

Nurse Practitioner Practicum Handbook for

Family and Adult/Gerontology Students

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STATEMENT OF FACULTY REVIEW

Graduate faculty review this Handbook at the beginning of each semester. Changes are made in the Handbook at the discretion of the faculty. Students are expected to comply with the guidelines in the Handbook that is current each semester.

ARTICLE I: NP CLINICAL PRACTICUM EXPERIENCE

Section A: Overview of Clinical Practicum Experience

The goal of the nurse practitioner clinical practicum experience is to engage students in varied, quality clinical experiences in primary care settings. Clinical practicum experiences are embedded in primary care courses (90 hours each) and a final practicum of 360 hours designed to provide a synthesis experience for the student.

Students must complete a total of 630 practicum hours in primary care in addition to 45 clinical hours in Health Assessment to meet the requirements for graduation. The expectation is that students will progress from requiring close supervision in the first practicum experience to seeing a schedule of clients independently with their preceptor's support by the end of their last clinical class.

Section B: Requirements for Clinical Practicum Experience

In order to maintain the highest standards possible, Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences instituted a Background Check and Drug Screening policy to help protect public safety. For more information see the Beth-El Background Check Policy below.

All students participating in a laboratory, clinical, practicum or residency course will be required to submit data for a certified background check and drug screen, at their expense. Each student has access to his or her own confidential results. Should there be a positive background check finding, or a positive drug screen finding, the Nursing Department Chair will determine if the student is eligible to participate in the Program. Eligibility is based on the nature of the finding as well as clinical site requirements.

In addition to the Background Check and Drug Screen the following documents must be submitted and be up to date for the student to participate in the clinical practicum experience. In the event the following documents are not submitted or up to date, the student is not allowed to start clinical hours or is removed from the practicum until all documents are updated. All documents must be uploaded into Medatrax the semester before starting your clinical practicum experience.

Students must submit and maintain the following documents in Medatrax:

- 1. RN license (current copy throughout the program)
- 2. CPR certification-BLS level provider course through American Heart Association or the American Red Cross for Health Care Workers. The card must be current when beginning clinical hours. If the card expires during the semester the student is responsible to renew CPR in order to continue with clinical hours. Any on-line CPR course must include a hands-on skill assessment. Students cannot submit an ACLS card as a substitute for CPR since some ACLS courses no longer review CPR as part of the course.
- 1. Proof of personal health Insurance
- 2. Immunization Records Required
 - a. Dates for two MMR immunizations or documentation of positive titers of ALL three diseases.
 - b. Dates of three shot series of Hepatitis B series or titer demonstrating immunity.
 - c. Date of last Tetanus which must be within the past 10 years.
 - d. Proof of one pertussis vaccination as an adult
 - e. Dates of two Varicella immunizations or titer demonstrating immunity
 - f. Date and result of annual TB Test. If a student has had a positive PPD a copy of the last chest x-ray report is needed. If a student is unable to take PPD, a copy of QuantiFERON® can be substituted for the PPD. Annual TB testing is required.
 - g. Current annual flu vaccine is required.
 - h. Proof of COVID vaccine

It is the responsibility of the student to enter the above documents into Medatrax, the electronic tracking system that maintains clinical and evaluation data for students doing practicum hours.

Section C: Expectations for the Clinical Practicum

The following sections list the general expectations for the clinical practicum experience. If you have questions about the clinical practicum that are not answered in this handbook, please contact the Practicum Coordinator: Denise Ostovich at mostovic@uccs.edu or (719) 255-4473. Students are required to complete 630 practicum hours, **NOT** including Health Assessment clinical hours, to graduate.

- 1. Students may not do more than 270 clinical hours with the same preceptor or site unless the site is a major health care system with different types of clinics. This allows students to have experiences in a variety of settings.
- 2. Forty-five clinical hours in the clinical setting=1 credit hour.
- 3. Students should expect an on-site visit or phone visit during each clinical course. For students that are in distant sites, a phone site visit with the preceptor may be done. Site visitors do not visit students in multiple sites during the same semester. Additional site visits to students are at the discretion of the lead faculty and/or site visitor.
- 4. Students who have a Site Visitor as their Preceptor may or may not have a site visit completed during a particular semester.
- 5. Telephone calls, or email contact will be made with preceptors who are working with students who are in practicum experiences that are distant from Colorado Springs.

- 6. Preceptors can be NPs, MDs, DOs, or PAs who are licensed in the state where the student is completing clinical hours. Military healthcare providers must be licensed in a state regardless of where they are assigned.
- 7. Each student is required to spend a minimum of 200 hours with a nurse practitioner during their clinical practicum experience. The rationale for this is to help the NP student appreciate the nuances of the NP role and to meet the requirements for certification by the American Nurse Credentialing Center or the American Association of Nurse Practitioners.
- 8. Students conducting telehealth visits during their clinical experience may only count 45 clinical hours of these visits during the entire program. All students must complete the telehealth tutorial found in each clinical class prior to participating in telehealth visits.
- 9. Students who are unable to complete all of the clinical practicum hours that they registered for or fail to log clinical hours and/or patients in a given semester may request an incomplete grade for their clinical course. Students must also be passing their didactic class to be given an incomplete and are expected to complete the remainder of the clinical hours and documentation during the following semester. If a student has an incomplete and is entering a non-clinical course the semester following the incomplete, the student may not be allowed to take the non-clinical class until the incomplete is cleared if the incomplete course is a prerequisite to the non-clinical class. If a student has completed all courses but not all clinical hours, the student will be required to register for a 1 credit Independent Study to complete the clinical hours. Be aware that completing these clinical hours in the following semester may potentially delay the expected graduation date. Students requesting an incomplete grade must notify the lead faculty of the course and Denise Ostovich, Practicum Coordinator explaining why they could not complete their clinical hours. Students may not enter NURS 6980 Synthesis Practicum with an incomplete in any of the primary care courses NURS 6915/6925/6900/6950.
- 10. Student must "clear" their incomplete within one calendar year or the incomplete will be become a failing grade.
- 11. It is the Graduate Program policy that students may drop a class only <u>one</u> time and then they may not drop that course again. For classes with a final exam, students must drop the course prior to the final exam.
- 12. Students who have a grade of B- or less for two classes during their graduate work will be dismissed from the program.
- 13. Students who have taken NURS 6730 or any additional clinical course may be required to do remediation at the option coordinators discretion if they have been on a leave of absence or out of the clinical setting for more than one semester.

Practice Experience Expectations

1st PRACTICUM COURSE

- Gathers comprehensive health history and accurately performs evaluation appropriate to chief complaint.
- Begins to develop differential diagnoses for the presenting problem
- Offers beginning suggestions for evidence-based interventions and referrals for presenting problem
- Demonstrates use of practice guidelines and other resources in the care of the patient

• Begins to demonstrate critical thinking in clinical decision-making and adjusts interventions based on outcomes

2nd PRACTICUM COURSE

- Develops and analyzes appropriate differential diagnoses for presenting problem while prioritizing care
- Incorporates the roles of provider, educator, consultant, administrator, and researcher in NP role as appropriate and articulates role to public and other health care professionals
- Begins to independently suggest evidence-based non-pharmacologic and pharmacologic interventions for acute and chronic conditions.
- Demonstrates critical thinking in clinical decision-making and adjusts interventions based on outcomes
- Participates in clinical discussions and contributes relevant knowledge of recent research

3rd PRACTICUM COURSE

- Independently suggests evidence-based non pharmacologic and pharmacologic interventions for presenting problem
- Begins to assist patient in adapting to acute/chronic conditions by developing an understanding of the patient's lifestyle, personal beliefs and priorities
- Provides effective learning environment for patient-based on assessment of patient's knowledge base, readiness to learn, patient's developmental and emotional level and motivation
- Uses community assessment information to evaluate client needs, initiate referrals, and coordinate care when applicable
- Manages patient care and refers to specialty services as appropriate within the existing heath care delivery system

FINAL PRACTICUM COURSE

- Independently develops and analyzes appropriate differential diagnoses for presenting problem while prioritizing care
- Assesses, diagnoses, monitors, coordinates, and manages the health/illness status of patients over a period of time when applicable
- Demonstrates skills in negotiating, consensus building and partnering with health care team members
- Understands basic business and management strategies to function as manager for the provision of quality care and efficient use of resources.
- Monitors quality of care via self, peer and quality assurance methods

Section D: Attendance at Clinical Practicum

If a student has to be absent for a scheduled clinical day, due to illness or emergency, the preceptor should be notified prior to the beginning of that clinical day. Prior to beginning any clinical rotation, students should identify the procedure for contacting the preceptor in case of absence. It is the student's responsibility to also notify the faculty, Practicum Coordinator, and site visitor, if applicable, of

the absence and then negotiate with the preceptor regarding make-up time. Students are expected to schedule clinical time with the preceptor consistent with the preceptor's availability/schedule.

Section E: Professional Behavior & Dress at Clinical Practicum

Students are expected to dress appropriately and behave in a professional manner at all times in keeping with the standards set forth by Occupational Safety and Health Administration (OSHA). School insignia and /or student identification badges must be worn, as designated by the policies of the University of Colorado Colorado Springs and Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences Graduate Student Policies.

Because of the professional expectations of students in clinical sites it is expected that students respond promptly to communication from faculty, site visitors and or preceptor. It is imperative that students conduct themselves in a professional manner.

Students should verify with the office manager within the site if there is a specific dress code and may wear attire that is consistent with the clinical site. Most office dress is business casual with or without lab coats. If lab coats are needed, students are required to supply their own lab coat. Scrub clothes are not appropriate attire during clinical hours, unless required by the clinical site. Avoid strong scented lotions and perfumes.

Instructions for obtaining student badges will be sent to students prior to NURS 6730, the Advanced Health Assessment course. Post Master's students not taking NURS 6730 will receive instructions prior to their first clinical rotation. While in clinical and signing charts and forms, student should sign their first and last name followed by designation as FNP/AGNP student. Students should not use RN after their name or other NP initials as it implies that the student is assuming care for the patient.

Students who have an issue with a preceptor or clinical site need to follow protocol to address the issue. The first person to speak with is the professor in your class. If that is not possible the Clinical Practicum Coordinator is the next person who can discuss the problem. If a resolution cannot be made, the Clinical Practicum Coordinator will discuss the situation with the Associate Chair of the Department of Nursing and the Department Chair as necessary.

Students MAY NOT directly confront or communicate with a preceptor in a caustic manner.

ARTICLE II: CLINICAL COURSES

Several courses in the curriculum include a practicum component with the DIDACTIC portion. These courses include:

- 1. NURS 6730 Advanced Health Assessment
- 2. NURS 6900 Primary Care of Pediatric Patients and Their Families
- 3. NURS 6915 Primary Care of Adults with Acute Health Conditions and Their families
- 4. NURS 6925 Primary Care of Adults with Chronic Health Conditions and Their Families
- 5. NURS 6950 Primary Care of the Geriatric Patients and Their Families
- 6. NURS 6980 Synthesis Practicum
- 7. NURS 6982 Pre-Synthesis (not on all degree plans)

Section A: Student Objectives for Practicum

1. NURS 6730 Advanced Health Assessment

This class is considered a lab course even though clinical hours may be done in an actual clinical setting.

- a. Gather comprehensive or interval health history from patient and/or family
- b. Review Medical Record
- c. Conduct physical examination utilizing techniques appropriate for comprehensive and /or focused examinations. Prioritize presenting patient problems and clinical findings.
- d. Present findings to preceptor in an organized, concise manner
- e. Complete accurate and legible SOAP note documentation
- f. Maintain patient confidentiality

2. NURS 6900/6015/6925/6950/6982 Primary Care Courses

- a. Improve use of time and resources
- b. Increase efficiency in obtaining focused history and physical examination
- c. Develop broader differential diagnoses
- d. Identify diagnostic test(s) if relevant to presenting problem
- e. Identify evidenced-based interventions
- f. Utilize appropriate referrals and practice guidelines in the care of the patient
- g. Develop greater depth and breadth of clinical knowledge
- h. Improve ability to prioritize and coordinate care

3. NURS 6980 Synthesis Practicum (with didactic)

- a. Perform all role functions in an efficient, organized, and independent manner
- b. Demonstrate an understanding of nurse practitioner role
- c. Engage in interdisciplinary collaboration and consultation

Section B: Overview for NP Clinical Practicum Courses

1. Clinical Practicum Hours for FNP Students

a.	NURS 6730 Advanced Health Assessment (not included in 630 hrs)	45 hours
b.	NURS 6900 Primary Care of Pediatrics and Their Families	90 hours
c.	NURS 6915 Primary Care of Adults with Acute Health Conditions	90 hours
d.	NURS 6925 Primary Care of Adults with Chronic Health Conditions	90 hours
e.	NURS 6982 Pre-Synthesis	45-90 hours
f.	NURS 6980 Synthesis Practicum	360 hours

2. Clinical Practicum Hours for <u>Adult/Gerontology Students</u>

a.	NURS 6730 Advanced Health Assessment (not included in 630 hrs)	45 hours
b.	NURS 6915 Primary Care of Adults with Acute Health Conditions	90 hours
c.	NURS 6925 Primary Care of Adults with Chronic Health Conditions	90 hours
d.	NURS 6950 Primary Care of Geriatric Patients	90 hours
e.	NURS 6982 Pre-Synthesis	45-90 hours
f.	NURS 6980 Synthesis Practicum	360 hours

3. This Program prepares students to work as Primary Care Advanced Practice Nurses therefore clinical hours are to be done in primary care settings. Family Practice, Pediatric and Internal Medicine settings will provide opportunities for the majority of clinical experiences. Students may not do clinical hours in a hospital setting or round on patients in a hospital setting as these hours will not count toward the required hours. Students may contact Denise Ostovich, Clinical Site Coordinator, at 719-255-4473 or by email at mostovic@uccs.edu with questions about clinical sites.

Prior to planning clinical experiences outside of Colorado, it is imperative that the student check with the College's Department of Nursing regarding any changes in state regulations centered on clinical hours in specific states. These changes can occur at any time by any state. Students need to stay abreast of changes in regulations that can affect their clinical placement decisions.

Students need to be aware that relocating from the state of residence at the time of acceptance into the graduate nursing program may prohibit a student from completing their course of study or obtaining a NP license in a new state because of state restrictions. These restrictions apply to both a didactic course and a clinical course requiring clinical practice hours.

4. Course Overviews

- a. NURS 6730- 45 hours in a primary care setting, emphasizing health history and assessment skill development. (No ED, Urgent Care, SNF, Specialty Clinics)
- b. **NURS 6900- 90 hours of pediatric care in a primary care setting**, focusing on developmental assessment, acute and chronic disease recognition, and management and health maintenance of the pediatric patient.
- c. **NURS 6915- 90 hours in a primary care setting**, concentration on acute, episodic problems and health maintenance of the adult client.
- d. **NURS 6925- 90 hours in a primary care setting,** concentration on chronic disease states, treatment, and management of the adult population.
- e. **NURS 6950- 90 hours in a geriatric setting**, applying gero-pharmacology content to clinical decision-making for pharmacologic treatments, integrating facets of comprehensive geriatric assessment into routine office visits and utilizing current clinical guidelines for health promotion with older adults and management of common acute and chronic health conditions utilizing current guidelines for management. Also addressing elder maltreatment and implementing processes in support of advanced care directives.
- f. **NURS 6982 45-90 hours in a primary care setting,** concentration on acute/chronic, problems and health maintenance of the pediatric or adult clients.
- g. **NURS 6980- 360 hours in a primary care setting**, concentrating on refining skills, developing clinical decision-making, gaining experience working with patients and in the NP role within the student's particular option. This course also has a didactic component.

5. Options of settings outside Primary Care

- a. Students are required to complete a minimum of 30 hours addressing women's health care issues (gynecological and breast problems) and no more than 45 hours. These hours MAY be completed in a primary care setting or women's health clinic during any clinical rotation/practicum.
- b. It is also recommended that students have 30 hours experience working with patients with mental health issues. These hours many times are completed during your primary care rotation. However, if you would like to do them in a mental health clinic they can only be done in synthesis and will be counted towards specialty.
- c. Students in their second, third, or Synthesis Practicum rotations MAY complete up to 90 hours in an Urgent Care. This does not include the Emergency Room or Fast-Track in a hospital ER. Students may do 90 additional hours during the Synthesis Practicum course in an Urgent Care setting for a total of 180 hours.
- d. FNP students are encouraged to do 45 hours in Assisted Living/Long-Term Care during the Synthesis Practicum class. Students in the FNP option may also do 45 hours in hospice/palliative care also during the Synthesis Practicum class. These hours do not count as "specialty" hours for either of these clinical sites.
- e. Students in the Adult/Gerontology track MAY complete up to 90 hours in an assisted living/skilled nursing facility either in NURS 6950 or the Synthesis Practicum class, NURS 6980. In addition, students may complete 45 hours of hospice/palliative care (out- patient only) during the NURS 6950 course.
- f. Synthesis Practicum students MAY complete up to 90 hours total in approved specialty clinics. Student can do 3 thirty-hour rotations, 2 forty-five-hour rotations or 90 hours in one specialty area. For any specialty rotation, a minimum of 30 clinical hours will be required. The approved specialty clinics include: Dermatology, Orthopedics, Interventional Pain Management, Palliative Care (out-patient only), Allergy/Immunology, and Cardiology. Other specialty clinics may be approved on a case by case basis. Adult/Gero students may do 45 hours of hospice/palliative care (out-patient only) if not done in NURS 6950. Adult/Gero students may also do 45 hours in adult pulmonology during the Synthesis class in lieu of the other listed specialties.
- g. Students beginning Synthesis in the summer may **not** select specialty options for clinical hours for the summer semester.
- h. Students may NOT do clinical hours in an in-patient setting.

Section C: Requirements for Primary Care Courses

Each primary care course will require the student to do clinical practicum hours. Faculty will require the student to reflect on clinical objectives that the student will attempt to meet during the semester with clinical practicum experiences. These are different from objectives for the course.

- a. Contact a preceptor and arrange to work with the preceptor in their clinical setting. Hours will vary depending on the course the student in taking.
- b. Complete the Clinical Site Information Sheet for each clinical site. A copy of this form is sent to every clinical student at the start of the semester.

- c. Ensure that all requirements for the Clinical Practicum Experience (Refer to Article I-Section B) are up to date.
- d. Develop a list of clinical goals that are measurable.

ARTICLE III: PREPARING FOR PRACTICUM

Section A: Guidelines for Setting-Up a Practicum Rotation

This section will briefly outline strategies to help students in finding and setting up clinical practicum rotations.

Students are expected to participate in finding preceptors who are willing to work with students and facilitate their practicum experience. It requires students to start looking for a preceptor well in advance of the beginning of a clinical course at least one semester prior to the semester when the clinical hours are needed.

Preceptors need a minimum of 2 years experiences prior to having a student. They must also have obtained full prescriptive authority.

Questions or concerns about clinical sites should be directed to the Clinical Practicum Coordinator, Denise Ostovich at mostovic@uccs.edu or by phone at 719-255-4473.

RESTRICTIONS

In order to maintain contractual agreements with certain agencies, it is imperative that students follow specific guidelines to access clinical hours in these agencies. Students interested in doing clinical hours at **Military sites** are approved on a case by case basis by the Clinical Practicum Coordinator.

Students seeking preceptors within many of the area Health Care systems may contact a preceptor. If the preceptor agrees, the student must forward a **completed clinical site sheet** to Shannon Clark for processing. Many placements are requested through My Clinical Exchange (mCE). Once the site is approved, the student will then receive instructions and a login to load specific information and documents into mCE. There is a nominal annual fee paid by the student for this access.

Finding a preceptor may occur in several ways:

- a. Talk to a physician, nurse practitioner, or physician assistant that you know about the possibility of being a preceptor, at least 3 to 6 months before you plan to start your practicum course.
- b. Consult other students who have completed clinical rotations in the program and in programs in your area.
- c. Contact and participate in the advanced practice group in your area.
- d. Contact Schools/Colleges of Nursing Faculty in your state.
- e. Lists of sites with clinical education agreements in place cannot be given to students. The Clinical Site Coordinator can be contacted for assistance.
- f. Denver Health and Centura many restrict allowing only employees to use preceptors in their clinics or only allow students from select Universities to use their clinics.

*Students may not use family (by blood or marriage) or close friends as preceptors. Likewise, students may not do clinical hours within the setting where they work or where family members work.

Students also may not use a clinical practice where they are seen as a patient.

Students may not do more than 270 hours with the same preceptor or the same site. The intent is that students have a wide range of exposure to different preceptors and different sites.

Students may "bank" up to 45 clinical hours in primary care, internal medicine, pediatrics and women's health. Hours can be banked in any clinical class after NURS 6730. These hours can only be counted in the last semester of synthesis NURS 6980. You must reach out to Denise Ostovich, Clinical Practicum Coordinator, at 719-255-4473 or by email at mostovic@uccs.edu to get prior approval before banking.

State Residency and Admitted students

You have been admitted to the UCCS program as a resident of the state in which you resided at the time of your application. If you plan to move to a different state while in the program, or do any practicum hours in a different state, it is your responsibility to check the list of approved states for the UCCS program to be sure you can continue in the Program in a different state.

Temporarily Going Out of Home State to Complete Hours

If you plan to do clinical hours in a different state you must contact the Clinical Practicum Coordinator, Denise Ostovich for approval. Students may only do hours in states listed on the College web site. If the state is a compact state, you must hold a multi-state license and follow the state guidelines for the length of time you can practice in that state prior to needing a specific state license in that state. If the state is not a compact state, you must hold an active RN nursing license in that state where you plan to do clinical hours.

Permission to begin hours

Student may not begin clinical hours at a clinical site until the contract with the agency is signed and returned and the preceptor letter is signed and returned. **These are legal documents**. Any clinical hours done without these two documents completed and returned to the Graduate Nursing office will **NOT** be counted in your required number of clinical hours. Shannon Clark, the Graduate Program Assistant, manages these documents and will notify students by email that the student is **"good to go"**. It is imperative that students read and follow instructions in emails from Shannon Clark regarding clinical hours.

Section B: Suggested Clinical Sites

Since this Program is a Primary Care Program, clinical hours need to be done in out-patient settings. Family Practice and Internal Medicine sites are excellent for clinical experience in primary care. Student Health Services on college campuses also offer an opportunity particularly for NURS 6915 Primary Care Acute Health Conditions early in your clinical experiences. Health clinics in businesses or manufacturing sites also may provide clinical opportunities. Faith Based clinics, Community Health clinics and sites within the Department of Corrections also offer good clinical experiences.

Section C: Clinical Education Agreement/Clinical Site Sheet

A fully executed clinical education agreement, the legal contract and a signed preceptor agreement letter for every health care agency is required for each student rotation. Clinical education agreements and preceptor letters are legal documents produced and tracked by the Nursing Department. These documents are generated by the Graduate Nursing Department after a completed clinical site sheet is received by Shannon Clark, Program Assistant. At times, there may be legal issues that need to be resolved before an agreement can be signed by UCCS and the health care agency. This may slow down the process of completing the agreement. It often takes 6 to 8 weeks to accomplish the contract if legal issues are involved. Occasionally the legal issue cannot be resolved, and the site cannot be used by the student.

It is important to get the complete and correct information requested to Shannon Clark, Program Assistant, sclark6@uccs.edu earlier than the semester before your practicum experience will start whenever possible. Once you have contacted a potential preceptor and she/he has agreed to be your preceptor:

- a. Complete the Clinical Site Information Sheet that was sent at the beginning of the semester. These forms sometimes change so it is imperative to use the one that was sent at the beginning of the semester.
- b. The Clinical site Sheet is completed by the student and does **not** need to be signed by the preceptor or office manager of the site.
- c. A Clinical Site Information Sheet is required for each site and each preceptor includes the exact number of hours to be done at the site. Ranges of hours will not be approved. This must be done every semester for each clinical site. If multiple preceptors are used at the same site, the number of hours with each preceptor needs to be included.
- d. Forms need to be completely filled out with correct information in every area.
- e. Forms with incorrect or incomplete information will be returned to the student for the correction of errors thus delaying the process of getting the clinical experience set up.
- f. Completed Clinical Site Information Sheets should be submitted to Shannon Clark at sclark6@uccs.edu or by fax (719)255-4496.
- g. Any questions regarding clinical agreements should be directed to Shannon Clark, the Graduate Program Assistant.
- h. Each clinical site must be approved by the Clinical Practicum Coordinator. Questions regarding suitability of sites should be directed to the Clinical Practicum Coordinator.
- 2. Important information regarding Clinical Education Agreements:
 - a. The Clinical Site Information Sheet is used to create the Clinical Education Agreement and must be completed before the Practicum Education can be started.
 - b. The student may <u>not</u> begin any clinical hours until the Agreement and the signed preceptor letter are returned to the College of Nursing.
 - c. The student will be notified by Shannon Clark by email when the clinical agreement process has been initiated and again when it is completed.
 - d. Students are notified by Shannon Clark by email when clinical hours can be started.
 - e. Students **cannot** do clinical hours prior to the start of the semester nor during time between semesters due to professional liability and Workmen's Compensation requirements.

- f. Students may only do clinical hours when registered for a course during fall, spring or summer semesters.
- g. Students are responsible for verifying their start status with their site <u>before</u> beginning any clinical hours.
- h. Any clinical hours done without the proper signed preceptor letter, site clearance, and compliance items posted will not count as part of the required hours for the course. Also, any clinical hours greater than 16 hours done with a preceptor other that the preceptor listed on the processed clinical site sheet will not count for the required hours if no clinical site sheet for that preceptor has been submitted. Students may NOT do any clinical hours while paperwork is being processed.
- i. The information from the Clinical Site Sheet is provided to the Clinical Practicum Coordinator.

Section D. Documentation of Clinical Experiences

- a. Students are expected to keep a log of clinical activity. The intent of the log is to have a record of the types of patients, ages of patients and management plans for patients seen.
- Medatrax is the electronic tracking system that is used by the College for a clinical log.
 Information about signing up for Medatrax is included in the course syllabi for those classes requiring Medatrax use.
- c. Student must log all patients using the patient icon in Medatrax. Failure to correctly enter the Medatrax system will necessitate an incomplete grade in a course until the information is correctly entered in Medatrax.
- d. Based on which clinical course the student is in, the following **minimum** number of patient encounters are a guideline:
 - 1. First clinical course 75 patients for the semester
 - 2. Second clinical course 90 patients for the semester
 - 3. Third clinical course 125 patient for the semester
 - 4. Synthesis practicum the equivalent of 2 patients/hour
- e. Students will log their clinical hours within Medatrax, documenting diagnosis codes (ICD-10), treatments, medications ordered and briefly the overall plan of care.
- f. The documentation in the clinical log needs to include a brief note to include presenting symptoms, diagnosis, diagnostics, and plan of care.
- g. Samples of the necessary documentation are shown in the Medatrax power point sent to student prior to their first clinical course and in the Canvas course "Graduate Practicum Resources".
- h. Demographic information will be requested by the system.
- Reports can be prepared by Medatrax for a student profile summarizing the types and ages of
 patients that have been seen. However, diagnosis codes must be included in the clinical log to
 run this report. There is a fee for the profile by Medatrax.
- j. In addition to the clinical log, Medatrax is used to complete all evaluations by the student, preceptors, and site visitors.

ARTICLE IV: CLINICAL PRACTICUM EVALUATION

Students will be evaluated by several different individuals during their clinical practicum rotations. Preceptors will be evaluating the student's performance and progress. Site visitors who are University Faculty will also help to assess how the student is progressing in their knowledge, experience, critical thinking, and clinical management. The grade for the clinical practicum is based on these evaluations and on other assignments related to the role of the APRN by the Faculty. (See Appendix A). Students not performing at the expected level of competence based on which clinical rotation or not meeting the clinical expectations of the course will fail the course and it will need to be repeated. Repeating the course also includes repeating the clinical hours. If this failure is the second failure for the student, the student will be dismissed from the program.

Section A: Medatrax

- 1. All evaluations will be completed through the Medatrax system.
- Students are responsible for loading preceptor evaluations in Medatrax each semester. Students
 may contact the Clinical Practicum Coordinator, Denise Ostovich at mostovic@uccs.edu
 (719) 255-4473 for questions regarding loading evaluations in Medatrax.
- 3. Any other questions regarding Medatrax should be directed to Denise Ostovich.

Section B: Preceptor Evaluations

- 1. Preceptors who have been with a student for more than 24 clinical hours will be asked to fill out an evaluation form evaluating the student at the end of the rotation. This evaluation will be factored into the student's final grade.
- 2. Preceptors may be contacted by the Practicum Coordinator at any time to discuss a student's performance.
- 3. Telephone calls or email contact will be made with preceptors who are working with students who are in practicum experiences that are distant from Colorado Springs or Denver.
- 4. It is the student's responsibility to ensure that all clinical/practicum paperwork, including the preceptor/site evaluation by the student, student self-evaluation, and clinical logs, patient logs using the patient icon in Medatrax is completed by the dates listed in the syllabus for each clinical course and should be maintained by students for potential employers. Students are sent updates towards the end of each semester, documenting which evaluations are missing.
- 5. Students may contact Denise Ostovich at mostovic@uccs.edu at any time to discuss the evaluation process.

Section C: Site Visitor Evaluation

- 1. Site visitors complete an evaluation on the student when a site visit (either on-site or by phone) is made. This evaluation is factored into the student's final grade.
- 2. Students should expect one on-site visit for each clinical course. If the student is in a distant site, a phone site visit will be made to the preceptor by the site visitor.
- 3. Students who have a Site Visitor as their preceptor may or may not have a separate site visit.
- 4. Site visitors may request a copy of your clinical objectives before they arrange a visit or other form of communication with the student and the preceptor.

- 5. Phone calls or email contact will be made by the site visitor with the student's preceptor for those students who are in practicum experiences that are distant from Colorado Springs.
- 6. Additional site visits are at the discretion of the lead faculty, Clinical Practicum Coordinator and/or site visitor.

Section D. Students not completing required clinical hours

Sometimes circumstances beyond the student's control prevents a student from completing clinical hours. In this circumstance the student must notify the Lead Faculty and Denise Ostovich explaining the circumstance that interfered with the completion of clinical hours and request to take an incomplete.

It is the student's responsibility to notify the Lead Faculty for the incomplete class and Denise Ostovich when the hours have been completed. Once Denise Ostovich has verified through Medatrax the hours have been met she will notify the Lead Faculty for the incomplete to change the earned grade in the class.

After the hours have been completed and the grade has been changed, the transcript will show the earned letter grade and will also note that the course was originally graded as "I" (incomplete). This will remain on the original transcript and cannot be removed by the College.

Section E. Students not meeting the minimum requirements

 Occasionally it is apparent that although a student is passing the didactic portion of their clinical class, the performance in the clinical area does not meet the requirements for the level of student performance or their clinical judgment is impaired as documented by the preceptor and/or site visitor evaluation. Since the clinical hours are imbedded in the clinical course the student would then fail the clinical course and need to repeat the clinical course and the clinical hours.

ARTICLE V: GRADUATION NON DEGREE STUDENTS

Section A. Post Masters Students

Only students that are obtaining a degree will be included in graduation ceremonies per University Policy. Post Masters certificate students will receive a certificate printed on diploma quality paper after the completion of the program.

APPENDIX A

Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences University of Colorado Colorado Springs

Preceptor Assessment of Student
Graduate Nursing Student - Nurse Practitioner Option
1st Clinical Course

Student Name:	Date:		
Preceptor Name:	Clinical Site:		
Key: 1= Unsatisfactory at NP role (B 84%-89%)	role (C< 80%)	2= Novice at NP role (B- 80%-84%)	3= Competent at NP
4= Proficient at NP role applicable, Not observed	(A- 90%-94%)	5= Mastery of NP Role (A 95%-100%)	%) NA/O= Not

COMPETENCY	EVALUATION						COMMENTS
Patient Management (Domain 1)	1	2	3	4	5	NA/O	
 Obtains age-appropriate history for comprehensive of focused exam to include health maintenance history. 							
 Performs appropriate examination using correct techniqs. 							
 Begins to develop differential diagnoses for presenting problem while prioritizing care 							
 Considers evidence-based non-pharmacologic and pharmacologic interventions for presenting problem 							
Begins to demonstrate critical thinking in clinical decision-making and adjust intervention as needed based on outcomes							
 Communicates effectively using professional terminology, format and technology 							
Documents visit thoroughly and accurately							
NP-Patient Relationship (Domain 2)	1	2	3	4	5	NA/O	
 Prioritizes care and negotiates plan of care with patient 							
 Maintains professional boundaries and patient confidentiality 							
Patient Education (Domain 3)	1	2	3	4	5	NA/O	
Assesses patient's educational needs							
Provides age and education-appropriate information about condition management and health promotion							
Professional role (Domain 4)	1	2	3	4	5	NA/O	

COMPETENCY	EVALUATION						COMMENTS
Begins to incorporate the roles of provider and educator in the NP role and articulates role to public and other health care professionals							
Interacts collaboratively with team members							
Appropriately seeks assistance from preceptor							
 Participates in clinical discussions and contributes relevant knowledge of recent research 							
Culturally sensitive care (Domain 7)	1	2	3	4	5	NA/O	
 Demonstrate respect for patients and delivers culturally sensitive care 							
Recognizes spiritual and emotional needs of patient							

hours completed by this student in my clinical setting

Preceptor Signature (Type your name in the box):
Date:
Additional Comments:

Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences University of Colorado Colorado Springs

Preceptor Assessment of Student
Graduate Nursing Student - Nurse Practitioner Option
2nd Clinical Course

Student Name:	Date:		
Preceptor Name:	Clinical Site:		
Key: 1 = Unsatisfactory at NP role (B 84%-89%)	role (C< 80%)	2= Novice at NP role (B- 80%-84%)	3= Competent at NP
4= Proficient at NP role applicable, Not observed	(A- 90%-94%)	5= Mastery of NP Role (A 95%-100%)	6) NA/O= Not

COMPRESSION	ENVALUATION						COLORDATE
COMPETENCY	EVALUATION						COMMENTS
Patient Management (Domain 1)	1	2	3	4	5	NA/O	
Obtains age-appropriate history for comprehensive of focused exam to include health maintenance history.							
 Performs appropriate examination using correct techniques. 							
 Orders and correctly interprets cost-effective diagnostic and health screening tests. 							
 Develops and analyzes appropriate differential diagnoses for presenting problem while prioritizing care 							
 Begins to independently suggest evidence-based non-pharmacologic and pharmacologic interventions for acute and chronic conditions. 							
 Demonstrates critical thinking in clinical decision- making and adjusts interventions as needed based on outcomes 							
Communicates effectively with preceptor using professional terminology, format and technology							
NP-Patient Relationship (Domain 2)	1	2	3	4	5	NA/O	
Prioritizes care and negotiates plan of care with patient							
Maintains professional boundaries and patient confidentiality							
Patient Education (Domain 3)	1	2	3	4	5	NA/O	
Assesses patient's educational needs							
Provides age and education-appropriate information about condition management and health promotion							
Professional role (Domain 4)	1	2	3	4	5	NA/O	
Incorporates the roles of provider, educator, consultant, administrator and researcher in NP role as appropriate and articulates role to public and							

COMPETENCY		E	ZVAI	LUA	TIO	N	COMMENTS
other health care professionals							
Interacts collaboratively with team members							
Appropriately seeks assistance from preceptor							
Participates in clinical discussions and contributes relevant knowledge of recent research							
Negotiating health care systems (Domain 5)	Negotiating health care systems (Domain 5)						
Practices within authorized scope of practice							
Culturally sensitive care (Domain 7)	1	2	3	4	5	NA/O	
Demonstrate respect for patients and delivers culturally sensitive care							
Provides care that meets spiritual and emotional needs of patient							

hours completed by this student in my clinical setting

Preceptor Signature (Type your name in the box):
Date:
Additional Comments:

Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences University of Colorado Colorado Springs

Preceptor Assessment of Student
Graduate Nursing Student, Nurse Practitioner Option
3rd Clinical Course

Student Name:	Date:		
Preceptor Name:	Clinical Site:		
Key: 1 = Unsatisfactory at NP role (B 84%-89%)	role (C< 80%)	2= Novice at NP role (B- 80%-84%)	3= Competent at NP
4= Proficient at NP role applicable, Not observed	(A- 90%-94%)	5= Mastery of NP Role (A 95%-100%)	%) NA/O= Not

COMPETENCY	EVALUATION						COMMENTS
Patient Management (Domain 1)	1	2	3	4	5	NA/O	0 011211221 (12
Obtains age-appropriate history for comprehensive of focused exam to include health maintenance history.							
 Performs appropriate examination using correct techniques. 							
Orders and correctly interprets cost-effective diagnostic and health screening tests.							
 Independently develops and analyzes appropriate differential diagnoses for presenting problem while prioritizing care 							
Independently suggests evidence-based non pharmacologic and pharmacologic interventions for presenting problem							
Demonstrates critical thinking in clinical decision- making and adjusts interventions as needed based on outcomes							
 Communicates effectively with preceptor using professional terminology, format and technology 							
NP-Patient Relationship (Domain 2)	1	2	3	4	5	NA/O	
Prioritizes care and negotiates plan of care with patient							
 Begins to assists patient in adapting to acute/chronic conditions by developing an understanding of the patient's lifestyle, personal beliefs and priorities. 							
Facilitates decision-making linked to patient's concerns							
Maintains professional boundaries and patient confidentiality							
Patient Education (Domain 3)	1	2	3	4	5	NA/O	
Provides age and education-appropriate information about condition management and							

COMPETENCY	EVALUATION						COMMENTS	
health promotion								
Provides effective learning environment for patient based on assessment of patient's knowledge base, readiness to learn, patient's developmental and emotional level and motivation								
 Uses community assessment information to evaluate client needs, initiate referrals, and coordinate care when applicable 								
 Assesses patient's response to teaching strategies and modifies approach based on outcomes 								
Professional role (Domain 4)	1	2	3	4	5	NA/O		
• Incorporates the roles of provider, educator, consultant, administrator and researcher in NP role as appropriate and articulates role to public and other health care professionals								
Interacts collaboratively with team members								
Negotiating health care systems (Domain 5)	1	2	3	4	5	NA/O		
 Manages patient care and refers to specialty services as appropriate within the existing heath care delivery system. 								
Practices within authorized scope of practice								
Incorporates professional and legal standards into practice								
Culturally sensitive care (Domain 7)	1	2	3	4	5	NA/O		
• Demonstrate respect for patients and delivers culturally sensitive care								
 Provides care that meets spiritual and emotional needs of patient 								
hours completed by this student in my clinical setting Preceptor Signature (Type your name in the box): Date:								

Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences

Additional Comments:

University of Colorado Colorado Springs

Preceptor Assessment of Student
Graduate Nursing Student - Nurse Practitioner Option
Synthesis Practicum Course

Student Name:	Date:		
Preceptor Name:	Clinical Site:		
Key: 1= Unsatisfactory at NP role (B 84%-89%)	role (C< 80%)	2= Novice at NP role (B- 80%-84%)	3= Competent at NP
4= Proficient at NP role applicable, Not observed	(A- 90%-94%)	5= Mastery of NP Role (A 95%-100%)	%) NA/O= Not

COMPETENCY		F	EVAI	JJA'	TIOI	V	COMMENTS
Patient Management (Domain 1)	1	2	3	4	5	NA/O	COMMENTS
Manages patient visit effectively by obtaining appropriate history and performs appropriate examination with correct techniques							
Appropriately orders and correctly interprets cost- effective diagnostic and health screening tests							
Independently develops and analyzes appropriate differential diagnoses for presenting problem while prioritizing care							
Considers complementary and alternative therapy options in plan of care when appropriate							
Independently presents evidence-based non pharmacologic and pharmacologic interventions for presenting problem							
Demonstrates critical thinking in clinical decision- making and adjusts interventions as needed based on outcomes							
Assesses, diagnoses, monitors, coordinates and manages the health/illness status of patients over a period of time when applicable							
Applies principles of epidemiology and diagnostic reasoning skills in clinical decision making							
NP-Patient Relationship (Domain 2)	1	2	3	4	5	NA/O	
 Assists patient in adapting to acute/chronic conditions by developing an understanding of the patient's lifestyle, personal beliefs and priorities. 							
Facilitates decision-making linked to patient's concerns while prioritizing care							
Maintains professional boundaries and patient confidentiality							
Patient Education (Domain 3)	1	2	3	4	5	NA/O	
 Provides patient with information that is scientifically grounded and appropriate to the health conditions 							
Provides effective learning environment for							

COMPETENCY	EVALUATION						COMMENTS
patient based on assessment of patient's knowledge base, readiness to learn, patient's							
developmental and emotional level and motivation Continues to reassess, negotiate and coach patient based on new data, motivation and response to teaching							
Uses community assessment information in evaluating patient needs, initiating referrals, and coordinating care							
Professional role (Domain 4)	1	2	3	4	5	NA/O	
Applies/develops a theory-based conceptual framework to guide practice							
Develops a base for personal ethics in practice as related to patient issues and scope of practice							
 Demonstrates skills in negotiating, consensus building and partnering with health care team members. 							
Negotiating health care systems (Domain 5)	1	2	3	4	5	NA/O	
 Understands basic business and management strategies to function as manager for the provision of quality care and efficient use of resources. 							
 Articulates progressive awareness of legislative and policy making activities which influence health services and practice. 							
Quality health care practices (Domain 6)							
 Uses practice guidelines and current research to include legal and professional standards to guide practice 							
Assumes accountability for practice							
 Monitors quality of care via self, peer and quality assurance methods 							
Culturally sensitive care (Domain 7)	1	2	3	4	5	NA/O	
Demonstrate respect for patients and delivers culturally sensitive care							
 Provides care that meets spiritual and emotional needs of patient 							
hours completed by this student in my clinical setting							
Preceptor Signature						Date_	
Additional Comments:							

I understand that my signing and submitting this record/document in this fashion is the legal equivalent of having placed my handwritten signature on the submitted record/document and this affirmation. I understand and agree that by electronically signing and submitting this record/document in this fashion I am affirming to the truth of the information contained therein.

Please type your Legal First and Last Names.

Preceptor Signature