



Florida Atlantic University

Nurse Practitioner Preceptor Orientation

Christine E. Lynn College of Nursing

Vision Statement

The Florida Atlantic University Christine E. Lynn College of Nursing will be the international preeminent leader in advancing caring science through its dynamic, innovative caring based education, research, scholarship, and practices.

Mission Statement

The Christine E. Lynn College of Nursing, as an integral part of Florida Atlantic University, is committed to the pursuit of higher education grounded in the arts, sciences and humanities. Faculty of the College support the University mission of teaching, research/scholarship and service within an environment that fosters inclusiveness.

The Christine E. Lynn College of Nursing is dedicated to caring; advancing the science, studying the meaning, practicing the art, and living caring day-to-day.

Table of Contents

1. Introduction.....	3
2. Contact information for FAU Faculty and Staff.....	3
3. Preceptor Orientation Aims and Objectives.....	4
4. College of Nursing History and Background Information.....	5
5. Overview of the MSN Program.....	7
a. Program Outcomes.....	7
b. Curriculum.....	10
6. Overview of BSN to DNP Program.....	12
a. Program Outcomes.....	12
b. Curriculum.....	12
c. DNP Project	14
7. Practicum Requirements.....	16
a. Preceptor Qualifications/Eligibility	16
b. Preceptor Responsibilities	16
c. NP Faculty Qualifications.....	18
..NP Clinical Faculty Responsibilities.....	18
d. Student Responsibilities.....	19
8. Preceptor Successes	
a. Characteristics of Successful Preceptors.....	20
b. Benefits of Precepting.....	21
c. Challenges of Precepting	21
9. Evaluation of Student.....	22
10. Providing Helpful Guidance.....	23
a. Types of Teaching/Learning Experiences.....	23
b. Strategies for Balancing Teaching/Learning Productivity	23
11. College, University, and Program Policies	25
12. College of Nursing Policies	25
a. Clinical course policies.....	25
b. Self-Insurance Plan.....	27
c. Reporting Critical Incidents.....	27
d. Clinical Forms	28
e. Code of Academic Integrity.....	28

13. Resources.....	30
Appendices.....	41
a. Course Descriptions.....	41
b. Preceptor evaluation of student.....	44
c. Student Evaluation of Preceptor.....	46
d. Student/Faculty Evaluation of Site.....	47

Introduction

It is through our relationships with dedicated practice partners that we are able to provide meaningful growth experiences for our nurse practitioner students. This resource is intended to provide guidance to those who have volunteered to serve as mentors for our graduate and doctoral level NP students as they grow in knowledge, skill, and competency.

Preceptor Orientation Program Aims/Objectives

Upon completion of this orientation guide, the clinical preceptor will be able to:

- Describe the mission and philosophy of the Christine E. Lynn College of Nursing (CON) of FAU.
- Delineate the role and eligibility requirements of the clinical preceptors, students, and faculty.
- Identify characteristics of effective teaching strategies that will enhance the learning experience for NP students in a variety of settings.

Contact information for FAU faculty and staff

Name/Title	Phone	Email
Valentine Etienne, MSN Program Coordinator	561-297-3261	etiennev@health.fau.edu
Anastasia Leveille, DNP Program Coordinator	561-297-1109	aleveille@health.fau.edu
Susan Bulfin, Director, DNP and NP Programs	561-297-3600	sbulfin@health.fau.edu
Karethy Edwards, Dean for Academic Programs	561-297-3318	edwardsk@health.fau.edu
Lynne Dunphy, Dean for Community Engagement	561-297-4646	ldunphy@health.fau.edu

College of Nursing History and Background Information

The Christine E. Lynn College of Caring has a rich and impressive history that continues to be written today. In thirty-five years, the College has grown from six to approximately 1,400 students and expanded its programs to include baccalaureate through doctoral. It has also moved from a division in the College of Social Science to a freestanding College, expanded offerings to three campuses, established eminent scholar chairs and professorships focused on advancing nursing knowledge, and created five major centers/institutes that provide the opportunity for research, education, and inter-professional collaboration.

The students, staff, and faculty of the College are grateful to local philanthropists Mr. Eugene Lynn, Ms. Lucy Edmondson, Mr. and Mrs. Frank Newman and Charles and Dorothy Schmidt, who in the late 1970s provided the money needed to begin this nursing program.

The story continues in the College's new home made possible by a \$10 million gift from Christine E. Lynn and matched in full with state funding. This state-of-the-art facility allows us to address present, emerging, and future healthcare needs with passion and compassion.

Accreditation

The Commission on Collegiate Nursing Education accredits the baccalaureate, master's and DNP programs at Florida Atlantic University's Christine E. Lynn College of Nursing.

Awards

The College of Nursing has received a national ranking of No. 46 for its Master of Science Nursing (MSN) program and No. 44 for its Doctor of Nursing (DNP) program by the *U.S. News & World Report* 2017 Best Graduate Schools Guidebook. The College has quickly risen from its previous ranking of No. 72 for its master's and doctoral programs in 2016, and this is the highest ranking for FAU's graduate nursing programs in its 27-year history.

FAU's College of Nursing ranks third in the state of Florida for both its MSN and DNP programs.

College of Nursing Philosophy, Core Values, and Professional Statement

Nursing is a discipline of knowledge and professional practice grounded in caring. Nursing makes a unique contribution to society by nurturing the wholeness of persons and environment in caring. Caring in nursing is an intentional mutual human process in which the nurse artistically responds with authentic presence to calls from persons to enhance well-being. Nursing occurs in nursing situations: co-created lived experiences in which the caring between nurses and persons enhance well-being. Nursing is both science and art. Nursing science is the evolving body of distinctive nursing knowledge developed through systematic inquiry and research. The art of nursing is the creative use of nursing knowledge in practice.

Knowledge development and practice in nursing require the complex integration of multiple patterns of knowing. Nurses collaborate and lead interprofessional research and practice to support the health and well-being of persons inextricably connected within a diverse global society.

Persons as participant in the co-created nursing situation, refers to individual, families or communities. Person is unique and irreducible, dynamically interconnected with others and the environment in caring relationships. The nature of being human is to be caring. Humans choose values that give meaning to living and enhance well-being. Well-being is creating and living the meaning of life. Persons are nurtured in their wholeness and well-being through caring relationships.

Beliefs about learning and environments that foster learning are grounded in our view of person, the nature of nursing and nursing knowledge and the mission of the University. Learning involves the lifelong creation of understanding through the integration of knowledge within a context of value and meaning. A supportive environment for learning is a caring environment. A caring environment is one in which all aspects of the person are respected, nurtured and celebrated. The learning environment supports faculty-student relationships that honor and value the contributions of all and the shared learning and growth.

The above fundamental beliefs concerning Nursing, Person and Learning express our values and guide the actions of Faculty as they pursue the missions of teaching, research/scholarship and service shared by the Christine E. Lynn College of Nursing and Florida Atlantic University.

Unique Focus on Caring

Guiding the philosophy and objectives of the Christine E. Lynn College of Nursing is one prevailing concept: caring. It is caring that informs how we study nursing, how we practice our profession and how we interact with others throughout our lives.

At the Christine E. Lynn College of Nursing, we study caring as lived in the ordinariness of life and as a central domain of our profession. We recognize each individual as caring and uniquely connected with others and the environment. We also believe that every interaction we have with others is an opportunity to demonstrate and live this caring philosophy.

Our model for relating, The Dance of Caring Persons, pictorially demonstrates the importance of all persons to the accomplishment of the caring mission and goals of our College.

The Dance symbolizes our way of valuing each person's gift to nursing: Dean, faculty, students, provost, president, etc. are each in the circle to offer their special and unique

contributions. These roles exist so that we can provide the highest quality educational programming for the needs of the healthcare profession, now and in the future. Our focus is on the person(s) nursed and the special contributions of nursing to nurturing the wholeness of persons and environment through caring.

Upon entering the College's Boca Raton campus, students, educators, alumni and visitors are greeted with a representation of The Dance depicted on the floor of our lobby. This artistic rendering is more than an appropriate greeting. It is a daily reminder of our focus, our purpose and our approach to nursing and to daily life.

Definition of Caring Science: Caring Science, in the discipline of nursing, is the body of knowledge, arrived at through intentional research and theory development, focused on the relationship of caring to health, healing and well-being of the whole person within the context of the family, community, society and within the global environment.

Nursing Professional Statement

When students of nursing begin their course of study, they enter into an implied professional agreement- agreeing to abide by the American Nurses Association (ANA) Code of Nursing Ethics and to conduct themselves in all aspects of their lives in a manner becoming a professional nurse.

The College of Nursing faculty holds a professional ethic of caring and healing, recognizing that each person's environment includes everything that surrounds an individual. Similarly, the College hopes to create an environment that nurtures the wholeness and dignity of self and others. The faculty encourage socially responsible behavior and will not accept actions that can be perceived as hostile, threatening or unsafe to others. It is the College's expectation that students promote a positive public image of nursing. It is the College's goal, as a professional college, to build an expanding community of nursing scholars and leaders within the context of its caring-based philosophy. Safety of the person being nursed and accountability for individual actions are priorities (or critical components) of a professional nursing education.

Students who do not abide by this policy will be subject to appropriate academic sanctions, which may include dismissal from the College of Nursing and/or disciplinary action, which may include suspension or expulsion from the University.

Overview of the MSN Program

The Master of Science in Nursing program prepares graduates for advanced practice roles as Family Nurse Practitioners or Adult/Gerontological Nurse Practitioners. Completion of one of the Nurse Practitioner concentrations prepares the graduate nurse to seek certification

as a nurse practitioner in the area of concentration. National certification is required for authorization to practice in the advanced practice role in Florida. Both tracks require 49 credit hours for graduation, a total of 600 clinical practicum hours and are offered as part-time programs. The programs accept a limited number of highly qualified applicants.

The Adult/Gerontological Primary Care Nurse Practitioner program provides graduates with the advanced skills and knowledge to assume the role of Adult/Gerontological Primary Care Nurse Practitioner with an emphasis on responding to calls from adolescents, adults and older adults. The unique features of this program are that it is inclusive of care to culturally diverse adolescents, adults and older adults. Clinical placements may occur in health department clinics, private practice offices, home-health agencies, community-based health centers, hospitals, long-term care institutions and other settings providing health care to adolescents, adults and older adults. Graduates of the Adult/Gerontological Primary Care Nurse Practitioner program are eligible to sit for the Certification Examination offered by the American Nurses Credentialing Center (ANCC) or the American Academy of Nurse Practitioners (AANP).

The Family Nurse Practitioner program provides graduates with advanced practice role preparation, knowledge and skills in the care of children and adults across all ages within a family framework. Health promotion, disease prevention and management of common acute and chronic long-term health alterations in primary care settings are the foci of this concentration. Practicum experiences occur in health department clinics, private practice offices, HMO clinics, community-based health centers, hospital clinics, urgent cares and other settings providing primary health care. Graduates of the Family Nurse Practitioner program are eligible to sit for the Family Nurse Practitioner Certification Examination offered by the American Nurses Credentialing Center (ANCC) or the American Academy of Nurse Practitioners (AANP).

MSN Program Eligibility Requirements

1. Earned B.S.N. from an accredited bachelor's program in nursing.
2. Minimum grade point average of 3.0 on a 4.0 scale for the final 60 baccalaureate-level course credits in the B.S.N. program, or
3. Graduate Record Examination (GRE) or Miller Analogies Test (MAT) scores are required for applicants with a grade point average of less than 3.0.
4. Basic undergraduate statistics course.
5. Baccalaureate-level, upper-division nursing research course.
6. Resumé or Curriculum Vitae (CV) presented in specified format located on the [website](#).
7. A written essay describing the student's philosophy of nursing (1,000 to 3,000 words).
8. One electronic letter of recommendation requested through the Nursing CAS System.

9. Current RN licensure to practice nursing.
10. A Level 2 (state/federal) criminal background check. (Costs are the responsibility of the applicant/student). Annual renewal by an Oath and Affirmation Statement is required.
11. An interview and on-site writing sample may be required.
12. Practice experience is not required but may be considered as part of the overall quality of the application.

MSN Program Outcomes

1. Develop self in caring-based advanced nursing practice.
2. Integrate a broad base of knowledge grounded in caring that includes theory and best evidence for advanced nursing practice.
3. Integrate multiple, complex patterns of knowing in coming to know persons and creatively responding to calls within nursing situations in advanced nursing practice.
4. Demonstrate accountability for ethical, safe practice and inquiry in advanced nursing practice.
5. Demonstrate cultural humility within nursing situations in advanced nursing practice.
6. Engage in systematic inquiry as a foundation for advanced nursing practice, healthcare delivery and the evolution of nursing as a caring science.
7. Participate in the implementation of technology and information systems to promote well-being, facilitate decision-making and enhance collaboration in advanced nursing practice.
8. Promote well-being for persons and populations across the lifespan in advanced nursing practice.
9. Promote caring environments that nurture wholeness in advanced nursing practice.
10. Honor human dignity and advocate for equity in healthcare outcomes, local and global health policy and healthcare delivery in advanced nursing practice.
11. Participate in the transformation of complex healthcare systems through caring leadership that facilitates intra- and inter-professional collaboration to achieve quality outcomes in advanced nursing practice.
12. Promote responsible stewardship to advance the discipline and profession, preserve resources and respect the environment in advanced nursing practice.

MSN Nurse Practitioner Curriculum

COURSE SCHEDULE		CREDITS	CLIN HRS
FALL (6 credits)			
NGR 6110	Advanced Nursing Practice: Grounded in Caring	3	
NGR 6141	Advanced Pathophysiology	3	
SPRING (6 credits)			
NGR 6811	Philosophy & Theoretical Foundations of Advanced Nursing Practice Roles	3	
NGR 6812	Nursing Research Evidence Based Practice	3	
SUMMER (6 credits)			
NGR 6251	Perspectives of Aging (AGNP) <u>or</u>	3	
NGR 6611	Advanced Nursing Situations: Care of the Family Across the Lifespan (FNP)		
NGR 6891	Leadership , Policy and Finance: Advanced Nursing Practice	3	
FALL (6 credits)			
NGR 6002	Advanced Health Assessment	2	
NGR 6002L	Advanced Health Assessment Lab	1	
NGR 6172	Advanced Pharmacotherapeutics	3	
SPRING (6 credits)			
NGR 6200	Primary Care 1: Foundations of Advanced Practice	3	
NGR 6200L	Primary Care 1 Practicum: Foundations of Advanced Practice (12 hours per week)	3	180
SUMMER (3-6 credits)			
NGR 6342	Women's Health: Nursing Situations in Advanced Practice (FNP/ AGNP)	3	
NGR 6301	Care of Children: Nursing Situations in Advanced Practice (FNP only)	3	
FALL (6 credits)			
NGR 6605	Primary Care 2: Foundations of Advanced Practice	3	
NGR 6605L	Primary Care 2 Practicum: Foundations of Advanced Practice (12 hours per week)	3	180
SPRING (6 credits)			
NGR 6608	Primary Care of Families: Comprehensive Advanced Nursing Practice	3	
NGR 6608L	Primary Care of Families Practicum (16 hours/week) <u>or</u>	4	240
NGR 6607	Comprehensive Care of Adolescents through Older Adults (AGNP)	3	
NGR 6607L	Comprehensive Care of Adolescents through Older Adults Practicum (AGNP) (16 hours/week)	4	240
TOTAL	CREDITS/CLINICAL HOURS	46-49	600

Overview of BSN to DNP Program

The BSN to DNP program prepares graduates for advanced practice roles as Family Nurse Practitioners or Adult/Gerontological Nurse Practitioners with a doctoral degree focusing on practice leadership. The Institute of Medicine (2010) and the American Association of Colleges of Nursing (2016) have called for nursing education to prepare individuals for practice with interdisciplinary, information systems, quality improvement and patient safety expertise. The emphasis of the program is the delivery of advanced practice nursing APRN has been adopted by the state) to culturally diverse populations. Graduate education in nursing occurs within the context of societal demands and needs as well as the inter-professional work environment. The program is designed for nursing leaders to develop skills in shaping and evaluating practice models in their own practice settings. The program will accept a limited number of applicants. Meeting minimum admission requirements does not guarantee admission. In order to meet the need of practicing professionals, the program is designed to be a full time program with classes offered weekends. All classes are Web-assisted. Students will complete 80 hours of post baccalaureate coursework.

The BSN to DNP student must complete 1000 clinical practicum hours while enrolled as recommended by the American Association of Colleges of Nursing. Clinical practice hours in the second year of study are designed to help students develop new practice skills and to test new models of care.

Eligibility requirements for BSN to DNP students

1. Graduate of a baccalaureate degree from an accredited school of nursing
2. Minimum GPA of 3.0.
3. Current licensure as a Registered Nurse in the state of Florida
4. Completion of the Certified Background requirements
5. CPR
6. Yearly health exam
7. Immunizations
8. Health insurance
9. HIPAA compliance
10. Self-Insurance Plan (SIP)

Program Outcomes

1. Develop self as a caring-based leader in advanced nursing practice.
2. Create innovative models for advanced nursing practice that are grounded in caring, best evidence and knowledge from nursing and other disciplines.
3. Integrate multiple, complex patterns of knowing in coming to know populations of persons and creatively responding to calls for leadership within nursing situations in advanced nursing practice.
4. Demonstrate leadership for developing and implementing ethical, safe practice and inquiry in advanced nursing practice.
5. Lead and mentor others in approaching populations within nursing situations with cultural humility in advanced nursing practice.
6. Use methods of systematic inquiry to evaluate programs, processes and outcomes of advanced nursing practice and leadership in healthcare delivery.
7. Evaluate design and lead in the implementation of technology and information systems to promote well-being, facilitate decision making and enhance collaboration in advanced nursing practice.
8. Create programs and health policy to promote well-being for persons and populations across the lifespan in advanced nursing practice.
9. Design and advocate for caring environments that nurture wholeness in advanced nursing practice.
10. Engage with local and global health policymakers to honor human dignity and advocate for equity in healthcare outcomes, health policy and healthcare delivery in advanced nursing practice.
11. Lead the transformation of complex healthcare systems through caring leadership that facilitates intra- and inter-professional collaboration to achieve quality outcomes.
12. Assume leadership to promote responsible stewardship to advance the discipline and profession, preserve resources and respect the environment.

BSN to DNP Curriculum Plan

Course Information	Class	Credits	Clinical hours
SEMESTER I SUMMER Credits=6			
Quantitative Methods for Advancement of Health Sciences and Nursing	NGR 6814	3	

Practice			
Theory Guided Models for Advanced Practice Nursing	NGR 7124	3	
Semester II FALL Credits= 7			
Epidemiology for Advanced Nursing Practice	NGR 6673	3	
Role Development: DNP Seminar I	NGR 7941	1	
Advanced Nursing Practice Grounded in Caring	NGR 6110	3	
SEMESTER III SPRING Credits=11			
Population-Based Caring in Aging Societies	NGR 7661	3	
Advanced Pathophysiology	NGR 6141	3	
Integration of Cultural Concepts: DNP Seminar II	NGR 7942C	2	45
SEMESTER IV SUMMER Credits=6			
Advanced Pharmacotherapeutics	NGR 6172	3	
Public Policy in Nursing and Health	NGR 7738	3	
SEMESTER V Fall Credits=9			
Advanced Health Assessment	NGR 6002	2	
Advanced Health Assessment Lab	NGR 6002L	1	
Advanced Pharmacotherapeutics II (new)	NGR 6176	3	
Healthcare Systems Leadership and Finance	NGR 7793	3	
SEMESTER VI SPRING Credits=9			
Primary Care 1: Foundations of Advanced Nursing Practice	NGR 6200	3	
Primary Care 1 Practicum: Foundations of Advanced Nursing Practice (12 hours/week)	NGR 6200L	3	180
Research for Advanced Practice Nursing	NGR 7850	3	
SEMESTER VII SUMMER Credits=6			
Care of Children: Nursing Situations in Advanced Practice (FNP)	NGR 6301	3	
Women's Health: Nursing Situations in Advanced Practice (AGNP and FNP)	NGR 6342	3	
Perspectives of Aging (AGNP only)	NGR 6251	3	

SEMESTER VIII FALL Credits=9			
Primary Care 2: Foundations of Advanced Nursing Practice	NGR 6605	3	
Primary Care 2 Practicum: Foundations of Advanced Nursing Practice (12 hours/week)	NGR 6605L	3	180
Evaluating Systems and Models of Care in Advanced Practice Nursing	NGR 7826	3	
SEMESTER IX SPRING Credits=8			
Primary Care of Families: Comprehensive Advanced Nursing Practice (FNP)	NGR 6619	3	
Primary Care of Families Practicum (16 hours/week) (FNP) OR	NGR 6619L	4	240
Comprehensive Care of Adolescents Through Older Adults (AGNP)	NGR 6607	3	
Comprehensive Care of Adolescents Through Older Adults Practicum (AGNP) (16 hours/week)	NGR 6607L	4	240
Project Development: DNP Seminar III	NGR 7943C	1	
SEMESTER X SUMMER Credits=6			
Residency for Advanced Practice Nursing	NGR 7945L	3	180
Advanced Practice Nursing: Essentials of Practice Management	NGR 7767	3	
SEMESTER XI FALL Credits=6			
Residency for Advanced Practice Nursing	NGR 7945L	3	180
TOTAL CREDITS/CLINICAL HOURS		80	1005

DNP Project

As a requirement for graduation, DNP students develop a DNP Project intended to be the culminating, tangible, deliverable “product derived from the practice immersion experience and is reviewed and evaluated by an academic committee” (AACN, 2006). Because of the immersive practice experience during their DNP Residency, the student will have an excellent opportunity to collaborate with practice site personnel in designing a project addressing a specific area of concern or need identified by partners at the site.

Typically, the DNP project aims to improve a certain health outcome for a specific population, and thus may add value or improve core measures as needed. The student

identifies a Community Chair from the practice site to serve as a content expert for the DNP project and a faculty member to serve as Project Chair. Development of the DNP Project Proposal occurs during the third practice semester, and thereafter, the student implements, evaluates, and disseminates the project at the site during the 4th and 5th semesters. These final semesters comprise the DNP Residency credits, whereby the student synthesizes knowledge, skill, and abilities (KSAs not sure that you need this abbreviation) gained throughout the program and continues to reinforce and expand their practice. Based on our DNP graduates experiences thus far, this collaboration has been found to be valuable for the student, the project chairs, the persons served, and the organization overall.

Examples of DNP projects include, but are not limited to:

- Evidence-based practice change initiatives
- Quality improvement projects
- Evaluation of an existing program
- Development of an assessment instrument or protocol for a specified population

The DNP Projects will be disseminated primarily through the mandatory oral presentation to faculty, community chairs, and peers during the last semester of the program. Dissemination may also include presentations at local, regional, and national conferences, and through publication of the final manuscript.

Student Progression

Number of clinical hours: Nurse practitioner students are required to complete 600 (MSN) or 1000 (DNP) supervised clinical hours prior to graduation. FNP and AGNP hours include women's health (100). FNP students must also complete pediatric (100) hours. AGNP students complete 150 hours in gerontologic settings including long-term care and/or subacute facility as well as 8 hours at FAU's Memory and Wellness Center.

Clinical experiences occur during 3-4 semesters for MSN students and 5-6 semesters for DNP students. All NP students progress through three primary care courses, sequentially building competence in health assessment and management of clients from common to complex health conditions. Primary Care 1 and 2 require a minimum of 180 hours per semester, which typically requires the student to attend clinical for two 6-8 hour days per week. Primary Care 3 requires the student to complete a minimum of 240 hours performing three 6-8 hour days per week.

Settings: Ideally, students remain in the same site for all 3-6 semesters, but may need to pursue additional opportunities in other settings to complete women's health, pediatric, or

geriatric requirements. Students may also perform up to 100 hours in urgent care and 40 hours in a specialty area. The settings must allow the students opportunities for:

- performing complete and episodic histories and physical examinations
- presenting the patients to the preceptor
- discussing options for diagnostic tests and management
- following up on the patients for whom they provide care

Progressive learning: Students should be involved in the decision-making process at increasing levels. They also need sufficient time for discussions about patients with the preceptor to gain insights into appropriate management. Learning experiences will be unique to each setting and should include opportunities to build competence in entrusted professional acts at progressive levels

Practicum Requirements

Preceptor Qualifications/Eligibility Need to format and line all of the points up

- National certification and licensure in Florida as an ARNP, MD, or DO
- Earned graduate degree (MD, DO, MSN, or DNP)
- A minimum of one-year practice experience in the role above.

Preceptor Responsibilities

At the Beginning of the Semester

- Complete and sign a preceptor agreement form provided by the student and keep a copy for yourself. This form has the contact information of the clinical faculty assigned to the student.
- Conduct a joint review with the student of the learning objectives for the advanced practice nursing experience. Should there be any problems in meeting the course objectives during the semester, the preceptor should inform the student and contact the faculty.
 - discuss orientation, goals and objectives for the experience
 - review the course syllabus (provided by the student)
 - arrange for clinical days and times.
 - notify the office staff about the student's schedule
 - discuss with staff how to inform patients about a learner being present
 - Provide orientation to the setting before and/or during the first week of the semester (Plan on 30-40 minutes to orient the learner and to review):

- Office policies
- Dress code
- Staff introductions and descriptions
- Office flow
- Hours, lunch time
- Parking/workspace
- Contents of exam room
- Labs or other diagnostics done in the office
- Documentation/forms/billing and coding
- Writing prescriptions
- Patient teaching information, drug samples
- Office resources available
- Procedure for
 - Selection of patients
 - assessment and presentation of patients
 - contacting preceptor
- Understand the legal liability of serving as a preceptor
 - Care provided by students must be the same standard of care provided by a licensed advanced practice professional (NP, MD, DO).
 - Legal and reimbursement guidelines require that preceptors validate findings on physical examination, review laboratory tests, and confirm differential diagnosis(es) and management plans with students prior to the discharge of the patient.
 - Review by the preceptor must be documented in the record indicating that the preceptor has examined the patient, is in agreement with the findings and plan as written by the student, and is responsible for care. It is customary that the preceptor co-signs all records in which the student has provided documentation

During The Semester

- Provide adequate facility/clinical space to facilitate student's interaction with a variety of clients necessary for appropriate learning experiences.
 - Obtain patient consent for learner: the office staff or preceptor should inform patient and ask if they would allow a student to be present and/ or to conduct the interview or exam.

- Actively participate and facilitate student's experience.
 - Provide an expanding scope of responsibility and accountability as the student progresses toward meeting and/or exceeding course objectives.
 - Participate with faculty member in evaluating the student's knowledge base and clinical management skills through direct supervision and observation.
- Critique written documentation as well as verbal presentation of cases.
- Support students in maintaining their advanced practice nursing logs and journals.
- Keep a record of the students, dates, and hours spent as a preceptor.
- Provide written evaluation at midterm and end of the semester.

NP Clinical Faculty Qualifications

- ARNP licensure in Florida with National Certification and doctoral preparation (DNP or PhD)

NP Clinical Faculty Responsibilities

Prior to the Start of the Semester

- Ensure contract is in place prior to students entering the site.
- Credentialing of students, preceptors, and site.

During the Semester

- Send beginning of Term and End of Term letters to preceptors.
- Maintain contact with the facility, preceptor, and administrators as appropriate
- Consult with preceptor regarding student's progress.
- Conduct site visits as appropriate
- Minimally one visit per semester scheduled in advance to ensure the time is convenient.
- More than one visit may be required prior to midterm depending on progress.
- Conduct three group clinical conferences per semester.
- Evaluate the student, preceptor and site over the course of the semester.
- Maintain collegial working relationships with preceptors and staff.
- Be available to preceptor and student during times that student is in advanced practice setting.
- Notify course faculty and student if unable to be available for student needs due to illness or unexpected events.

- Submit a signed summary sheet, e-log composite printout, student evaluations, and student preceptor/site evaluations to the graduate coordinator within one week of submitting course grades.
- Notify NP Coordinator of sites no longer appropriate or functional.

Student Responsibilities

Prior to the Start of the Semester

- Meet all clinical entry requirements as outlined in the college clinical tracking system.
- Obtain faculty site approval prior to entering any practicum.
- Submit signed preceptor agreement form to faculty prior to entering any practicum site.
- Submit an electronic clinical arrangements form for each practicum site prior to entering the site.
- Provide preceptor with a copy of the student's CV/resume, a course syllabus, evaluation forms, and a set of individualized objectives.
- Complete an orientation to the setting before and/or during the first week of the semester.

During the Semester

- Demonstrate the integration of a philosophy of caring in advanced nursing situations.
- Dress in professional attire with a visible student ID and name badge
- Report to the clinical facility on time. Tardiness is considered unprofessional behavior.
- Notify both the clinical faculty and preceptor (or site personnel) of unexpected absences prior to the beginning of the practicum experience for that day.
- Maintain advanced practice nursing electronic logs as described in individual course syllabus. Students are advised to maintain a copy of their clinical logs for their own records. No patient identifiable information is collected.
- Reflect on achievement of the course objectives through weekly journaling
- Maintain all ethical standards per the ANA code, including client confidentiality.
- Use NP Student Clinical Experience Documentation and Tracking System provided by eLogs and
- Include supplemental notes with specific drugs and dosages.
- Document in eLogs all patient encounters and submit no more than one week following the clinical experience.
- Document in the client's medical record unless the agency does not allow it. In that case, use the "Office Note" form provided. (May also use to present each patient situation to preceptor)

- Monitor the time spent with each patient. By dividing *hours spent by the number of patients in minutes and record this as your time per patient.*
- Verify all clinical hours with preceptor's signature
- Complete a Self/Faculty Evaluation at midterm and at the end of the semester.

Preceptor Success

Preceptors contribute to the clinical teaching of nurse practitioner students as clinical educators, directing overall goals and activities of the practicum experience as indicated in the syllabus and agreed upon by the faculty, preceptor, and student (NONPF, 2015). Several authors (Altmann, 2006; Hayes, 1998; Luhanga, Dickieson, & Mossey, 2010) have described the complexity of the clinical preceptor's role as indicated below.

Multifaceted Role

- Facilitator of student success
- Teacher, student advocate, and performance evaluator
- Professional role model
- Experienced, competent nurse
- Resource person

Characteristics of Successful Preceptors

Several studies explored personal and professional characteristics of preceptors, which have been associated with effective outcomes for NP student clinical experiences (Altmann, 2006, Barker & Pittman, 2010; Burns, Beauchesne, Ryan-Krause, & Sawin, 2006; Luhanga, Dickieson, & Mossey, 2010):

Personality Characteristics

- Empathy
- Warmth
- Respectfulness
- Sense of Humor
- Flexibility
- Fairness
- Dependability
- Consistency

Professional Characteristics

- Works willingly with beginning to more advanced students (novice to expert)
- Supports student's educational program

- Maintains current knowledge and skills
- Models appropriate behaviors and attitudes
- Provides constructive feedback
- Encourages student growth

Benefits of Precepting

The majority of preceptors report a high level of satisfaction with their experience and indicate that they would like to continue working with students (Latessa, Beaty, Landis, Colvin, & Janes, 2007). Precepting provides the clinician a variety of satisfying benefits and opportunities. According to the National Organization of Nurse Practitioner Faculty [NONPF] (2015), these include opportunities to:

- share expertise
- expand knowledge base
- influence positive change in NP education
- contribute to their profession
- improve organizational skill
- remain stimulated and keep current in health care
- improve teaching skill
- learn from the student
- be recognized as a respected role model (by patients and colleagues)
- increase involvement in workplace
- improve chances for advancement
- contribute to NP student socialization into the role

Challenges of Precepting

Challenges for preceptors range from the variety of knowledge levels of the students to the pace of the work environment itself. Specific challenges include meeting productivity expectations, maintaining relationships with patients and families while including the student in care, creating the space for students and making time to accommodate student needs. (Burns, Beauchesne, Ryan-Krause & Sawin, 2006; Webb, Lopez, & Guarino, 2015). In addition, preceptors may lack experience or formalized education in clinical instruction.

To facilitate student learning, preceptors must develop strong relationships with the academic faculty (Brooks & Niederhauser, 2010) yet recognize that faculty also experience challenges including evaluating student progress indirectly through written documentation and visits to the site and keeping learning expectations from impacting too greatly on preceptor service demands (Burns, Beauchesne, Ryan-Krause & Sawin, 2006).

Evaluation of Students

Formative Evaluation

Formative evaluation occurs throughout the clinical experience. Ongoing feedback allows for an opportunity of improvement and growth. Areas of competence as well as areas of weakness should be discussed (Sims & Swenson, 2015)

Summative Evaluation

Summative evaluation occurs at the end of the clinical experience and includes a description of the student's performance, improvement, and development. Though not all competencies may be met right away, the student should demonstrate progression. Written comments are valuable for remediation. Academic faculty provide evaluation forms to the preceptor (Sims & Swenson, 2015).

Behaviors that indicate the student is growing in knowledge, skill, and competency

- Presents thorough, focused history and physical.
- Consistently articulates sound decision-making.
- Develops and implements reasonable plan.
- Connects interpersonally with the patient in caring manner.
- Is organized, independent, and time-efficient.
- Is self-confident but knows limits; asks for help.
- Has holistic view of care; includes health promotion and disease prevention.
- Provides concise charting and oral presentations.

Red Flag Student Behaviors

- Is hesitant, anxious, defensive, and not collegial.
- Has uneasy rapport with patient and misses cues.
- Presents less focused history and physical with excessive incomplete data.
- Performs physical examination poorly, inconsistently.
- Is unable to explain reasoning for diagnosis.
- Is unable to prioritize patient problems.
- Is unable to create plans independently.
- Misses health education and disease prevention opportunities in plan.
- Is unsure of tests to order.
- Is unable to provide clear charting and presentations.

Providing Helpful Guidance to Students

Types of Teaching/Learning Experiences

The majority of the student's clinical hours should be spent in family practices or internal medicine practices that provide care to patients with a wide variety of common and complex primary care problems. Students are required to be engaged in direct patient care with opportunities for decision-making. Other opportunities can be considered such as:

- Hospice visits
- Nursing home visits
- EKG interpretation
- Working with the receptionist, coder and biller, manager
- Attending staff meetings
- Triageing patient phone calls
- Chart audits
- Legislative activities
- Negotiations with 3rd party payers
- Ethical case reviews
- **Strategies for Balancing Teaching/Learning and Productivity**

Preceptors have identified innovative techniques to respond to some of the challenges associated with balancing productivity with patient and student quality experiences. Some of these innovations are listed below.
- **Teaching to the developmental level of the student**

Because most students will be in the same clinical placement throughout their entire curriculum, the Preceptor will have the advantage of watching the student grow from semester to semester. During the first few clinical experiences, having the student observe the preceptor allows the student to comfortably acclimate to their new surroundings. It also allows the student to observe the preceptor as a role model and identify the format of the patient encounters that are unique to your practice.
- **Making space and time**

A designated area (however small) for the student to study and document patient encounters is helpful. With the expectations of large numbers of patients to be seen each day, the preceptor can feel like a student is slowing them down, however having students may increase productivity and implies to the patient that the preceptor (their healthcare provider), is respected in the academic community. Several techniques have been advocated to overcome time challenges (Barker & Pittman, 2010).
- **Incorporating “focused half days”**

The preceptor can select 1 or 2 patients that address an area that the student needs to focus on, and have the student work on one in the morning and one in the afternoon. The focus can be on age, disease process, assessment skills, and documentation in the EMR or any other identified area of need. This will allow the preceptor to continue with their regular workload and the student will have the time spend on an in depth evaluation of the patient and presenting that patient to the preceptor. This is not an appropriate technique for the entire rotation, but can be used when the preceptor has limited time to teach, or the student is struggling with a specific area.

- **Giving students homework (Bartol, 2012)**

- **Medication options**

- To help refine decision-making skills, each week a student can focus on medication options for a disease or condition. The new knowledge can be directly applied to patient situations.

- **Reading Research Studies**

- Reading and understanding research is integral to evidence-based decision-making. A strategy may be to have the student read a research article and then discuss it with them the following week. This activity can also prepare the student to ask well-informed questions when being presented with new materials from drug reps or sales people.

- **Setting time limits**

- New students may have difficulty working within time constraints and often spend much time on data gathering skills in the beginning. It may be helpful to say “Get as much of the history as you can and I will come in the room in 10 (15) minutes.” Set limits on presentation time. Have the student demonstrate the “5 minute exam”.

- **Giving Feedback Effectively**

- Respect the learner
 - Set expectations
 - Ask the patient about the experience with the student (share them with student)
 - Focus on improving/changing behavior
 - Sandwich comments
 - First describe what was done right/well/correctly
 - Next describe what needs changing or improvement
 - Finally, focus on what can be done next time

- **Common Barriers/Pitfalls to Effective Learning**

- Preceptor takes over the case for the student
- Asking the student too many questions.
- Not allowing sufficient processing time
- Pushing the learner past his or her ability.
- Not giving feedback.
- Fear of upsetting learner.
- Softening the feedback so that the message is lost.
- Written feedback tends to be more critical than face-to-face.
- Feedback may be too general.
- Grade inflation

College and University Policies

Policies for Preceptor/Practicum Sites

The agencies and institutions for advanced nursing practice experiences in the graduate program are selected according to the following criteria:

- The health care philosophy and objectives of the agency or institution are compatible with those of the College of Nursing and learning needs of the students.
- The accreditation status of the agency (if appropriate) is satisfactory.
- The demographics of clients and advanced nursing situations are adequate to fulfill the course objectives.
- The educational preparation and experience of the preceptors meets required criteria for the specific course.
- The location of the agency/institution is accessible.
- Use of the agency by other nursing programs does not create negative learning opportunities for students.
- Students MAY NOT participate in practicum experiences when the university is officially closed and during semester intersessions (the period between semesters).

College of Nursing Policies

- All students are required to complete Background Check at the time of admission to the College of Nursing.
- All students must comply with mandatory College of Nursing (CON) requirements prior to entering practicum sites: This includes Certified Background Check,

Health Record Management, and Drug Screening). These requirements are validated at the beginning of each practicum semester and the documents are managed and maintained by Castle Branch.

- The Christine E. Lynn College of Nursing Policies may be found in the Graduate Handbook at the link below:

<http://nursing.fau.edu/index.php?main=3&nav=457>

Clinical Course Policies

Expectations of the Preceptor and Clinical Experience

Students must have the opportunity to actually carry out ("hands-on") complete and episodic histories and physical examinations, present the patients to the preceptor, discuss the options for diagnostic tests and management including follow-up of the patients.

Students should be involved in the decision-making process to some degree, and have opportunities for in-depth discussions about patients with the preceptor to gain insights into appropriate management. In addition, opportunities for recording the patient information, understanding certain financial influences in the practice site, etc are important.

As representatives of the CON, students are required to wear professional attire for advanced practice nursing experiences:

Business apparel is appropriate dress in most circumstances. No shorts, tennis shoes, unprofessional wear.

Hair needs to be clean and neat and nails short and clean.

A lab coat is required

A name pin is required. The name pin should read as follows: Janet Harrison, BSN, RN, FAU Graduate Nursing Student

Student Credentials

- Student credentials must be up to date in order to practice in the clinical setting. The college of nursing now uses **Castle Branch** to track all background checks and health requirements.
- Students must make a copy of the face sheet and **submit it to clinical faculty on the first night of the class.**

- The student cannot begin the clinical until the above steps are completed. If assistance is needed Colleen Alcantara-Slocombe may be contacted by e-mail Slocombe@fau.edu 561-297-2872
- **Self-Insurance Plan**
- Florida Atlantic University has a Self-Insurance Program, which covers all of our nursing students during practicum experiences. It is important to note that the college SIP only covers activities performed in the student role.
- The SIP Certificate accompanies all clinical contracts.

Reporting Critical Incidents:

- The SIP reporting guidelines must be followed for all critical incidents and reported to the Assistant Dean of Graduate Practice Programs, College of Nursing by the faculty member within two working days of the event. Below is the link to the SIP guidelines.
 - <http://nursing.fau.edu/academics/student-resources/preceptors-information/policies.php>
- It is expected that all graduate students adhere to the policies and procedures of the practice site, including HIPAA regulations. Professional behavior is expected at all times. Critical incidents include errors and events in clinical settings in which there is potential/actual injury or harm to a client, staff member, or student. In the event of a critical incident in any clinical setting, the student must follow the policies/procedures of the agency as to completion of the proper documents.
- In cases where the student has sustained a physical/chemical injury or has been exposed to an infectious agent, the student must follow the procedure of the institution as to the reporting of the incident and follow-up.
- All students are required to maintain personal health insurance and follow approved guidelines as to follow-up following injury or exposure to potentially harmful infectious/chemical agents.

Clinical Forms (See APPENDICES D-I)

- Preceptor Evaluation of Student
- Student Evaluation of Preceptor
- Student Evaluation of Site
- Faculty Evaluation of Student
- Faculty Evaluation of Site

Code of Academic Integrity

The University policy regarding academic integrity is enforced in this course. Students at Florida Atlantic University are expected to maintain the highest ethical standards. Dishonesty is considered a serious breach of these ethical standards, because it interferes with the University mission to provide a high quality education in which no student enjoys an unfair advantage over any other. Dishonesty is also destructive of the University community, which is grounded in a system of mutual trust and places high value on personal integrity and individual responsibility. Harsh penalties are associated with academic dishonesty. The College of Nursing regards adherence to the Code of Academic Integrity as a professional competency and an expectation of all students. **ANY** act of dishonesty that violates the code of academic integrity and misrepresents your efforts or ability is grounds for immediate failure of the course. For more information on Academic Integrity see:

http://www.fau.edu/regulations/chapter4/4.001_Code_of_Academic_Integrity.pdf

Florida Atlantic University's Academic Policies and Regulations are found at the links below:

<http://www.fau.edu/academic/registrar/catalogRevs/academics.php>

<http://www.fau.edu/regulations>

Benefits for Precepting for FAU

In appreciation for your dedication to preceptorship, the following benefits are made available to FAU CELCON preceptors.

Free Access to the FAU Library System.

Through this access, current editions of many medical and nursing textbooks are available for you to use. Precepting keeps you current in your practice and this tool will prove invaluable.

Tuition Waiver for Preceptors from the State of Florida. The State of Florida awards certificates (Intern Participation Certificates) for tuition remission to individuals who precept or supervise students (not a faculty member). Preceptors may apply for a certificate of participation after 300 hours of precepting, which will allow waiver of tuition for six credits at any state college or university.

Persons who engage in direct supervision of at least one university student for 300 contact hours (may be accumulated over multiple semesters but must have at least 100 direct contact hours per semester) are eligible to apply. The certificates are valid for three (3) years from the date of issuance. Colleges send a list of preceptors to the Director of Student Teaching in the College of Education. The information required must contain the name, Social Security

number, address and phone number of each preceptor who provides evidence in a log of student contact hours over the semester. The names of the students, the dates precepted, and the total hours precepted for each student must be provided with the preceptor's name.

Preceptors do have the responsibility to keep a log of precepted hours and students with their dates of clinicals and site. Preceptors may accumulate hours by precepting one student over a longer time or more students over a shorter time. The key is that it must be direct supervision. This does not mean that the preceptor has to be with the student every minute but that he or she would be directly available to the student and would be responsible for the student for the time period specified. Preceptors who submit applications and do not hear in a reasonable period of time, for example 3-6 months, should notify one of the grant faculty listed in the beginning of this handbook, (this was stated above)The following links provide the instructions and application form for the tuition waiver process.

<http://nursing.fau.edu/files/pdfs/Preceptor%20background.pdf>

<http://nursing.fau.edu/academics/student-resources/preceptors-information/index.php>

Appointment and Promotion Guidelines for Clinical Affiliate and Affiliate Faculty

Clinical Affiliate or Affiliate Faculty Appointments

Clinical Affiliate and Affiliate faculty members of the Christine E. Lynn College of Nursing contribute actively to the educational, research, academic service, and/or patient care programs of the College of Nursing. These appointments do not provide tenure or tenure-earning status. Most Clinical Affiliate or Affiliate faculty serve as volunteers.

Clinical Affiliate faculty status is available to clinicians only, while Affiliate faculty status is available for other scholars. Appointment to the Clinical Affiliate or Affiliate faculty requires that the faculty candidate hold a terminal doctorate (i.e. DNP, PhD, M.D and/or D.O., or equivalent). In circumstances in which another degree is considered the pertinent degree for contribution, holding that degree may be acceptable pending evaluation.

Appointments to the Clinical faculty of the CON require evidence of professional and clinical expertise, willingness and ability to perform the proposed activity with the potential to serve as a role model and colleague. For clinicians, current Florida state licensure or their equivalent are required. Another state license may substitute for a Florida state license providing that a criminal background check is included in the licensure process (for a list of acceptable states that meet this criteria, refer to the faculty handbook). In cases where a candidate for Clinical Affiliate or Affiliate faculty status has not received a terminal degree or board certification is

pending in her/his field, the rank of Instructor may be appropriate. For Clinical Affiliate faculty appointments at the rank of Clinical Assistant Professor or higher, board certification in an area of expertise is required.

All Clinical Affiliate and Affiliate faculty members of the College of Nursing must comply with the policies and procedures of the College of Nursing and the University, as well as any local, state, and federal laws and regulations that are applicable to their activities within the college.

The academic titles for Clinical Affiliate or Affiliate faculty are **Clinical Affiliate Instructor or Affiliate Instructor, Clinical Affiliate Assistant Professor or Affiliate Assistant Professor, Clinical Affiliate Associate Professor or Affiliate Associate Professor, and Clinical Affiliate Professor or Affiliate Professor.**

In rare circumstances, such as retirement or the onset of an illness of an affiliate faculty member who previously played an active role in the College of Nursing but who, as a result of his/her changed circumstances, no longer has a role, such faculty member may, at the discretion of the Dean be conferred his/her affiliate title with the additional modifier of "Retired".

Process for Appointment of Clinical Affiliate Faculty

Clinical affiliate faculty candidates will be nominated by a faculty member who will submit to the appropriate program administrator (eg: undergraduate or graduate assistant dean or PhD/DNP program director; associate dean for community outreach) a letter of support that highlights the contribution and/or potential ongoing contribution of the candidate using the criteria noted in the Appendix. The nominating faculty member will also include candidate's updated curriculum vitae and a candidate statement of intent that includes a description of current and/or envisioned faculty contribution. When the candidate has received the endorsement of the program administrator, the administrator will forward to the Office of the Dean the entire package (nomination letter; vita; letter/email of intent from the candidate) and the Dean's office will arrange for a background check. Upon receipt of an acceptable background check, the Dean's office will prepare the letter of appointment to an Affiliate Faculty position.

The applications for Affiliate faculty who are not designated for particular clinical roles may be processed differently. The request for appointment will be made to the chair of the Committee on Faculty by a faculty member who submits: a letter of support that highlights the contribution and/or potential ongoing contribution of the candidate; the candidate's updated curriculum vitae and a candidate statement of intent that includes a description of current and/or envisioned faculty contribution. The chair of the Committee on Faculty will forward the packet of

information to an appropriate faculty administrator/director (eg: Associate Dean for Research if this is a research-focused appointment). When the candidate has received the endorsement of the program administrator, s/he will notify the Chair of the Committee on Faculty in writing and the Chair will forward to the Office of the Dean the entire package (nomination letter; vita; letter/email of intent from the candidate). The Dean's office will arrange for a background check. Upon receipt of an acceptable background check, the Dean's office will prepare the letter of appointment to an Affiliate Faculty position.

Final responsibility for confirming the appointment and rank of new candidates to the Clinical Affiliate or Affiliate faculty resides with the Dean. The decision of the Dean is final in all appointment and promotion decisions involving Clinical Affiliate and Affiliate faculty.

Candidates will be appointed to the Clinical Affiliate or Affiliate faculty on the basis of their commitment to assist with teaching, collaborative research, academic service, and/or patient care for a particular role within the College of Nursing.

Appointments to the faculty may be made at any time during the University's fiscal year (July 1 to June 30). The effective date of the appointment will occur on the date of the candidate's acceptance of appointment after required information has been received and evaluated as appropriate for appointment. The term of appointment will be outlined in the initial appointment letter, ending on June 30th of the third year. Acceptance of an appointment to the Clinical Affiliate or Affiliate faculty carries with it the agreement by the faculty member to abide by the policies and procedures of the University and College of Nursing as per the faculty handbook. Faculty members will participate in faculty development programs as required by the college.

Reappointment to the Clinical Faculty

A record of reappointment time points for Affiliate Faculty will be maintained by the Office of the Dean and the Office will notify the Affiliate faculty member when the renewal date has occurred. When notified of a renewal time point, the Affiliate faculty member will initiate the reappointment process by submitting an updated vita to the appropriate oversight person who can evaluate his/her contribution. The oversight person will send an email to the Office of the Dean confirming the reappointment, attaching the updated vita and noting the contributions of the Affiliate faculty member. In addition to this sequence, evaluations and actions for reappointment or non-reappointment may be undertaken by the program administrator or the Dean at any time during the appointment. Reappointment is not automatic and is based on

continued contributions to the mission of the Department and the College of Nursing, and continued eligibility. Non-reappointment needs no justification.

For Clinical Affiliate and Affiliate faculty undergoing the required reappointment evaluation during their last year of service, the usual termination date is June 30. For those individuals reappointed to the clinical affiliate or affiliate faculty, their reappointment term will begin on July 1 of that year.

It is the responsibility of each member of the Clinical Affiliate and Affiliate faculty to maintain a current *curriculum vitae* on file with the appropriate Department; vita updates will be expected annually. During the reappointment process, nursing license information will be verified for licensed health professionals. **If licensure renewal occurs before the reappointment, the licensed person must submit updated information.**

Clinical Affiliate or Affiliate Instructor Appointment

The rank of Instructor is appropriate as an entry rank for candidates who are at the early stage of academic and/or clinical service, The rank of Assistant Professor signifies that the candidate has made or has the potential to make contributions to at least one of the focus areas of academic and/or clinical achievement that constitute the mission of the College of Nursing.

These are:

- teaching (at the nursing student and/or resident level; graduate students in the medically-related sciences)
- research/scholarship
- patient care and
- service (administration and/or community service)

Board certification is required for appointments to the rank of Clinical Affiliate Assistant Professor or to any higher rank as appropriate.

Clinical Affiliate or Affiliate Associate Professor Appointment

The rank of Associate Professor signifies that the candidate has made tangible contributions to at least one of the focus areas of academic and/or clinical achievement that constitute the mission of the College of Nursing (see above) and that the candidate has achieved regional recognition.

As Clinical Affiliate or Affiliate members of the faculty, Associate Professors will exhibit high levels of skill as educators and/or practitioners. They will contribute actively to the educational and/or clinical programs of the College of Nursing, and they will demonstrate the ability to stimulate students and trainees toward a scholarly approach to nursing practice. Such clinical

faculty members must provide high-quality patient care where applicable. **Clinical Affiliate or Affiliate Professor Appointment**

Professors will have achieved national and/or international recognition as outstanding teachers and/or clinicians. They will demonstrate efficiency in design, organization, and presentation of material, and continue to contribute to the formal teaching programs of the College of Nursing. They must demonstrate a more distinguished level of accomplishment and a longer record of academic involvement than an Associate Professor.

The Clinical Affiliate or Affiliate Professorial rank represents the highest rank that can be earned in the Professoriate for Affiliate Faculty. Scholarly presentations or publications of research and/or clinical accomplishments are standard for appointment to this rank.

Promotion of Clinical Affiliate and Affiliate Faculty

Following initial appointment, Clinical Affiliate and Affiliate faculty can request consideration for promotion in rank at any time. Promotions are limited to one rank above the current level at a time, and one promotion per individual per academic year. Faculty or leaders within the College of Nursing may also recommend a Clinical Affiliate or Affiliate Faculty member for promotion based on their contributions on behalf of the CON. Promotion decisions will follow the same process as decisions on appointment, with the initial recommendation on academic rank being provided by the program administrator overseeing the affiliate faculty member. The program administrator will review all requests and nominations for promotions and make a recommendation to the Dean. The Dean of the College of Nursing has responsibility for all final decisions involving promotions for Clinical Affiliate and Affiliate faculty.

Promotion of Clinical Affiliate and Affiliate faculty members is encouraged for those individuals who make sustained contributions to the mission of their Department and the College and meet the criteria for the promotion. Those contributions generally focus on teaching, research, academic service, and clinical and professional service.

The following are the core components of the material that is provided to the Faculty Affiliate applicant. :

1. Letter of recommendation (from an educational head of a department division, or course/clerkship/program director) speaking to the contributions of the candidate
2. Curriculum vitae (CV), including a full bibliography and list of all other achievements related to their faculty role
3. Evidence of activities, products or achievements commensurate with promotion rank as specified below.

Consideration for promotion in rank should take in to account whether the candidate meets the criteria for the rank as outlined in the initial appointment descriptions. Examples of criteria in the areas of teaching, scholarship/research, patient care/clinical service and professional service for each of the ranks are listed below. Candidates may be considered for their achievements in one particular area, or may have achieved criteria in multiple areas.

EXAMPLES OF PROMOTION CRITERIA FOR VARIOUS RANKS

Examples of Professional Activities and Achievements Considered for Promotion to Associate Professor

For Teaching:

- Sustained and substantial teaching contributions
- Developing significant educational and curricular materials (e.g. syllabi, curricular objectives, teaching cases, software)
- Developing significant evaluation techniques (e.g. examinations, surveys, software, standardized patients).
- Responsibility for design, organization, coordination and evaluation of a high quality course or series of lectures
- Developing and participating in teaching of major components of courses
- Significant contributions to educational administration, curriculum planning and development or analysis within the educational program (modules, electives)
- Developing or applying new or improved teaching methods
- Supervising or coordinating teaching by others (e.g. module/clerkship, residency program director)
- Supervising graduate students and participating in dissertation committees
- Inclusion of teaching materials or educational scholarship in a peer-reviewed venue
- Adoption of teaching materials or innovations by other faculty or institutions
- Invitations to present at regional, national or international meetings (including evaluations of the presentations)
- Consulting work provided to other nursing schools
- Securing program development funding
- Teaching effectiveness evidenced by mastery of both content and method, documented by student and faculty evaluations

- Participation in the development of texts or educational software
- Thesis or dissertation advisement of graduate students
- Receipt of teaching awards

For Scholarship/Research:

- Principal investigator or co-investigator of peer-reviewed, externally funded research grants (Research can be basic, clinical, health services, or quality improvement)
- Principal investigator or co-investigator of other funded research grants
- Publishing peer-reviewed articles in quality journals
- Presentation of findings at meetings and conferences
- Unsolicited invitations to present research findings at other institutions
- Leadership role in appropriate committees related to research Peer reviewer of manuscripts for journals as well as *ad hoc* editorial services to professional publications
- Officer of national/international scientific societies
- Election to membership or fellowship in prestigious scholarly societies, advisory groups or study sections
- Serving as examiner for recognized specialty board, or the equivalent
- Leadership of group developing local or regional clinical guidelines and/or membership of group developing national guidelines or equivalent activities
- Leadership of group developing local or regional health policy and/or membership of group developing national policy
- Patents or other evidence of acceptance of devices or procedures
- Service on national committees and task forces or review panels
- Effective participation in research training
- Serving as an exemplary clinical or research role model for trainees
- Receipt of scientific honors or research awards

For Patient Care/Clinical Services:

- A scholarly approach to patient care as demonstrated by: (a) Knowledge and/or use of current concepts and techniques, or development of new programs; (b) Dissemination of clinical knowledge at the regional or national level
- Development, implementation, and/or evaluation of innovative care programs and/or quality improvement programs
- Leadership role in committees or groups related to clinical services

- Evaluations of the candidate's clinical activities and performance by authorities in the candidate's field Responsibility for a clinical program
- Serving as an exemplary clinical role model for trainees
- Awards and other recognition as an outstanding regional clinician
- Publication of clinical observations, reviews, investigations, computer programs or contributions dealing with new clinical insights, improved methods of diagnosis and treatment and more effective delivery systems
- Recognition as an outstanding clinician as evidenced by a state-wide pattern of clinical referrals and/or reputation for clinical excellence,
- Recognition of superior clinical accomplishments as evidenced by being sought out for consultation by colleagues
- Holding leadership role in an affiliated hospital or health care organization, or recognized achievement on behalf of such an organization
- Membership or fellowship in elected professional organization that denotes a high level of clinical competency

For Professional Service

- Leadership and substantial contributions to committees and working groups of the College, University, and national/international groups
- Substantial administrative responsibility for program development
- A spokesperson for the College or University on areas of expertise
- A leadership role/chair of major committees of professional organizations on a regional basis
- Professional service to local, regional, state, or national associations or governmental units
- Serving as an effective mentor for junior faculty, or for students
- Serving on civic organizations concerned with health care issues at local, state, national, or international level

Examples of Professional Activities and Achievements Considered for Promotion to Professor

For Teaching:

- Responsibility for design, organization, coordination and evaluation of a high quality course or series of lectures

- Responsibility for successful curriculum innovation and design
- Writing or editing textbooks or equivalent resources adopted by other institutions
- Acting as an education consultant to national or international bodies or a reviewer for national grants in education
- Supervising an educational program for a national or international audience
- Developing a course, curricular materials, or evaluation resources/techniques that are used regionally, nationally or internationally
- Inclusion of teaching materials or educational scholarship in a peer-reviewed venue
- Data showing adoption of teaching materials by other faculty or institutions
- Invitations to present at regional, national or international meetings, including evaluations of the presentations
- List of institutions where the curriculum or innovation has been adopted
- Invitations to consult with other schools
- Securing program development funding
- Teaching effectiveness evidenced by mastery of both content and method, documented by student and faculty evaluations
- Innovation in teaching methods and production of texts, educational software or other software
- Thesis or dissertation advisement of graduate students
- Receipt of teaching awards

For Scholarship/Research:

- Principal investigator of peer-reviewed, externally funded research grants
- Principal investigator of other funded research grants
- Publishing peer-reviewed articles in quality journals
- Invited research presentations to other institutions, prestigious meetings, workshops, and other academic venues
- Service on national research committees and task forces
- Contributing editor or regular writer for a major scientific publication
- Member of an editorial board of a major scientific publication
- Officer of national/international scientific societies
- Significant contributions to the development of other scholars and researchers (evidence of mentoring must be provided to the mentees as well as from colleagues and the Department Chair)

- Election to membership or fellowship in prestigious scholarly societies, advisory groups or study sections
- Serving as examiner for recognized specialty board, or the equivalent
- Leadership of group developing local or regional clinical guidelines and/or membership of group developing national or international guidelines or equivalent activities
- Leadership of group developing local or regional health policy and/or membership of group developing national policy
- Leadership role in appropriate committees or groups related to research
- Patents or other evidence of acceptance of devices or procedures
- Receipt of scientific honors or research awards

For Patient Care/Clinical Services:

- A scholarly approach to patient care as demonstrated by: (a) Knowledge and/or use of current concepts and techniques, or development of new programs; (b) National dissemination of clinical knowledge at the national or international level
- Leadership role in appropriate committees or groups related to clinical services
- Evaluations of the candidate's clinical activities and performance by authorities in the candidate's field
- Responsibility for a major clinical program
- Clinical or public health consulting on a national or international basis
- Awards and other recognition as an outstanding clinician
- Recognition as a national leader in area of expertise
- Publication of clinical observations, reviews, investigations, computer programs or contributions dealing with new clinical insights, improved methods of diagnosis and treatment and more effective delivery systems
- Recognition as an outstanding clinician as evidenced by a state-wide pattern of clinical referrals and/or reputation for clinical excellence
- Recognition of superior clinical accomplishments as evidenced by being sought out for national or international consultation by colleagues
- Holding leadership role in an affiliated hospital or health care organization, or recognized achievement on behalf of such an organization
- Membership or fellowship in elected professional organization that denotes a high level of clinical competency
- Serving as an exemplary clinical role model for trainees

- Development, implementation, and/or evaluation of innovative care programs and/or quality improvement programs

For Professional Service

- Leadership and substantial contributions to committees and working groups of the College, University, and national/international groups
- Substantial administrative responsibility for major program development
- Service on a national or international committee or advisory group that substantially impacts/health/scientific issues
- Leadership role in state, national or international professional organization
- Significant contribution to national standards in area of expertise
- Serving as an effective mentor for junior faculty
- Provision of continuing and effective counseling and guidance services to students
- Serving on civic organizations concerned with health care issues at local, state, national, or international level.

Resources

- Alguire, P. C., DeWitt, D. E., Pinsky, L. E., Frenchick, G. S (2008). *Teaching in your office: A guide to instructing medical students and residents*. Second Edition. American College of Physicians: Philadelphia.
- Barker E. R. & Pittlan, O. (2010) Becoming a super preceptor: A practical guide to preceptorship in today's clinical climate. *Journal of American Academy of Nurse Practitioners*, 22, 144-149.
- Bartol, T. (2012). Precepting NP students" A win-win situation. *The American Journal for Nurse Practitioners*, 16(5/6), 18-19.
- Bott, G., Mohide, A., & Lawlor, Y. (2001). A clinical teaching technique for nurse preceptors: The five minute preceptor. *Journal of Professional Nursing*, 27(1), 355-42.
- Brooks, M. V. & Niederhauser, V. P. (2010). Preceptor expectations and issues with nurse practitioner clinical rotations. *Journal of American Academy of Nurse Practitioners*, 22, 573-579
- Burns, C, Beauchesne, M., Ryan-Krause, P., Sawin, K. (2006). Mastering the preceptor role: Challenges of clinical teaching. *Journal of Pediatric Health Care*, 20 (1), 72-183.
- Department of Health and Human Services (2011). Guidelines for Teaching Physicians, Interns, and Residents ICN 006347 Gerontological Advanced Practice Nurses Association. *Preceptor Toolkit*. www.GAPNA.org
- Latessa, R., Colvin, G., Beaty, N., Steiner, B., & Pathman, D. (2013). Satisfaction, motivation, and future of community preceptors: What are the current trends? *Academic Medicine*, 88, 1164–1170. doi:10.1097/ACM.0b013e31829a3689
- National Organization of Nurse Practitioner Faculties-NONPF (2005) *Partners in NP education: A Preceptor manual for NP programs, faculty, preceptors & students*. NONPF: Washington, DC.
- National Academies of Science, Engineering and Medicine (2010). *The Future of Nursing: Leading Change, advancing health*
- Sims, S.L., & Swenson, M. (2015). Module three: Preceptor guidelines (pp. III-1-III13). In *Partners in NP education: A preceptor manual for NP Programs, faculty, preceptors, & students* (2nd ed.). M.A. Dumas (Ed). Washington D.C.:The National Organization of Nurse Practitioner Faculties.
- Webb, J., Lopez, R.P., & Guarino, A.J. (2015). Incentives and barriers to precepting nurse practitioner students. *The Journal for Nurse Practitioners*, 11(8), 782-789. doi:10.1016/j.nurpra.2015.06.003

APPENDIX A

NURSE PRACTITIONER CORE COURSE DESCRIPTIONS

Advanced Health Assessment (NGR 6002) 2 credits. Focuses on advanced assessment; history-taking; risk appraisal; health promotion; psychosocial, developmental, functional assessment and physical examination techniques. Emphasis is on diagnostic reasoning skills in assessing deviations from normal.

Advanced Health Assessment Lab (NGR 6002L) 1 credit. Provides a lab experience for the study of advanced health assessment. It includes supervised experiences of advanced clinical assessment and physical diagnosis.

Advanced Nursing Practice Grounded in Caring (NGR 6110) 3 credits. Examines the philosophical and theoretical foundations of caring as the essential concept for nursing practice, research, administration and education. Major contributions to an understanding of caring from nursing as well as from humanities and science are surveyed. Emphasis on conceptualizations in nursing and philosophical literature. Students examine the implications of caring in relation to the use of multiple ways/patterns of knowing.

Advanced Pathophysiology (NGR 6141) 3 credits. Offers advanced study of human pathophysiology as it relates to the detection of disease and nurturing wholeness of individuals and families throughout the lifespan using nursing situations grounded in caring.

Advanced Pharmacotherapeutics (NGR 6172) 3 credits. Builds on foundational knowledge of the use of pharmacotherapeutic agents including complementary and alternative therapies. Focuses on the major drug categories for physiological systems with indications, therapeutic and adverse effects and drug interactions in individuals across the lifespan in the promotion, maintenance and restoration of health. Personal, genetic and environmental practice considerations are addressed.

Advanced Pharmacotherapeutics II (NGR 6176) 3 credits. This course builds on the principles of advanced pharmacotherapeutics and is designed to prepare advanced nursing practice students for their prescribing role as primary care providers. The focus is on the application of contemporary advanced drug knowledge and evidence-based decision making in the clinical setting for safe and effective prescribing across the life span.

Primary Care 1: Foundations of Advanced Nursing Practice (NGR 6200) 3 credits. Focuses on the foundational study of primary care across the lifespan using nursing situations in advanced practice grounding in caring science, including health promotion, disease prevention, assessment, diagnosis and management of common conditions in the primary care setting.

Primary Care 1 Practicum: Foundations of Advanced Nursing Practice (NGR 6200L) 3

credits. Allows students to integrate the foundational concepts of primary care in the practice settings to diagnose and manage common conditions across the lifespan. Development of the advanced practice nursing role utilizes nursing situations grounded in caring science and includes health promotion, disease prevention, ethical and evidenced-based practice.

Perspectives of Aging (NGR 6251) 3 credits (AGNP). Emphasizes knowledge of the aging experience as a foundation to the advanced nursing practice of adult/gerontological nursing with culturally, ethnically and economically diverse groups of older adults, grounded in caring science. Includes history of gerontological nursing and an appreciation of the uniqueness and beauty of aging and social gerontology theories.

Care of Children: Nursing Situations in Advance Practice (NGR 6301) 3 credits (FNP).

Focuses on the care of children from infancy through adolescence using nursing situations in advanced practice including health promotion, disease prevention, health protection, assessment, diagnosis and management of health in the primary care setting. Emphasizes an appreciation of the wholeness and uniqueness of the individual and family in relation to psychosocial, cultural, spiritual, developmental and political issues affecting the health and well-being of children.

Women's Health: Nursing Situations in Advanced Practice (NGR 6342) 3 credits. Focuses on the care of women using nursing situations in advanced practice including health promotion, disease prevention, assessment, diagnosis and management of common female and reproductive conditions across the lifespan. An appreciation of the wholeness and uniqueness of the individual and family in relation to psychosocial, cultural, spiritual, developmental and political issues is incorporated into strategies to enhance the health and well-being of women.

Primary Care 2: Foundations of Advanced Nursing Practice (NGR 6605) 3 credits.

Focuses on the expanding study of primary care across the lifespan using nursing situations in advanced practice grounded in caring science, including health promotion, disease prevention, assessment, diagnosis and management of more complex conditions in the primary care setting.

Primary Care 2 Practicum: Foundations of Advanced Nursing Practice (NGR 6605L) 3

credits. Allows students to integrate the foundational concepts of primary care in the practice setting to diagnose and manage common and complex conditions across the lifespan.

Development of the advanced practice nursing role utilizes nursing situations grounded in caring science and includes health promotion, disease prevention, ethical and evidenced-based practice.

Comprehensive Care of Adolescents through Older Adults (NGR 6607) 3 credits. Focuses on preparing AGNP students in the management of adolescents, adults and older adults and their families/caregivers in primary care settings across the continuum of care. Nursing situations grounded in caring are used to diagnose and manage complex health conditions. Prepares students for certification, practice management and professional engagement.

Comprehensive Care of Adolescents through Older Adults Practicum (NGR 6607L) 4 credits. Students prepare for comprehensive management of adolescents, adults and older adults and their families with specialized, complex health care in primary care settings across the continuum of care. Development of the advanced practice nursing role utilizes nursing situations grounded in caring science and includes health promotion, disease prevention and ethical- and evidence-based practice.

Primary Care of Families: Comprehensive Advanced Nursing Practice (NGR 6619) 3 credits. Family nurse practitioner students prepare for comprehensive management of primary care patients across the lifespan. Nursing situations grounded in caring are used to diagnose and manage common and complex health conditions in a variety of health care settings. Prepares students for certification, practice management and professional engagement.

Primary Care of Families Practicum (NGR 6619L) 4 credits. Prepares family nurse practitioner students for comprehensive management of primary care patients across the lifespan. Nursing situations grounded in caring are used to diagnose and manage common and complex health conditions in a variety of health care settings. Prepares students for certification, practice management and professional engagement.

Evaluation Key

0 = Unsatisfactory; minimal competence; Student omits key items even with prompting

1 = Satisfactory; needs **considerable supervision**: Student needs frequent prompting and role modeling to demonstrate necessary knowledge and skill in providing basic advanced nursing care.

2 = Satisfactory; needs **moderate direct supervision**: Student demonstrates broad knowledge and competency with minimal prompting or role modeling needed.

3 = Needs **minimal direct supervision**: Student is able to complete functions thoroughly, accurately, and efficiently with minimal guidance.

Student Progress

Primary One. Students in the first clinical semester are expected to be achieving scores of 1 and 2, as they are beginning to develop the knowledge and skill necessary for care at a basic level. During the semester, they should progress in ability to provide health promotion and disease prevention strategies for patients with less complex needs.

Primary Two. During semester two, students will increasingly be able to provide an orderly assessment. They should correctly identify the most important diagnostic testing as well as increase in the accuracy of diagnoses and management plans with patients experiencing moderately acute or chronic conditions

Primary Three. Students will be functioning with higher levels of autonomy and be able to care for patients with more complex needs.

DNP Residency. Students will be functioning with increasing autonomy and will need minimal oversight. Students will also be focusing on improving population health outcomes and refining leadership skills and interprofessional collaboration as they implement their DNP Project.

APPENDIX C

Student Evaluation of Preceptor FAU Christine E. Lynn College of Nursing

Circle Course: NGR 6200L, 6605L, 6619L, 6607L, 7945L

Student Name: _____

Preceptor

Name: _____

Site: _____

#Hours this semester with Preceptor:

Indicate your level of agreement with your preceptor's performance of each activity below. 1=Strongly Disagree 2=Disagree 3=Agree 4=Strongly Agree NA=Not applicable or no opportunity						
	Competency	1	2	3	3	N/A
1.	Discussed my objectives and reviewed times/dates for clinical experience.					
2.	Arranged adequate for orientation to the clinical site.					
3.	Provided opportunities appropriate to my learning level and needs.					
4.	Demonstrated adequate knowledge/ competence in his/her area of expertise					
5.	Allowed access to patient clinical records.					
6.	Assessed clinical performance and provided meaningful guidance regarding areas of improvement.					
7.	Provided guidance/ critique in a timely manner					
8.	Presented information in a clear, logical manner.					
9.	Effectively modeled professionalism and socialization into role the NP					
10.	Consulted with nursing faculty at time of site visit to assure my progress.					
11.	Actively sought educational opportunities for my learning needs.					
12.	Used stories/examples to bridge gap between knowledge and practice.					
13.	Integrated me into the work of the practice setting at an appropriate pace.					
14.	Exhibited cultural competence in interactions with clients and student					
15.	Likelihood of recommending this preceptor to other NP students.					

AdditionalComments _____

Student Signature: _____

Date _____

APPENDIX D
DNP Faculty Evaluation of Site

Student: _____

Date: _____

Name of Site: _____

Address: _____

Directions: _____

General Comments:

1. List ways this agency/individual provides effective clinical experience for students.

2. List areas in which this agency/individual needs improvement in order to provide optimal student learning.

3. Do you recommend this agency/individual for other students? ___ Yes ___ No
Why or why not?

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

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 and type of problem, etc?				
5. Are students allowed to select 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 support staff accepting of student's role?				
10. Is philosophy of site to provide:				
a. Health promotion & disease prevention?				
b. Disease diagnosis & management?				
c. Both?				
11. Are instructional materials available for clients to supplement their learning?				
12. Are community resources, other agencies. and professional disciplines involved with client welfare?				

