TITLE: Preceptorship for Capstone and Elective Courses (other than N416, see policy B-24)

POLICY: Use of clinical preceptors with students may be an appropriate option for Capstone and selected elective courses within the College of Nursing curriculum. Use of clinical preceptors provides a consistent one-to-one relationship which presents an effective environment for learning. The preceptorship experience needs to reflect a collaborative process involving the faculty, the preceptor and the student. The faculty is responsible for organizing and evaluating the preceptorship experience, and for selection of preceptors. The preceptor is responsible for providing a supportive learning milieu for the student. The student is responsible for knowing and functioning within the Student Scope of Practice, and for responsible regular communication with both faculty and preceptor.

RATIONALE: This policy is to enumerate responsibilities of faculty, preceptors, and student when clinical preceptors are used in capstone and elective courses.

PROCEDURE:

I. Faculty Roles and Responsibilities

A. The faculty is responsible for appropriate site selection:
   1. Insures safe site selection for functioning of student/preceptor
   2. Insures a learning environment that enables the student to meet course objectives
   3. Determines appropriateness of the student preceptor site

B. The faculty organize and evaluate orientation for new preceptors and provide continuous and ongoing orientation for previous preceptors.

C. A minimum of two (2) contacts by faculty with preceptor during each experience is required and on an as needed basis as requested by student, preceptor or faculty.

D. Faculty will be available to the preceptor and the student during clinical experiences. Availability and access will be in writing and given to student and preceptor, and posted within the agency at an appropriate location.

E. Faculty will mentor new preceptors to increase their clinical teaching potential. Faculty will offer assistance to preceptors in the areas of clinical teaching skills, evaluation techniques, and use of adult learning theory.

F. Evaluation of preceptors by faculty is continuous and ongoing during the semester. Preceptors are evaluated for clinical knowledge, ability to work with students, and appropriateness as role models. Feedback is given to preceptors and their managers throughout the semester.
G. Selection of preceptor is the faculty responsibility and follows the guidelines outlined below.

1. Preceptors for MSU-Bozeman College of Nursing capstone and elective clinical courses must be carefully selected, screened, and approved in a systematic manner in order to assure meeting the criteria established by the College of Nursing faculty and to be consistent with the Montana Board of Nursing Rules and Regulations Section 8.32.909 Faculty subsection. Preceptors quoted as follows:

“(5) Preceptors (registered nurses) may be utilized to assist with course teaching provided that a nursing faculty member, holding a master’s degree in full compliance with ARM 8.32.909, retains responsibility for lecture and laboratory portions of the course, and provided the use of preceptors is appropriate given the course objective and the level of students in the course.

a. Appropriate uses of preceptors include the following:
   (i) Preceptors may be used in “capstone” or summary courses taken during last quarter/semester of the nursing education program when such preceptors serve primarily as role models for students. In these instances, the usual 10:1 student to master’s prepared faculty member ratio does not apply;
   (ii) Preceptors may be used to extend master’s prepared faculty members in regular nursing curricular courses. In these instances, preceptors are viewed as providing safety supervision such as that which previously could be given by less acute and the complexity of health care was less sophisticated. IN THESE INSTANCES, THE USUAL 10:1 STUDENT TO MASTER’S PREPARED FACULTY MEMBER RATIO APPLIES;
   (iii) Preceptors may be used to extend master’s prepared faculty members in the elective nursing courses. In these instances, the usual 10:1 student to master’s prepared faculty member ratio does not apply.”

II. Selection of Preceptors

A. Criteria for Selection
   1. A minimum of a baccalaureate degree in nursing
   2. Considered expert nurses and good role models by peers and supervisor
   3. Provide experiences deemed appropriate for the course level
   4. Agree to act in this role
   5. Agree to engage in orientation
   6. Agree to be involved in evaluation
   7. Possess organizational knowledge (i.e. agency policy and procedure)
   8. Identified an interest in teaching
   9. Demonstrated effective communication skills
B. Initial Screening

1. Agency contact is established: Course description and objective are discussed with managers. Preceptor requirements are shared and managers then solicit volunteers. Managers are considered to be effective first level screen since they:
   a. Must approve preceptor participation; therefore, managers assist in even distribution of preceptors across shifts and units.
   b. Evaluate and supervise staff; therefore, managers are most knowledgeable regarding professional performance in suitability as role models.
   c. Assure that all preceptors are legally employed and subjected to employer screen for valid registered professional nurse license and specialty credentially as required by individual institutions.
   d. Are aware of educational preparation of the staff nurses.

2. After managers approve participation by volunteers, all preceptors are oriented prior to the student learning experience. Due to various scheduling protocols, orientation may take place over two to three weeks in both groups and individual sessions. Preceptors are evaluated at this time for their understanding of course objectives and skill at precepting a senior student. Every effort is made to assist and encourage the growth of volunteers in becoming effective preceptors.

C. Course and Student Evaluation

1. Preceptors provide evaluative input about student performance at the end of the clinical experience. This input includes information about student performance and the interaction of preceptor and student.

2. Students complete a preceptor and course evaluation at the end of the semester, providing feedback about the overall quality of the preceptor, the clinical experience itself as it assists in meeting the course objectives and a recommendation for continued use of the preceptor. This information may be shared by the faculty with the preceptor.

3. Evaluative material is considered when renewing or soliciting new preceptors.

III. Coordination and Communication

A. All potential preceptors are asked to fill out the Preceptor Data Form, which identified their level of educational preparation, years of experience, area of expertise/specialty and other pertinent information (see Attachment #1).

B. The Campus Director seeks evaluative input about preceptors from faculty as appropriate.

C. Preceptors are notified in writing by the Course Coordinator, (see sample letter - Attachment #2, and Guidelines for Nurse Preceptors and Students --Attachment #3). The Campus Director is made aware of preceptor selection.

D. Records are kept of Preceptor Data Forms in a designated location.

E. All preceptors must agree to participate in an orientation session provided by the course coordinator or campus director before beginning the preceptor experience.

F. The procedure for scheduling and posting of hours and assignment must be clearly communicated.

G. All preceptors are expected to participate in the evaluation of the student and the preceptor’s
experience (see evaluation forms -- Attachment #4 and #5).

H. All students are expected to participate in the evaluation of the preceptor (see evaluation form -- Attachment #6).

The attached forms are recommended for preceptor courses.

ATTACHMENTS #1-6

Approved by:

UAAC: 4-7-95; 5-3-96
Faculty: 4-17-95
Dean: 9-25-95 (KHC); 12-10-97 (LA)
MONTANA STATE UNIVERSITY-BOZEMAN
COLLEGE OF NURSING
Preceptor Data Form

Agency Name: ____________________________________________________________

Address: ___________________________________________ Phone: _______________

Preceptor’s Name: ______________________________________ Unit/Department _______

Job Title: ___________________________________________________________________

Area of Specialization: ___________________________________ Years of Practice in Specialty: _____

Areas of Special Interest (e.g. Oncology in Peds, CVA’s in Rehab., etc.)
1. 
2. 
3. 

Supervisor’s Name ________________________________________________________

MT License #: ____________________________ Length of Time at Present Institution: ______

Certification #: ________________________ Years: ____________ Months: ____________

Certification Board: _________________________________________________________

Baccalaureate Degree in Nursing (B.S.N.) from: Date Degree Awarded:

_____________________________________________________________________________

Additional Advanced Degrees in Nursing from: Date Degree Awarded:

_____________________________________________________________________________

Have you ever precepted nursing students before? Yes:______ No:______

If yes, was it in a Summer Internship Course _____ or N484 Management Concepts in Nursing _____

_____________________________________________________________________________

Signature __________________________ Date ______________________

Home Address: _____________________________________________________________

Home Phone No.: ___________________________________________________________
Date:

Preceptor Name
Address

Dear (Preceptor):

Enclosed you will find material concerning (Course #, Course Name). Included for your information is the course syllabus explaining the objectives of the course, the role of the preceptor, and the faculty role.

The student will spend (? days/wk) with the preceptor for a total of ? hours. A student will only be present when her/his preceptor is present. This could include weekends and various shifts. Please see attached letter and course syllabus for procedures students can and cannot do.

(Faculty name) is the faculty assigned to this group of students. This faculty member is available and can be reached whenever the student is involved in clinical experiences by calling (phone #). He/she will be contacting the preceptor (by a visit to the unit or a phone call) on a weekly basis or as needed. The preceptor should feel free to call the faculty at any time with questions or concerns.

The student will begin this experience on (date). We have notified the students that they are to meet with their preceptors during the week of (date) to develop a schedule. The student is to turn in a written schedule to (faculty name) by (date). For any change in the schedule, (faculty name) needs to be notified. Students should complete their ? hours by (date). (Faculty name) also plans to meet with the preceptors and/or nurse managers before the students arrive to answer any questions.

We greatly appreciate your time and efforts in the education of our students. Please feel free to provide additional written or verbal communication to ____________, Campus Director. If I can answer any questions, please don't hesitate to call me at my office (phone #). Thanks again.

Sincerely,

Faculty Name
Course Coordinator N____

Campus Director Name
___________ Campus, MSU-Bozeman College of Nursing

Attachments
OVERALL: Thank you for agreeing to participate in this educational experience!

Students enrolled in (Course #) are (1st or 2nd) semester (Jrs/Srs) and will graduate in (month/year).

Attached is a copy of the syllabus which describes the course, course objectives and learning activities.

Students will contact their preceptors to meet and develop a schedule. A written schedule needs to be turned in to the faculty and the preceptor. Students are expected to keep their clinical commitments as agreed upon with the preceptor. Any changes in the schedule must be approved by faculty.

WHAT CAN THE STUDENTS DO?

Students can utilize the nursing process to plan care for patients in settings and with problems similar to those encountered previously. Students have been doing care plans for several semesters; however, these should be checked by the preceptor and modified as appropriate. The students should have feedback on the plan of care before it is carried out.

Students can deliver care to patients which is commensurate with their knowledge and skills background and confidence level as described by the students and by the student's skills checklist. (See course syllabus for standard scope of practice.) Students will provide the preceptor with a list of previously learned skills. The preceptor may use this list as a basis for evaluating confidence and competence outcomes.

Skills ordinarily requiring licensure may be carried out under supervision of preceptor if they have been previously learned from and carried out under supervision of an MSU instructor per Montana State Board of Nursing regulations. Observational experiences or skills not requiring a professional license may be carried without the direct supervision of the preceptor. In other words, the student can carry out work with same level of supervision as that provided for those tasks being performed by an unlicensed person. The preceptor should help interpret to staff what students should and should not be doing. They should not be doing new skills beyond what an unlicensed staff member would do. They should practice already learned skills under the supervision of the preceptor. This is not to say that students cannot have new observational experiences, or gain new knowledge. Please note that students are not permitted to take verbal or telephone orders from physicians.
**PRECEPTOR TEACHING ROLE**

The **preceptor is a role model**. Students learn by observing, analyzing and questioning the preceptor's style of practice, interactions with clients and colleagues and responses to a multitude of demands. It is most helpful if the preceptor can share rationale and motives underlying actions and decisions with the student. This may be done in pre- or post-experience conferences and/or "thinking aloud" when appropriate.

There usually is more than one way to carry out a procedure. Techniques do not have to be identical. Students should be prepared to identify principles and sound rationale for minor deviations from techniques they have learned. For example, rather than saying, "I don't know if this is the way your instructors want you to do it . . ." preceptors might ask students to explain or demonstrate what they have been taught and why. Institutional policies may dictate minor modifications or the student may adopt techniques which the preceptor uses (new procedures are not included here) but which utilize the same principles.

**WHAT DO WE MEAN BY SUPERVISION?**

Judgment comes into the picture here with more difficult skills. Preceptors need to be able to use critical judgment. The preceptor should be available for consultation/assistance. The student is also responsible to seek assistance and supervision as needed. This is an important part of the development of judgment and is a key concept in the MSU clinical teaching program. The preceptors should not delegate supervisory responsibility to other staff (except for observational experiences the student may have). As a professional nurse, the preceptor is legally liable for appropriate assignment and supervision of anyone to whom he/she has delegated care, including the student. The student is also legally liable for care given to patients and must refuse inappropriate assignments and seek an appropriate level of supervision. Since preceptors are also liable for assignments they make, students need to be accurate in the way they represent their experience and confidence level when potential assignments are discussed so that the preceptor has a sound basis for making those assignments. Students and preceptors should refer to the ANA Code for Nurses (1976): "When the needs of clients are beyond the qualifications of the nurse, consultation must be sought from qualified nurses or other appropriate sources (6.3);" and ". . . personal competence should be carefully assessed before accepting responsibility or delegating activity (6.4);” and ". . . if the nurse does not feel personally competent or adequately prepared to carry out a specific function, the nurse has the right and responsibility to refuse. In so doing, both the client and the nurse are protected (6.5)."

**CONTACT WITH FACULTY/FACULTY SUPERVISION**

One of the faculty assigned to the course will be available to the student and preceptor by telephone/beeper throughout the semester. A faculty member will visit the clinical sites regularly for on-site supervision and/or communication with student and preceptor. Periodically and at completion of the clinical experience, a faculty member will meet with the preceptor to obtain evaluation data.

**EMPLOYMENT STATUS**

Students should not be considered as part of the employed work force of the agency and should not be used in this way. Since they are not employees, they are not entitled to Workman's Compensation. If an injury occurs on the job, the students must seek their own care and file claims for reimbursement through their own insurance company.
TERMINATION

The agency must at all times protect the rights of clients who receive care from students in the agency. If the student is not meeting the objectives or is not prepared to participate safely with clients, the agency, the preceptor or the faculty member may terminate the placement. The preceptor is responsible for contacting the faculty member if the student's performance is not satisfactory. The student likewise should contact the faculty member if the student believes that agency expectations or supervision are inappropriate to his/her knowledge or experiential background.

MISCELLANEOUS STUDENT REQUIREMENTS

The students must show evidence of current student liability insurance before starting the semester and must also show evidence of a current negative TB skin test or x-ray reading. Students must also provide evidence of positive Rubella and HBV titer and/or vaccines. Students will wear student uniforms, or appropriate street clothes with or without a lab coat, which are appropriately clean and in good repair, and student name tags. Student attire will be appropriate to the policy of the clinical agency. Evidence of current CPR certification must also be provided.
Circle the appropriate number: Strongly agree  Strongly disagree

1. The objectives of the course were clear to me: 1 2 3 4 5
2. I understood my role as a preceptor: 1 2 3 4 5
3. My student was adequately prepared for this course: 1 2 3 4 5
4. There was adequate communication between myself and the course instructor: 1 2 3 4 5
5. I felt comfortable in calling the course instructor should the need arise: 1 2 3 4 5
6. Serving as a student preceptor is an activity I enjoy: 1 2 3 4 5
7. Students should spend more hours with their Preceptors in this course: 1 2 3 4 5
8. Student progress in this course was less than I expected: 1 2 3 4 5
9. What do you see as strengths of this course?

10. What do you see as weaknesses of this course?

11. Would you be willing to serve as a preceptor for a student in the future?

Your name(optional): __________________________________________________________

Comments:
Faculty: 
Semester: 
Name of Student: ________________________________________________
Name of Manager Preceptor: ________________________________________
Name of Agency: _________________________________________________
Date of Evaluation: __________

Instructions: Rate the student’s performance in each item provided.

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<tr>
<th></th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
<th>Unsatisfactory</th>
<th>Not applicable</th>
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1. Adapts to clinical situation

2. Development in awareness of the structural organization of the health care agency

3. Identifies the manager’s application of the management process:
   - Planning/decision making
   - Organizing
   - Directing
   - Controlling
   - Evaluating

4. Identify the influences on the agency’s health care delivery system:
   - relationship between the manager
   - impact on nursing care
   - issues in nursing management as it affects the health care delivery system (i.e. conflict management, agency’s budgetary issues)

5. Identifies the legal/ethical responsibilities of the nurse in the management role
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<th>Needs Improvement</th>
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<th>Not applicable</th>
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<td>6.</td>
<td>Utilizes appropriate verbal and written communication skills with patients, families’ health care personnel and faculty</td>
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<td>7.</td>
<td>Identifies nursing implications for promoting a healthy managerial style</td>
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<td>8.</td>
<td>Discusses use of information systems and data management in clinical setting</td>
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<td>9.</td>
<td>Identifies current issues in nursing management through a variety of resources</td>
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<td>10.</td>
<td>Demonstrated accountability for own actions</td>
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Comments:

Thank you for your input.
Student:_________________________________ Patient:______________________________________

Organization:_________________________________________________________________________

Preceptor:____________________________________________________________________________

Management:___________________________________________________________________________

PLEASE RATE YOUR PRECEPTOR AND PROVIDE COMMENTS IN THE FOLLOWING AREAS USING THE FOLLOWING SCALE: 1 = WEAK; 2 = COMPETENT; 3 = VERY COMPETENT.

<table>
<thead>
<tr>
<th>1. Utilization of management/leadership skills:</th>
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<tr>
<td>-directing and supporting of staff</td>
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<td>-organizing the delivery of care to a group of clients</td>
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<td>COMMENTS:</td>
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| 2. Demonstration of clinical skills:          |
| COMMENTS:                                    |

| 3. Provision of teaching/mentoring behaviors:|
| -presents information clearly                |
| -encourages independent decision-making      |
| -provides you with assistance when you had questions and/or concerns |
| -assists you to select learning experiences to meet your clinical learning needs |
| -listens and acknowledges your feelings      |
| -assists in making you feel welcome and an integral part of the unit staff |
| -gives feedback to your progress during daily interactions |

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<th>Weak</th>
<th>Competent</th>
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-challenges you to think critically

-suggests resources to enhance your learning

COMMENTS:

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<th>4. Demonstrate knowledge of agency/institution</th>
<th>Weak 1</th>
<th>Competent 2</th>
<th>Very Competent 3</th>
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<td>-orients you to the unit/agency’s routines</td>
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<td>-demonstrates knowledge of unit’s policies</td>
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<td>during daily activities</td>
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COMMENTS

5. Please share any other significant strengths and or/weaknesses.

6. Would you recommend this preceptor for future student activities? Please provide rationale.