

MONTANA STATE UNIVERSITY
COLLEGE OF NURSING

POLICY C-9

TITLE: PRECEPTORSHIP FOR REQUIRED UNDERGRADUATE NURSING COURSES

POLICY: The faculty is responsible for appropriately utilizing preceptors for educational experiences, selection and training of preceptors, and organizing and evaluating the preceptorship experience. Preceptors need not be registered nurses, but should be in a role that legitimately facilitates a student's ability to successfully achieve the clinical objectives. Preceptors are defined and guidelines for selection are provided in the State Board of Nursing Rules and Regulations Section 24.159.665 Preceptors in Nursing Education Programs. (See section I, G, 1 below.) In accordance with these rules, "clinical preceptors may be used to enhance, but not replace, faculty-directed clinical learning experiences. Preceptor utilization is limited to no more than 20 percent* of a student's total clinical hours in the program." Further, "when utilizing preceptors, faculty members are responsible for:

- (a) ensuring safe, accessible and appropriate supervision based on client health status, care setting, course objectives, and student level of preparation;
- (b) selecting the individual preceptors and ensuring appropriate preceptor qualifications and scope of responsibility;
- (c) ensuring that the preceptor demonstrated competencies related to the area of assigned clinical teaching responsibilities and will serve as a role model and educator to the student; and
- (d) providing the lecture and laboratory portions of a course."

The preceptor is responsible for providing a supportive learning environment for the student and for providing formative evaluation of student performance. The student is responsible for knowing and functioning within the Scope of Practice, and for responsible regular communication with both faculty and preceptor.

Selection of Preceptors

Preceptors for MSU College of Nursing clinical courses are 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 24.159.665 Preceptors in Nursing Education Programs.

In order to serve in the role, potential preceptors must:

1. Be considered an expert in the role and a good role model by peers and supervisor
2. Be willing to provide experiences deemed appropriate for the course level
3. Agree to act in this role
4. Agree to engage in orientation
5. Agree to be involved in evaluation of student performance and the course in general
6. Possess organizational knowledge (i.e. agency policy and procedure)
7. Identify an interest in teaching
8. Demonstrate effective communication skills

RATIONALE: Use of clinical preceptors with students may be an appropriate option for 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. This policy enumerates responsibilities of faculty, preceptors, and student when previously learned clinical nursing skills are practiced by the student. This policy is not intended to cover the learning of new skills.

- As of 3/1/12, 20% of 1185 total clinical hours allows for 237 total preceptored hours per student.

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PROCEDURE:

FACULTY PROCEDURES:

The course faculty:

1. Assesses student learning needs, course objectives, and appropriateness of preceptor model to achieve learning
2. Identifies the appropriate clinical agency intermediary (e.g., clinical education coordinator, nurse managers) and follows that agency's procedures for identifying potential preceptors. To assist the agency in identifying preceptors, the faculty member shares the course description and objectives and requests the intermediary to solicit volunteers who meet the preceptor requirements (listed in Policy).
3. Assures that any licensed preceptor has an unencumbered license and completes the Preceptor Data Form (See Attachment #1)
4. Organizes and evaluates an orientation for new preceptors and provide continuous and ongoing orientation for previous preceptors. Due to various scheduling protocols, orientation may take place over two to three weeks in both group and individual sessions.
5. Contacts each preceptor at least *twice* during each experience and on an as needed basis as requested by student, preceptor or faculty.
6. Provides contact information to the student and preceptor at the beginning of the experience and is readily available to both during clinical experiences.
7. Notifies the preceptor of their preceptor role via phone, email, or in writing by the Course Coordinator. (See sample letter - Attachment #2, and Guidelines for Preceptors and Students --Attachment #3).
8. Develops and clearly communicates the procedure for scheduling and posting of hours and assignment between the student, faculty and preceptor.
9. Coaches 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.
10. Seeks formal preceptor feedback about student performance at least twice a semester and responsibly incorporate the feedback into formative and summative student evaluations and decision-making about student progress. (See attachment #5 for sample evaluation tool.)
11. Evaluates preceptors formatively at intervals during the semester and summatively at the end of the semester. Preceptors are evaluated for clinical knowledge, ability to work with students, and appropriateness as role models. Feedback is given to preceptors at the end of the semester.

PRECEPTOR PROCEDURES:

The preceptor:

1. Attends an orientation session provided by the course coordinator prior to beginning the preceptor experience.
2. Provides timely, honest, and regular updates about student performance to the faculty member.
3. Participates in the evaluation of the student and the preceptor's experience (see sample evaluation forms -- Attachment #4 and #5).

Reviewed/Approved:

Level I: UAAC (March, 2012)

Level II: Associate Dean for Undergraduate Programs (November, 2012)

ATTACHMENTS #1-6

The attached forms are recommended templates for courses that use preceptors. They may be adapted to meet individual course needs.

**PROCEDURE C-9
ATTACHMENT #1
MONTANA STATE UNIVERSITY
COLLEGE OF NURSING
Preceptor Data Form**

Preceptor's Name: _____

Home Address: _____

Home Phone No.: _____

Agency Name: _____

Address: _____

Unit/Department _____ Phone: _____

Job Title: _____

Supervisor's Name _____

Relevant qualifications/background for serving as preceptor: _____

For *NURSE* or other *LICENSED* preceptors only:

Area of Specialization: _____ Years of Practice in Role: _____

Length of Time at Present Institution: _____

Areas of Special Interest (e.g. Oncology in Peds, CVA=s in Rehab., etc.)

1.

2.

Primary Education from: _____

Type of Degree and Date Degree Awarded: _____

Additional Advanced Degrees from: _____

Type of Degree and Date Degree Awarded: _____

Certifications: _____

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

If yes, was it in a Summer Internship Course _____ or N487 Nursing Leadership and Management Development

The information provided above is accurate. If licensed, I attest that my license is unencumbered.

Signature

Date

**POLICY C-9
ATTACHMENT #2
MONTANA STATE UNIVERSITY
COLLEGE OF NURSING
Letter to Preceptors**

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). 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 _____. If I can answer any questions, please don't hesitate to call me at my office (phone #). Thanks again.

Sincerely,

Faculty Name
Course Coordinator NRSG

Campus Director Name
_____ Campus, MSU College of Nursing

Attachments

**PROCEDURE C-9
ATTACHMENT #3**

**MONTANA STATE UNIVERSITY
COLLEGE OF NURSING
Guidelines for Nurse Preceptors and Students**

COURSE #/TITLE:

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 health care providers independently. Students are allowed to take verbal or telephone orders if witnessed and co-signed by the preceptor. The preceptor is responsible for assuring the accuracy of the order.

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 of Ethics for Nurses (2001): *4.1 Acceptance of accountability and responsibility: "Individual registered nurses bear primary responsibility for the nursing care that their patients receive and are individually accountable for their own practice". 4.4 Delegation of nursing activities: "Nurses functioning in educator or preceptor roles may have less direct relationships with patients. However, through assignment of nursing care activities to learners they share responsibility and accountability for the care provided. It is imperative that the knowledge and skills of the learner be sufficient to provide the assigned nursing care and that appropriate supervision be provided to protect both the patient and the learner".*

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 regarding student performance. However, faculty should be notified in the interim should any concerns arise regarding student performance or behavior.

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. Students have on file evidence of confidentiality agreements, HIPPA regulations, standard precautions and current CPR certification.

UNUSUAL OCCURRENCES

Students are required to report any unusual occurrences to their preceptor and to the faculty member responsible for their supervision. Students are to complete any forms required by the agency, such as occurrence reports. The faculty member and student will consult with the Campus Director for College of Nursing follow-up. Examples of unusual occurrences would be medication errors, patient or student injuries, needle sticks, unprotected blood/body fluid exposure, etc.

**PROCEDURE C-9
ATTACHMENT #4**

**MONTANA STATE UNIVERSITY
COLLEGE OF NURSING
Preceptor Evaluation of Preceptor Experience**

Please rate the following on a scale of 1 (Strongly Agree) to 5 (Strongly Disagree):

	SA				SD
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. I understood the behavioral/clinical expectations of the student.	1	2	3	4	5
7. I understood the expected practice level of the student.	1	2	3	4	5
8. Expectations regarding my evaluation of the student were clear to me.	1	2	3	4	5
9. I would be willing to serve as a preceptor for a student in the future.	1	2	3	4	5

Please provide any additional comments you think would be helpful to me:

Your name (optional): _____

**PROCEDURE C-9
ATTACHMENT #5**

**MONTANA STATE UNIVERSITY
COLLEGE OF NURSING
Preceptor Evaluation of Student's Performance in Course (Example = NRS 487)**

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.

Instructor: Adapt criteria below based on specific course objectives and expectations of student.

	Satisfactory 1	Needs Improvement 2	Unsatisfactory 3	Unable to assess 4
Adapts to clinical situation				
Practices safely. <ul style="list-style-type: none"> - Applies principles of safe patient care. - Performs at level consistent with level of learner. - Recognizes own limitations and seeks assistance appropriately. - Practice is consistent with Code of Ethics. 				
Development in awareness of the structural organization of the health care agency				
Identifies the manager's application of the management process: <ul style="list-style-type: none"> -Planning/decision making -Organizing -Directing -Controlling -Evaluating 				
Identify the influences on the agency's health care delivery system: <ul style="list-style-type: none"> -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) 				

Instructor: Adapt criteria below based on specific course objectives and expectations of student.

Satisfactory Needs Improvement Unsatisfactory Unable to assess
 1 2 3 4

Identifies the legal/ethical responsibilities of the nurse in the management role				
Utilizes appropriate verbal and written communication skills with patients, families, health care personnel and faculty				
Identifies nursing implications for promoting a healthy managerial style				
Discusses use of information systems and data management in clinical setting				
Identifies current issues in nursing management through a variety of resources				
Delegates and supervises the nursing care given by others.				
Demonstrates responsibility and accountability to health care personnel, patients and families.				
Able to give and receive constructive feedback in a professional, responsible manner.				
Applies previous coursework to enact the nursing role safely and effectively: <ul style="list-style-type: none"> • Utilizes the nursing process effectively in the care of patients. • Utilizes appropriate verbal and written communication skills with patients, families and health care professionals. • Utilizes the teaching-learning process appropriately with patients, families, peers or staff • Performs psychomotor skills safely, accurately and efficiently. • Plans, organizes, prioritizes, and manages workload effectively. 				

Comments regarding student strengths:

Comments regarding areas where student needs improvement: