



**California State University, San Marcos**

**School of Nursing**

**Preceptor Handbook**

**2011-2012**

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Dear Preceptor:

Thank you for your continued support and willingness to precept California State University San Marcos School of Nursing Students. Your expert guidance provides our students with an opportunity to apply their newly acquired clinical skills and knowledge in preparation in various roles within the nursing profession. As a busy professional with numerous demands and responsibilities, your commitment to this process is commendable and demonstrates your personal dedication to the continued development of qualified nursing professionals and the nursing profession, as a whole. Each student will gain confidence and validation through your exemplary teaching, coaching, and role modeling. It is difficult to imagine successfully preparing qualified professionals without the collaboration of our nursing colleagues!

Our preceptor handbook is intended to orient you to the preceptor courses and the School of Nursing. Please review the information enclosed in this handbook.

The faculty and staff at the School of Nursing value your service as an excellent clinician, clinical preceptor and welcome your recommendations for making this role more effective and satisfying. Please feel free to contact me or any faculty member if you have any questions or concerns.

Sincerely,

Denise Boren, PhD, RN  
Interim Director  
School of Nursing  
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## **SECTION I: INTRODUCTION TO THE SCHOOL OF NURSING**

### **History of the School of Nursing**

The School of Nursing at California State University, San Marcos was established in 2006. The University admitted its first Pre-Nursing Students in Fall 2005, and we admitted our first nursing cohort students in Fall 2006.

In Fall 2007, we began a partnership with Extended Learning, a division within the University which offers degree programs on a self-support basis. These Nursing Degree Programs are taught by the School of Nursing faculty, but are administered through Extended Learning. This partnership has expanded the opportunities for Nursing degree options at the University and for meeting the health care needs in the region for Baccalaureate and Master Degree Nurses.

The University graduated its first Nursing students in Spring 2009, representing graduates from the following Nursing programs: Generic/Basic BSN, LVN-to BSN, RN-to-BSN, and Accelerated BSN programs.

Additionally, the following Master of Science in Nursing (MSN) programs began being offered in Fall 2009. These programs are currently offered through Extended Learning: MSN specializations include the Clinical Nurse Specialist, Clinical Nurse Leader, Family Nurse Practitioner, Family Psychiatric Mental Health Nurse Practitioner, Advanced Public Health Nursing, Nursing Education, and the RN-to-MSN program.

### **School of Nursing Approval/Accreditation:**

The nursing program is approved by the California Board of Registered Nursing (BRN) and Commission on Collegiate Nursing Education (CCNE).

### **Nursing Programs Offered:**

The University offers the following Nursing Programs:

1. Generic/Basic BSN for the generic (basic) student
2. RN - BSN for the returning RN student
3. LVN - BSN for the LVN transfer student
4. LVN – RN 30 unit option
5. Accelerated BSN for students with a Bachelor's degree in a different discipline
6. MSN
7. RN to MSN

## **CSUSM Mission Statement**

California State University San Marcos focuses on the student as an active participant in the learning process. Students work closely with a faculty of active scholars and artists, whose commitment to sustained excellence in teaching, research, and community partnership enhances student learning. The university offers rigorous undergraduate and graduate programs distinguished by exemplary teaching, innovative curricula, and the application of new technologies. Cal State San Marcos provides a range of services that respond to the needs of a student body with diverse backgrounds, expanding student access to an excellent and affordable education. As a public university, California State University San Marcos grounds its mission in the public trust, alignment with regional needs, and sustained enrichment of the intellectual, civic, economic, and cultural life of our region and state.

## **School of Nursing Mission Statement**

The mission of faculty and the staff of the School of Nursing is to prepare students for a career in professional nursing that focuses on assisting patients/clients to achieve health or health-related goals and to transition from a disease-oriented to a health-oriented system of health care. Faculty assist students who acquire general knowledge from sciences and arts and specific knowledge and skills from nursing practice and theories and to assume nursing leadership roles. These professional nursing roles are practiced as a provider of care, teacher, advocate, coordinator of care, and member of the profession. Faculty articulate a philosophy of nursing in which nurses provide health care for culturally and ethnically diverse individuals, groups, families, and communities in hospitals, homes, and community-based settings. (SON Mission Statement, Adopted May 2006)

## **School of Nursing Philosophy**

The School of Nursing's philosophy is congruent with the mission of the University and Orem's conceptual model (Orem, D.E., 1995 *Nursing: Concepts of practice*, 5th Ed., St. Louis: Mosby), upon which the nursing curriculum is broadly based but utilizes an eclectic theoretical approach to link to practice. The philosophical statements about the person, environment, health, nursing, and nursing education are as follows:

### Philosophy of Person

The person may be defined as an individual, group, family or community and is the client recipient of health care. The focus of nursing is the client who possesses a set of self-care requirements related to health. This client either has the capability to initiate and perform self-care or needs the availability or access to assistance (dependent care) if the developmental stage or a disability interferes with maintenance of life, health, and/or well being. Individuals are bio-psycho-social-spiritual beings that are constantly interacting with a changing environment. They perceive and respond to actual or potential health problems in unique ways that are influenced by their age, gender, education, occupation, socialization, religion, health status, and cultural background. To make the best use of their capabilities and potentialities while fulfilling their role responsibilities, individuals strive for self-direction and relative independence. Only in a dependent state or an extreme state of helplessness is there justification for health care providers to make a decision for, rather than with, a client.

Aggregate clients are groups, families, and communities and they are sociological units, composed of interacting, interdependent parts or sub-units. A family is defined as an interacting system which is composed of two or more members who identify themselves as being a family based on a social

relationship. Groups and communities are defined as aggregates of individuals who share some important feature of their lives. Aggregates also strive for growth and are influenced by many factors, most notably, regional, developmental/historic, political, economic, and cultural factors. Moreover, they have potential and actual health problems.

### Philosophy of Environment

The concept of the environment is a central theme to the discipline and is reflected in its conceptual frameworks. The environment has physical, spatial, social and cultural aspects with intermingling boundaries in constant interaction with the person. The environment encompasses all external conditions and provides stimuli that influence life, development, and adaptation of the human organism. The constant interaction between the environment and the person yield, over time, specific individual patterns that affect a person's health. Nursing can influence the person's health through recognition and restructuring of harmful patterns.

### Philosophy of Health

Persons experience varying degrees of health and/or illness. Health and well being is conceptualized as a dynamic state of being with flexible parameters, modified by individual perception, choice and ability. Optimal health and well being is defined as a state in which self-care and dependent-care capabilities, actions, and role responsibilities are realized to the fullest extent possible. The maintenance of health is first and foremost an individual's responsibility through self-care actions. When the individual is unable to perform adequate self-care activities because of lack of knowledge, physical or cognitive condition, or dependent care status, a health care deviation exists. Nursing serves to restore or support self care abilities, thereby assisting the client to maintain, regain or restore health. Opportunity for growth and change is every person's right regardless of social or economic status, personal attributes, or the nature of the health problem.

### Philosophy of Nursing

Nursing has as a central focus the diagnosis and treatment of a client's responses to actual or potential health problems. Nursing diagnoses are actual or potential health problems within the scope of nursing practice for which the nurse can intervene. Actual health problems are existing health care deficits that produce specific and identifiable physical, experiential, and/or biochemical changes that are confirmed by medical diagnosis. Potential problems are situations, behaviors or conditions that predispose clients to health threats. Nursing is a health care profession which systematically assists clients to achieve health or health-related goals through the development and maintenance of self-care practices. Nursing utilizes evidence-based practice to guide clinical decisions and interventions. As an applied science, nursing utilizes theories from its own discipline as well as other sciences to explain phenomena encountered in client care and to provide rationale for and to explicate appropriate nursing interventions in particular situations. Theory and research are essential components in the advancement of nursing as a professional discipline.

A baccalaureate program in Nursing prepares generalists, who by utilizing a comprehensive approach to health care, can assist individuals, families, groups, and communities in meeting health related self-care needs. Generalists practice in a variety of health care settings, including the hospital or acute care settings, long term care settings such as rehabilitation and hospice and in assisted living environments. Nurses also practice in the community including community clinics, public health service sites, and home health and respite care settings. The essential roles of professional nursing are as a client advocate, teacher, provider of care, researcher, and as a practitioner who coordinates care and/or collaborates with other health professionals. In these roles and as a member of the profession, nurses

engage in making clinical judgments, in forming policy, and in the design and implementation of plans for the improvement of health care services. Members of the profession are expected to act responsibly, always mindful of the public trust. Self-regulation to assure quality in performance is at the heart of Nursing's relationship with society.

### Philosophy of Nursing Education

The School of Nursing is part of a university that resides in a community populated by people from multiple ethnic and cultural backgrounds. A goal of the nursing program will be to recruit a student population which is representative of the ethnic and cultural diversity in the local community and to prepare its students to serve the nursing needs of this culturally diverse society. Students, endowed with the capacity for self-direction, are ultimately responsible for their own learning and self-development. It is anticipated that students will vary in aptitude, learning style, motivation, cultural orientation and other individual differences. Assessment of these factors provides the faculty member a basis for the selection of the most appropriate teaching-learning strategies and for referral to the multiple campus resources and services available should the student have academic or personal issues needing support and/or assistance.

The foundation for understanding the self and others will be provided through a balanced program of arts and humanities, social and biological sciences and professional courses. Critical thinking will be developed through application of problem-solving methods in clinical practice where analysis includes the weighing of alternatives in selecting a course of action most likely to achieve the desired outcome. Essential to the preparation of the professional nurse is the development of communication skills, cultural competency, professional values, ethical principles, and the technical expertise in assessment and clinical intervention. Effective social interaction, therapeutic communication and mastery of the technical skills are among the fundamental aptitudes needed by the professional nurse. An essential component of comprehensive nursing care is a concentration on health promotion and disease prevention.

The role of the faculty member will be to serve as an instructor, role model, preceptor, resource person, motivator and facilitator. Faculty members will be expected to combine teaching with other professional activities such as ongoing clinical practice, scholarly publications and presentations and research. Establishment of partnerships with local health care agencies will promote the development of faculty practice opportunities, collaborative research projects and joint appointments. Through these joint appointments and other part-time faculty positions, expert nurse clinicians/practitioners will participate as faculty.

### **Goals of the Baccalaureate Program**

The primary goals of the baccalaureate nursing program are to prepare professional nurse generalists who collaborate with other members of the health care team, take leadership roles in providing care to individuals, families and groups in institutional and community settings, and establish the foundation for graduate education in nursing. The curriculum is designed to stimulate self-directed study, creative expression and understanding of self and others. Critical thinking, synthesis and application of concepts drawn from the arts and humanities, natural, social, and medical sciences, and personal and professional ethics and accountability will be stressed in the nursing program.

## **Program Objectives of the Baccalaureate in Nursing Degree**

The overall objective of the Bachelor of Science in Nursing will be to prepare students to become successful practicing nurses. This will be accomplished by assisting them to meet the following:

1. Apply theoretical and empirical knowledge from the science of nursing, the humanities, and the social, natural, and medical sciences, applicable to the practice of professional nursing at the generalist level.
2. Develop social, interpersonal, and technological skills which are essential to the profession of nursing for assessing the needs of an individual, family or group related to health care actions needed to promote and maintain health and well being.
3. Apply the nursing process through critical thinking and professional nursing judgment to provide and evaluate nursing care needed to sustain life, to recover from disease or injury, and cope with long-term effects in acute and long term care institutional and community settings.
4. Apply knowledge about the research process, its application to the discipline of nursing and the essential relationship of evidence-based nursing practice to clinical decision making and interventions.
5. Function within the specific nursing roles as a provider of care, a coordinator of care, a health educator, an advocate for individuals, families, groups, and communities, and as a member of the nursing profession.
6. Collaborate and consult as a member or as a leader of a health care team in the planning, implementation and improvement of health care services consistent with the health needs of an increasingly diverse and multicultural society.
7. Perform a self assessment of personal values, ethics, capabilities and limitations and accept responsibility for one's own professional nursing actions.
8. Develop a foundation for continuing personal and professional self-growth, development and lifelong learning and the necessary educational background to enable the pursuit of a higher degree in advanced nursing practice.
9. The ability to perform a self assessment of personal sociocultural values, ethics, and religious beliefs and evaluate how these factors correspond to those of one's own clients and professional nursing actions.
10. The ability to perform a cultural assessment for the purpose of operationalizing a culturally sensitive plan of nursing care for clients who differ from the nurse by virtue of race, culture and /or ethnicity.

## **Outcome Criteria of the Baccalaureate Program**

The program outcome criteria for the baccalaureate program have been developed to establish the parameters of measurable indicators of student success. The program outcome criteria include acquisition of content and clinical practice standards that are operationalized into five specific nursing roles suggested by the American Association of Colleges of Nursing (AACN) *Essentials of Baccalaureate Education for Professional Nursing Practice (January 1998; October 20, 2008)*. These nursing roles are provider of care, teacher, advocate, coordinator of care, and member of the nursing profession. Two levels of program outcome criteria have been developed based on these roles. Generic

students are expected to meet the Basic Practice Level (BPL) outcome criteria after successful completion of sophomore and junior level year generic nursing courses. Since these BPL outcome criteria represent a basic minimum level of competencies, RN transfer students are admitted to the program with the expectation that they are able to meet these, and in some cases, exceed these outcome criteria. This expectation is based on their prior educational experience and maturation as a result of their clinical practice.

The Summative Professional Level (SPL) outcome criteria reflect a level of competencies beyond the minimum level of competencies and represent a level of performance expected by a baccalaureate graduate nurse. These outcome criteria are consistent with the competencies of the baccalaureate nurse suggested by the AACN (*Essentials of Baccalaureate Education for Professional Nursing Practice, January 1998, October 2008*). Both generic and transfer RN students are expected to meet the SPL outcome criteria at the successful completion of specific senior nursing courses in the baccalaureate program.

Some of the program outcome criteria for the baccalaureate program will be summative and measured through the use of Level I and Level II evaluation tools to be administered by faculty at differing points in the curriculum. For both the basic/generic and accelerated BSN student, the first evaluation will occur at the successful conclusion of the last medical-surgical course - NURS 320/321 (generic BSN) and NURS 324/325 (accelerated BSN). At this point in the curriculum, the students will have completed all required BRN pre-license content except for leadership, management and delegation found in NURS 450/451. It is at this point that the Level I outcomes will be measured by faculty teaching these courses.

The second evaluation point will occur in the last semester of the program for both the generic and accelerated BSN students after the completion of NURS 440/445 (Level II Provider of care, teacher, and advocate) and NURS450 and 451(Level II coordinator of care and member of the profession). It is at this point that the Level II outcomes will be measured by faculty teaching these courses.

### **Level I: Basic Practice Level Outcome Criteria**

Given an individual or family with a common, well defined health care situation and limitation(s) in self-care ability, the student will:

#### As a Provider of Care

1. Demonstrate skills in physical assessment and obtaining a health history, utilization of written and verbal communication in planning and documenting patient care, and the provision of standard direct and indirect therapeutic nursing interventions.
2. Utilize the nursing process and research based knowledge to develop, implement and evaluate a plan of care, in cooperation with other members of the health care team, within structured health care delivery situations.
3. Perform nursing interventions that reflect critical thinking ability based on the ability to integrate concepts from biological, behavioral, natural, and nursing science to correctly identify client health deviations.

### As a Teacher

1. Demonstrate knowledge of basic principles of the teaching-learning process.
2. Identify client's learning needs, capabilities and limitations, select appropriate information, materials and strategies based on standardized teaching protocols, and evaluate and document outcomes relative to client education.
3. Demonstrate an understanding of how human behavior is influenced by culture, race, religion, gender, lifestyle and age and how these factors shape health care practices.

### As an Advocate

1. Provide culturally competent and sensitive care that is respectful of the client's privacy and preserves the client's confidentiality.
2. Identify rights and responsibilities of the client as health care consumer and supports fairness and non-discrimination in the delivery of care.
3. Participate in client care conferences communicating the client's needs and preferences to other health care providers.

### As a Coordinator of Care

1. Articulate one's own scope of practice as it relates to coordination of patient care
2. Identify the roles of other health care providers and communicate appropriately with them to facilitate optimum care.
3. Describe the relationship between standards of nursing care outcomes, quality assurance monitoring, and the provision of cost-effective services to clients.

### As a Member of the Profession

1. Demonstrate knowledge of the standards and scope of professional nursing practice and the role of major nursing organizations and regulatory bodies.
2. Develop personal goals for professional development and assess own capabilities and limitations, and accept accountability for one's own actions
3. Demonstrate understanding of the limits of one's own scope of practice and adhere to practice regulations.

### **Level II: Summative Professional Level Outcome Criteria**

Given a client (individual, family, group, aggregate or community) with a complex health care situation(s), at varying points on the health-illness disability continuum, across multiple settings, the student will:

### As a Provider of Care

1. Demonstrate the knowledge and skills to holistically evaluate client needs across the lifespan including a spiritual, cultural, social, cognitive and psychological assessment and a comprehensive physical examination.
2. Determine client capabilities for self-care and interpret and utilize quantitative data via a scientific process for problem solving to develop, implement and evaluate a plan of care in collaboration with the client and other health care providers which promotes maximum health and well-being.
3. Demonstrate the ability to use professional communication within the client-nurse relationship and mastery of core clinical skills and techniques required for the delivery of safe and competent nursing care.

### As a Teacher

1. Demonstrate the ability to comprehensively assess the predictive risk factors and the adequacy of an individual's health information that may influence the health and well being of a client.
2. Develop, implement and evaluate a comprehensive health education plan for a specific client that includes strategies for health promotion, risk reduction, and disease prevention across the life span.
3. Incorporate client strategies to recognize and manage the key physical and psychological symptoms related to disease states and/or the therapeutic regimen in the teaching plan.

### As an Advocate

1. Develop a plan of care in partnership with the client and their families and respect the right of the client to make decisions about health care but provide information so clients can make informed choices.
2. Inform clients of their rights and responsibilities as health care consumers continuously monitor their ability to exercise their rights and make decisions, and act as their spokesperson if needed.
3. Assume a leadership role by working with other health care professionals brokering and negotiating for client needs and preferences in keeping with the provision and delivery of the plan of care.

### As a Coordinator of Care

1. Design, coordinate, manage and evaluate the outcomes of nursing care for clients from vulnerable populations to maximize independence and quality of life.
2. Direct, organize and evaluate outcomes of care by other health care providers and secure appropriate community resources to provide cost-effective services.
3. Delegate and supervise the nursing care given to the client by others while retaining accountability for the quality of care within one's own scope of practice.

### As a Member of the Profession

1. Incorporate practice standards and accountability within the legal and ethical standards of the profession of nursing.
2. Negotiate and advocate for the role of the professional nurse as a member of the interdisciplinary health care team.
3. Participate in professional organizations to continue personal development and for the advancement of the profession.

## **SECTION II: PRECEPTOR PROGRAM**

### **Preceptor Policies and Procedures (based on California BRN Regulations for Preceptorial Learning Activities (Preceptorships))**

1. Definition: The Preceptor Program at California State University San Marcos (CSUSM) is a component of the Nursing Program that includes a teaching strategy designed to provide students with a learning experience that is guided by an experienced registered nurse who may also be an expert in his or her area of specialty.
2. Preceptors shall have an active and clear license as a Registered Nurse in the state of California and be employed by a CSUSM affiliated health care facility for at least one year.
  - a. For the BSN Program, a Preceptor shall be an RN with a Bachelor's of Science in Nursing and/or is highly experienced in the department assigned with demonstrated competence in customer relations/communication and clinical nursing skills. The preceptor is selected by the nurse manager and is willing and able to teach and serve as a role model for nursing students. He/she oversees the student's clinical practice in the facility. Along with the Nursing student, the Preceptor is responsible for the patients for whom the student and preceptor give care.
  - b. A relief preceptor, who meets the qualifications specified by CSUSM Nursing Department, shall be scheduled on the designated preceptor's off days.
    - i. To ensure continuity of the student's preceptored learning experience.
    - ii. To ensure that a preceptor is present and available on the patient care unit at all times while the student is providing patient care/nursing services.
  - c. Preceptors must complete the CSUSM Nursing Program preceptor orientation prior to serving as a preceptor.
3. Students shall be enrolled in the designated CSUSM NURS course in which he/she is assigned to a preceptor and will not be compensated by the clinical facility where the clinical rotation occurs.
4. The Preceptor Program files shall be housed in the Nursing Department office and includes the following information for the designated semester/year assigned:
  - a. Dates of preceptorship
  - b. Preceptor names
  - c. Preceptors' licensure as RN in California
  - d. Preceptor responsibilities (as designated by the assigned course)

## 5. Preceptorship

- a. The course syllabus shall serve as the written plan for preceptor course; it will provide objectives, evaluation rubrics, and student performance expectations to serve as guidelines for the preceptor.
- b. The syllabus is kept on file in the Nursing Department for the following courses:
  - i. NURS 451
  - ii. NURS 491
  - iii. NURS 493
  - iv. NURS 495
- c. The Preceptor Handbook shall provide guidelines regarding role and responsibilities of Nursing faculty (Course Coordinator, Clinical Instructor), Preceptor, Student are delineated in the Preceptor Handbook
- d. Selection of Preceptors
  - i. A preceptor is an experienced registered nurse, employed by a clinical facility affiliated with CSUSM, assigned to assist and supervise CSUSM nursing students as during educational experiences that are designed and directed by a CSUSM faculty member. At a minimum, the preceptor must meet the requirements for a clinical teaching assistant as described in CA BRN regulations Section 1425(f).
  - ii. As part of the affiliation agreement to assist with student learning experiences, each CSUSM affiliated clinical facility identifies preceptors based on the BRN regulation Section 1425(f).
- e. Faculty/Student ratio shall not exceed 1:12 for undergraduate courses.
- f. Orientation Plan – The Preceptor Orientation shall consist of completion of CSUSM online preceptor module or CSUSM-approved affiliated clinical facility preceptor training program. The Preceptor Orientation will include:
  - i. Overview of CSUSM Nursing Program
  - ii. Purpose of Preceptor Program
  - iii. Responsibilities of Nursing faculty (Course Coordinator, Clinical Instructor), Preceptor, Student (graduate or undergraduate)
  - iv. Frequency and method of faculty/preceptor/student contact during preceptorship
    1. Phone/Email contact with Clinical Instructor ongoing and as needed.
    2. Scheduling of In-Person Student/Preceptor/Faculty Conferences:
      - a. Beginning of Semester
      - b. Midterm
      - c. End of Semester
  - v. Faculty availability during perceptorial learning activities – faculty shall be readily available to the preceptor and student during the entire semester that the student is assigned to a preceptor for clinical learning experiences.
    1. Clinical Faculty
      - a. Clinical Faculty shall available by phone as well as rounds at facility (on-site a minimum of 10 hours per week).
    2. Course Coordinator – available to be contacted by phone or email as needed.
  - vi. Communication Plan during preceptorship
    1. The Clinical Instructor shall periodically meet with the Preceptor and student to monitor progress of the student’s learning experiences.
    2. The Clinical Instructor meets with the Course Coordinator and other members of the course teaching team (other clinical instructors) at least three times each semester; and more as needed to communicate progress of the learning experience and preceptor input/feedback.

vii. Student Evaluation:

1. The syllabus and clinical evaluation forms serve as resources for conveying student performance requirements and course evaluation criteria.
  2. The Preceptor provides input into evaluation of the Nursing student's performance to aid in determining if the student's abilities meet or fail to meet the course evaluation criteria.
  3. The Clinical Instructor, with input from the preceptor for supportive evidence of ratings, shall be responsible for the final evaluation of the student.
6. Ongoing Evaluation of Preceptor Program
- a. Preceptor evaluation of course - courses are evaluated each semester by the assigned preceptors.
  - b. Student evaluation of preceptor - each semester nursing students evaluate their assigned preceptors, as ongoing evaluation for continued use.
  - c. Faculty evaluation of preceptor – Faculty will regularly review preceptor performance via evaluation input from students and faculty, as ongoing evaluation for continued use.

### **Student Professional Standards in Clinical Practice**

Professional standards are to be maintained. A student who demonstrates unprofessional behavior or behavior which indicates unsafe practice or improper classroom behavior (online and in person) may be denied progression or may be dismissed from the program. Criteria are:

#### **Safety**

1. Demonstrates safe clinical performance skills.
2. Notifies the instructor or agency immediately if an error has been made or safety has been violated.
3. Protects the patient from environmental hazards and provides for the safety of the patient, self, and others.

#### **Personal/Professional Accountability**

1. Consistently takes initiative in seeking faculty consultation and supervision.
2. Seeks assistance in aspects of patient assessment in which student lacks confidence or skills.
3. Communicates online and in person, in a manner which maintains and promotes professional relationships with co-workers, patients, staff faculty and adjunct educators.
4. Communicates important patient problems identified during the clinical experience to the appropriate persons accurately and without delay.
5. Performs all clinical assignments or informs the instructor of inability to do so in adequate time or with the required level of competence.
6. Recognizes and assumes responsibility for the consequences of own actions.
7. Demonstrates organizational skills and priority setting appropriate to the clinical setting.
8. Assumes responsibility for attempting to identify and organize data for problem-solving.
9. Exhibits decision-making and leadership skills appropriate for an independently functioning professional.
10. Demonstrates judgment appropriate for an independently functioning professional.
11. Demonstrates professional conduct at all times while performing clinical assignment (non-professional conduct includes use of abusive language, substance abuse — alcohol and drugs, and other behavior indicating loss of emotional control).

12. Demonstrates honesty at all times.
13. Reports to the agency prepared for assignment on time and dressed appropriately (hair and clothes clean and appropriate for the assignment).
14. Notifies appropriate persons of absences or when late in arriving for clinical experience.
15. Demonstrates ethical behavior as outlined in the ANA Code of Ethics (2001).
16. Provides services with respect for human dignity and the uniqueness of the client, unrestricted by consideration of social or economic status, personal attributes, or the nature of the health problem.
17. Safeguards the client's right to privacy by judiciously protecting information of a confidential nature.
18. Acts to safeguard the client and the public when health care and safety are affected by the incompetent, unethical or illegal practice of any person.

The student is expected to meet all clinical assignments and to arrive on time. The instructor, who becomes aware of a student failing to meet one or more clinical objectives, will notify the student immediately.

### **Admission to Clinical Labs**

Prior to the admission to the clinical laboratory experience the following items must be on file with the School of Nursing who will verify the currency and completeness of the record to the clinical agencies.

- Proof of student malpractice insurance (\$1,000,000. per occurrence and \$3,000,000.), which is currently being provided by the CSU Chancellor's Office.
- Proof of current health insurance
- Annual negative TB skin test and if converted, follow CDC guidelines for x-ray
- Evidence of required immunity to tetanus/diphtheria or titer; mumps or titer; measles or titer; rubella or titer; rubeola or titer; varicella zoster or titer; & hepatitis B or titer. Proof of annual flu immunization or signed declination form. Immunizations and vaccinations are available for minimal fees at the Student Health Center or they may be completed through the student's personal health care provider.
- Current and appropriate CPR certification for the healthcare provider BLS with AED.
- All students must complete HIPAA training. This must be done prior to admission to the clinical setting. Information concerning access to the HIPAA module and other agency specific requirements will be provided during the first day of orientation.
- With all clinical lab experiences, you are expected to be professional and maintain confidentiality on all personal and sensitive information obtained in this course. This includes, but is not limited to, avoiding discussions that would allow others to identify the subject of the information and removing patient names from course papers/class assignments. To discuss patient information in a student forum, you may use initials or a name that is not the patients. Failure to protect the privacy of others may have serious repercussions and is a violation of the Health Information Protection and Privacy Act (HIPAA). There is more discussion on this subject in the handbook section entitled "Professional Standards in Clinical Practice".
- Due to recent changes in requirements by health care agencies, all nursing students must have a criminal background check and urine drug screen completed. Positive findings may result in denial of clinical placement by some health care agencies.

- Additional content on infection control and universal precautions, abuse reporting, and waste disposal may be required.

## **CSUSM Preceptor Online Training Module**

Thank you for offering to be a preceptor for a California State University San Marcos nursing student. This training module will begin to answer some questions by providing information about what the California State University San Marcos preceptorship is and by providing you with guidelines in developing your role of nurse preceptor.

### Instructions

The School of Nursing is using web based content to help you prepare for the clinical preceptorship experience. Please log on to the following website:

<http://ca-hwi.org/udtv.cfm?i=13>

1. Read and consider the objectives. If you prefer, you may download this training into a pdf file and review in a hard copy format.
2. You will notice that each module uses the same outline-
  - a. **Discover** - includes learning objectives
  - b. **Read** - the content being considered
  - c. **Explore** - relevant books, articles and websites for more information
  - d. **Apply** - suggestions for ways to bring the principles into practice
  - e. **Measure** - a brief post test
3. Take the post test.
4. Complete the CSUSM Preceptor Training verification form via

<https://www.surveymoz.com/s3/628177/CSUSMPreceptorTraining>

## **Becoming an Expert Preceptor**

By the end of this module you should be able to:

1. Describe your role as a preceptor as it relates to your home hospital, the nursing program and the nursing profession as a whole.
2. Describe the roles, responsibilities and formal expectations in the preceptor/preceptee relationship.
3. Describe the attributes of a preceptor as role model.
4. Describe the challenges associated with the transition from student to novice nurse.
4. List six characteristics of adult learners.
5. Apply strategies to facilitate socialization of the student into the work environment and foster critical thinking.

The intent of this learning experience is to clarify roles and formalize the process of mentoring a student about to graduate into the workplace. As a preceptor you will be demonstrating the values of your agency and serving as a role model in the range of behaviors that will be expected from future nurses. By completing the modules, you will be provided with the basics of precepting as well as acquiring practical information and suggestions on how to help the student develop the knowledge, skills, and attributes necessary to successfully transition from the school to work environment.

Because you have agreed to participate as a preceptor, we know that you are committed, enthusiastic, and desirous of guiding and taking responsibility for the student's learning experience. We hope that in being recognized by your employer, the college, and your preceptee, that this experience will enrich you as well by renewing your sense of professional pride and personal accomplishment.

## **Tips for the Preceptor**

### How Can I Best Help the Student?

As the preceptor, you are the main source of experienced information for the student. It is not uncommon for you to want to explain everything there is to know about the patients, procedures, medications, patient care systems, etc. In addition to role modeling nursing practice for the student, to maximize the learning experience, here are some tips of what you can use.

- Be patient, patient, patient. What seems like logical sense for the experienced nurse, can be quite a challenge for students.
- Keep your hands behind your back and lips sealed. Allow the student to make the decisions as you watch. Only if they proceed in an unsafe manner jump in.
- Use guided questioning with the student, allowing the student to give rationale for actions. Talk the students through decisions and procedures but ask them "what do you think you should do? After they answer, ask them for a rationale. This helps them with their critical thinking ability. Even though it puts them on the spot, in the long run they will benefit.
- Make the students use their brains, don't be too quick to give them the answers (unless it is a life-threatening situation)
- Seek clinical skills they can perform based on their skills check-list. Not all students have had the opportunity to perform nursing procedures for a while.
- Encourage the student to communicate patient status and needs with the physician
- Have the student give the verbal report to the next nurse.
- Provide plenty of verbal feedback, both positive and negative. Most students want to be told if they have done it wrong.
- Complete the student evaluation; the evaluation is a written report of student performance. It will be used in conjunction with the student's self-evaluation, the instructor's evaluation, and other assignments to determine the final grade. (see attachment)
- Have fun and relax, you have a senior Nursing student who is eager to assist you during the semester!

**APPENDIX I**  
**Preceptorship Agreement**  
**Statement of Understanding between Student, Faculty Coordinator, and Agency/Preceptor**

This memorandum sets forth the provision of understanding between the student, California State University, San Marcos faculty coordinator, and agency/preceptor with respect to participation in the course. Students may perform numerous skills including medication administration with BRN approval after they have met agency or the School of Nursing requirements for such administration.

**I. Responsibilities of the Clinical Faculty Coordinator**

The clinical faculty coordinator shall:

1. Assume direct responsibility for coordinating the Program and will serve as a liaison between the School of Nursing and the clinical agency.
2. Secure and evaluate clinical placements for the Program.
3. Assure that students are eligible for the program and verify that registration of students.
4. Ensure that each student assigned to an agency is covered by student's professional liability insurance.
5. Visit or contact the agency at least once during the experience to monitor the student's progress.
6. Maintain proper records on student's work schedule and evaluation reports.
7. Review the student's progress with the preceptor during the semester and at the final evaluation for consideration of rewarding Credit (CR) or noncredit (NC) grade.
8. Conduct class meeting at the beginning of the semester to go over course requirements/
9. Communicate on a regular basis with the clinical agency to provide necessary information for the effective and efficient administration of the program,
10. Review student journals in a timely manner and give feedback.

**II. Responsibilities of the Clinical Agency/Preceptor**

**The clinical agency shall:**

1. Assign students to medical/surgical nursing units and ensure that they are oriented and always working under the supervision of a Registered Nurse.
2. Ensure that student responsibilities will be commensurate with student level of competence as indicated in the School of Nursing Skills Inventory and within policies of the clinical agency. At no time are students to be assigned nursing responsibilities and functions, which are beyond the scope of their abilities.

3. Have the right, after consultation with the faculty coordinator, to discontinue any student who in the agency's judgment is not performing satisfactorily.

**The clinical agency preceptor shall:**

1. Serve as a role model for the student. The preceptor serves as a resource person, consultant, and teacher.
2. Work collaboratively with the student and the faculty to achieve optimal learning experience for the student.
3. Give the student specific and constructive feedback about performance during the semester.
4. Evaluate student's performance and discuss the performance appraisal with the student and faculty coordinator utilizing "Evaluation Student Skills" form.
5. Participate in the student's final evaluation by completing student evaluation tool.  
Please note: The University does not provide financial remuneration to the preceptor.
6. Communicate with the faculty coordinator to discuss issues, problems and suggestions for the effective and efficient administration of the program.
7. Provide a copy of certificate of Preceptor Course at agency or complete the designated Clinical Preceptor Course approved by CSUSM, School of Nursing.

**III. Responsibilities of the Student**

**The student shall:**

1. Follow all of the policies of the agency as well as the policies of the School of Nursing.
2. Keep faculty informed of scheduled clinical hours prior to their occurrence.
3. Ensure that all immunizations, other medical requirements such as TB testing and CPR training are current.
4. Work at least 12 – 16 hours a week on a schedule arranged between agency, student, and faculty coordinator and always under the supervision of an R.N.
5. Maintain professional liability insurance and private medical insurance. Students are responsible for any skill implemented, therefore students must review skills learned in the nursing programs.
6. Perform nursing skills and procedures that are stipulated on the School of Nursing Skills Inventory. At no time are students to perform skills that they have not been previously taught nor accept nursing responsibilities that are beyond the scope of their abilities.
7. Attend mandatory class meeting at the beginning of the semester and complete ATI testing.

8. Consult regularly with preceptor and faculty to determine progress and to discuss any problems or concerns arising during the work experience.
9. Participate in the performance evaluation at the end of the work experience.
10. Submit agency's evaluation report and any other progress reports required by the faculty coordinator.
11. Communicate with faculty coordinator regarding any problems, issues, or suggestions regarding the work experiences.

Clinical Agency:

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Clinical Agency Personnel or Preceptor Name/Signature	Phone	Date
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Student Name/Signature	(student phone)	Date
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CSUSM Faculty Name/Signature	Phone	Date
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**APPENDIX II**  
**Preceptorship Evaluation**  
**Student Self Evaluation Form**

This questionnaire will be kept confidential by the faculty coordinator at CSUSM and will not be seen by the agency personnel (RN, Manager, etc.). Information provided in this questionnaire will not affect the CR/NCR grade you receive for the course. However, you can lose credit if you do not turn this in. Please provide the best and most honest response.

Student Name \_\_\_\_\_

1. How many other courses did you take this session?  
\_\_\_\_\_

2. Other than the preceptorship experience were you working during this session? Yes \_\_\_\_  
No \_\_\_\_

If yes, how many hours were you working? \_\_\_\_\_  
What type of work were you doing? \_\_\_\_\_

3. Have you ever been employed at the agency where you had your preceptorship experience?  
Yes \_\_\_\_ No \_\_\_\_

If yes, when were you employed and what was your job?  
\_\_\_\_\_

4. For the preceptorship experience, what hospital were you assigned to? \_\_\_\_\_

5. What was your unit assignment and what type of patients did you care for? \_\_\_\_\_  
\_\_\_\_\_

6. Did you get assigned to other units, if so, which were they? \_\_\_\_\_  
\_\_\_\_\_

7. What shift(s) did your work? \_\_\_\_\_

8. How many patients, on the average, were you assigned to care for?  
The least number? \_\_\_\_ The greatest number? \_\_\_\_

9. Who was your main preceptor? \_\_\_\_\_

10. Did you always have the same preceptor? Yes \_\_\_\_ No \_\_\_\_

11. If you took the medication test given by the hospital, did you pass the first time you took it?  
Yes \_\_\_\_ No \_\_\_\_

12. How long was the orientation you received, if any? Please explain. \_\_\_\_\_  
\_\_\_\_\_

13. Did you feel that the orientation was sufficient to prepare you for safe performance on the unit? Yes \_\_\_ No \_\_\_  
If no, what should have been included to make it better?

Please rate each statement from extremely helpful to not at all helpful.

		Extremely Helpful	Very Helpful	Somewhat Helpful	Not Helpful
14.	My clinical preceptor was	_____	_____	_____	_____
15.	In general, the hospital staff was	_____	_____	_____	_____
16.	This experience improved my clinical competency	_____	_____	_____	_____
17.	This experience improved my Nursing knowledge	_____	_____	_____	_____
18.	This experience improved my organizational skills	_____	_____	_____	_____
19,	I found this experience to be	_____	_____	_____	_____
20.	Describe your positive experiences:				
21.	Describe your negative experiences:				
22.	What would you eliminate or change about this experience?				

**APPENDIX III**  
**Preceptorship**  
**Preceptor Evaluation Form (To Be Completed By Preceptor)**

Student's Name \_\_\_\_\_ Agency \_\_\_\_\_ Semester/year \_\_\_\_\_

Preceptor's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Instructions: The purpose of this preceptor evaluation is to permit CSUSM School of Nursing to evaluate and refine the educational experience. In addition, the information will provide an evaluation of the performance by the student assigned to the preceptor for determining credit.

Please consider each question and give your honest response by circling the appropriate selection. Please rate the following statements from Poor (1) to Excellent (5)

**STUDENT EVALUATION**

	Poor 1	Fair 2	Average 3	Very Good 4	Excellent 5
1. Rate the students' communication skills and use of the chain of command in communicating patient/family needs to members of the healthcare team.	1	2	3	4	5
2. Interacts professionally and demonstrates confidence in providing nursing care in the acute care setting.	1	2	3	4	5
3. Administers safe and competent nursing care.	1	2	3	4	5
4. Performs clinical skills independently within hospital policy requiring minimal assistance from the preceptor	1	2	3	4	5
5. Demonstrates the ability to organize and prioritize patient care needs.	1	2	3	4	5
6. How many patients on the average were assigned to the student? The least number ? _____ The greatest number? _____ Comments:					

## PRECEPTOR EVALUATION

The following section is provided for your feedback about the preceptorship experience. Please feel free to give examples and negative aspects of this experience. Suggestions for improvement and what was valuable to you as well as what you would delete or change.

1. Was the information provided to you prior to the experience to determine your role as a preceptor and what was expected from the student?  
Yes \_\_\_\_ No \_\_\_\_

Comments:

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2. What were the things about this precepting experience, which you felt, were positive? \_\_\_\_\_

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3. What were the things about this precepting experience, which you felt, were negative? \_\_\_\_\_

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4. What suggestions do you have for improvement? \_\_\_\_\_

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**APPENDIX IV**  
**Preceptorship Journal Log**

Student \_\_\_\_\_ Log # \_\_\_\_\_

**(A) Problematic patient/family or staff situation:**

**(B) Personal Reactions/Thoughts/Feelings:**

**(C) Resolution and Learning:**

**California State University, San Marcos  
 Verification of Student Work Hours  
 (To Be Completed by Student & Signed by Preceptor)**

Student: \_\_\_\_\_ Course Number: \_\_\_\_\_  
 Semester/ Dates: \_\_\_\_\_  
 Instructor: \_\_\_\_\_ Agency/Unit \_\_\_\_\_  
 \_\_\_\_\_ Preceptor \_\_\_\_\_

Date of Shift Worked										
Shift Hours (7-3, 7-7, 8-4, 3-11, 11-7)										
Hours Completed										
Documentation with Preceptor's Initials										

Preceptor(s) Name, Title, Initials:

Name	Title	Initials
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Name	Title	Initials
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## APPENDIX VI

### Preceptor Profile

Profile needs to be updated annually. If preceptor has completed this form during this school year, only complete the top part of the form regarding name, unit and contact information.

Preceptor Name \_\_\_\_\_

Agency/Hospital Name \_\_\_\_\_

Unit Position Title \_\_\_\_\_

Email address \_\_\_\_\_

Phone Number: Work \_\_\_\_\_

Home/cell \_\_\_\_\_ (optional-based on preceptor's preferred means of communication with faculty)

Education:

Nursing Degree/Certificate (circle one)      Graduation Date      School \_\_\_\_\_

Diploma

Associate Degree

BSN

Masters

Nurse Practitioner

Doctoral Degree : PhD DNS, DNP

Other \_\_\_\_\_

Clinical Experience: (past 5 years)

Dates                      Institution                      Position Title \_\_\_\_\_

Training for preceptor role: Circle one of the following  
CSUSM Course                      On the job training

Preceptor Class(es)

Number of years as a preceptor \_\_\_\_\_ ; # of years precepting student nurses \_\_\_\_\_

Dates Precepting for CSUSM this school year:

School year \_\_\_\_\_

Circle the sessions precepting: fall                  spring                  summer

\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

Course Number \_\_\_\_\_



**APPENDIX VII**  
California State University San Marcos – School of Nursing  
**COMPLETED ONLINE AT END OF PRECEPTORSHIP**

Nursing Student Evaluation of Preceptor

Preceptor Name: \_\_\_\_\_ Hospital: \_\_\_\_\_ Unit: \_\_\_\_\_  
 Student Name: \_\_\_\_\_  
 Dates of clinical rotation: \_\_\_\_\_

In order to provide preceptors with helpful feedback, please complete the following evaluation by circling your response. If you had more than one preceptor, please complete one form for each preceptor with whom you worked for 2 or more shifts.

RESPONSES: 5=Always 4=Usually 3=Occasionally 2=Rarely 1=Never NA=not applicable

1. Identified (with me) my goals for the day.	5	4	3	2	1	NA
2. Assessed my skill level before introducing new learning experiences	5	4	3	2	1	NA
3. Provided instructional guidance	5	4	3	2	1	NA
4. Provided feedback (positive & negative) about my work throughout the day.	5	4	3	2	1	NA
5. Is sensitive about when and where feedback is given.	5	4	3	2	1	NA
6. Raised challenging questions/ issues for discussion.	5	4	3	2	1	NA
7. Encouraged me to think for myself.	5	4	3	2	1	NA
8. Promoted an atmosphere conducive to learning.	5	4	3	2	1	NA
9. Pointed out location of appropriate resources (ie helped me find equipment, unit ref manuals ...)	5	4	3	2	1	NA
10. Is an effective teacher.	5	4	3	2	1	NA
11. Reflected an enthusiastic attitude toward clinical nursing.	5	4	3	2	1	NA
12. Seemed concerned about my progress and was actively helpful	5	4	3	2	1	NA
13. Provides adequate support, and is available to me.	5	4	3	2	1	NA
14. Is a professional role model.						NA
15. Provides up to date current knowledge of unit and specialty area.	5	4	3	2	1	NA

Please provide comments on what was:

- a) Most helpful about my preceptor's instruction:
  
- b) Least helpful about my preceptor's instruction: