
role to public and other health							
care professionals.	-	<u> </u>	 	-			
Interacts collaboratively with							
team members							
Negotiating health care							
systems							
Practices within authorized							
scope of practice							
Manages patient care and		1		†	1		
refers to specialty services as							
appropriate within the existing							
heath care delivery system	-	-	-	-	-		
Incorporates professional and							
legal standards into practice			x				
Culturally sensitive care	1	2	3	4	5	NA/O	
Demonstrate respect for	T						
patients and delivers							
culturally sensitive care					İ	-58-	Education OS 58
outturanty sometive cure							LUUVAHVII VO JO

• Provides care that meets				
spiritual and emotional needs				,
of patient				

Rating Scale: 1-unsatisfactory, 2-minimally satisfactor	ry, 3-satis	factory, 4	highly sa	tisfactory,	5- excellent					
Preceptor Serves as Role Model										
Communication Skills/ Facilitates communication	1	2	3	4	5					
Time Management	1	2	3	4	5					
Interaction with Patients	1	2	3	4	5					
Shares knowledge & techniques	1	2	3	4	5					
Preceptor'	s Teachin	g Style								
Selects appropriate learning experiences	1	2	3	4	5					
Respects student	1	2	3	4	5					
Asks questions in non-threatening way	1	2	3	4	5					
Receptive to students questions	1	2	3	4	5					
Provides relaxed atmosphere	1	2	3	4	5					
Validates student's clinical skills & provides ongoing	1	2	3	4	5					
feedback										
Shows enthusiastic for teaching	1	2	3	4	5					
Willing to work with novice students	1	2	3	4	5					

Comments:

Preceptor	Signature :
Student Si	gnature :
Course Cl	inical faculty Signature :

Appendix Capstone Practicum

	Capstone Practicu
Student Name:	

Preceptor Name: Clinical Site:	
Types of Patients seen at clinical site:	
Key: 1= Unsatisfactory at NP role (C< 80%)	
2= Novice at NP role (B- 80%-84%)	
3= Competent at NP role (B 84%-89%)	
4 D C : 4 4 ND -1- (A 000/ 040/)	

4= Proficient at NP role (A- 90%-94%)
5= Mastery of NP Role (A 95%-100%)
NA/O= Not applicable, Not observed

Manages patient visit effectively by obtaining appropriate history and performs appropriate examination with correct technique • Appropriately orders and correctly interprets cost effective diagnostic and health screening tests. • Independently develops and analyzes appropriate differential diagnoses for presenting problem while prioritzing care • Considers complementary and alternative therapy options in plan of care when appropriate londependently presents evidence-based non pharmacologic interventions for presenting problem • Demonstrates critical thinking in clinical decision making and adjusts interventions as needed based on outcomes • Assesses, diagnoses, monitors, coordinates and manages the health/illness status of patients over a	COMPETENCY	EVALUATION			V		COMMENTS				
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manages the health/illness status of patients over a											
status of patients over a	1										
period of time when	period of time when						***				
applicable	1 *										

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• Applies principles of							
research (EBP)and	-						
diagnostic reasoning skills							
in clinical decision making	. 1 1. 0			olyaka ing kanasana	isos ir ir ir		
NP-Patient Relationship	1	2	3	4	5	NA/O	
Assists patient in adapting							
to acute/chronic conditions	ĺ						
by developing an		1		İ			
understanding of the							
patient's lifestyle, personal							
beliefs and priorities.							
Facilitates decision-making							
linked to patient's concerns							
while prioritizing care							
Maintains professional							
boundaries and patient							
confidentiality							
Patient Education	1	2	3	4	5	NA/O	
Provides patient with	22. 5 0.65			- crystilling	11.	In the second section of the second s	
information that is							
scientifically grounded and							
appropriate to the health							
condition							
Provides effective learning							
environment for patient							
based on assessment of			1				
patient's knowledge base,							
readiness to learn, patient's							
developmental and							
emotional level and							
motivation							
Continues to reassess,		<u> </u>					
negotiate and coach patient							
based on new data,							
motivation and response to							
1							
teaching		-			-		
Uses community							
assessment information in			ļ				
evaluating patient needs,							
initiating referrals, and							
coordinating care							
Professional role	1	2	3	4.	5	NA/O	
Applies/develops a theory-							
based conceptual							
framework to guide practice			1				
Develops a base for	 	 	+	-			
personal ethics in practice							
as related to patient issues							
and scope of practice			 	 			
• Demonstrates skills in							
negotiating, consensus							
building and partnering							
with health care team							
members.							
						61	

Negotiating health care systems							
Understands basic							
business and management strategies to function as							
manager for the provision							
of quality care and efficient							
use of resources.							
Articulates progressive awareness of legislative and							
policy making activities						5	
which influence health							
services and practice				Test controls			
Culturally sensitive care	1	2	3	4	5	NA/O	
						4.7	
lexbyrd00@yahoo.com							
Demonstrate respect for							
patients and delivers							
• Provides care that meets	<u> </u>	<u> </u>	-	-			
spiritual and emotional							
needs of patient							

Rating Scale: 1-unsatisfactory, 2-minimally satisfact	ory, 3-sati	sfactory, 4-	highly sat	isfactory, 5	- excellent
	Serves as	Role Mode			
Communication Skills/ Facilitates communication	1	2	3	4	5
Time Management	1	2	3	4	5
Interaction with Patients	1	2	3	4	5
Shares knowledge & techniques	1	2	3	4	5
Precept	or's Teacl	ing Style			
Selects appropriate learning experiences	1	2	3	4	5
Respects student	1	2	3	4	5
Asks questions in non-threatening way	1	2	3	4	5
Receptive to students questions	1	2	3	4	5
Provides relaxed atmosphere	1	2	3	4	5
Validates student's clinical skills & provides	1	2	3	4	5
ongoing feedback					
Shows enthusiastic for teaching	1	2	3	4	5
Willing to work with novice students	1	2	3	4	5

Comments:
Preceptor Signature :
Student Signature :
Course Clinical faculty Signature :

MSN FNP Clinical Rotation & Preceptor Orientation Verification Sheet

	eted and signed by all parties prior to rotation start.	
Clinical Rotation (circle one):	Primary Care I Management of the Adult/Geriatric Popularity Care II Management of Childbearing Families Primary Care III Management of Children, families, and Primary Care IV Clinical Capstone & Practicum for FN	d Populations
Clinical Preceptor Acknowled	dgment of receipt of the MSN-FNP preceptor hand boo	k, orientation and
Clinical Preceptor Contact In	formation (Email and/or Phone):	
Student Signature		
Date:		
Program Director Approval:		
Clinical Placement Coordinat	tor:	

University of Saint Mary Nursing PL & Graduate Program Meeting Minutes

https://zoom.us/j/92933989076?pwd=bEdTRIJIK2RwakZCOGREN3VMeEJHUT09

Join Zoom Meeting Date: 9-17-20

Attendance: Kirsten Mcguire, Lezlee Price, Lynne Connelly, Karen Kidder, Tina Howard,

Michelle Birdashaw, Liana Roberts

Not in attendance:

Student Representatives: Marcy Hoppes

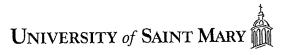
Staff members: Nancy Hernandez

Recorder of the Minutes: Michelle Birdashaw

Draft meeting minutes	Discussion	Follow- up	Responsible Party
Welcome and acknowledge any Guest and Student Reps			
Review of previous meeting Minutes for July 9th any changes?			
Motion to Approve	K Mcguire	None	
Motion to 2nd	Lynne C	None	
Approval of the Minutes	All	None	
Review of Agenda			
Motion to Approve This Meetings Agenda?	Liana R		
Motion to 2nd	Kirsten M		
Approval of the Agenda	All Approved		
Announcements			
Spring TextBooks Due date is October 30*! Please update the share drive and MBS with your text book elections.		МВ	МВ
Faculty Position and adjuncts- Resumes and interest in teaching have come through the division. So far only those that wish to be adjunct or online have voiced interest. Will continue the search and been to advertise with goal to fill our graduate and Post Licensure position by December. We have 3 new adjuncts with DNP-NP and Phd that will be assisting in filling courses.			
Old Business			
MSN program initiatives			mb

 Mission proposal Tagging questions exam soft PLO and course surveys Mentors- what does this really mean? What about Mentors in the MSN online and RN-BSN programs 	
Governance	
See under CAP standards	
New Business Items	
Diversity grant discussions- RNBSN Partnership discussions	
CAP Standard I Mission and Governance	
Mission: Reminder to begin thinking about our Graduate Program Mission-Is this something we wish to keep, or with our growing programs and Advanced Practice component what do we want this to look like?	All grad Faculty
CAP Standard II - Program Quality: Institutional Commitment and Resources	
No items	
CAP Standard III- Program Quality: Curriculum and Teaching- Learning Practices	
Thoughts on why NURN321 only speaks to the assessment of the adult patient? Aren't we preparing the RN-BSN students at the generalist level? Why is pediatrics missing. Karen Kidder—most ADN programs pediatric assessment is built into their pediatric course and this is how our Trad BSN program is constructed. No strong opinions were voice on the need to change at the current time, we may re-evaluate or provide electives. May be a nice idea to survey students to see what perception they have.	None at this time
CAP Standard IV - Program Effectiveness: Assessment and Achievement of Program Outcomes	
MSN-FNP and Graduate clinical hours(proposal that was submitted to CCNE and Grad council available in agenda) Proposal to change the ratio of all graduate clinical credit hours from 1:45 to 1:60 Karen asked if this would require an overall increase in the # of program hours to the online programs. Discussion was that the clinical credit requirement could be adjusted from 1 to 0.5 in order to keep practicum clinical hours	mb

the same, however the need is with consistency in grad programs and the FNP is needing to increase overall practice hours to address preparedness for entry to practice. Karen Kidder motioned to adopt the clinical credit adjustment with all graduate programs to the 1:60 ratio. Kirsten McGuire 2 nd All approved.		
PLO and course surveys Tagging of exam questions to MSN essentials and NTF criteria. Reminder that this is on one of our overall program initiatives and that we need to start the process.		mb
APA checklist: Lynne- Foundations FP program. Lynne developed and has the students turn in with their assignments. Improved APA- recommend that's its required with the capstone projects. Karen and Tina- created a checklist as well for the online programs.	All agree	All faculty
Next Meeting		
November 19 th at 3pm		
Adjourn motion: Lynne, Connelly, 2 nd Karen Kidder. All Approve.		



Graduate Council Agenda

October 1, 2020 Zoom

Attendees: Rick Gunter, Mark Harvey, David Strohm, Michelle Birdashaw, Tom Bertoncino, Elizabeth Youngs, Andy Wu, Joseph Squillace, Jamie Dehan, Cheryl Reding, Danielle Swatzell, Maureen Schuchardt

3:00 - Call to Order

Opening Prayer - S. Elizabeth

Old Business

- a. Presentation of September 10, 2020 Minutes for approval Mark Harvey moved to approve, Joe Squillace seconded Minutes were approved
- b. Discussion of Graduate council make up, policy and procedures. Jamie Dehan presented changes and the group worked together on adjusting the policy. Work by the council will continue on this.

New Business

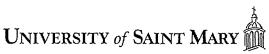
MSN-FNP and Post Masters FNP certification program clinical practice hours major change request. Michelle Birdashaw presented the proposed hours change and answered questions. Tom Bertoncino made a motion to approve the changes in hours. Joe Squillace seconded. All voted in favor of approving, request sent on to Faculty Senate.

Next Meetings

November 12, 2020

Program Review Schedule

Education Programs – review due Dec 1, 2020
Psychology Programs – review due Spring 2021
DPT Program – review due Spring 2022
Nursing Programs – review due Spring 2023
Athletic Training Program – review due Spring 2024
MBA Programs – review due Spring 2025
OTD Program – review due Spring 2026



Faculty Senate Minutes

October 6, 2020 @ 3:15pm Via Zoom

FACULTY PRESENT: Alice Howard, Amanda Quantz, Anand Shetty, Andy Wu, April Boyd-Noronha, Bethany Stanley, Bob Kircher, Breanna Swatzell, Brian Hughes, Briana Burgette, Bryan Bond, Caroline Mackintosh, Cheryl Reding, Chris Kinslow, Dan Burland, Dana Jackson, Daniel Williams, Danielle Swatzell, Darrel Stufflebeam, David Strohm, David Vance, Jamie Dehan, E. Nicole Hess-Escalante, Elizabeth Kinney, Emily Cline, Gwen Landever, Hannah Colmer, Heather Cornett, Jacqlynn Asherman, Jill Herbert, Jim Zimmerman, Joe Squillace, Julia Bacon, Justin Trent, Karen Kidder, Karenbeth Zacharias, Kat Humphrey, Kate Horvat, Kathleen DeKrey, Kelly Siler, Kirsten Workman, Kirsten McGuire, Kyle Anthony, Laveda Peterlin, Lezlee Price, Liana Roberts, Lindsey Ness-Hunkin, Lisa Parrott, Maureen Schurchardt, Mark Harvey, Marla Jones, MaryAnne Winn, Megan Pilcher, Melanie Stroda, Michelle Birdashaw, Nicole Clark, Phil Kilmer, Phil Watlington, Randall Scott, Richard Gunter, Rick Silvey, Roger Bonner, Sr. Rosie Kolich, Sheila Hammonds, Sofia Paredes, Sonia Rawal, Staci Petrillo, Sunny Sun, Tamara George, Tamilia Reed, Thomas Radosevich, Tina Howard, Todd Moore, Tom Bertoncino, Sr. Elizabeth Youngs, Sr. Dianne Steele

Excused: Jim Zimmerman, Justin Trent, Tamilia Reed, Phil Watlington

- I. 3:15 Call to Order
- II. Welcome Roger Bonner
- III. Opening Prayer Brian Hughes
- IV. Birthdays/Kudos
 - a. Karenbeth: Dana Jackson had her historical romance novel accepted for publication with Harlequin Press. The tentative title is Blues Moon and it is based in Kansas City.
 - b. Sofia Paredes has been nominated and accepted as a Board Member of an Immigrant Rights Organization.
- V. Announcements, Questions and Answers Sister Diane, Michelle Metzinger, Gwen Landever:

Sister Diane: Continuing to do Covid Testing. Currently have 3 positives today. Most of the students will come out of quarantine on Friday, October 9th, 2020. The goal is to continue testing by "Teams". The football team typically practices in small groups, but when they are all together for instance in the last scrimmage it can be challenging, therefore they are all tested. Women's Basketball, Wrestling, Swim, and Cross-Country Teams have had done a great job with few positives. The quarantine policy is established by the Leavenworth County Health Department. Most of the teams are being re-

tested before they come out of quarantine. The coaching staff has encouraged the students to continue to complete their homework and to participate with course assignments.

VI. Presentation of Minutes for Approval:

September 15th Minutes: Minor changes were submitted and will be corrected. No other changes submitted.

Roger moved to accept the September 15th changes with minor changes. Sr. Elizabeth Youngs second the motion to accept the September 15th minutes.

Minutes accepted through consensus.

VII. Continuing Business

a. Graduate Council nominations

Undergraduate seats have nominees: April Boyd-Noronha and Lisa Parrot have expressed interest in the position and we will put them on a ballot for a vote for the Faculty Senate October 27, 2020 meeting.

- b. **Discontinuation of majors** Presented by Karenbeth Zacharias: These majors were presented for discussion last Spring 2019. They have been approved by Academic Affairs on April 3, 2019 and now are presenting for vote from Faculty Senate.
 - i. **Theology:** USM has had very few majors and these numbers are available. Theology would continue to be a foundational program at USM and a Theology Minor would be able to revised to include the ULO 5 General Education.

Discussion

<u>Dan Burland</u> regarding the discontinuation of all three of these majors: Dan feels we need to remember we are a Catholic Liberal Arts University and must remember this. We have had a strong Humanities Program at USM and it has been a sacrifice and it is worth support. Every graduate that he has met from the program has been "gentle, decent, and fearless" and this quality makes up what is lacking in quantity. Dan believes USM should keep these Degree Majors as a Catholic Institution.

Karenbeth: She "Thanked" Dan B. for is comment and stated as a Faculty member in Humanities, she is deeply committed to the Liberal Arts. We are not eliminated the Theology, Pastoral, and Theater courses, but we are readjusting and they will still be able to do these as a "Minor" along with their Major Degree of Study. We must keep in mind the numbers and the daily operations of business as these majors require a management of the courses. We are making a shift from a Major to more consolidation with these as a Minor and we will continue to support Humanities and Music.

<u>Dan Burland:</u> I stand by my original statement and we must have the Institutional support.

<u>Brian Hughes:</u> Thank you to Dan for the touching comments. Roger B. Moved to Approve the Discontinuation of the Theology Major:

Tamara George: Moved to Second the Motion:

Motion: Passed: Yes 54% No: 25% Abstain: 20%

ii. Pastoral Ministry: Roger B. Moved to Approve the Discontinuation of the Pastoral Ministry Major: Tamara George: Moved to Second the Motion

Passed: 60% No: 28% Abstain: 12%

iii. **Theater: Roger B.** Moved to Approve the Discontinuation of the Theater Major.

Nicole Hess-Escalante Moved to Second the Motion Passed: Yes 61% No 26% Abstain 13%

 Proposal to add MSW and BSW programs – Presented by Joe Squillace

Roger B. Moved to Approve the addition of the MSW Degree Program:

Karenbeth Zacharias: Moved to Second the Motion

MSW Vote: Passed: 97% Yes No 2% Abstain 2%

Roger B. Moved to Approve the addition of the BSW Degree Program

Richard Gunter: Moved to Second the Motion BSW Vote: 97% Yes No 2% Abstain 2%

d. Proposal to add LCF CIS program —Presented by Sunny Sun Roger B. Moved to Approve the addition of the CIS Program at the Lansing Correctional Facility under the Second Chance Pell Grant Rick Silvey: Moved to Second the Motion Vote 89% No 3% Abstain 8%

VIII. New Business

a. Adding HI 1xx to Gen Ed curriculum – Presented by Kyle Anthony: Discussion: Comment by Dana Jackson: This proposed course is an Innovative and Positive addition to our course offerings Tamara George: Moved to Approve the addition of the HI 1xx Course Dana Jackson Moved to Second the Motion

Vote: Yes 94% No 3% Abstain 3%

 Adding CH 118 to Gen Ed curriculum – Presented by Hannah Colmer: Discussion: Comment by Roger B. most students enjoy this course. Roger B. Moved to Approve the addition of CH 118 to the Gen Ed Curriculum. Tamara George: Moved to Second the Motion Vote: Yes 97% No 2% Abstain 2%

c. New courses – SPA 203 and 303 – Presented by Sofia Paredes Discussion: Comment by Karenbeth Zacharias These are Great Courses that were piloted and now are ready to be in the catalog as course offerings.

Roger B. Moved to approve the addition of SPA 203 and 303

Richard Gunter: Moved to Second the Motion Vote: Yes 98% No 2% Abstain 0

d. Changes to Graduate Nursing Clinical/Practicum hours – Presented Michelle Birdashaw

Roger B. Moved to approve the changes to the Graduate Nursing Clinical/Practicum hours.

Sr. Elizabeth Youngs: Moved to Second the Motion Vote: Yes 98% No 0 Abstain 2%

IX. Announcements

Nicole Hess-Escalante: Anyone interested in teaching an Honors class. Dan Williams: Please contact Dan Williams if you have a location for his Forensic Biology Course experiment.

X. Closing Adjourned at 4:18pm

Future Meetings
October 27th
November 17th