THE UNIVERSITY OF LOUISVILLE SCHOOL OF NURSING

DOCTOR OF NURSING PRACTICE PROGRAM

FAMILY AND ADULT PRIMARY CARE

NURSE PRACTITIONER CLINICAL TRACK

HANDBOOK FOR CLINICAL PRECEPTORS

Spring 2018 – Fall 2019

UofL

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INTRODUCTION

Thank you for participating in the education of Family and/or Adult Primary 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.

FAMILY AND ADULT NURSE PRACTITIONERS: STANDARDS AND ROLES

Nurse Practitioners are registered nurses with the advanced education (Master of Science in Nursing) and clinical competency that is necessary for the delivery of high quality primary health care. Family Nurse Practitioners (FNP) are nurse practitioners who provide advanced nursing care to individuals, families, and groups throughout their lifespan. Adult Nurse Practitioners (ANP) provide advanced nursing care to individuals ages 12 and above as well as groups and communities. They practice in ambulatory, acute, and long-term care settings. In addition to diagnosing and managing acute episodic and chronic illness, FNPs and ANPs emphasize health promotion 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. Teaching and counseling individuals, families and groups is a major part of NP practice. The NP practices autonomously and in collaboration with health care professionals and other individuals to diagnose, treat and manage the patient's health problems. The NP also serves as a health care researcher, interdisciplinary consultant, and patient advocate (AANP, 2013). Standards of practice published by professional nursing organizations guide 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 American Academy of Nurse Practitioners Scopes and Standards of Practice for Nurse Practitioners, guide practice. Students have copies of the three practice documents and can share and discuss these with you.

THE UNIVERSITY OF LOUISVILLE FAMILY NURSE PRACTITIONER PROGRAM

The FNP and ANP Clinical specialties began in August 1998 at the University of Louisville School of Nursing. All nurse practitioner students complete the same core courses, e.g. nursing theory, nursing research, informatics, health care systems, advanced nursing roles, health promotion disease prevention (*See Appendix A*). When students enter the clinical specialty, their course work reflects the specialty practice needs and courses become different. They enroll in clinical didactic courses that focus on the primary care of individuals and families across the lifespan. Core and clinical courses for the FNP and ANP Program are in *Appendix A*. Other graduate clinical specialties at the University of Louisville are the *Adult-Gerontology Acute Care, Neonatal, and Psych-Mental Health Nurse Practitioner*. If you would like further information on these clinical tracks, please call 852-3801.

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 Clinical Specialty Coordinator for the Family Nurse Practitioner concentration is also Sara Robertson DNP, APRN. The Clinical Specialty Coordinator for the Adult Gerontology Nurse Practitioner

is Whitney Nash PhD, APRN. In addition, a Clinical Faculty member is assigned to interact with the clinical preceptors, supervise, and evaluate the Family Nurse Practitioner in the clinical setting. The Clinical Faculty member will be in touch with you and provide contact information. However, if you need to speak with this person and do not have this information or cannot reach the individual, 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 Coordinator 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 faculty 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, will be obtained or verified. Additionally, a formal, written, and signed contract 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 work with the preceptor to determine the final diagnoses

4.   Develop an appropriate plan of care with the help of the preceptor.

5.   Verbally present the patient situation to the preceptor.

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.

8.   Meet school of nursing clinical compliance, carry an active license to practice nursing, maintain student nurse practitioner malpractice insurance, and maintain currency in CPR.

9.   Keep a *Clinical Log* (See *Appendix* B) that documents each patient encounter and submit to Course Coordinator.

10. Submit a Summary of *Clinical Log* (See *Appendix* B) to the clinical faculty at the completion of each semester.

11. Be prepared for clinical practicum by reading references pertinent to the clinical situations that are common to the clinical site.

12. Contact the preceptor and clinical faculty before clinical absence.

13. Meet the needs of the patient holistically and foster health promotion.

14. Demonstrate consistency in the responsible preparation, documentation, communication, and promotion of continuity in the care of patient.

15. 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 oversight of clinical performance

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.

12. *Selected Office Procedures for Clinical Practice* is included in the course of study. Students may perform these procedures <u>only with supervision</u> after didactic preparation. Procedures may include but are not limited to those listed in Appendix C.

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:

1. 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 during the semester.

   a. Meet with the preceptor during the visit with 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 student evaluation

6. 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; however, the preceptor may only refer to the student's documentation of an E/M service that is related to the Review of Systems and/or Past Family and/or Social History. According to the Centers for Medicare & Medicaid Services (2011), elements of student documentation that must be re-documented by the preceptor include the history of present illness, physical exam, and medical decision making. A preceptor may also choose to have students document on paper rather than directly in the EMR. Students should use the SOAP note format.

The Clinical Log

The student is responsible for keeping a daily *Clinical Log (Appendix* B). This clinical log is maintained via the Typhon 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.

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 tool that is completed by students at the endpoint of the clinical experience. 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).*

Clinical Faculty Evaluation of the Student

The Clinical Faculty uses the form (*Appendix F)* to evaluate the student at a mid-point and at the conclusion of the clinical experience. The Clinical Faculty reviews and discusses their evaluation with the student, the preceptor's evaluation of the student, and the student's perceptions of their performance. With input from the preceptor, the Clinical Faculty determines the final clinical grade and assists the student in developing a plan to improve clinical

performance. The Clinical Faculty reports any unusual problem that threatens the success of the student to the Course and/or Clinical Track Coordinator.

Student Evaluation of the Clinical Preceptor

Each student submits an evaluation of his or her preceptor at the conclusion of the clinical experience. This will be completed via the Typhon software.

Appendix A: Family and Adult Nurse Practitioner Curriculum

Core DNP Courses	Semester Hours	Total
NURS 741 Advanced Pathophysiology	4	
NURS 605 Theoretical Applications to Practice	3	
NURS 607 Foundational Concepts of EBP	3	
NURS 608 Economic & Information Management	3	
NURS 740 Advanced Pharmacology	3	
NURS 744 Synthesis and Evaluation of Evidence Based Practice	3	
NURS 743 Epidemiology	3	
NURS 745 Health Information Technology	3	
NURS 746 Program Development and Evaluation	3	
NURS 747 Finance Management in Health Care Delivery	2	
NURS 725 Leadership and Health Policy	3	
NURS 652 Statistics	3	
NURS 742 Advanced Clinical Assessment	3	
NURS 657 Health Promotion & Illness Prevention Across the Lifespan	3	
NURS 754 Clinical Reasoning in Advanced Practice Nursing	1	
NURS 748 Transformational Leader	2	
Total FNP Core Hours		**45**
NURS 755 Diagnosis and Management in Adult Health	4	
NURS 756 Procedures in Adult Health	2	
NURS 757 Diagnosis and Management of Women's Health	2	
NURS 760 Gerontology Pharmacology	1	
NURS 758 Diagnosis and Management of Mental Health	2	
NURS 761 Pediatric and Adolescent Well Child Theory*	2	
NURS 762 Diagnosis and Management for Pediatric Health**	2	
NURS 787 Clinical Practicum I	2	
NURS 788 Clinical Practicum II	3	
NURS 789 Clinical Practicum III	3	
TOTAL FNP HOURS		**23**
Total Credit Hours without project		**67**
Project Practicum	9	
Total Program Hours		**76**

*Adult NP takes a 1 credit hour Adolescent course ** Adult NP does not take this class

Appendix B: FNP Electronic Clinical Log

TyphonGroup
Healthcare Solutions

Nurse Practitioner Student Tracking - Data Entry Section
CASE INFO SCREEN

Facility: University of Louisville   (Facility #7278)
Case ID #: 1302-20091027-002

Student, Sample is logged in.   Log Out
Date of Service: 10/27/2009 Edit

Save Data   Cancel

▶ = REQUIRED FIELD

Student Information

▶ **Semester:** Fall

▶ **Course:** NURS 624

▶ **Preceptor:** ADAMS, Robert M.

▶ **Clinical Site:** Norton Community Medical Associates-Barret AVE

☐ Rural Visit
☐ Underserved Area/Population

Patient Demographics

☐ Group Encounter

▶ **Age:**   years   ☐ Pre-Term Child?

☐ Prenatal visit? Enter fetus age: weeks

▶ **Gender:** --Select One--

▶ **Race:** --Select One--

▶ **Insurance:** --Select One--

Clinical Information

▶ **Time with Patient:**   minutes

Consult with Preceptor: ____   minutes (not part of patient time)

▶ **Type of Decision-Making:** --Select One--

▶ **Student Participation:** --Select One--

▶ **Reason for Visit:** --Select One--

▶ **Chief Complaint:** ____

Encounter #: --Select One--

Type of H & P: --Select One--

Axis IV (Psychosoc./Environ.):

Axis V (GAF Scale 0-100):

Social Problems Addressed

☐ Abused Child/Adult	☐ Nutrition/Exercise
☐ Caretaking/Parenting	☐ Palliative/End of Life Care
☐ Education/Language	☐ Prevention
☐ Emotional	☐ Role Change
☐ Grief	☐ Safety
☐ Growth & Development	☐ Sanitation/Hygiene
☐ Housing/Residence	☐ Sexuality
☐ Income/Economic	☐ Social Contact/Isolation
☐ Interpersonal Relationships	☐ Spiritual Issues
☐ Issues w/Community Resources	☐ Substance Abuse
☐ Legal	☐ Other:
☐ Neglected Child/Adult	

Diagnosis/ICD Codes

▶ #1	🔍▣	#5	🔍▣
#2	🔍▣	#6	🔍▣
#3	🔍▣	#7	🔍▣
#4	🔍▣	#8	🔍▣

AXIS I-III Translation

Procedures/CPT® Codes

▶ #1	🔍▣	#7	🔍▣
#2	🔍▣	#8	🔍▣
#3	🔍▣	#9	🔍▣
#4	🔍▣	#10	🔍▣
#5	🔍▣	#11	🔍▣
#6	🔍▣	#12	🔍▣

🔷 Birth & Delivery

Medications

 # OTC Drugs taken regularly: ____

 # R_x currently prescribed: ____

 # New/Refilled R_x This Visit:

Types of New/Refilled R_x This Visit

- ⊕ Analgesic & Antipyretic
- ⊕ Cardiology
- ⊕ Dermatology
- ⊕ Endocrinology
- ⊕ ENT
- ⊕ GI Agents
- ⊕ Gynecology
- ⊕ Hematology/Oncology
- ⊕ Infectious Diseases
- ⊕ Neurology
- ⊕ Ophthalmology
- ⊕ Psychiatric
- ⊕ Pulmonary
- ⊕ Rheumatology
- ⊕ Urology
- ⊕ Vaccines
- ⊕ Wound Management
- ⊕ Miscellaneous

Compliance Issues with Medications

- ☐ Caretaker failure
- ☐ Complexity/demands of treatment
- ☐ Denial of need
- ☐ Disappearance of symptoms
- ☐ Disbelief in benefits/efficacy
- ☐ Fear of addiction
- ☐ Financial concerns
- ☐ Forgetfulness
- ☐ Knowledge deficit
- ☐ Physical disability
- ☐ Pregnancy
- ☐ Psychiatric diagnosis
- ☐ Religious reasons
- ☐ Other/side effects:

Other Questions About This Encounter

Appendix C: Selected Office Procedures for Clinical Practice

- **Skin Biopsy**

- **Excision of skin lesions**

- **Superficial suturing**

- **Pap smears**

- **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**

Adapted from *Advanced Practice Nursing: Curriculum Guidelines and Program Standards for Nurse Practitioner Education* (NONPF, 1995)

University of Louisville
School of Nursing
(MSN)
An electronic copy of this form can be found on the DNP resources page

Name of Site: _____

Location: (check one) _____ Urban _____ Rural

Underserved Area: (check one) _____ yes _____no

Clinical Preceptor: _____

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?				
4) Are the types of clients varied as to age, type of problem, etc?				
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?				
10) Is philosophy of clinic/site to provide: a) health promotion and disease prevention? b) disease diagnosis and management? c) both				

11) Are instructional materials available for clients to supplement their learning (i.e. pamphlets, outside class opportunities, etc?)

12) Are community resources, other agencies, and professional disciplines involved with client welfare?

13. How far away is the site?
Mileage: _____
Travel time from University: _____

13. Please check the one category that <u>BEST</u> describes the practice site:
_____ Physician's office   _____ Day treatment center
_____ Hospital   _____ Community center
_____ Clinic

14. Which of the following <u>BEST</u> describes the practice site selected in question 17?
_____ Physician's clinic
_____ Company or industrial clinic
_____ School clinic
_____ Neighborhood and family health center
_____ Intensive Care Unit
_____ Outpatient/Inpatient
_____ Other type of setting
Specify: _____

<u>General Comments</u>

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?

Appendix E: Preceptorship Verification Form

Kentucky Board of Nursing **Preceptorship Verification Form** 312 Whittington Parkway, Suite 300 Louisville, KY 40222

If you wish to claim preceptorship hours as a way of validating continued competency, this form *can be used* as a means to document participation. **USE OF THIS FORM IS NOT REQUIRED**

Participation as a preceptor is equivalent to fifteen (15) contact hours of continuing competency validation as long as each of the following criteria is met: (201 KAR 20:215)

Criteria:
- a minimum of 120 clock hours;
- shall be a one-to-one relationship between the preceptor and nursing student or employee undergoing orientation;
- may involve more than one (1) student or employee;
- shall be evidenced by written documentation 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 Manager 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 Manager 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 Manager Verifying:

_____

Position/School: _____ Contact Phone Number: (_____) _____-_____

Retain this information in the same manner that you would maintain a
Continuing Education Certificate of Attendance
(at least five (5) years following the current licensure period)

Appendix F: Clinical Evaluation Form

Clinical Evaluation Form
University of Louisville DNP Program
This clinical evaluation tool is designed to evaluate students during their clinical courses and to highlight areas in which the student is progressing satisfactorily and areas that require improvement. 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 student will rate him or herself first, give the form to the preceptor who will then rate the student, and both will review the form together to generate discussion and generate future performance goals. An electronic version of this form is also located on the DNP resources webpage. The clinical faculty will use input from the preceptor and student and evaluate the student during the on-site visit.

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

	Student	Preceptor	Faculty
Scientific Foundation			
1. Critically analyzes data and evidence			
2. Discusses pathophysiology and course of diseases			
3. Applies psychosocial concepts related to health and illness			
Practice, 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			
c. 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			
c. Displays consideration to safety, infection control, and cultural factors during the exam			

6. Distinguishes between normal and abnormal			
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			
Technology			
14. Translates technical and scientific information appropriately for patients			
Leadership			
15. Maintains a climate of mutual respect and shared values			
16. Communicates practice knowledge orally and in writing			
17. 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:

Evaluator: faculty _____   Preceptor _____   student (self) _____

Signature: _____

Appendix G: Objectives for Clinical Courses

NURS 787	NURS 788	789
The purpose of this course is to provide clinical experiences in comprehensive patient assessment, diagnosis, and management of common health problems among select patient populations. Students will begin practicing the role of an APRN under preceptor supervision.	The purpose of this course is to provide advanced clinical experiences in comprehensive patient assessment, diagnosis, and management of complex problems among select patient populations. Students will strengthen and enhance their advanced practice skills with preceptor supervision.	This clinical experiences focuses on synthesis of theoretical, scientific, clinical knowledge and practice-based skills in the diagnosis and management of existing and potential health problems. Emphasis will be placed on the collaborative and leadership roles of the advanced practice nurse in health care delivery.
1. Use a systematic approach to identify health concerns of patients and their families. 2. Employ evidence-based clinical guidelines for use in the management of common health problems. 3. Synthesize clinical data to formulate health management plans. 4. Collaborate with patient, family, and other health professionals to develop and provide a health care plan. 5. Develop a philosophy of the role of the nurse practitioner as a member of the interprofessional health care team. 6. Incorporate culturally competent health care in advanced nursing practice.	1. Use a systematic approach to identify health concerns of patients and their families. 2. Employ evidence-based clinical guidelines for use in the management of complex health problems. 3. Synthesize clinical data to formulate comprehensive health management plans. 4. Collaborate with patient, family, and other health professionals to develop and provide a comprehensive health care plan. 5. Develop a philosophy of the role of the nurse practitioner as a member of the interprofessional health care team. 6. Incorporate culturally competent health care in advanced nursing practice.	1. Demonstrate clinical competence in advanced practice nursing based on selected specialty standards of practice. 2. Employ evidence-based clinical guidelines for use in the management of complex health problems. 3. Synthesize individual and aggregate data to formulate a comprehensive health management plan. 4. Lead an interprofesional team in the delivery of healthcare that includes appropriate referral, consultation, and continuity of care for clients. 5. Integrate an evolving personal philosophy of nursing and 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
2017-2018
DNP Program

Institutional Effectiveness Program Goals 1-7		Program Outcomes	Student Learning Outcomes	Measures & Targets
Program Goal : Competency related to Professional Practice and training experiences	1	Demonstrate moral, ethical and legal behavior in the advanced nursing role. Essentials I, II, IV, V	1. Students will meet professional behavioral standards.	1 Clinical Evaluation (direct): 95% of students will satisfactorily meet clinical evaluation clinical indicator (13, 15, 19) on final evaluation.
Program Goal : Competency related to Content Knowledge	2	Apply knowledge and leadership skills in the provision of quality advanced nursing care. Essentials II, VII, VIII, IX	2. Students will meet leadership objectives related to final clinical evaluation/practicum evaluation.	2 Clinical Evaluation (direct): 95% of student will satisfactorily meet leadership indicators (8, 11, 12, 16) on final evaluation.
Program Goal : Competency related to Engagement in Research	3	Synthesize current evidence to plan and provide advanced nursing care. Essentials I, III, IV	3. Students will synthesize evidence to provide advanced nursing care.	3 Class assignment (direct): 3.1 95% of students will receive a satisfactory grade on their DNP project proposal defense.
Program Goal : Competency related to Professional Practice and Training experiences	4.	Use effective communication strategies with individuals, families, and groups in providing advanced nursing care. Essentials IX	4. Students will demonstrate effective communication in an advanced nursing role.	4 Clinical Evaluation (direct): 95% of students will satisfactorily meet clinical communication indicator (16) on final evaluations.

Institutional Effectiveness Program Goals		Program Goals (CCNE Outcomes)	Student Learning Outcomes	Measures
Program Goal: Competency related to major	5.	Develop, participate on, and/or lead inter-professional teams to improve patient and population health outcomes. Essentials II, IV, VII	5 Students will demonstrate inter-professional collaborative skills.	5. Clinical Evaluation (direct): 95% of students will satisfactorily meet clinical evaluation clinical indicator (16, 17) on final evaluation.
Program Goal : Competency related to Content Knowledge	6.	Demonstrate critical thinking in advanced nursing care of individuals, families, groups, and communities. Essentials I, IV, IX	6. Students will demonstrate critical thinking skills in the care of individuals, family, and groups.	6. Class assignment (direct): 95% of students will receive a satisfactory grade on their DNP practice project defense.
Program Goal : Competency related to community engagement	7.	Analyze the role of health policy and advocacy in the provision of health care. Essentials VI, VII, IX	7. Students will advocate for a change in or maintenance of a health policy related to a selected health care issue.	7. Class assignment (direct): 95% of students will receive a satisfactory grade on their health policy written assignment.

AACN directed DNP Program Goal:

Graduate education resulting in a Doctor of Nursing Practice (DNP) prepares nurse leaders to:

a. Synthesize and apply knowledge to improve population outcomes

b. Collaborate with other disciplines to improve the delivery of health care

c. Assume clinical, leadership, executive, public policy and/or teaching roles

d. Affect health policy through the application of knowledge. The DNP is the terminal practice degree in nursing.