# THE UNIVERSITY OF LOUISVILLE SCHOOL OF NURSING

## **DOCTOR OF NURSING PRACTICE PROGRAM**



# ADULT-GERONTOLOGY ACUTE CARE NURSE PRACTITIONER CLINICAL TRACK HANDBOOK FOR CLINICAL PRECEPTORS

**Spring 2021 – Fall 2022** 

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#### **INTRODUCTION**

Thank you for participating in the education of Adult-Gerontology Acute Care Nurse Practitioners. As you know, practice is the heart of nursing and health care. Nursing practice is where the professional meets the clients to apply knowledge and skills to improve health of individuals, families, and groups. Therefore, we are grateful that you, a recognized expert practitioner, will assist with the clinical mentoring that will prepare our graduates to fulfill this practice mission.

#### ADULT-GERO ACUTE CARE NURSE PRACTITIONERS: STANDARDS AND ROLES

Nurse Practitioners are registered nurses with the advanced education (Master of Science in Nursing or Doctor of Nursing Practice) and clinical competency that is necessary for the delivery of high quality health care. Adult-Gerontology Acute Care Nurse Practitioners (AG ACNP) are nurse practitioners who provide care to young adults (including late adolescents and emancipated minors), adults, and older adults. The AG ACNP cares for patients with unstable chronic, complex acute, and critical conditions. The AG ACNP focuses on restorative care. In addition to diagnosing and managing acute, unstable, and critically ill patients, the AG ACNP emphasizes health promotion, health protection, and disease prevention. Services they provide include, but are not limited to: ordering, conducting and interpreting diagnostic and laboratory tests, and prescription of pharmacological agents and non-pharmacological therapies. The AG ACNP practices autonomously and as part of an interprofessional team to diagnose, treat and manage the patient's health problems. Standards of practice published by professional nursing organizations guide AG ACNP practice. These are: (1) The American Nurses' Association (ANA) Scopes and Standards of Practice for Advanced Practice Nurses and Nurse Midwives, (2) The ANA Code of Ethics, and (3) The AACN Scope and Standards for Acute Care Nurse

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Practitioner Practice, and (4) National Organization of Nurse Practitioner Faculties (NONPF) Core and Adult-Gerontology Acute Care Nurse Practitioner Competencies guide practice.

#### THE UNIVERSITY OF LOUISVILLE AG ACNP NURSE PRACTITIONER PROGRAM

The AG ACNP Clinical Track began in August 2012 at the University of Louisville School of Nursing. All nurse practitioner students complete the same core courses, e.g. nursing theory and role, evidence based practice, informatics, health care systems, and health promotion disease prevention (*See Appendix A*). When students enter the clinical tracks, their course work reflects the specialty practice needs and courses become different. They enroll in clinical didactic courses that focus on the acute care of adults across the age continuum. Core and clinical courses for the AG ACNP's Program are in *Appendix A*. Other graduate clinical tracks at the University of Louisville are the *Adult-Gerontology Primary Care, Family Nurse Practitioner, Neonatal, and Psych-Mental Health Nurse Practitioner*. If you would like further information on these clinical tracks, please call 852-8095.

#### ADMINISTRATORS AND FACULTY

The program is administered through the office of the director of the Doctor of Nursing Practice (DNP) program, Sara Robertson, DNP, APRN. Her telephone number is (502) 852-3801. Dr. Robertson ensures that a written contract with the agency and each preceptor are obtained prior to each clinical experience. Each clinical specialty also has a *Clinical Specialty Coordinator* who, in collaboration with other nurse practitioner faculty from the specialty, is responsible for the quality of the specialty curriculum and coordination of clinical experiences. The Specialty Track Coordinator for the AGAC-NP specialty is Shannon Shumaker, PhD, APRN. Dr. Shumaker can be reached by email (Shannon.shumaker@louisville.edu) should you have questions. Clinical faculty interact with the clinical preceptors and supervise the AGAC-NP

students in the clinical setting. The clinical faculty member will be in touch with you and provide contact information such as an email or telephone number. However, if you need to speak with this person and do not have this information or cannot reach the individual, please call Dr. Robertson at 502-852-3801.

#### SUPERVISION AND PLACEMENT OF STUDENTS IN THE CLINCIAL PRACTICUM

The DNP Program Director, in collaboration with the clinical track faculty is responsible for placement of students in the clinical area. Students are required to complete three semesters of clinical practicum. The objectives for the clinical practicum are listed in Appendix G. Students are taught and supervised by University of Louisville nurse practitioner faculty and clinical preceptors. A University of Louisville clinical faculty is assigned to each clinical student, but the on-site Clinical Preceptor provides the day-to-day clinical supervision of students. Prior to the clinical placement of a student, an agency agreement, if not already in place, is obtained or verified. Additionally, a formal, written, signed contract (preceptor agreement) will be made with each preceptor. During this phase the preceptor will be asked to submit a current curriculum vitae (CV) which will need include title, discipline, credentials, licensure, education, and years in role. If a formal schedule has not already been pre-approved, the student will contact you to determine a mutually agreed upon schedule that includes time and dates.

#### **RESPONSIBILITIES OF STUDENTS, PRECEPTORS AND CLINICAL FACULTY**

#### The Nurse Practitioner student's responsibilities are to:

- 1. Interact with the client and ascertain appropriate historical information.
- 2. Correctly institute and perform an appropriate examination and perform diagnostic techniques related to the identified health problems
- 3. Identify the differential diagnoses and final diagnosis.
- 4. Develop an appropriate plan of care.

- 5. Verbally present the patient situation to the presenter.
- 6. Obtain a satisfactory clinical performance evaluation in order to progress.
- 7. Contact the preceptor and the course faculty prior to the beginning of the semester to arrange mutually agreeable times for the practicum. Additional hours may be required as determined by the preceptor and faculty.
- Meet University health requirements carry an active license to practice nursing, maintain student nurse practitioner malpractice insurance and maintain currency in CPR.
- 9. Maintain the *APRN patient clinical time log* (Appendix B)that is signed by the preceptor every day, verifying the hours the student spent in clinical.
- 10. Keep a *Clinical Log* (See *Appendix* B) that documents each patient encounter and submit to Course Coordinator.
- 11. Submit a Summary of *Clinical Log* (See *Appendix* B) to the clinical faculty at the completion of each semester.
- 12. Be prepared for clinical practicum by reading references pertinent to the clinical situations that are common to the clinical site.
- 13. Contact the preceptor and clinical faculty <u>before</u> clinical absence.
- 14. Meet the needs of the patient holistically/foster health promotion.
- 15. Demonstrate consistency in the responsible preparation, documentation, communication, and promotion of continuity in the care of patent.
- 16. Practice within the guidelines of the Kentucky Nursing Laws (KRS 314), the ANA Scopes and Standards of Practice, The ANA Code of Ethics, and the AANP Scopes and Standards of Practice, the guidelines set forth in the course syllabus, the University of Louisville School of Nursing Graduate Student Handbook, and the rules and

regulations of the health care agency or agencies that are the site of the clinical practicum.

#### The Clinical Preceptor's responsibilities are to:

- 1. Review the clinical objectives and assess how they can be accomplished within the uniqueness of his/her practice setting.
- 2. Orient the student to the practice setting and prepare site staff for student's arrival.
- 3. Provide adequate clinical space for the student to take patient's histories and to perform adequate physical examinations.
- 4. Obtain the patient's permission for the encounter or delegate this to the student.
- 5. For each patient presentation by the student.
  - a) Validate and give feedback regarding student's findings and assessment/impression,
  - b) Discuss the management plan consistent with his/her role and skill
- 6. Act as the student's liaison with other practice colleagues, clinical and office staff.
- 7. Provide the student with ongoing evaluation of clinical performance weekly and at the termination of the clinical rotation with the preceptor.
- 8. Provide consultation with the clinical faculty for evaluation for the student, understanding that the final evaluation will come from the clinical faculty.
- 9. Alert the clinical faculty member to problems in student performance; this may be prior to on-site visits by Clinical Faculty as needed. Additional clinical experiences (over the required) may be necessary if, in the preceptor and/or faculty's opinion, the student is in need of additional experience.
- 10. Provide the student with opportunities to assess, diagnose, and treat clients with supervision according to the student's level of competency.

- 11. The number of patients that students can see independently will vary according to the course in which they are enrolled. Generally, we expect student's productivity to increase over time with a minimum of 5-8 patients per 8-hour clinical day. Preceptors facilitate this expectation by selecting patients that are appropriate for each student's current level of competence and observing them in patient interaction and provide feedback on performance.
- Selected Office Procedures for Clinical Practice is included in the course of study.
   Students may perform these procedures <u>only with supervision</u> after they are presented in class (Appendix C).
- 13. Sign the student's clinical time log at the end of each day, verifying the time the student spent in clinical.

#### Helpful Hints from The One-Minute Teacher: Six Micro skills for Clinical Teaching

- 1. Get a commitment: What do you think is going on? What would you like to accomplish on this visit?
- 2. Probe for supporting evidence: What led you to that conclusion? What else would you consider?
- 3. Teach general rules: When this happens, do this . . .
- 4. Reinforce what was right: Specifically, you did an excellent job of ...
- 5. Correct mistakes: Next time this happens, try . . .
- 6. Identify next Learning steps: What do we need to learn more about?

## The Clinical Faculty's responsibilities are to:

 Contact the Preceptor at the beginning of each semester to answer questions and clarify student's learning needs. Thereafter, be available to the preceptor and student for consultation and assistance throughout the semester.

- 2. Serve as a liaison between the student, preceptor and the School of Nursing.
- 3. Consult with the preceptor in person at the time of the student visit.
- 4. Evaluate the student's performance twice during the semester.
  - a. Meet with the preceptor during the visit to the student.
  - b. Observe the student in the clinical situation (with a minimum of 2 clients).
  - c. Consult with the student and provide feedback.
- 5. Obtain and utilize preceptor input in course grade assignment.
- Visit practice site(s) 1-2 times during each semester and more often if needed. On-site visits will generally be about 4 hours in length.

#### **Documentation**

The art of documentation is critical to the delivery and evaluation of high-quality care as well as achieving proper reimbursement for services. These skills are essential for students to learn. Students may document services in the medical record. A preceptor may also choose to have students document on paper rather than directly in the EMR. Students should use the SOAP note format. Students are not required to document on every patient they see and can learn from discussion while the preceptor fills in the electronic note.

#### The Clinical Patient Log and Time Log

The student is responsible for keeping a daily *Clinical Patient Log and APRN Clinical Patient Hour Time Log (Appendix B)*. This clinical log is maintained via the Typhon Group electronic system. The information recorded by the student on the form is verified by the clinical faculty. The Clinical Faculty member reviews the information at the mid and endpoint of the clinical rotation to assure that the student has had the appropriate learning experiences for the course and forwards the form with recommendations, if appropriate, to the *Clinical Specialty Coordinator*. The information in needed to verify that the student has had the appropriate clinical experiences and to provide data for accreditation and traineeships. The time log is a daily hours chart that is to be signed by the preceptor every day that they student is in clinical to verify the number of clinical hours.

#### **Evaluations: Site, Student, Preceptors, and Faculty**

Prior to the first placement of students in a site, a faculty/staff member will meet with the preceptor to evaluate the site. The purpose of this meeting is to evaluate if the site will meet the learning needs of the students. The Site Evaluation Form appears in *Appendix D*. On an ongoing basis the Clinical Faculty collaborates with the preceptor and offers information and assistance. The Evaluation of the Preceptor is the instrument that is completed by students at the endpoint of the clinical experience and it can be accessed by the Typhon Group software. At the completion of the clinical experience, the Clinical Placement Coordinator will send each preceptor the Kentucky Board of Nursing Preceptor Verification Form (*Appendix E*).

#### Preceptor Feedback and clinical evaluation of the Student

The Preceptor will have the opportunity to use the The Preceptor Feedback form (*Appendix F*) to provide feedback to the student and clinical faculty at a mid-point and at the conclusion of the clinical experience. The Clinical Faculty will review the preceptor's feedback form regarding the student and will talk one-on-one with the preceptor and the student regarding student performance. With input from the preceptor, the Clinical Faculty will determine the final clinical pass/fail grade and assists the student in developing a plan to improve or maintain clinical performance. The Clinical Faculty Evaluation Form mimics the Preceptor Feedback Form and contains the same components. The Clinical Faculty reports any unusual problem that threatens the success of the student to the Course and/or Clinical Specialty Coordinator.

#### **Student Evaluation of the Clinical Preceptor**

Each student submits an evaluation of his or her preceptor at the conclusion of the clinical experience. The evaluation instrument can is completed electronically in the Typhon Group software system.

| Core DNP Courses   | Semester<br>Hours | Total |
|--|-------------------|-------|
| NURS 605 Theoretical Applications to Practice                | 3                 |       |
| NURS 607 Foundational Concepts of EBP                        | 3                 |       |
| NURS 749 The Business of Healthcare                          | 3                 |       |
| NURS 791 Advanced Statistical Application                    | 3                 |       |
| NURS 657 Health Promotion & Disease Prevention in Culturally | 3                 |       |
| Diverse and Vulnerable Populations                           | 5                 |       |
| NURS 725 Analysis of Leadership and Health Policy            | 3                 |       |
| NURS 740 Advanced Pharmacology                               | 3                 |       |
| NURS 741 Advanced Pathophysiology                            | 4                 |       |
| NURS 742 Advanced Clinical Assessment                        | 3                 |       |
| NURS 743 Epidemiology  | 3                 |       |
| NURS 744 Synthesis and Evaluation of Evidence Based Practice | 3                 |       |
| NURS 745 Health Information Technology                       | 3                 |       |
| NURS 746 Program Development and Evaluation                  | 3                 |       |
| NURS 747 Finance Management in Health Care Delivery          | 2                 |       |
| NURS 748 Transformational Leader                             | 3                 |       |
| NURS 754 Clinical Reasoning in Advanced Practice Nursing     | 1                 |       |
| Total DNP Core Hours   |                   | 46    |
| NURS 777 The Adult Gerontology Acute Care Role               | 1                 |       |
| NURS 779 Procedures & Diagnostics for Adult Acute Care I     | 1                 |       |
| NURS 760 Gerontology Pharmacology                            | 1                 |       |
| NURS 779 Diagnosis & Management for Adult Acute I            | 3                 |       |
| NURS 780 Procedures & Diagnostics for Acute Care II          | 2                 |       |
| NURS 781 Diagnosis & Management for Adult Acute II           | 3                 |       |
| NURS 783 Diagnosis & Management for Adult Acute III          | 2                 |       |
| NURS 787 Clinical Practicum I                                | 2                 |       |
| NURS 788 Clinical Practicum II                               | 3                 |       |
| NURS 789 Clinical Practicum III                              | 3                 |       |
| TOTAL AG ACNP HOURS  |                   | 21    |
| Total Credit Hours without project                           |                   | 67    |
| Project Practicum  | 9                 |       |
| Total Program Hours  |                   | 76    |

| TyphonGrou  | P Nurs   | e Practitioner Stud                             | lent Tracking - Data E<br>CASE If               | NFO SCREEN  |
|---|--|---|---|-------------|
| Facility: University of Lo<br>Case ID #: 1302-200910              |  | Sti   | udent, Sample is logged<br>Date of Service: 10/ |             |
|   | (Smo Data) (Car  | lasel   |   |             |
| REQUIRED FIELD  |  |   | in the second second                            |             |
| Sture<br>Semester: Fr   | lent Information   |   | agnosis/ICD Codes                               | ۵. 🗉        |
| Course: N   |  | ► #1  | 1   |             |
| Preceptor: A  |  | #2  |   | <u> </u>    |
|   | orton Community Medical Associates-Barret AVE            | #3  | 7 🔍 🖾 🔍   | ۵ 🗖         |
|   |  | #4  | 8 🖳 🔍 🔍   | ت ب         |
|   | Rural Visit  | _   | XIS I-III Translation                           |             |
|   | Underserved Area/Population<br>ent Demographics          |   | edures/CPT <sup>®</sup> Codes                   | _           |
|   | Group Encounter  | ▶ #1  | a 🗐 🖓   | ء 🔍         |
|   |  | #2  | 8% 🖃 🔍  | ۹ 🗉         |
| r A   |  | #3  | 9% 🖃 🖓  | ۹ 🗉         |
| Con   | Prenatal visit? Enter fetus age: weeks<br>ler:Select One | #4  | #10 🔍 💷   | ۹ 🗉         |
|   | ce: -Select One  | #5  | #11 🔍 🗖   | ۵ 🔍         |
|   | ce:Select One  | #6  | S I #12   | ۹ 🖬         |
|   | ical Information   |   | 100 012   |             |
| Time with Patient:  | minutes  | •   | Birth & Delivery                                |             |
| Consult with  |  |   | Medications                                     |             |
| Preceptor:  | minutes (not part of patient time)                       | # OTC Drug                                      | ıs taken  |             |
| Type of Decision-   | Select One   |   | gularly:  |             |
| Making:   |  |   | urrently  |             |
| Student<br>Participation:   | Select One   |   | scribed:  |             |
| Reason for Visit:   | Select One   | # New/Refilled                                  | Visit:  |             |
| Chief Complaint:  |  |   |   |             |
| Encounter #:  | alact One-   | Types of New/R                                  | efilled Compliance<br>with Medica               |             |
| Type of H & P:  |  | R <sub>x</sub> This Visit<br>O Analoesic & Anti |   |             |
| Axis IV   | sett one-  | Cardiology                                      | Curcumer  |             |
| Psychosoc./Environ.):   |  | Dermatology                                     | Complexity,<br>treatment                        | /demands of |
| Axis V (GAF Scale 0-  |  | Endocrinology                                   | Denial of n                                     | eed         |
| 100):   |  | O ENT<br>O GI Agents                            | Disappeara                                      |             |
| Social Problems Addres  | sed  | O Gynecology                                    | symptoms  |             |
| Abused Child/Adult  | Nutrition/Exercise                                       | Hematology/Ond                                  |   |             |
| Caretaking/Parenting  | Palliative/End of Life Care                              | O Infectious Disease<br>O Neurology             | benenay enrou                                   |             |
| Education/Language  | Prevention   | Ophthalmology                                   | Fear of add                                     |             |
| Emotional   | Role Change  | Psychiatric                                     | Financial co                                    |             |
| Grief   | Safety   | Pulmonary<br>D Phononary                        | Forgetfulne                                     |             |
| Growth & Development  | Sanitation/Hygiene                                       | Scheumatology Ourology                          | Knowledge                                       |             |
| Housing/Residence   | Sexuality  | O Vaccines                                      | Physical dis                                    | ability     |
|   | Social Contact/Isolation                                 | O Wound Manager<br>O Miscellaneous              | Pregnancy<br>Psychiatric                        | diagonosie  |
| Income/Economic   | Interpersonal Relationships Spiritual Issues             |   | Psychiatric                                     | ulagnosis   |
| Income/Economic<br>Interpersonal Relationsh                       |  | W_PROCEIDING OF                                 | Religious re                                    | asons       |
| Income/Economic<br>Interpersonal Relationsh<br>Issues w/Community | Substance Abuse  | <u>Children and an</u>                          | Religious re<br>Other/side                      |             |
| Income/Economic<br>Interpersonal Relationsh                       |  |   | Religious re<br>Other/side                      |             |

# Appendix B: AG ACNP Electronic Clinical Log

|              | APRN Student Clinical Pat | ient Hour Time Log |        |
|--------------|---------------------------|--------------------|--------|
| Student Name |                           | Semester           | Course |

| Date | Clinical Site        | Patient<br>Clinical<br>Hours | Clinical<br>Preceptor Name | Signature |
|------|----------------------|------------------------------|----------------------------|-----------|
|      |                      |                              |                            |           |
|      |                      |                              |                            |           |
|      |                      |                              |                            |           |
|      |                      |                              |                            |           |
|      |                      |                              |                            |           |
|      |                      |                              |                            |           |
|      |                      |                              |                            |           |
|      |                      |                              |                            |           |
|      |                      |                              |                            |           |
|      | TOTAL HOURS FOR PAGE | XXX                          |                            |           |

## Appendix C: Selected Office Procedures for Clinical Practice

- Skin Biopsy
- Excision of skin lesions
- Superficial suturing
- Application of splints (volar, thumb, spica, posterior)
- Knee aspiration and injection, shoulder injection
- Eye irrigation and fluorescein staining
- Portable pulmonary function testing
- X-Ray interpretation
- Central Line Placement
- Arterial Line Placement
- Intubation
- Chest tube placement
- Lumber puncture

### Appendix D: Site Evaluation Form

This form can also be Accessed online under the DNP resources page

## University of Louisville School of Nursing (DNP)

| Name of Site:                 |       | <br>        |       |
|-------------------------------|-------|-------------|-------|
| Location: (check one)         | Urban | <br>_ Rural |       |
| Underserved Area: (check one) |       |             |       |
| Clinical Preceptor:           |       | <br>        |       |
| Completed by:                 |       |             | Date: |
| (Faculty)                     |       |             |       |

Instructions:

- 1. Please mark an X in the most appropriate space after each statement regarding the site.
- 2. Space is provided after each statement if you choose to add any written comments.

|  | YES | NO | N/A | COMMENTS |
|--|-----|----|-----|----------|
| 1) Is adequate space provided?   |     |    |     |          |
| 2) Is adequate time given to see clients?  |     |    |     |          |
| 3) Are there sufficient numbers of clients?  |     |    |     |          |
| <ol> <li>Are the types of clients varied as to age,<br/>type of problem, etc?</li> </ol>                           |     |    |     |          |
| 5) Are students allowed to selected clients according to their needs?  |     |    |     |          |
| 6) Are students given the opportunity to follow-up with clients and/or problems of interest?                       |     |    |     |          |
| 7) Are reports from lab and x-ray accessible to students?  |     |    |     |          |
| 8) Is support staff appropriately helpful to students?   |     |    |     |          |
| 9) Is supporting staff accepting of student's role?  |     |    |     |          |
| <ul><li>10) Is philosophy of clinic/site to provide:</li><li>a) health promotion and disease prevention?</li></ul> |     |    |     |          |

|     | b) d<br>c) b | lisease diagnosis and management?<br>oth   |                    |
|-----|--------------|--|--------------------|
| 11) | clier        | instructional materials available for<br>its to supplement their learning (i.e.<br>phlets, outside class opportunities,  |                    |
| 12) | and          | community resources, other agencies,<br>professional disciplines involved<br>n client welfare?   |                    |
| ]   | 13.          | How far away is the site?<br>Mileage:<br>Travel time from University:  |                    |
| -   |              | Physician's office   |                    |
| -   |              | Physician's clinic         Company or industria         School clinic         Neighborhood and fa         Intensive Care Unit         Outpatient/Inpatient         Other type of setting | mily health center |

#### **General Comments**

- 1) List ways this agency/individual provides good clinical experience for students.
- 2) List areas in which this agency/individual needs improvement in order to provide optimal student learning.
- 3) Identify the practicum level of the student most appropriate for placement at this practice facility.
- 4) Do you recommend this agency/individual for other students? \_\_\_\_\_ Yes \_\_\_\_\_ No

Why or why not?

|  | entucky Board of Nursing  |  |  |  |  |
|--|---|--|--|--|--|
|  | eptorship Verification Form   |  |  |  |  |
| 312 Whittington Parkway, Suite 300<br>Louisville, KY 40222   |   |  |  |  |  |
|  | If you wish to claim preceptorship hours as a way of validating continued competency, this form <i>can be used</i> as a means to document participation. USE OF THIS FORM IS NOT REQUIRED |  |  |  |  |
| Participation as a preceptor is equivalent<br>long as each of the following criteria is m                      | to fifteen (15) contact hours of continuing competency validation as et: (201 KAR 20:215)   |  |  |  |  |
| Criteria:  |   |  |  |  |  |
| <ul> <li>a minimum of 120 clock hours;</li> <li>shall be a one-to-one relationship betworientation;</li> </ul> | ween the preceptor and nursing student or employee undergoing   |  |  |  |  |
| • may involve more than one (1) studen   | t or employee;<br>ntation from the educational institution or preceptor's supervisor  |  |  |  |  |
| Licensee Name:   | License #:  |  |  |  |  |
| Employing Agency:  | Location:   |  |  |  |  |
| The preceptorship was with:  |   |  |  |  |  |
| Name:  | Credential:  RN/LPN  Nursing Student  |  |  |  |  |
| Dates of preceptorship:  | # of hours:   |  |  |  |  |
| Signature of Faculty Member/Facility Ma  | nager Verifying:  |  |  |  |  |
| Position/School:   | Contact Phone Number: ()  |  |  |  |  |
| The preceptorship was with:  |   |  |  |  |  |
| Name:  | Credential:  RN/LPN  Nursing Student  |  |  |  |  |
| Dates of preceptorship:  | # of hours:   |  |  |  |  |
| Signature of Faculty Member/Facility Mar   | nager Verifying:  |  |  |  |  |
|  | Contact Phone Number: ()  |  |  |  |  |
| The preceptorship was with:  |   |  |  |  |  |
| Name:  | Credential:  RN/LPN  Nursing Student  |  |  |  |  |
| Dates of preceptorship:  | # of hours:   |  |  |  |  |

| Signature of Faculty Member/Facility Manager Verify   | ving:                    |
|---|--------------------------|
| Position/School:  | Contact Phone Number: () |
| <i>Retain this information in the same t</i><br>Continuing Education Co<br>(at least five (5) years following | ertificate of Attendance |

Preceptor Clinical Feedback Form University of Louisville DNP Program

The preceptor clinical feedback from is designed for the preceptor to give feedback to the clinical faculty and the student on the student's performance in clinicals. The student, over the course of the program, is expected to progress from the basic skills level in their first clinical course to intermediate or possibly high skills level during practicum. The form provides feedback and is intended to generate discussion and future performance goals with the clinical faculty. The clinical faculty will use the feedback from this form or verbally from the preceptor to evaluate the student and assign a final pass/fail grade. The clinical faculty evaluation form mimics the preceptor feedback form and has all of the same components.

| Rating | Skill Level  | Definition   |
|--------|--------------|--|
| 1      | Poor         | Significant gaps exist in gathering patient information,<br>interpretation of findings, and in the ability to generate even<br>simple plans. Consistently requires substantial<br>assistance/supervision to perform task adequately and is not<br>demonstrating growth towards independence. Skill<br>techniques are commonly incorrect. Communication is<br>inaccurate and/or unclear. Does not demonstrate the ability<br>to apply didactic content to the clinical setting. Does not<br>understand practice parameters and/or there are concerns for<br>unsafe practice.  |
| 2      | Novice       | There is a good attempt but gaps exist in gathering patient<br>information, interpretation of findings and in the ability to<br>generate a plan. A significant amount of<br>assistance/supervision is needed, but student is moving<br>toward independence. Skills demonstrate technique that is<br>mostly correct but tentative and may need some correction.<br>Communication is accurate but requires a lot of prompting<br>form the preceptor and is disjointed or missing information.<br>Beginning to incorporate didactic knowledge and has little<br>clinical experience from which to build or may know<br>didactic content but has not had the opportunity to apply. |
| 3      | Competent    | Performs clinical duties with skill and able to gather patient<br>information, interpret findings and generate a simple plan<br>accurately most of the time. Requires some<br>assistance/supervision. Skills demonstrate correct technique<br>but may be slow or uneven. Communication is accurate but<br>is disjointed or not succinct. Demonstrates ability to<br>incorporate didactic knowledge and previous clinical<br>experience   |
| 4      | Proficient   | Performs clinical duties with proficiency and skill. Gathers<br>patient information, interprets data, and generates a plan with<br>consistently accurate judgment. Needs minimal<br>assistance/supervision. Psychomotor skills are smooth and<br>sure. Communication is accurate, clear and succinct.<br>Demonstrates clear ability to build on didactic knowledge<br>and previous clinical experience.  |
| 0      | Not Observed | There was not an opportunity to observe or verbally  |

| challenge the student with this competency. If $> 4$         |
|--|
| competencies are not observed, the evaluator must assess the |
| site and make a plan in conjunction with the student to meet |
| all competencies.  |

| Student Name       |                |
|--------------------|----------------|
| Date of Evaluation |                |
| Number of Hours    | Semester Total |
| completed          |                |
| Clinical Course    |                |
| Number             |                |

|        |   | Preceptor |
|--------|---|-----------|
| Scient | ific Foundation   |           |
| 1.     | Critically analyzes data and evidence                       |           |
| 2.     | Discusses pathophysiology and course of diseases            |           |
| 3.     | Applies psychosocial concepts related to health and illness |           |
|        |   |           |
| Practi | ce, Practice Inquiry, Quality                               |           |
| 4.     | History   |           |
| a.     | Obtains and accurately documents problem focused/           |           |
|        | comprehensive age appropriate health histories              |           |
| b.     | Includes a complete or focused evaluation of the ROS is     |           |
|        | appropriate   |           |
| с.     | Modifies interview technique to meet differences in age,    |           |
|        | gender, and cultural factors                                |           |
| d.     | Includes pertinent developmental assessment across the      |           |
|        | lifespan  |           |
| e.     | Performs risk assessment as appropriate                     |           |
| 5.     | Physical Assessment   |           |
| a.     | Performs episodic or complete physical examination          |           |
|        | accurately as appropriate                                   |           |
| b.     | Performs physical exam techniques that are supported by     |           |
|        | subjective data   |           |
| с.     | Displays consideration to safety, infection control, and    |           |
|        | cultural factors during the exam                            |           |
| 6.     | Distinguishes between normal and abnormal                   |           |
|        |   | 1         |

| 7.     | Assessment  |  |
|--------|---|--|
|        |   |  |
| a.     | Formulates a list of differential diagnoses                   |  |
| b.     | Formulates accurate problem list supported by patient data    |  |
| C.     | Produces and accurate list of client health risk behaviors    |  |
|        | and environmental health risks                                |  |
| d.     | Demonstrates ability to identify "red flags" requiring urgent |  |
|        | or emergent care, consultation or referral                    |  |
| Plan   |   |  |
| 8.     | Includes appropriate follow-up/referral/consultation in the   |  |
|        | plan of care  |  |
| 9.     | Selects age and condition specific diagnostic tests and       |  |
|        | screening procedures  |  |
| 10.    | Identifies and plans appropriate health promotion             |  |
|        | education, counselling, and anticipatory guidance to the      |  |
|        | patient/family/caregiver                                      |  |
| 11.    | Identifies appropriate interventions (pharmacological &       |  |
|        | non-pharmacological)  |  |
| 12.    | Synthesizes data from a variety of sources including          |  |
|        | evidence-based practice recommendations to approach           |  |
|        | patient management  |  |
| Ethics |   |  |
| 13.    | Integrates ethical principles in decision making and protects |  |
|        | patient confidentiality                                       |  |
|        |   |  |
| Techn  | ology   |  |
| 14.    | Translates technical and scientific information               |  |
|        | appropriately for patients                                    |  |
|        |   |  |
| Leade  | rship   |  |
|        | Maintains a climate of mutual respect and shared values       |  |
|        | Communicates practice knowledge orally and in writing         |  |
|        | Consistently and effectively participates in and/or leads an  |  |
|        | inter-professional team in the provision of care.             |  |
|        |   |  |

| Policy & Systems  |  |
|---|--|
| 18. Demonstrates an understanding of the interdependence of |  |
| policy and practice   |  |
| 19. Discusses ways to minimize risk of adverse patient      |  |
| outcomes  |  |
| 20. Evaluates access, cost, care processes and heath care   |  |
| structure when developing a management plan                 |  |

Total points \_\_\_\_/ 116 NURS 787 – 73 points or above is passing NURS 788 - 88 points or above is passing

NURS 789 - 102 Points or above is passing

Number of competencies not observed

Student's strengths and overall comments about performance:

Areas for improvement or remediation:

Preceptor Name and Location:

# Appendix G: Objectives for Clinical Courses

| NUR                                      | S 787                                  | NURS 788                                  | 789  |  |
|--|--|---|--|--|
| The purpose of this course is to provide |  | The purpose of this course is to provide  | This clinical experiences focuses on           |  |
| clinical experiences in comprehensive    |  | advanced clinical experiences in          | synthesis of theoretical, scientific, clinical |  |
|  | t assessment, diagnosis, and           | comprehensive patient assessment,         | knowledge and practice-based skills in the     |  |
| mana                                     | gement of common health problems       | diagnosis, and management of complex      | diagnosis and management of existing and       |  |
|  | g select patient populations. Students | problems among select patient             | potential health problems. Emphasis will       |  |
| will b                                   | egin practicing the role of an APRN    | populations. Students will strengthen and | be placed on the collaborative and             |  |
| under                                    | preceptor supervision.                 | enhance their advanced practice skills    | leadership roles of the advanced practice      |  |
|  |  | with preceptor supervision.               | nurse in health care delivery.                 |  |
| 1.                                       | Use a systematic approach to           | 1. Use a systematic approach to           | 1. Demonstrate clinical competence             |  |
|  | identify health concerns of patients   | identify health concerns of patients      | in advanced practice nursing based             |  |
|  | and their families.                    | and their families.                       | on selected specialty standards of             |  |
| 2.                                       | Employ evidence-based clinical         | 2. Employ evidence-based clinical         | practice.                                      |  |
|  | guidelines for use in the              | guidelines for use in the                 | 2. Employ evidence-based clinical              |  |
|  | management of common health            | management of complex health              | guidelines for use in the                      |  |
|  | problems.                              | problems.                                 | management of complex health                   |  |
| 3.                                       | Synthesize clinical data to            | 3. Synthesize clinical data to            | problems.                                      |  |
|  | formulate health management            | formulate comprehensive health            | 3. Synthesize individual and                   |  |
|  | plans.                                 | management plans.                         | aggregate data to formulate a                  |  |
| 4.                                       | Collaborate with patient, family,      | 4. Collaborate with patient, family,      | comprehensive health                           |  |
|  | and other health professionals to      | and other health professionals to         | management plan.                               |  |
|  | develop and provide a health care      | develop and provide a                     | 4. Lead an interprofesional team in            |  |
|  | plan.                                  | comprehensive health care plan.           | the delivery of healthcare that                |  |
| 5.                                       | Develop a philosophy of the role       | 5. Develop a philosophy of the role       | includes appropriate referral,                 |  |
|  | of the nurse practitioner as a         | of the nurse practitioner as a            | consultation, and continuity of                |  |
|  | member of the interprofessional        | member of the interprofessional           | care for clients.                              |  |
|  | health care team.                      | health care team.                         |  |  |
| 6.                                       | Incorporate culturally competent       | 6. Incorporate culturally competent       | 5. Integrate an evolving personal              |  |
|  | health care in advanced nursing        | health care in advanced nursing           | philosophy of nursing and                      |  |
|  | practice.                              | practice.                                 | healthcare into the advanced                   |  |
|  |  |   | practice role.                                 |  |
|  |  |   | 6. Analyze the impact of culture and           |  |
|  |  |   | environment on health behavior of              |  |
|  |  |   | individuals and families.                      |  |
|  |  |   |  |  |

# Appendix H: Program Goals and Student Learning Outcomes

## University of Louisville School of Nursing Student Learning Outcomes 2018-2019 DNP Program

| Program<br>Outcome<br>Number | Program Outcomes   | Student Learning Outcomes  | Measures & Targets   |
|------------------------------|--|--|--|
| 1                            | Students will meet professional<br>behavioral standards for the advanced<br>practice nurse.<br>Essentials II, IV, V, VIII  | Students will demonstrate moral, ethical and<br>legal behavior while engaged in nurse practice<br>initiatives.                     | Class Assignment (direct) – 90% of<br>students will receive a score of 80% or<br>higher on the Human Subjects CITI<br>training (NURS 750)                |
| 2                            | Apply systems and organizational<br>leadership in the provision of<br>advanced practice nursing initiatives<br>Essentials II, VII, VIII                          | Students will demonstrate leadership<br>competency by evaluating fiscal resources;<br>organizational culture, and systems thinking | Class Assignment (direct)– 90% of<br>students will receive a grade of B- (80%)<br>or higher on the LOGIC assignment<br>(NURS 747)                        |
| 3                            | Engage in clinical scholarship by<br>synthesizing and translating evidence<br>into quality improvement and practice<br>initiatives<br>Essentials I, III, IV      | Students will evaluate and synthesize current<br>evidence to implement a change in health care<br>delivery                         | Class Assignment (direct)– 90% of<br>students will receive a satisfactory grade<br>of pass on their DNP Project Proposal<br>(NURS 750)                   |
| 4                            | Apply communication strategies with<br>individuals, families, and groups in<br>providing advanced nursing care or<br>practice initiatives<br>Essentials IV, VIII | Students will use analytics and patient care<br>technology to effectively communicate patient<br>and program information           | Clinical Evaluation (direct):<br>90% of students will receive a score of<br>B- (80%) or better on their SOAP note<br>communication assignment (NURS 787) |
| 5                            | Develop and lead inter-professional<br>teams to improve patient and<br>population health outcomes.<br>Essentials II, VI, VII                                     | Students will lead an inter-professional team to<br>implement a health care based quality<br>improvement initiative                | Class Assignment (direct)– 90% of<br>students will receive a satisfactory grade<br>of pass on their DNP Project Defense<br>(NURS 752)                    |

| Program<br>Outcome<br>Number | Program Goals<br>(CCNE Outcomes)   | Student Learning Outcomes  | Measures   |
|------------------------------|--|--|--|
| 6.                           | Demonstrate knowledge development<br>in the practice of advanced nursing<br>care to individuals, families, groups,<br>and communities.<br>Essentials I, VI, VIII | Students will translate knowledge into practice<br>to promote safe, timely, effective, equitable, and<br>patient centered care | 90% of students will pass the final<br>clinical evaluation of clinical practice<br>skills with a minimum score of 102<br>points out of 116 on the Clinical<br>Evaluation Instrument (NURS 789) |
| 7.                           | Analyze the role of health policy and<br>advocacy in the provision of health<br>care.<br>Essentials II, V, VII, VIII   | Students will analyze a local, state or national health policy issue.  | Class assignment (direct):<br>90% of students will receive a grade of<br>B- (80%) on their health policy written<br>assignment (NURS 725)  |

NURS 750 – DNP Project 1

NURS 747 – Finance Management in Health Care Delivery

NURS 787 - Clinical Practicum I

NURS 752 – DNP Project III

NURS 789 – Clinical Practicum III

NURS 725 – Leadership and Health Policy for the Doctorally Prepared Nurse