



NURS 494

Capstone Professional Nursing

Clinical Handbook

Fall 2021

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School of Nursing

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Dear Preceptor,

Thank you for your participation in the clinical preceptorship experience for the University Of Louisville School Of Nursing. We are very excited about this opportunity that will allow students to have an intensive, precepted clinical experience. These guidelines should provide information for you, the preceptor, as well as the student about the expectations and progression of the student through this experience. The responsibilities of each party involved in the student learning experience are in the following pages as are expected activities and behaviors of students. Guidelines are provided for the preceptor on how to advance the student's activities as the student demonstrates competence with regards to skills and medication administration with some restrictions in this area.

Each student has also been assigned a clinical faculty who will maintain close communication with the student and the preceptor. The clinical faculty will arrange orientation of students to the agency and will orient the preceptor as needed to their role and responsibilities.

The preceptor's perception of student performance is most valuable in assessing the student's progress toward the terminal objectives of the clinical experience. The clinical faculty and the preceptor will exchange phone numbers and email addresses to insure that close communication can be maintained throughout the clinical experience. The clinical faculty will visit the clinical site and conduct phone interviews or exchange email messages with the preceptor to evaluate the student's progression.

We trust that your judgment regarding the student's performance is based on your expertise as a practicing registered nurse. **Therefore, we want you to know that we trust your assessment of the student's performance and highly encourage you to contact us at the first indication that there may be concerns with the student's clinical performance and/or professional behaviors.**

If there are concerns about the student's performance, additional communication may be needed. The faculty may choose to follow the student for a number of hours to directly observe the student in the clinical setting. This may be initiated by faculty concerns or at the request of the clinical preceptor.

The clinical faculty will further evaluate the student's performance through a reflective journal the student is required to submit each week describing their clinical activities and a detailed narrative of the care rendered to patients (adhering to strict HIPAA requirements).

The student's description of patient care must follow the format of the nursing process as follows:

1. **Assessment:** subjective and objective data including physical, psycho-social, spiritual, cultural assessment, developmental stage and lab interpretation and diagnostic studies results and the associated nursing implications.
2. **Nursing Diagnoses:** major patient problems identified for the day care is rendered based on the assessment and long-term patient issues that should be addressed
3. **Planning:** what was the "plan of care" for the day (goals), what did you expect to reasonably achieve during the time which you provided care? How will you measure progress toward the goals?
4. **Interventions:** What was done or should have been done? This should include collaborative care as well as nursing care. Provide scientific rationale for the interventions. Include your knowledge of medications and the nursing implications of those drugs
5. **Evaluation:** what was achieved, did you meet your goals, how could you have done this better

or differently to achieve the goals? Did you need to redefine your goals?

The clinical preceptor can assist the student in integrating knowledge while learning technical skills by helping the student focus on the aspects of the nursing process as patient care is delivered.

Please review this document carefully prior to the beginning of the clinical experience. We want you to feel free to contact the student's clinical faculty or myself, the Course Coordinator for any concerns or questions about your role.

Thank you!

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**UNIVERSITY OF LOUISVILLE SCHOOL OF NURSING
N494: CAPSTONE PROFESSIONAL NURSING PRACTICUM**

GUIDELINES FOR PRECEPTORSHIP EXPERIENCE

The University of Louisville School of Nursing Agrees:

1. To offer an approved curriculum for undergraduate students that meets accepted national accreditation standards.
2. To be responsible for planning with the preceptor and agency administration experiences that facilitate meeting the learning needs of the student.
3. To require students to maintain clinical compliance, as outlined in the clinical agency agreement.
4. To require students to obtain final approval for additional learning objectives. Final approval will rest with the designated preceptor and the student's faculty advisor.

The Agency Agrees:

1. To provide opportunities for students to provide nursing care in a selected setting.
2. To allow students the opportunity to acquire experience in assuming leadership roles within the confines of the practice setting.
3. To allow students to develop additional learning objectives for the clinical experience in collaboration with preceptor and faculty within the parameters of the agency.
4. To allow students the freedom to independently and/or collaboratively apply the skills of assessing, planning, implementing and evaluating their own nursing care, under the direct supervision of a licensed nurse.
5. To utilize in collaboration with the School of Nursing the following criteria in selecting a student preceptor.

The Preceptor must:

1. Be a registered licensed nurse in the state of clinical practice, with a minimum of 18 months nursing experience.
2. Have a minimum of a BSN.
3. Exhibit expertise in the field of preparation.
4. Have a committed belief in the expanded role of the professional nurse.
5. Be willing to serve as a preceptor and assume responsibility for making student assignments for independent practice, with careful attention given to the scope of the individual's knowledge and skills.
6. Be willing for the student to pursue individual learning objectives within the parameters of the agency.
7. Share contact information with the faculty for the purpose of ongoing communication regarding evaluation of student performance.
8. Work a minimum of 24-36 hours each week engaged in direct patient care.

The Preceptor Agrees:

1. To provide opportunity for the student to pursue learning objectives within the parameters of the agency and in accord with the nursing role assumed by the preceptor.
2. To allow the student the freedom to independently and/or collaboratively apply the skills of assessing, planning, implementing and evaluating their nursing practice.
3. To provide opportunities for the student to assume a leadership role as a learning experience within the confines of the practice setting.
4. To serve as a resource person, consultant and supervisor for the student's clinical nursing experience.
5. To be willing to assume responsibility for making student assignments for independent practice with careful attention given to the scope of the student's knowledge and skills.
6. To share contact information in order to communicate with the faculty on an on-going basis (email, telephone, face-to-face)

7. To initiate communication with faculty immediately regarding concerns about student performance and to discuss any needed actions.
8. To be licensed to practice nursing in the state of employment.

The Student Agrees:

1. To establish any additional learning objectives for the clinical experience in collaboration with the clinical instructor and preceptor. These objectives must be written and in measurable behavioral terms.
2. To negotiate with the preceptor for experiences that will facilitate meeting personal learning objectives and assist in the development of professional competencies.
3. To maintain pristine communication with the clinical faculty and the preceptor through email, phone calls or personal meetings.
4. To have current professional liability insurance, immunizations (including TB testing) and CPR certification.
5. To have current health insurance, and to assume the cost of any health care services not covered by insurance.

The Clinical Faculty Agrees:

1. To orient students and preceptors to the clinical experience.
2. To arrange for student orientation to the assigned agency and to facilitate student access to the agency.
3. To establish a mechanism for maintaining contact with preceptors during the period of preceptorship. Examples of mechanisms: electronic mail, telephone contact, on-site visits and/or discussions.
4. To provide a midterm and final written clinical evaluation to students. While faculty may elicit input from the clinical preceptor, the assigned clinical faculty retains responsibility for evaluating students and assigning course grades.

Preceptorship Guidelines based closely upon those used by the University of Alabama School of Nursing for NUR 458. Used by permission of UAB School of Nursing.

CLINICAL SKILLS: (P/F)

Students are expected to demonstrate knowledge and competency of previously learned skills throughout the clinical rotation. Students are encouraged to review skills from prior semesters and ensure adequate preparation to perform these during the clinical rotation. If a student is unable to demonstrate necessary skills in a safe and competent manner, they will be required to complete remediation to continue in the clinical experience.

Required Textbooks:

Publication Manual of the American Psychological Association (6th Edition). Journals will be written in strict APA format.

The Interdisciplinary Curriculum for Oncology Palliative Education (iCOPE) Project:

This education curriculum project started as a \$1.5 million grant from the National Institute of Health/National Cancer Institute. The 5-year grant was awarded in September of 2010 to develop an interdisciplinary oncology palliative care curriculum that would include students from medicine, nursing, social work, and chaplaincy programs. The Council members (from Nursing these include Dr. Carla Hermann [co-I], and Ms. Karen Black) worked on the development and implementation of this curriculum. The project is integrated into the N494 clinical experience. Students will be participating in this interdisciplinary educational experience related to palliative care.

N494 students will accrue “Miscellaneous/Professional” clinical hours for their participation. Hours are assigned for each portion of the project **totaling 9hrs**. Participation in this project is **mandatory** and therefore any failure to complete all the requirements for this program will result in not earning the “9hrs” needed to complete the N494 clinical experience. Disciplinary action could result including possible failure of the N494 experience. These hours cannot be made-up.

OVERVIEW OF N494 CAPSTONE PROFESSIONAL NURSING PRACTICUM EXPERIENCES

- Each student is assigned a preceptor with whom they will work throughout the clinical experience.
- Each student has also been assigned a clinical faculty who will maintain close communication with the student and the preceptor.
- The clinical faculty is responsible for evaluation of the students in meeting clinical objectives.
- The clinical faculty will arrange orientation of students to the agency and will orient the preceptor as needed to their role and responsibilities.
- The preceptor's perception of student performance is valuable in assessing the student's progress toward the terminal objectives of the clinical experience.
- The clinical faculty will visit the clinical site and/or conduct phone interviews or communicate via email with the preceptor to evaluate the student's progression.
- The clinical faculty and the preceptor will ensure that close communication can be maintained throughout the clinical experience.
- If there are concerns about the student's performance, additional assessments of student performance may be needed. The faculty may choose to follow the student for a number of hours to directly observe the student in the clinical setting. This may be initiated by faculty concerns or the request of the clinical preceptor.
- **The preceptor is encouraged to contact the clinical faculty at any time regarding concerns about the student's clinical performance and behaviors.**
- The clinical faculty will further evaluate the student's performance through the knowledge the student demonstrates in the reflective journals. See "Journal" section below.
- Any questions regarding the clinical experience should be discussed with your clinical faculty during orientation.
- **The goal of this clinical experience is to develop your basic skills as a generalist. If you are placed in a specialty area because of your high qualifications and faculty references bear in mind that you need to be especially disciplined in your review and study of medical-surgical content including the foundational concepts as well as the NURS 494 classroom content as you will not have opportunities to experience observing these conditions in the clinical area. This will require particularly close attention as you prepare for the CPE and NCLEX.**
- **Evening, night shift, and weekends-only clinical rotations will be assigned** as there are insufficient numbers of dayshift preceptors available.
- **Students will be required to attend clinical on weekend shifts when their preceptors are working.**
- Students must meet expectations of both the School of Nursing as well as the agency during the clinical rotation.
- The Clinical Practicum is evaluated on a P/F basis and is evaluated by the clinical faculty with input from the preceptor.
- **Failure to complete assignments (including re-writes of journals or topics) or clinical hours (including iCOPE) will result in an "Incomplete" grade. The grade will be changed to "Pass" once all work has been completed.**
- **An unsatisfactory in any of the objectives in the final clinical evaluation will result in a grade of "F" for the course.**

KBN REGULATIONS

The Kentucky Board of Nursing (KBN) requires that all students complete a minimum of 120 clinical hours in **the last semester** of nursing school.

Because this clinical is somewhat autonomous in nature, the student must demonstrate his/her ability to function in an independent mature and responsible manner. It is **imperative** then that the **student maintains excellent**

communication with the clinical instructor and preceptor. Students violating the expectations set forth in the syllabus will receive formal academic disciplinary counseling. Depending on the nature of the violation this may include failure of the NURS 494 capstone experience.

Please be sure you not only read and understand these expectations but that you clarify any uncertainties you have with regard to them with your clinical instructor or course coordinator.

PATIENT CARE CLINICAL HOURS:

-The total number of clinical hours is 210.

-The number of clinical hours required in the provision of direct patient care within the assigned agency **must be a minimum of 180** (but may be more, see below).

-These hours include:

Direct patient care and any activities associated with the nurse's role on your unit/facility, following your patient to observe a procedure, attending a staff meeting or committee meeting with your preceptor, following or meeting with the nurse manager, etc.

REQUIRED iCOPE PARTICIPATION: (9 hrs)

PLEASE review the Panopto on iCOPE. You will have 4 activities for this project: 1) 4 online modules each with a test you must pass to receive credit, 2) viewing a film with the entire class, 3) a Critical Reflection Paper and 4) an interprofessional Face-to-Face session with other professional students.

You will report any iCOPE activity in which you participate in your weekly journal but do not assign the number of hours for that activity. iCOPE hours will be earned in one block of 9 hours for all 4 activities. You will receive a "Certificate of Completion" at the end of the semester when you have completed ALL required activities (including completion of evaluations). You will forward this certificate to your Clinical Faculty as proof of earning your 9hrs for iCOPE.

NOT an option for Fall 2021 You have an opportunity to earn 8hrs of patient care by attending a Palliative Care Clinical Rotation (associated with the iCOPE project). I highly encourage students to choose this option. It truly enhances the iCOPE experience and makes it even more meaningful. Students who are interested will need to contact Ms. Karen Black within the first week of classes so she can arrange their clinical experience.

OPTIONAL PROFESSIONAL/MISCELLANEOUS ACTIVITIES: (max 10 hrs)

The student is allowed a **maximum of 10 hours Professional activities**

- These hours must be reported in the student's journal and **recorded separately in the Professional Hours Clinical Log.**
- Prof hours are optional and include:
 - professional activities such as professional education meeting or symposium, nursing specialty organization meetings such as Oncology Nursing Society, American Association of Critical Care Nurses, Society of Pediatric Nurses, attendance at KANS and/or SGA meetings, KNA, NSNA, SNRS, MNRS etc.
 - leadership activities such as assisting other faculty with Simulation Labs in Health Assessment, MoC and/or Mother/Baby may also earn clinical hours.
- ALL professional activities must be approved by the student's clinical faculty prior to the activity in order for the student to receive clinical credit.
 - Professional activities may be requested at any time during the semester **at least two business days prior** to the expected activity.
 - The request form for these activities is posted on Blackboard under "Course Documents". Requests must be submitted via email to the clinical faculty.

- You must receive written approval in the form of an email from your faculty.

Culminating Undergraduate Experience Evidence Based Project: (max 10 hours)

Students will be required to take part in a discussion with their faculty upon identifying a researchable problem on a unit. The guidelines and the rubric will be posted on Blackboard under “Course Documents”. This activity is charted out on the calendar throughout the semester. A plan of action and suggestions will be formulated based on gathered research. The final project will then be presented as a poster presentation and to your assigned clinical unit. Please refer to the course calendar for presentation date.

CLINICAL PHASE I: Preparation for Patient Care

Clinical activities in the first week of the clinical phase are directed towards orientation to clinical requirements, the clinical agency, and orientation to the unit where you will complete your clinical experience.

Required Activities To Accomplish During Preparation For Patient Care:

- Meeting with your assigned clinical faculty for orientation more specific to your clinical assignment. You will receive instructions on other orientation activities you must complete.
- Meet preceptor / obtain schedule for coming week. **Please note you are not allowed to contact your preceptor until your clinical faculty has given you permission.**
- Orientation to unit during shadowing of preceptor (your first entire shift).

Phase I Activities may take place at varied times during the second or third week of the semester at the discretion of the clinical faculty and the ability to schedule activities with the clinical facilities.

- You must be available during this time to attend these activities.
 - Please keep your schedule OPEN during the second and third week of classes until you have been scheduled for all orientation activities.
- Once you obtain your preceptor’s schedule, you will know what your clinical commitments are and you will be better able to schedule other responsibilities you have.
- **You will write about these experiences in your journal (explained in more detail below).**

CLINICAL PHASE II: Provision of Direct Patient Care and Professional Activities

- After you have completed your **shadowing** experience (first day with your preceptor in which you observe), you should assume responsibility for patient care.
 - Your preceptor should allow you to begin care for patients on your second full day.
 - Your preceptor will increase your responsibilities and/or number of assigned patients based on your demonstration of competence at each level.
- You will be responsible for completing and submitting a journal **every Thursday** to report your clinical activities for the **previous** week (SUNDAY – SATURDAY)

Faculty Availability:

- Your clinical faculty member may be reached anytime **Monday through Friday to assist you during the hours you are scheduled in the clinical area.**
- **Your clinical faculty will be available by phone during weekends (4:00 p.m. Friday through 8:00 a.m. Monday) for emergencies.**
- **Emergencies include any occurrence at your facility wherein a “Clinical Incident Report” is filed at the facility.**
 - **You must notify your clinical faculty immediately (regardless of day or time of day) for any such events (med errors, patient injuries, student injury, needle-sticks etc.).**
 - **You will also complete a “School of Nursing Clinical Incident Report” and submit that to your clinical faculty ASAP (“Clinical Incident Reports”)**

- If you must call in sick or your preceptor is cancelled or sick on a week-end shift, you must contact your clinical faculty ASAP. Your instructor will tell you how they prefer to be contacted after business hours and on weekends (phone call, email or text).
 - **If you must call in sick or your preceptor is cancelled or sick on a week-end shift, you do not have to call the clinical faculty but instead, promptly send an email to your clinical faculty explaining your absence.**
- For shifts during the week (Mon – Fri), you must notify your clinical faculty of your absence as soon as reasonably possible (please wait until 7am for day shift). Your faculty will further advise you on this matter.
- Before or after business hours (8am-4pm), please limit your phone calls to your faculty to those that need **immediate attention** (preceptor didn't show up for clinical and didn't inform you, need to leave clinical, reportable incidents or other matters that are time sensitive and need immediate attention).
- Your faculty will advise you on the method by which he/she prefers to be contacted.
- E-mail correspondence for non-urgent matters before or after business hours.
- **Please don't hesitate to call if the matter is time-sensitive or urgent.**

EXPECTED STUDENT BEHAVIORS DURING THE PRACTICUM EXPERIENCE

I. Clinical Week: The clinical week is **SUNDAY** through **SATURDAY**.

II. Student Availability: Students must be available for clinical all days of the week Sunday through Saturday.

III. Attendance / Minimum Hours Requirement:

- The student must attend clinical at their assigned clinical facility at least **an average of 18 hrs per clinical week (one - two 12hr shifts)**.
- Partial shifts are acceptable only for students working **7P-7A (night) shifts**.
 - Students on nights may attend clinical from 7PM – 11PM the night before class and/or 11PM – 7AM the night following class if approved by both preceptor and clinical faculty.
 - **Students are not allowed to attend clinical for the full night shift before any class.**
 - **Violation of this tenet will result in forfeiture of those clinical hours.**
- Partial shifts are not acceptable for students with 7AM – 7PM clinical assignments unless there is conflict with other class face-to-face activities.
 - These partial shifts must be pre-approved by the NURS 494 clinical faculty.
 - If extraordinary circumstances create a rare need for a partial shift to complete clinical requirements, it must be pre- approved prior to the scheduled day by the clinical instructor.
 - Partial shifts will not be approved for personal activities.
- Students are excused from the 18hr minimum of clinical hours only if their preceptor is not available for 24hrs that week or if he/she is working the day of class or the day before an exam and the student cannot be with the preceptor.

IV. Weekends: Students will be required to attend clinical on weekends if necessary, to achieve the minimum required hours.

V. Maximum Hours Limit:

- Students are not permitted to attend clinical in excess of three 12 hr shifts. The risk for errors is increased with excessive hours and is not safe practice.
- **Clinical patient care hours reported exceeding three 12 hr shifts or four 8 hr shifts/week will be forfeited.**

VI. Scheduled course activities:

- Class time takes priority over scheduled clinical hours.
- Students assigned a night shift clinical will not be permitted to schedule a full clinical the night before a scheduled class or class activity.
- Students are not permitted to schedule professional activities in conflict with class time or another scheduled course activity.
- **Violation of this will result in forfeit of the clinical hours and the student will be formally counseled.**

VII. Personal activities:

- Personal activities (weddings, showers, vacations, doctor/dentist appointments, out-of-town trips, job interviews etc.) **must be arranged so they do not interfere with the expected clinical requirements and other required clinical and classroom activities.**
- Failure to obtain the weekly minimal clinical hours because of conflicts with personal activities or excessive absences may result in failure of the clinical experience.
- Students are expected **not to schedule outside work in conflict with class or clinical time.**
- **Students who have an important personal event** occurring during the semester should consult with their clinical faculty as far in advance as possible to arrange a way in which both personal needs and academic requirements can be met.

VIII. Schedules:

- **Clinical faculty are responsible for students and therefore must know at all times when the student is in the clinical area.**
- Students are responsible for submitting their clinical schedule to their Clinical faculty **at least one week ahead of their schedule.**
- No changes are to be made in the submitted Clinical Schedule without the express permission of the Clinical Faculty.
- Failure to notify the Clinical Faculty of schedule changes, missing clinical time (full day or partial day), or adding hours to the schedule without the faculty's permission will be considered failure to communicate and meet professional standards and will result in formal disciplinary action.
- **This may also be construed as academic dishonesty and may result in disciplinary action and failure of the clinical experience.**
- **Clinical hours reported to the faculty for which the faculty did not receive a previous schedule will be forfeited. It is the student's responsibility to submit the schedule on time.**
- **Violation of this will result in forfeit of the clinical hours and the student will be formally counseled.**

IX. Safe Practice:

- If at any time, a student is deemed unsafe or unprepared for clinical, the student may be dismissed from or prohibited from attending clinical.
- Whether or not the student is allowed to return to the area is solely the judgment of the clinical faculty and course coordinator.

X. Optional Professional Activities:

- The student must seek approval for these activities utilizing the "Request Form for Professional Activities" provided under "Clinical Documents" on Blackboard.
- The student must include an itinerary of planned activities and 2 written objectives for the experience.
- A contact person must be identified at the time the experience is arranged.

- You must provide your faculty with the contact person's name and phone number when you seek approval.
- This person will sign your clinical log as verification of your hours of attendance.
- **The forms must be submitted at minimum 2 business days prior to attending professional activities**
- **Students who do not submit the request form or who submit the form in less than the required time before the activity and do not have faculty approval will forfeit the clinical hours reported for the activity.**
- After approval by the clinical faculty the student may attend the activity.
- Following the activity, the student must provide the clinical faculty with information as to **how the objectives were met in their next journal entry.**
- Please remember to *separate* these "Professional" hours from "Patient Care" hours with the preceptor when recording these on the clinical log and reporting these to the clinical instructor.

XI. Completion of Clinical Hours:

- All *210 clinical hours* must be completed by the date indicated on the calendar.

XII. Clinical Evaluations:

- Preceptors will be oriented to the preceptor role by clinical faculty prior to the start of clinical.
- Preceptors will evaluate students on a daily basis and provide feedback to the student regarding clinical objectives.
- Students will have a midterm and final clinical evaluation with the clinical faculty.
- Input will be sought from the preceptor. The preceptor is welcomed to submit input to the clinical faculty on the student evaluation form located in this syllabus; however, there is no requirement for the preceptor to complete an evaluation in writing.
- **Input will be given to the faculty during site visits and/or through phone or email conversations.**

XIII. Compliance with U of L SON and Clinical Site Policies:

- The student will comply with all policies and procedures of the clinical facility, including the SON clinical DRESS CODE.
- The students will wear their U of L student nametag and picture ID badge when in clinical at all times.
- If clinical site policies are more rigorous than SON policies, the student will abide by the clinical site policies.

XIV. Alternate Preceptors:

- **No other staff member may serve as the student's preceptor other than the formally assigned preceptor** without prior arrangements by the clinical faculty.
 - In this case the staff member must meet the qualifications for serving as a preceptor, agrees to do so, and has approval from her/his nurse manger.
- Any hours accrued with an "alternate" preceptor that was not pre-approved by the clinical instructor will be forfeited.

XV. Procedures, Skills and Medications:

- The preceptor will make the determination when the student is competent to perform a skill.
- There are certain activities the student is prohibited from performing during the duration of the clinical experience.
- The student will **NOT**:
 - Initiate chemotherapy but may assist the RN in monitoring the patient during administration
 - Witness client signatures on legal consent forms

- Take telephone medical orders
- Sign out medication including narcotics without the preceptor
- Initiate blood or blood products but may assist the RN in monitoring the patient during administration
- **Administer IV drugs, IV solutions, IV piggyback medication without the direct supervision of the preceptor**
- **“Practice” procedures such as IV sticks, phlebotomy, subQ or IM injections on any person (e.g. preceptor or staff) other than a patient on the assigned unit.**
- The preceptor will check all medications prior to administration by the student.
- Students must be supervised by their preceptor in medication administration.
- **Again, the student must always be directly supervised when administering any IV medication or IV fluids.**
- **Violation of any of these tenets may result in immediate failure of the clinical experience.**

GENERAL WRITING REQUIREMENTS

I. Seek Clarification: Students are encouraged to dialogue with their clinical instructors regarding the written assignments

II. Quality Writing:

- Journals are considered scholarly writing.
- Proper use of grammar, formal language, syntax, organization and clarity of thought are required and will be closely scrutinized and evaluated.
- No slang and no crude commentaries.
- **APA style will be required.**

III. Deadlines for Submitting Written Assignments:

- All written assignments will be submitted to Blackboard as an attached **WORD** document.
- Journals should be submitted under the date that they are due.
- **PLEASE NOTE:** Blackboard is down and non-operational between the hours of 10pm and 2am EST every Friday. **It is strongly advised that you keep a copy of all of your papers on a flash drive as a backup. Save your work often and save in multiple places.**
 - Losing your work will not excuse you from the deadline for submission.
 - Submitting the “wrong document” will not be an acceptable excuse.
 - Resubmission of a paper or journal after the deadline will not be allowed.
 - Consider submitting assignments before the final hour.
 - Power outages, computer glitches etc. do happen.
 - Waiting until the last minute to submit your assignment increases your risk that if a problem should occur, you may not be able to submit your paper on time.

IV. Reviewing Others’ Written Work:

- Students are advised not to review papers written by former students.
 - Unsupervised reviews of others’ work may be construed as a form of academic dishonesty and will result in possible disciplinary procedures according to university academic dishonesty policy.

V. Policy on Reviewing Written Assignments:

- The student has the right to question and discuss a written assignment with his/her clinical faculty.

- The student must meet face-to-face with his/her clinical faculty to discuss the elements of the journal that are of concern to the student.
- If, after that meeting, the student is still in disagreement about the outcome, the student may request a meeting with the Course Coordinator.
- **Reconsideration of written assignments is null and void after the last class day.**

REFLECTIVE JOURNAL AND CLINICAL LOG

Reflective Journal

In N494, you will submit a journal each week to your clinical faculty. Journaling is an exercise that allows the student to self-reflect on their ability to synthesize and apply knowledge in the care of clients/families. Students will use the Elements of Thought (Paul & Elder, 1997) and Intellectual Standards in the framework of the nursing process to report the care provided in the clinical setting. The reflective journal will provide a clear, accurate, and precise representation of the students' learning activities and the integration of critical thinking skills in the assessment, planning, implementation, and evaluation of client/family care.

- **Your journal will serve as an important communication tool between you and your faculty. Because face-to-face contact with your faculty is limited, your journal is a vital means of communicating your progress towards your understanding of safe and effective care and the nursing process.**
- **You will submit a journal via Blackboard every week in which you accrue any type of clinical hours** (either patient care or professional).
- Each journal will have an “**Overview**” section, a “**Topic**” and a “**Report of Hours**” (both patient care and professional) and **upcoming schedule** for each journal submitted (until all “Topics” have been addressed)
- During the clinical experience, the student will submit **5 short journals & 2 in-depth nursing process journals (aka Long Journals)** describing the care of one patient for whom he/she cared for the previous week. The student will report that care using the nursing process as outlined below for the long journal.

Students will complete a short journal for each week you completed clinical hours, not to exceed 5. Students will complete a total of 2 long journals.

Journals will be scored as follows:

- 1) Short journals are worth 5 points each
- 2) Long journals are worth 25 points each

There is a total of 75 points that can be earned for completion of short and long journals.

Scoring: Journals will be graded using a rubric. The rubrics are located in the Journal Info Tab section in Blackboard. A level will be assigned for the journal. Level 3 receives 25 pts, Level 2 receives 20 pts, and Level 1 receives 0 points. All journals must be at least a Level 2 to count for total number of 2 long journals. Therefore, if a student scores zero pts on a journal, the journal must be resubmitted using a new patient. All rewrites will receive a maximum of 20 points.

- **The student will be required to write an additional Nursing Process Journal in the event that ANY journal (including non-NP journals) is submitted after the due date/time (late).**

- The journal must be about a different patient.
- The topic of “Metamorphosis/Perception of Nursing” will be reserved for the **last journal** submitted. Topics can be found in “Reflective Journal Guidelines” document under the Journal Info tab on Blackboard.
- Journals written about the **preceding** clinical week (previous SUN through SAT) will be submitted to the appropriate Blackboard site as a WORD document **no later than 5PM each Thursday.**
- Students must honestly report their activities in their journals. Faculty will be communicating with preceptors regarding patient care. Falsification of the documentation of care in the student’s journals will be construed as a form of academic dishonesty.

CLINICAL DAILY LOG

- The student will maintain a **written log** of all patient care clinical hours that will be **signed DAILY** by your clinical preceptor.
- Additionally, you will maintain a **separate written log** of all professional activities.
 - This log should be also be signed in by the contact person for days in which you have an alternative experience or a professional activity.
- Think of the log as your **clinical “time cards”**.
- Your faculty may periodically review this document.
- You will turn in your completed log to your clinical faculty at your final clinical evaluation as proof of your completed clinical hours.
- Falsification of clinical hours is considered academic dishonesty and will result in failure of NURS 494 and be dealt with according to the academic dishonesty policy of the SON and the University.
- **The form for these logs can be found on Blackboard under “Clinical Documents”.**

END OF CLINICAL EXPERIENCE EVALUATIONS

- At the end of the clinical rotation, the student will complete an evaluation of their preceptor and **submit it to their clinical faculty during their final clinical evaluation.** The form is found on Blackboard.

CLINICAL INCIDENT REPORT POLICY

All incidents, such as medication errors, an injury to a patient, exposure to communicable diseases, needle sticks or any incident that places a student at risk must be reported to the faculty member immediately upon occurrence. The student is responsible for completing the “Clinical Incident Report” (available from the School of Nursing Office) within 24 hours of the incident.

CLINICAL INCIDENT REPORT PROCEDURE

1. Student must notify faculty member as soon as an incident has occurred.

2. Faculty must ensure (a) the student completes the clinical incident report in an accurate and timely manner and (b) the agency receives communication about the incident.
3. If the incident involves a student injury and/or exposure, the student should contact the HSC Student Health Services at 852-6446. There is a HSC Student Health Services physician on-call 24 hours a day, 7 days a week to advise individuals.
4. In the event of a non-sterile needle stick, the physician will determine the need for any required interventions. If an intervention is determined to be necessary, the physician will explain the process and make arrangements for the student to obtain emergency post-exposure drugs, available 24 hours a day. Any required blood work may be completed during routine office hours (Monday-Friday, 8:00am-4:30pm) up to 3-4 days after the exposure. Students who are rotating out of town should also follow the same process. The HSC Student Health Office will make arrangements for any necessary drugs through a local hospital or pharmacy as needed. The cost of the on-call service, diagnostic testing for the student and the initial 5 day starter supply of medications is included in the student health fee.
5. Any incident involving a student(s) must be reported by completion of the Clinical Incident Report Form within 24 hours of the occurrence.
6. The completed Clinical Incident form must be submitted within 72 hours of the occurrence to the course coordinator who will then forward the form to the Associate Dean for Academic Affairs for signature.
7. Associate Dean for Academic Affairs should forward to the Dean for signature.
8. Signed form should be filed in office of Associate Dean for Academic Affairs.

Approved: HSC Legal Council (Glenn Bossmeyer)

Date: September 13, 1999

Revised: October 3, 2001

Approved by HSC Legal Council, Glenn Bossmeyer October 3, 2001

Reviewed and Updated by Academic Affairs Committee, February 8, 2019

**University of Louisville School of Nursing
CLINICAL INCIDENT REPORT**

Clinical Facility _____ Date/Time of Incident _____

Student Name _____
Address _____
Phone (W) _____ (H) _____
Insurance company _____
Named Policy Holder _____

Clinical Facility/Site Agency Name _____
Address _____
Phone _____
Area incident occurred _____
Name of Facility/Unit Supervisor _____

Student description of incident, including others involved: _____

Student summary of how this incident could have been prevented/how will such incidents be prevented in the future: _____

Use back of report sheet if more room is required.

Medical treatment given; including time and date _____

Any restrictions noted during medical treatment _____

IF THIS CLINICAL INCIDENT INVOLVES AN INCIDENT TO A STUDENT, THE STUDENT HAS BEEN ADVISED THAT THEY ARE RESPONSIBLE FOR THE COST OF HEALTH CARE SERVICES.

Report prepared by _____ Date of this report _____

Signature, Clinical Instructor _____ Date _____

Signature, Clinical Course Coordinator _____ Date _____

Signature, Program Director _____ Date _____

Signature, Assoc. Dean for Academic Affairs _____ Date _____

Signature, Dean _____ Date _____

Clinical Evaluation Tool
Fourth Semester

Student Name _____

Student ID _____

NURS _____ Semester & Year _____

Faculty Name _____

| Evaluation Criteria | Midterm | | | Final | |
|---|---------|----|----|-------|----|
| | S | NI | US | S | NI |
| Program Goal #1: Prepare professional nurses to use critical thinking and apply ethical standards in the provision of nursing care. | | | | | |
| Program Outcome #1a: Demonstrate professional nursing standards of moral, ethical and legal conduct. | | | | | |
| Appraise the roles and responsibilities of the professional nurse. | | | | | |
| Consider legal and ethical behaviors in the provision of safe and effective care. | | | | | |
| Assume individual responsibility and accountability for nursing interventions, outcomes, and other actions. | | | | | |
| Maintain confidentiality of health records in an ethical manner. | | | | | |
| Program Outcome #1b: Apply critical thinking in the practice of nursing with individuals, families, groups and communities. | | | | | |
| Discriminate the principles of critical thinking. | | | | | |
| Consider evidence of critical thinking when communicating with clients and staff. | | | | | |
| Appraise critical thinking within the nursing process when planning and providing patient care. | | | | | |
| Program Goal #2: Prepare professional nurses to engage in scholarly inquiry and lifelong learning to provide evidence-based, safe, and effective care to individuals, families, and communities. | | | | | |
| Program Outcome #2a: Use current evidence in the planning and provision of patient-centered care. | | | | | |
| Integrate evidence-based interventions that promote the health of individuals, families, and communities. | | | | | |
| Critique evidence-based literature related to clinical practice. | | | | | |
| Defend the need to incorporate evidence-based practice into the plan of care. | | | | | |
| Program Outcome #2b: Demonstrate knowledge & leadership skills in the provision of quality patient-centered care. | | | | | |
| Evaluate the role of leadership in the clinical setting in identifying and meeting health needs of individuals, families, groups, and communities in the healthcare system. | | | | | |
| Value the importance of taking initiative in the clinical setting. | | | | | |
| Integrate principles of delegation and prioritization. | | | | | |

| | | | | | |
|--|--|--|--|--|--|
| Value the importance of patient-centered care. | | | | | |
| Program Goal #3: Prepare professional nurses to collaborate with inter-professional teams to provide culturally relevant patient-centered care. | | | | | |
| Program Outcome #3a: Communicate effectively with individuals, families and groups. | | | | | |
| Incorporate principles of therapeutic communication when working with individuals, families, and groups. | | | | | |
| Analyze communicate techniques to convey relevant data. | | | | | |
| Integrate effective communication in the provision of patient-centered care. | | | | | |
| Program Outcome #3b: Collaborate with inter-professional teams to provide effective, patient-centered, culturally competent care. | | | | | |
| Discriminate between intra and inter-professional team member roles and scopes of practice. | | | | | |
| Choose patient care technologies to effectively communicate the patient's health status and needs with the interprofessional team. | | | | | |
| Evaluate culture, values, and beliefs and their effects on the behavior of self and others. | | | | | |
| Integrate principles of culturally competent care. | | | | | |
| Program Goal #4: Prepare professional nurses to act as change agents to achieve optimal health outcomes through quality improvement and changes in health care policy in diverse microsystems of care. | | | | | |
| Program Outcome #4: Describe the role of health policy in the provision of health care. | | | | | |
| Appraise methods to deliver care in a timely and cost-effective manner. | | | | | |
| Analyze opportunities to improve the quality of patient care. | | | | | |
| Examine the use of policy development in the provision of client care. | | | | | |
| Consider the importance of patient advocacy | | | | | |

Midterm:

Faculty Comments:

Student Comments:

Student Signature _____ Date: _____

Faculty Signature _____ Date: _____

Final:
Faculty Comments:

Student Comments:

Student Signature _____ Date: _____

Faculty Signature _____ Date: _____

Grade Descriptions

A grade of "S" means the student:

- Functions satisfactorily with minimum guidance in the clinical situation.
- Demonstrates accurate and appropriate knowledge and integrates knowledge with skills and attitudes.
- Engages consistently in self-direction in approach to learning.
- Provides evidence of preparation for all clinical learning experiences.
- Follows directions and performs safely.
- Identifies own learning needs and seeks appropriate assistance.
- Demonstrates continued improvement during the semester.
- Uses nursing process and applies scientific rationale.

A grade of "NI" means the student:

- Functions safely with moderate amount of guidance in the clinical situation.
- Demonstrates adequate knowledge and requires moderate assistance in integrating knowledge with skills.
- Requires some direction in recognizing and utilizing learning opportunities.
- Requires moderate amount of assistance with the use of the nursing process and application of scientific rationale.

A grade of "U" means the student:

- Requires intense guidance for the performance of activities at a safe level.
- Clinical performance reflects difficulty in the provision of nursing care.
- Demonstrates gaps in necessary knowledge and requires frequent or almost constant assistance in integrating knowledge and skills.
- Requires significant amount of assistance with the use of the nursing process and application of scientific rationale.
- Requires frequent and detailed instructions regarding learning opportunities and is often unable to utilize them.
- Is often unprepared and has limited insight into own behavior.
- Is unable to identify own learning needs and neglects to seek appropriate assistance.
- Not dependable.
- Breaches in professional or ethical conduct such as falsification of records and failure to maintain confidentiality.

I have received a copy of the University of Louisville NURS 494 Clinical Handbook. My signature indicates my understanding of the information included in this handbook, which includes:

- An overview of the course
- BSN program outcomes
- Student learning objectives
- Clinical evaluation methods
- Role expectations of clinical faculty, clinical preceptor, and student

Preceptor Signature: _____