PRECEPTOR HANDBOOK

Universidad del Turabo
School of Health Sciences
Nursing Department
Family Nurse Practitioner Program
Thank you for considering to precept our Nurse Practitioner students.

Our program is accredited by the Council on Higher Education in Puerto Rico, Middle States Association of Colleges and Secondary Schools and the Commission of Collegiate Nursing Education (CCNE). The Nursing Program holds membership in the American Association of Colleges of Nursing (AACN) and the National Organization of Nurse Practitioner Faculties (NONPF).

A brief history of Nurse Practitioner practice in the US and NP scope of practice, competencies, guidelines and criteria will be discussed at the Preceptor Orientation. A description of our NP programs, course descriptions, student requirements, faculty requirements and preceptor requirements are provided within the Preceptor Handbook. Also, included are suggestions for being an effective Preceptor.

In addition, we have provided all of the evaluation forms needed to complete your responsibilities and rubrics for grading/evaluating SOAP notes. The rules and regulations of clinical rotations are also outlined.

PLEASE NOTE: YOUR CV, LICENSES, CREDENTIALS, CERTIFICATES MUST BE ON FILE IN THE NP DIRECTORS OFFICE BEFORE THE STUDENT MAY BEGIN THE CLINICAL ROTATION.

We appreciate your willingness to share your expertise with our students. If you have any questions, you may contact your student’s faculty, the FNP Coordinator or the Department Director.

Nursing Program
School of Health Sciences
Universidad del Turabo
PO Box 3030
Gurabo, PR 00778
Tel. (787) 743-7979 ext. 4017
Fax (787) 704-2703
Student Responsibilities

1. Review the course syllabi and provide a copy for the preceptor;

2. Complete the Clinical Eligibility Form with proof of nursing license and immunization status as necessary;

3. Ensure that the preceptor has signed an agreement and attended the Preceptor Orientation prior to commencement of clinical rotation;

4. Adhere to rules and regulations of the MSN Handbook especially those pertinent to NP guidelines and professional ethics;

5. Document all clinical encounters in the respective health records using a SOAP format. All clinical logs and SOAP’s must be co-signed by the preceptor; and

6. Arrive at designated site on time and dressed professionally with UT, SHS Nursing Department patch on lab coat and student nametag

Faculty Responsibilities

1. Be available to discuss the program requirements and objectives with the preceptor and student.

2. Assess the adequacy of space and appropriateness of assignment for the student’s learning objectives and experiences in accordance to course syllabi.

3. Communicate with preceptor regarding the student’s progress.

4. Schedule on-site evaluations at midterm and final or when deemed necessary by the faculty, student and/or preceptor.

5. Schedule on-site visit when deemed necessary but the faculty, student and/or preceptor

6. Ensure that the student and preceptors adhere to Nurse Practitioner Primary Care Competencies in Specialty Areas: Adult, Family, Gerontological, Pediatric, and Women’s Health www.NONPF.com

The National Task Force (NTF) for Quality NP Education had completed its periodic review and updating of the Criteria for Evaluation of Nurse Practitioner Programs 2008. www.NONPF.com
THE NURSE PRACTITIONER

THE NURSE PRACTITIONER (NP) is a registered nurse (RN) with advanced education (usually a master’s degree) and additional clinical experience, who delivers health care in a variety of settings.

There are different specialties of NP’s just as there are different types of physicians. Each type of Nurse Practitioner must practice within a particular scope of practice. Examples of nurse practitioner include the following:

- Acute care (adult and pediatric)
- Adult
- Emergency Room
- Family
- Geriatric
- Neonatal
- OB/GYN
- Occupational
- Pediatric
- Psychiatric Mental Health
- Women’s Health Care

Nurse Practitioners must be recognized as advanced practice nurses by their State Board of Nursing, and are certified by their professional organizations.

The Nurse Practitioner focuses on health promotions disease prevention and treatment. Using a step-by-step (holistic) approach, the NP:

1. Assesses the person(s) by obtain patient history and complete health assessments. Using this data, appropriate risk factors for disease and health problems (medical and nursing diagnoses) are identified.

2. A plan of care is then determined and implemented. This care includes nursing interventions (education, counseling, symptom relief) as well as medical interventions (ordering laboratory tests, prescribing medications, referrals).

3. The treatment interventions and resulting care outcomes are evaluated.

Nurse Practitioner work in all types of settings such as private practice, HMO’s hospitals, clinics, health departments and occupational clinics in business, nursing homes and may others.

NPs work independently in most states and in Puerto Rico, NPs work collaboratively and interdependently with physicians.

Numerous research studies have demonstrated that Nurse Practitioners provide high quality care.
SUGGESTIONS FOR BEING AN EFFECTIVE PRECEPTOR

Preceptorship is a working relationship between an experienced provider of care and a beginner provider of care. The preceptor helps to bridge the gap between realities and theory. As preceptors:

1. You will be receiving a copy of your student’s syllabus before being presented to your student. Please review your student’s goals and objectives for this semester. During clinical practice keep in mind that these goals should be the main focus, but students should not be exclusively restricted to them. We would like our students to be exposed to as many experiences as possible.

2. Orient the student on your clinical site policies, procedures and protocols.

3. Initially, allow the student to observe your methods of assessing, diagnosis and treating.

4. Provide a one-on-one clinical experience.

5. Allow the student opportunity to assess, diagnose and complete a treatment plan prior to your feedback and suggestions.

6. Evaluate the student using the appropriate form and review the evaluation with the student offering constructive criticism and encouragement.
1. Only a One to One NP Student per Preceptor Ratio is allowed.

2. A preceptor must have authorization by the appropriate state licensing entity to practice in his/her population-focused and/or specialty area.

3. A preceptor must have educational preparation appropriate to his/her area(s) of supervisory responsibility and at least one year of clinical experience.

4. Preceptors are oriented to program requirements and expectations for oversight and evaluation of NP students.

5. Preceptor CV’s, credentials and licenses must be on file in the program director’s office.

6. Preceptor must read the orientation handbook and sign the agreement prior to beginning a clinical rotation with a UT NP student.

7. The clinical log database will be utilized for student evaluation, evidence of types of clients and diagnoses, clinical hours, site evaluation evidence of types of clients and variety of diagnoses, clinical hours, site evaluation, preceptor evaluation and program evaluation will be conducted by NP faculty.

8. Students will be evaluated at midterm and final while in clinical courses at clinical sites by preceptors and clinical faculty. All clinical evaluation forms are located at the back of this handbook. All preceptors and clinical sites will be evaluated at midterm and final.

9. Review with student the site’s patient population, most frequent diagnoses and procedures commonly performed.

10. Discuss preceptor and agency expectations for the documentation of patient encounters.

11. Facilitate an informal collaborative and mutually respectful environment in which to learn.

12. Promptly communicate issues of concern or unsafe practice regarding the student to the clinical faculty.

13. Review the objectives of the course, and student’s clinical objectives to determine the type of learning opportunities that will enhance the student’s learning. Direct the student to resources and evidence based readings.

14. Discuss guidelines for students’ interactions and feedback on student performance. Provide students with constructive feedback to improve student’s assessment and management skills.

15. Facilitate student’s progressive independence in clinical knowledge and skills.
16. Assume responsibilities for providing a substitute preceptor in the event of absence.

Rules and Regulations

Our nurse practitioner students have been oriented, prior to commencing clinical practice, on the following rule and regulations:

A. Confidentiality and Privacy of Client Information

The student is expected to adhere to the ANA Code for Nurses. Confidentiality is the protection of a client’s privacy through careful use of oral and written communications. The client’s right to privacy is safeguarded by judicious protection of confidential information. An individual can withhold any personal information desired. Nursing students must be especially careful regarding the invasion of the client’s privacy. Students should use only INITIALS of the client when completing history forms, care plans, and any other documents that are part of their educational experience. The graduate student is particularly concerned with the process of informed consent in the implementation of research during completion of the research option. The actual procedure used in obtaining informed consent and the basis for the Research Project Committee’s determination that the procedures followed by the student are adequate and appropriate shall be fully documented. A copy of SOAP notes are to be submitted with clinical logs.

B. Attendance

Attendance at 100% of clinical experiences is expected of every student.

Exceptions, if made, will be made at the discretion of the clinical faculty, clinical preceptor and the faculty course coordinator. New dates will be scheduled to insure all clinical hour requirements. Students are expected to be punctual in all clinical sessions. If students are going to be late, the student is expected to call the clinical preceptor or designated contact person at the clinical site as soon as possible. When the student cannot attend the clinical session, the student must:

a. Call the clinical preceptor or designated contact person as soon as possible.

b. Call the clinical faculty as soon as possible.

The preceptor must see all patients seen by the student. If the preceptor is absent from work, students should not assume responsibility for patient care unless assigned to another preceptor. Failure to adhere to attendance policies with ongoing absenteeism or tardiness will result in an “Unsatisfactory” evaluation and could be grounds of failing this course.

C. Academic Honesty

In their academic and independent research activities, students are expected to maintain high standards of honesty and integrity. Passing off as one’s own the
work of another (plagiarism) is totally unacceptable. A student is expected to maintain the professional standards of the nursing discipline.

Definitions of Unacceptable Behavior:
The following are the Universidad del Turabo School of Health Sciences, Department of Nursing definitions of unacceptable behavior.

a. **Plagiarism:** Taking credit for someone else’s ideas, words or statements or other works as one’s own without proper acknowledgment. Examples of plagiarism include:
   - **Word-for-Word Plagiarism** – copying exactly from someone else’s text.
   - **Section-by-Section Plagiarism** – lifting phrases from someone else’s text.
   - **Select-Term Plagiarism** – lifting a special term from a text not one’s own.
   - **Paraphrasing** – using someone else’s ideas as if they were one’s own thoughts.
   - **Borrowing facts, statistics and other illustrative material** – unless the information is common knowledge.

b. **Cheating:** Committing fraud on a record, report, paper, computer assignment, examination or other course requirement. Examples of cheating include:
   - **Using unauthorized notes**, study aids or information from another student or student’s paper on an examination or any other course requirement, including giving or receiving assistance from another student without the instructor’s permission.
   - **Altering a graded work** after it has been returned and then submitting the work for grading.
   - **Allowing another person to do one’s work** and to submit the work under one’s own name.
   - **Submitting two copies of the same or nearly similar papers** to two professors without prior approval,
   - **Fabricating data in support of laboratory or fieldwork.** Dishonesty in reporting results, ranging from sheer fabrication of data, improper adjustment of results, and gross negligence in collecting or analyzing data, to selective reporting or omission of conflicting data for deceptive purposes.

c. **Aiding and abetting dishonesty:** Providing material or information to another person with knowledge that the material or information will be used improperly.

d. **Falsification of an academic records and official documents:** Without proper authorization. Altering documents affecting academic or University record; forging signatures of authorization; or falsifying information on an official academic document, election form, grade report, letter of permission, petition, clinical logs, clinical hour tally sheet, clinical lifespan encounter, clinical record or any other official University document. Misrepresentation attending clinical sites without official authorization and **fraudulently accessing patient records.**
e. **Misuse of computers:** Violating the University’s “Condition of Use” statement which defines proper and ethical use of computers.

f. **Misuse of available facilities:** Intentionally abusing available facilities. Examples of available facilities include, but are not limited to, laboratories, classrooms and libraries.

g. **Nurse-patient relationship:** The students of the Universidad del Turabo School of Health Sciences, Department of Nursing are expected to exhibit behavior appropriate to the profession of nursing. They must assume personal responsibility for being in physical and mental condition to give safe nursing care and for the knowledge and skills necessary to give this care. Unacceptable behavior includes, but is not limited to, the following examples:

- **Providing nursing care in an unsafe or harmful manner.**
  - a. Carrying out a procedure without competence or without the guidance of a qualified person.
  - b. Willfully or intentionally doing physical and/or mental harm to a client.
  - c. Exhibiting careless or negligent behavior in connection with the care of a client.
  - d. Finding oneself unable to assume the assigned and necessary care of a client and failing to find alternative measures for the delivery of that care.

- **Falsifying patient’s records or fabricating patient experience.**
  - a. Failing to report omission of or error in treatments or medications.
  - b. Fabricating patient experience or clinical hours.

- **Disrespecting the privacy of a client: violating the confidentially of the nurse/client relationship.**
  - a. Disclosing the full name or position of a client in a manner that violates the individual’s privacy.
  - b. Discussing confidential information in inappropriate areas, such as elevators, or with inappropriate persons, such as media representatives.
  - c. Discussing confidential information about a patient with third parties who do not have a clear and legitimate need to know.

h. **Drugs and alcohol:** Using, possessing, selling, or distributing illicit drugs; illegally using, selling, possessing or distributing any drugs or alcohol; or using prescribed and/or illicit substance or alcohol in such a manner as to impair one’s judgment or performance as a nursing student.

**Student Grievance Policy**

Any student(s) enrolled in the MSN Program has the right to contest the decision of a faculty member(s) regarding a grade, academic dishonesty and/or misconduct or unsafe and/or unethical practice. In such instances the following procedure must be followed as established by the Universidad del Turabo. It is ultimately the student's
responsibility to follow the grievance procedure as written. Failure to do so or to meet deadlines as stipulated can result in failure of the grievance or further consideration of the grievance.

The student(s) must first discuss the incident in question with the faculty member(s) involved. The student(s) must submit a written request to meet with the faculty member(s) within five working days after the grade is received or the incident has occurred. The faculty member(s) must then schedule a time for the meeting within five working days after the student(s) request has been received.

If the student and faculty member(s) are unable to arrive at a mutual agreement the student has the right to make an appeal to the Program Coordinator or to the Director. This written appeal must be made within five working days after the meeting with the faculty member(s) and specify whether the appeal relates to the charge or to the imposed penalty. The Director must schedule a meeting within five working days after receiving the request, with the student(s), faculty member(s) and any other relevant parties. The Director decision will be based on the conclusiveness of the evidence and the appropriateness of the penalty. The Director will in writing inform the student(s) and the faculty member(s) of the decision.

Students also have the right to complete the form and submitted to the Dean to present any concern, which requires an action.

**General Dress Code Policies**

A professional appearance should be maintained at all times in the clinical setting. Our nurse practitioner students have been oriented prior to commencing clinical on the following dress code. Unacceptable attire is interrupted by patients/ families as unprofessional and inappropriate.

**Females:** White lab coats, slacks, and appropriate length skirts. Mini-skirts and low cut blouses are not allowed in clinical area. Shoes should be comfortable with an enclosed heel and toe. Heels should be no higher than 2 ½ inches. Lab coats, when worn, should be white and long sleeved.

**Males:** White lab coats, shirt, tie, slacks, and closed toe shoes. Jeans, shorts and sneakers are not allowed in clinical area. Lab coats, when worn, should be white and long sleeved.

**Jewelry:** Rings-engagement and wedding bands only. (Rings can cause injury to clients, also harbor organisms). Small earrings, whether posts or loop earrings. Only one earring per ear is allowed. No other body piercing jewelry may be worn in the clinical area.
Fragrances (perfume, cologne, aftershave): Use only sparingly. Strong odors can be objectionable to clients who are ill. The odor of a smoker is also apparent and offensive to some clients and others.

Hair: Long hair must be pulled back from one's face and should not be allowed to fall forward in a work area. Use discretion in hair accessories to maintain a professional appearance, safety, and hygiene.

Fingernails: Short, Clear or very light color polish without designs is permitted. Artificial nails are not permitted.

Tattoos: Any tattoos must be covered while in the clinical area.

Gum Chewing: NO gum chewing is allowed in the clinical area.

Identification: The following identification must be worn and clearly visible in every clinical setting:
A. UT Student ID Badge
B. An institutional ID badge should be worn in any health care agency requires and provides one.

Failure to comply with the dress code will result in potential dismissal from the clinical setting. If there are repeated clinical violations, the student will receive an academic warning for unprofessional behavior and may fail the clinical portion of the course.

**Cellular Phones and Pagers**

It is recognized by the faculty and staff that the changing pace of life in our society necessitates the use of electronic communication in many styles and methods. It is also recognized that the time spent in the classroom or clinical setting is very important and must be the primary focus of both the faculty and students involved. It is, therefore, necessary to prohibit the use of personal cellular phones, pagers and any other disruptive equipment in the classroom and clinical settings. When cellular phones or pagers are part of the communication within that clinical setting, an exception may be made. Should a student be in a situation where an emergency communication is pending, it should be brought to the attention of the faculty member or appropriate staff member. Cellular phones or pagers can be left with the appropriate person for a message to be delivered to the student if the need arises.

**Disciplinary Action**

Disciplinary action may be imposed upon a student following the violation of any of the rules and regulations.

The NP Programs expect every student to observe the basic rules of good behavior in all academic settings including clinical rotations.
Acts of Reprimand or Probation

- Non-compliance with the NP program and SHS policies.
- Defamatory statements about the clinic, fellow students, preceptors, patients or faculty.
- Unexcused absence or lateness: Habitual or frequent lateness or absence from duty, classes, conferences or extracurricular activities.
- Untidiness: Both personal untidiness with respect to personal grooming and hygiene, or untidiness in work areas, care of equipment, keeping of records, etc.
- Smoking in an unauthorized area or at an unauthorized time.

Insubordination: Students are expected to comply with directions given by a faculty/preceptor, without argument or dissent. Any questions concerning the directions may be presented to the Program Director:

- Un satisfactory performance of assignments.
- Contributing or causing unsafe conditions.
- Practical joking and laughing or playing on duty.
- Unauthorized absence from assigned work.
- Extending lunches or break-time without permission.
- Failure to sign-in and out when required.
- The use of profane or abusive language.
- Any conduct detrimental to patient safety, fellow students, employees or clinical settings.
- Divulging any confidential information.
- Refusal to carry out assignments.
- Soliciting tips, loans, or gifts from patients or other person.
- Failure to report an injury, accident, incident or unsafe conditions occurring or existing on clinical premises.

Acts that are cause for dismissal

- Failure to fulfill responsibilities to an extent that might or does cause injury to a patient, visitors, other students or hospital personnel.
- Deliberate violation of a posted health, safety, and fire prevention or security rule.
- Falsification of record, i.e., health forms, or application forms.
- Habitual non-compliance with departmental policies.
- Unauthorized clinical performance without the knowledge of faculty or program director that have been logged as official when not in an official capacity
- Deliberate false, fraudulent or malicious statements or action involving relations with a patient, fellow students, the clinical settings, employees, or the public or other disloyal conduct.
- Theft: Removal of or unauthorized possession of property belonging to employee, students, visitors. This includes the intent to remove or the actual removal of university and property from clinical settings grounds.
- Illegal use of or possession of drugs or the dispensing of drugs without a prescription.
• Possession of use of intoxicating substances or narcotic on clinical settings of school premises of reporting to class under the influence of a intoxicating substance or drug as evidence by:
  • Inability to perform assignments.
  • Undesirable influence towards patient, visitors, staff and employees.

The following documentation includes preceptor agreement and preceptor information form, which need to be completed prior to students commencing clinical practice. Also, preceptor’s student evaluation form, SOAP note grading rubric, and clinical logs which your students will ask you to sign during each clinical practice.