

DePaul University
School of Nursing
DNP Nursing Program, Nurse Practitioner Track
Preceptor, Student, and Faculty Responsibilities for DNP Program

Preceptor Responsibilities

The preceptor will provide a setting in which the student may see patients and gain experience in clinical practice.

1. Orientation

- a. The student should arrange to meet with the preceptor for orientation prior to the actual clinical experience.
- b. During initial orientation to the clinical setting, the preceptor should:
 - i. Communicate general guidelines to be used for preceptor/student interactions and for review and feedback of student performance.
 - ii. Review advanced practice procedural and management protocols specific to the setting.
 - iii. Review expectations for documentation. The preceptor should co-sign all records and orders written by the NP track student.
 - iv. Discuss overall plan for progression of student assignments in regard to number and complexity of patients.
 - v. Review student's previous learning experiences and clinical objectives to be accomplished.
 - vi. Encourage student to identify strengths and areas for continued professional growth.
 - vii. Perform initial assessment of student's current level of proficiency through observation of physical assessment skills, and through directed, guided questioning.
 - viii. Involve student in assessment/validation/decisions about learning strategies to be employed.
 - ix. Review clinical site educational and licensure documentation, parking, dress code, etc.
 - x. Negotiate a clinical schedule with the student. If the student will be absent on a scheduled clinical day, the student is responsible for notifying the preceptor prior to the designated time.
 - xi. Review other clinical site specific operational issues involved in the performance of advanced practice role responsibilities.

2. Clinical Supervision and Teaching

- a. Assess the competence of the student in providing care.
- b. Ensure that care provided by the student is consistent with standards set forth in clinical site policies, procedures, and advanced practice protocols.
- c. Direct the progression of student assignments in regard to complexity of care.

- d. Directly supervise the student in the performance of advanced practice role responsibilities. The student will require direct supervision until such time that the preceptor and the student deem it no longer necessary.
- e. Review the student's record documentation and make constructive suggestions for improvement. Students will sign all notations with their first name, last name, NP track student title, and school.
- f. Take time with the student to discuss specific learning objectives and experiences. These discussions should review:
 - i. The student's care management and documentation.
 - ii. Advanced practice skills attempted and completed.
 - iii. The student's comprehension of physiology as it relates to care.
 - iv. Intervention strategies, including rationale for treatment decisions.
 - v. The student's ability to communicate and collaborate effectively with preceptors, families, staff, and other health care professionals.
 - vi. Professional issues related to advanced practice role implementation.
 - vii. Plans for future learning experiences based on an assessment of the student's strengths and areas for continued professional growth.

3. Evaluation of Student Performance

- a. Assess student progress through a formal, written evaluation at the completion of the clinical experience.
- b. Inform the designated clinical faculty of concerns related to unsafe clinical practice by the student or if the student is identified as having difficulties in meeting the requirements of the preceptorship experience.

Student Responsibilities

Nurse Practitioner track students are responsible for being self-directed in identifying initial and ongoing learning needs, for seeking learning opportunities to meet identified needs, and for being accountable for their performance in the advanced practice nursing role.

The student should:

1. Complete all preceptor and/or agency agreements prior to the initiation of the clinical experience.
2. Discuss specific clinical objectives and negotiate a clinical schedule with the preceptor prior to the actual clinical experience.
3. Provide the clinical site with the necessary licensure, liability insurance, and educational information as requested. Submit a completed student profile to the preceptor and to faculty on or before the first clinical day.
4. Perform the advanced practice role under the supervision of the preceptor recognizing the limitations of educational preparation and complying with professional standards, clinical site policies, and advanced practice protocols.
5. Demonstrate professional role behaviors of an advanced practice nurse.

6. Demonstrate accountability for thoroughness and timeliness in completing assigned role responsibilities.
7. Demonstrate progressive independence and competency in the advanced practice role in accordance with his/her academic progression. Arrive at the clinical experience prepared to perform in accordance with assigned learning activities in accordance with the clinical course.
8. Actively seek input into the evaluation process and participate in self-evaluation of strengths and identified areas for professional growth with preceptor and designated faculty.
9. Contact faculty by phone or email if faculty assistance is necessary.
10. Respect the confidential nature of all information obtained during the clinical experience.
11. Complete clinical preceptor evaluation at the end of the clinical experience.
12. Adhere to all policies in the DePaul University School of Nursing Student Handbook for DNP students.

Designated Faculty Responsibilities

Faculty identify clinical learning objectives specific to the program, course, and learning needs of the students. They facilitate student achievement of these objectives through provision of didactic instruction, identification of appropriate clinical facilities and preceptors, observation and evaluation of students in the clinical setting, and establishment of close working relationships with preceptors.

The faculty should:

1. Identify and evaluate clinical sites for appropriateness of learning experiences.
2. Review the expectations for the students, the preceptor, and the faculty with the preceptor and pertinent personnel at the facility/agency.
3. Assure establishment of affiliation or preceptor agreements prior to initiation of clinical experience.
4. Review the policies of the agency to be followed by faculty and assigned students.
5. Act as counselor, consultant, and teacher. Responsible for providing immediate consultation and/or support of the preceptor when needs or problems are reported.
6. Serve as role model to demonstrate effective communication, leadership and clinical expertise.
7. Seek preceptor input regarding student's clinical performance and other clinical related activities.
8. Maintain communication with the preceptor/facility/agency and make clinical site visits as needed.
9. Encourage student to verbalize and demonstrate the use of theoretical frameworks and the application of relevant research for care and decision making.
10. Document the student's progress using clinical objectives for the specific quarter, and assign a pass/fail grade by the completion of the clinical experience.

Preceptor Teaching Tips

1. Avoid using the same teaching-learning approach for everyone.

Students learn in many ways. Some are visual, oral or written learners, some concrete and some abstract, and others are multidimensional. Recognize that your style of learning may be very different from the student's.

2. Spend some time to know your student.

Find out your student's talents, prior experiences, and learning needs. This information helps you know how to best guide the student. Knowing the student's current knowledge base and readiness to learn helps both of you know how much work you have ahead of you. This is essential to help the student see the gap between where they are and where they need to be.

3. Create a positive and safe learning environment

Students are more likely to take risks when the teacher creates a safe environment. Admitting what one doesn't know or making a wrong decision is an uncomfortable feeling for anyone. Allow students the opportunity to learn from their mistakes. Establish mutual trust, respect, and support.

4. Give frequent feedback along the way, not just at the end.

Students need to have information about their behavior and performance as they are learning. Focus on the performance, not the person. Involve the learner in the self evaluation process.

5. Share your passion for nursing and health care.

If the teacher has passion for the art and science of nursing and/or health care, the student is likely to catch it. You are teaching by example all of the time. Students learn as much from observing your behavior and communication of caring as they do from listening.

6. Repeat the important points.

Give the most important points more than once and in various ways. The first time something is stated it is heard and will be recognized, but it takes repetition and application to be learned. Repeat the important points!

7. Ask questions.

Learning requires exploring the unknown and considering ideas from a different perspective. The preceptor guides the student to seek a deeper understanding. For example, "how does that work?" "What would have happened if we had done exactly opposite of what you suggested?" You are teaching how to think.

Ask questions that encourage students to demonstrate the thinking process that led to the right answer.

8. Talk out loud about your decision making process.

Share your thought process that led to making decisions. Problem solving skills can be learned. Point out the factors in the clinical situation that guided your thinking.

9. You don't have to be perfect.

Acknowledging that you don't know something shows you are still learning. The student expects you to know the answers to most questions, but does not expect you to be perfect.

10. Sometimes "less is more".

Making one or two teaching points in a case may be better than trying to have the learner focus in on all possible learning points.

11. Break larger tasks into step by step skills.

Give feedback on the performance of each step of the process. Give rationale during demonstration. Allow active practice and repetition.

12. Be punctual, present, presentable, professional and personable, NOTperfect.

REFERENCES:

Myrick, F. and Yonge, O. (2002). Preceptor questioning and student critical thinking. *Journal of Professional Nursing*, 18 (3), 176-181.