

# **University of Massachusetts Amherst**

## **College of Nursing** Graduate Preceptor Handbook

2020 - 2021



*Prepared with the support of faculty and staff of the  
Office of the Associate Dean for Academic Affairs*

# TABLE OF CONTENTS

## Introduction

### I. College of Nursing History and Organization

Introduction.....	3
History and Accreditations.....	4
College of Nursing Deans and Program Directors.....	5
Vision, Mission and Goal.....	6
The Graduate Program Terminal Objectives.....	8
Clinical Nurse Leader Program Objectives.....	9
Doctor of Nursing Practice.....	10
Family Nurse Practitioner.....	11
Public Health Nurse Leader.....	11
Adult – Gerontology Nurse Practitioner.....	12
Psychiatric Mental Nurse Practitioner.....	12
Specific Requirements for Progression in the DNP Program.....	13
Family Nurse Practitioner – Role Courses and Sequencing.....	14
Public Health Nurse Leader – Role Course Sequencing.....	16
Adult – Gerontology Nurse Practitioner – Role Course Sequencing.....	17
Psychiatric Mental Health Nurse Practitioner – Role Courses.....	19
Graduate Program Professional Conduct Policy.....	22
Overview of the DNP Project.....	23

### II. Preceptorship

The Preceptor Role.....	24
Students as Adult Learners.....	24
Teaching Learning Methods.....	25
Learning Styles.....	25
Creating an Environment for Learning.....	26
Useful Communication Techniques.....	26
Assessing Student Progress.....	27
Criteria for Preceptor Selection.....	27
Student Health Requirements.....	27
Student Illness/Injury During Preceptorship.....	28
Frequently Asked Questions.....	28
References.....	29

### III. Course Specific Information (Additions)

Nursing Program/Faculty Responsibilities and Student Responsibilities.....	30
Typhon.....	31

## Introduction

Thank you for agreeing to be a preceptor for a graduate nursing student from The University of Massachusetts Amherst College of Nursing (CON). This handbook has been developed to assist you in this role by providing an overview of the CON, School values, mission, and vision, Graduate Programs and the importance of the preceptor role for graduate students in their role development. It includes guidelines for the preceptor experience and preceptor selection, faculty and student responsibilities, sample agency agreements, specific course requirements and objectives, the University grading policy and student evaluation tools, along with means of communication with faculty.

The faculty member associated with the clinical or other experience for which you are preceptor will contact you for a telephone or in person appointment at a mutually-convenient time and place to address any questions or concerns you may have about your role as preceptor. Although our goal is to provide this orientation prior to assignment of students, it is not always possible, given busy schedules, but it will take place as early in the semester as possible. In the meantime, familiarizing yourself with the enclosed materials will help a great deal.

Please feel free to contact the specific course faculty member with whom you are paired at any time, the Graduate Program Director or other resources listed below:

Karen A. Kalmakis, PhD, MPH, FNP, FAANP  
Director, DNP Program  
[kalmakis@nursing.umass.edu](mailto:kalmakis@nursing.umass.edu)  
(413) 577-4763

Lori Anne Lyne, DNP, ACNP-BC  
Graduate Clinical Placement Coordinator  
[loriannelyne@nursing.umass.edu](mailto:loriannelyne@nursing.umass.edu)  
(413) 545-1341

Andrea “AJ” Juno  
Clinical and Affiliation Agreements Coordinator  
[ajuno@nursing.umass.edu](mailto:ajuno@nursing.umass.edu)

(413) 545-5056

### Other resources:

Karen Ayotte  
DNP Program Assistant  
[kayotte@nursing.umass.edu](mailto:kayotte@nursing.umass.edu)  
(413) 545-1302

Cynthia Mendoza  
CNL & PhD Program Assistant  
[cmendoza@nursing.umass.edu](mailto:cmendoza@nursing.umass.edu)  
(413) 577-2322

## **I. College of Nursing History and Accreditation**

### **History**

At its founding in 1953, the College of Nursing offered the first baccalaureate nursing program in public higher education in the Commonwealth of Massachusetts. Four years later, the College launched the first such Master of Science degree program, and in 1994, the state's first publicly supported PhD program in Nursing in collaboration with The University of Massachusetts Medical School and the Graduate College of Nursing. In 2005, the School offered its first PhD program sponsored uniquely by the College of Nursing and in 2006 the first Doctorate of Nursing Practice (DNP) program in the state.

Continuous accreditation first by the National League for Nursing, and currently by the Commission on Collegiate Nursing Education (CCNE), along with the success of graduates in passing both licensing and certification exams, testify to the enduring quality of the School's programs, faculty, and curriculum.

The College of Nursing is one of the twelve schools and colleges comprising the University of Massachusetts Amherst, founded in 1863. The University is a Carnegie Designated Research University Very High (RUVH) and the flagship campus of the five-campus public university system. Sponsored research now totals over \$100 million a year, with increasing emphasis on the life sciences and biotechnology applications.

Embodying the University's commitment to high quality, accessible education, the College of Nursing is committed to meeting the challenges faced by the nursing profession in the context of the changing dynamics of society and the delivery of health care.

### **Accreditation**

The Nursing Program is accredited by the Commission on Collegiate Nursing Education (CCNE), a national nursing education accrediting body, and approved by the Massachusetts Board of Registration in Nursing. The DNP program received a full 10-year re-accreditation by CCNE in 2015 and the Masters programs have received the full CCNE 10 year approval in 2010.

## **College of Nursing Deans and Program Directors 2019 - 2020**

*For a complete list of CON Faculty, please visit our website:*  
<http://www.umass.edu/nursing/faculty-staff>

### **Dean**

Dr. Cynthia S. Jacelon BS, Trenton State College; MS, Boston University; PhD, New York University; Certified Rehabilitation Registered Nurse-Advanced - Professor – *Research Interests Independence in elders with chronic health problems.*

### **Graduate Program Director**

**DNP & CNL Programs:** Dr. Pamela Aselton  
BSN, Southern Connecticut University; MPH, MSN & PhD University of Massachusetts/Amherst,  
Board Certified FNP – Clinical Associate Professor - *Research Interests: Nursing Education,  
Health Policy, Clinical Area: College & Adolescent Health.*

## **Values, Vision, Mission and Goals**

### **Vision**

The College of Nursing is a force for innovation, learning and discovery in preparing culturally proficient nurses for leadership in health for a global society.

### **Mission**

To provide an affordable and accessible education to enhance health and healing through nursing leadership in teaching, scholarship, practice and service.

### **Values**

We, the faculty of the College of Nursing, are committed to:

#### Caring and Collaborative Relationships

- Caring and compassion as the heart of evidence-based nursing practice
- Collaboration with clients, nursing and interdisciplinary peers as essential to enhancing health and healing
- Attending to the needs and input of vulnerable and underserved populations

#### Leadership

- Nursing's contribution to reducing health disparities and promoting health in a global society
- An environment that enhances the social conscience and professional development of all members of the College of Nursing
- The knowledge that environments are interrelated systems that affect and are affected by nursing practice, culture, and public policy
- Students developing their identity as agents for innovation in the world

#### Excellence

- The reciprocal relationships among teaching, scholarship, and engagement
- Encouraging integrity and high moral character in all members of the College of Nursing
- Becoming reflective practitioners to increase the authenticity of our work (Boyer, 1990)

#### Innovation

- Creative ways of acquiring, managing and sharing knowledge

#### Diversity

- Striving to design and provide culturally sensitive nursing care in a global society
- Promoting diversity in our school and in the profession

#### Life Long Learning

- Arts, humanities, and sciences as a foundation for nursing education
- Learning as a dynamic, collaborative process that promotes mutual growth of students and teachers

## **Engagement Goals**

Our goals are to:

- Contribute to the search for answers to the most pressing social, civic, economic and moral problems facing our profession and world today (Boyer, 1990)
- Facilitate and enhance an organizational culture of diversity that promotes the success of collaborative partnerships, relationships, and affiliations within a global community
- Promote and expand faculty practice, which reflects the expertise of faculty needs and needs of our communities of interest
- Promote faculty development and systematic understanding through a variety of mechanisms that would include:
  - a. Coordinating access to all existing internal university resources.
  - b. Securing external global resources.
  - c. Mentoring faculty with the ongoing development of their academic careers.
- Contribute to systematic and structural improvement of the University and UMass systems
- Promote service to the underserved and vulnerable populations

We prepare professional nurses by creating an innovative environment for inquiry, discovery, and learning with diverse populations. Our goals are to:

- Ensure a flexible learner-centered environment that utilizes information technology to its highest potential to ensure collaboration and inclusiveness
- Foster the advancement of students through graduate education
- Ensure a comprehensive, cohesive curriculum, which prepares students for leadership in a changing and diverse sociopolitical world

## **Scholarship Goals**

Enhance the art and science of nursing by creating, translating, and disseminating knowledge. Our goals are to:

- Facilitate the scholarship of discovery, integration, application and teaching
- Foster a creative environment that supports scholarship activities
- Enhance mechanisms for interdisciplinary scholarship

## **The Graduate Program Terminal Objectives**

The Graduate Program builds on the core competencies of the baccalaureate program as a basis for the curriculum. Therefore, the terminal objectives for the graduate program are defined at a more advanced level of practice and specialty.

- Incorporate the core knowledge of nursing into an advanced practice role to promote, maintain and restore health of clients
- Utilize advanced knowledge of pharmacology, pathophysiology and health assessment in the provision of direct client care
- Provide culturally competent care at an advanced level in response to human diversity and societal needs
- Integrate research findings and professional standards and guidelines into advanced nursing practice
- Collaborate with clients, health care providers and community leaders to effect change that improves health and the environments of care

## **Graduate Program**

The Graduate programs awards three graduate level degrees; The Master of Science (MS), Doctor of Nursing practice (DNP) and the Doctor of Philosophy (PhD). The MS is comprised of the Clinical Nurse leader (CNL), Nursing Education (MSNE) and Nursing Studies (MSNS). The DNP is comprised of four tracks: Family Nurse Practitioner, Adult Gerontology Primary Care Nurse Practitioner, Psychiatric Mental Health Nurse Practitioner, and Public Health Nurse Leader.

The Master of Science Program in the College of Nursing was created through the collaborative efforts of faculty in the College of Nursing and local leaders in nursing practice. This program addresses the competencies and knowledge specified by the American Association of Colleges of Nursing for Masters Education, and for the specific Clinical Nurse Leader focus.

The CNL and Masters of Nursing Education programs are online programs. All course work is offered through Continuing and Professional Education, and clinical practicums are arranged by the student, often in the facility they are working in.

The Clinical Nurse Leader (CNL) Masters concentration prepares nurse leaders who design, provide, manage and coordinate health promotion, risk reduction, disease prevention and illness management services to individuals and clinical populations.

The CNL is accountable for the application of research-based information and the efficient and cost-effective use of resources to improve clinical and environmental care outcomes and effect change in health care organizations.

The graduate is prepared to lead both intra-disciplinary and interdisciplinary health care teams and to function across clinical settings in order to meet the demands of a complex care delivery system.

## CNL Program Objectives

At the completion of the program the graduate will be prepared to:

- Implement the CNL role in a variety of clinical settings
- Apply advanced knowledge (pharmacology, pathophysiology, health assessment) and core competencies (critical thinking, communication, nursing technology/resources) to the development and evaluation of a plan of care for individuals or populations at the point of care
- Assume accountability for the efficient and cost-effective use of human, environmental and national resources by applying principles of healthcare policy, finance, economics and ethics to improve quality of care delivery
- Integrate knowledge of informatics, human diversity and ethics to address and manage variation in population outcomes and ensure culturally relevant care
- Implement evidence-based practices and professional standards of care to affect change in health care organizations and improve outcomes of care
- Apply principles of leadership and collaboration to improve the health outcomes of individuals and clinical populations
- Improve clinical practice and optimize healthcare outcomes through use of information systems and technologies
- Advocate for the client, interdisciplinary care team and profession in legislative and regulatory arenas

The master's CNL concentration requires completion of 32 credit hours of course work and selected courses include practicum/project hours.

Course	Title	Credits
N614	Advanced Health Assessment and Clinical Reasoning	3
N615	Advanced Pathophysiology	3
N619	Advanced Pharmacology	3
N630	Research Methodology in Nursing	3
N540	Epidemiology for Clinicians	3
N725	Leadership in Public Health Systems	3
N735	Informatics for Nursing Practice	3
N701	Healthcare Quality	3
N698N	Clinical Practicum: Clinical Nurse Leader	2
N798N	Practicum: Clinical Nurse Leader – Advanced Clinical Practicum	6
	<b>TOTAL CREDITS</b>	<b>32</b>

## **Doctor of Nursing Practice (DNP) Online Program**

The University of Massachusetts Amherst offers the Doctor of Nursing Practice (DNP) degree to prepare advanced practice nurses at the highest level. This professional nursing preparation will include advanced coursework in leadership, research translation, and clinical knowledge and skills. This change was driven by evolving nursing roles in an increasingly complex health care system, new scientific knowledge, and ongoing concerns about the quality and outcomes of patient care.

The College has expert faculty in four role areas:

1. Family Nurse Practitioner (FNP)
2. Public Health Nurse Leader (PHNL)
3. Adult Gerontology Primary Care Nurse Practitioner (AGPCNP)
4. Psychiatric Mental Health Nurse Practitioner (PMHNP)

### **DNP Expected Outcomes and Objectives**

Graduates of the DNP program will practice at the highest level. Specific expected outcomes of the program are to graduate nurses who will:

- Engage in nursing practice using the advanced knowledge from nursing and related disciplines to improve health outcomes
- Provide leadership and collaborate with leaders in other professions for change in systems of care
- Synthesize and translate evidence from nursing and other disciplines to manage complex health problems
- Provide culturally proficient care to respond to health disparities and societal needs

Core competencies essential for those preparing for direct care roles and for population based roles build on eight essential content areas:

- Scientific underpinnings for practice
- Organizational and systems leadership for quality improvement, and systems thinking
- Clinical scholarship and analytic methods for evidence-based practice
- Technology and information for the improvement and transformation of healthcare
- Health care policy for advocacy in health care
- Interprofessional collaboration for improving patient and population healthcare outcomes
- Clinical prevention and population health for improving the nation's health
- Advanced nursing practice for improving the delivery of patient care

## **DNP Curriculum**

### **Core Courses**

All students will take core courses that include the following:

- N603 Theoretical Components of Nursing Science (3)
- N630 Research Methodology in Nursing (3)
- N605 Scholarly Writing (3)
- N735 Informatics for Nursing Practice (3)
- N715 Intermediate Biostatistics (3)
- N701 Healthcare Quality (3)
- N651 Nursing Ethics, Health Policy & Politics (3)
- N725 Leadership of Public Health Systems (3)
- N704 Health Disparities and Social Justice (3)
- N742 Defining Evidence-Based Problems & Solutions {Capstone I} (3)
- N798U Proposal Development {Capstone II} (2)
- N798W DNP Project proposal {Capstone III} (1)
- N840 DNP Project Implementation and Monitoring {Capstone IV} (3)
- N898A DNP Project Completion, Evaluation and Dissemination {Capstone V} (3)

### **Role Concentration Courses**

**In addition** to the above DNP core courses, post baccalaureate students will choose the FNP, PHNL, AGPCNP, or PMHNP tracks and complete additional courses as needed. An individually tailored Plan of Study will be created for Post-Master's students based on transcript review.

#### **Family Nurse Practitioner (FNP)**

- N614 Advanced Health Assessment and Clinical Reasoning (3)
- N615 Advanced Pathophysiology (3)
- N619 Advanced Pharmacology (3)
- N670 Family Systems and Intervention (3)
- N643 Assessment and Diagnosis of Psychiatric and Mental Health Disorders
- N703 Pharmacotherapy Management (3)
- N610 Primary Health Care of Children, Adolescents & Young Adults (3)
- N620 Primary Health Care of Middle Aged and Older Adults (3)
- N723 Complex Health Problems in Primary Care – I (2)
- N733 Complex Health Problems in Primary Care – II (2)
- N698 & N798 Practicums & Role Seminars (12 credits)

#### **Public Health Nurse Leader (PHNL)**

- EPI 630 Principles of Epidemiology (3)
- HPP 620 Introduction to the U.S. Health Care System (3)
- EHS 565 Environmental Health Practices (3)
- HPP 601 Application of Social & Behavioral Theories in Pub Health Education and Intervention (3)
- HPP 628 Financial Management of Health Institutions (3) (or equivalent PH course)
- N640 Advanced Public Health Nursing I (3)
- N750 Advanced Public Health Nursing II (3)
- N760 Contemporary Issues in Public Health Practice (3)
- N698G Practicum: Advanced Public Health Nursing I (3)
- N798LL Practicum: Advanced Public Health Nursing II (3)
- N798M Practicum: Contemporary Issues in Public Health Practice (3)

**Adult Gerontology Primary Care Nurse Practitioner (AGPCNP)**

- N614 Advanced Health Assessment and Clinical Reasoning (3)
- N615 Advanced Pathophysiology (3)
- N619 Advanced Pharmacology (3)
- N670 Family Systems and Intervention (3)
- N703 Pharmacotherapy Management (3)
- N643 Assessment and Diagnosis of Psychiatric and Mental Health Disorders
- N610 Primary Health Care of Children, Adolescents & Young Adults (3)
  
- N620 Primary Health Care of Middle Aged and Older Adults (3)
- N705 Complex Health Problems in Primary Care for Patients with MCC - I (2)
- N706 Complex Health Problems in Primary Care for Patients with Multiple Chronic Conditions - II
- N698 & N798 Practicums & Role Seminars (12 credits)

**Psychiatric Mental Health Nurse Practitioner (PMHNP)**

- N614 Advanced Health Assessment and Clinical Reasoning (3)
- N615 Advanced Pathophysiology (3)
- N619 Advanced Pharmacology (3)
- N670 Family Systems and Intervention (3)
- N580 Integrative Therapies (2)
- N703 Pharmacotherapy Management (3)
- N643 Assessment and Diagnosis of Psychiatric and Mental Health Disorders (3)
- N707 Neuropsychopharmacology (3)
- N612 Advanced Psychiatric Mental Health Nursing with Children & Adolescents (3)
- N622 Advanced Psychiatric Mental Health Nursing with Adults & Older Adults (3)
- N712 Advanced Psychotherapy Modalities with Individuals, groups and Families (2)
- N722 Psychiatric Mental Health Complex Health Problems (2)
- N698 to N898 Practica & Role Seminar (11)

**DNP Completion (for currently certified APN's)**

- N735 Informatics for Nursing Practice (3)
- N715 Intermediate Biostatistics (3)
- N701 Healthcare Quality (3)
- SCH-MGMT 680 Organizational Behavior (3)
- N651 Nursing Ethics, Health Policy & Politics (3)
- N725 Leadership of Public Health Systems (3)
- N704 Health Disparities and Social Justice (3)
- N742 Capstone 1: Defining Evidence-Based Problems & Solutions (3)
- N798U Proposal Development {Capstone II} (2)
- N798W DNP Project proposal {Capstone III} (1)
- N840 DNP Project Implementation and Monitoring {Capstone IV} (3)
- N898A DNP Project Completion, Evaluation and Dissemination {Capstone V} (3)

[For a complete list of course descriptions, please browse the University Course Catalog](#)

**Faculty Advisors**

All College of Nursing faculty members who have graduate faculty status are potential advisors for DNP students. Students will be assigned an advisor that is congruent with their area of interest whenever possible. DNP students are expected to meet regularly with their advisors to outline their plan of study, discuss academic coursework, and to prepare for the comprehensive exam and capstone scholarly project.

### **Overview of Progression through Coursework**

The DNP program is a practice-focused doctoral program that prepares advanced practice nurses for increasingly complex evidence-based nursing practice. This includes translating research into practice, evaluating evidence, applying research in decision-making, implementing viable clinical innovations to change practice, and conducting and evaluating program development projects. The final scholarly requirement of the DNP program is the capstone project. The DNP project in the UMass DNP program is a requirement for graduation.

This project is begun in the first Capstone course N742 Defining the Evidence and continued in the spring in N798U Proposal Development. The proposal is further developed in the summer in N798W Proposal Development and implemented in the N840 DNP Project Implementation and Monitoring and N898A DNP Project Completion, Evaluation and Dissemination.

The DNP Project focuses on the implementation, monitoring, evaluation, and dissemination of a theoretically based research translation project designed as a programmatic intervention to address a practice problem.

Successful progression depends upon completing required course work, according to the students' plan of study, maintaining a minimum cumulative GPA of 3.0, and working closely with advisor. Advisor and student should be mindful of incomplete grades and students whose CGPA falls below 3.0 who will be in jeopardy of dismissal by the College of Nursing and the University.

## **Role Courses and Sequencing for NP Role courses**

Students enrolled in the DNP/FNP, AGPCNP & PMHNP specialty cannot begin FNP specialty courses until they are able to progress through required core courses. Prior to beginning any specialty courses in the DNP/FNP program, students must successfully complete N615 Advanced Pathophysiology, and N619 Advanced Pharmacology. Students must also have completed (or take concurrently) N703 Pharmacotherapeutics and N670 Family Systems and Interventions when enrolled in the first specialty courses in the sequence, N614 and N698A.

In the DNP/FNP, AGPCNP & PMHNP program curriculum, there is a series of five theory courses with five concurrent practicum courses that provide content and experience in the specialty area of advanced primary care/family nurse practitioner. After completing these specialty courses, students will engage in the Final Immersion Practicum (the 6<sup>th</sup> and final practicum course), taken during their final semester in the DNP program. All FNP students are required to take these courses, unless they have a Master's degree in a nurse practitioner specialty, and have received some course waivers at the time of admission. These courses build upon each other and must be taken in the sequence outlined in the DNP/FNP Plan of Study. This course sequence is offered every year, and students must follow their Plan of Study in order to efficiently progress in the program.

### **Course Descriptions:**

**N615 Advanced Pathophysiology** (3 cr.) - This course examines the conceptual basis and specific knowledge of pathophysiology and disease recognition for children and adults as observed in the primary care setting.

**N619 Advanced Pharmacology** (3 cr.) - This course reviews in-depth the principles of pharmacology for classes of drugs commonly used in various health care practices. The most pertinent drug classes for nursing practice are included in this course.

**N703 Pharmacotherapy Management** (3 cr.) – Integration of principles of pharmacology and therapeutic patient care management to construct, implement and evaluate optimal pharmacotherapeutic regimens for patients in various healthcare settings. This course includes an assignment with a local pharmacist.

**N670 Family Systems and Interventions** (3 cr.) - Selected concepts, theories and research related to family dynamics and family coping, with an emphasis on practice strategies to support family well-being and mental health.

**N614 Advanced Health Assessment and Clinical Reasoning** (3 cr.) and **N698A Practicum** (1 cr.) – **must be taken concurrently.** N698A is the first practicum course in the FNP/DNP specialty concentration sequence.

Content and practicum focus is on acquiring the knowledge and skills needed to perform comprehensive health assessments and develop enhanced capacity for clinical reasoning and laboratory test interpretation. Application of this knowledge occurs in the concurrent clinical practicum N698A, the first clinical practicum experience in the FNP specialty that affords students the opportunity to develop+ competence and confidence in a precepted clinical experience while applying knowledge obtained in a concurrent theory course. Students will select an agency and a preceptor in their community and engage in **56 hours of practicum** experiences to meet course objectives. The N698A UMass faculty will supervise this practicum course in conjunction with the student's approved preceptor. This first practicum experience, which starts mid-way through the semester, concentrates on the "Art" of Clinical Reasoning and, therefore, most any qualified provider from a variety of healthcare settings can be

appropriate. The concentration of the practicum is for students to learn the techniques and practices of the “Focused Case Visit” and the “Complete History and Exam Visit” to acquire a sound knowledge base in diagnostic reasoning and differential diagnosis prior to launching into the individual patient population courses. NPs and MDs who see patients of all ages in a primary care setting are preferred.

**N610 Primary Health Care of Children, Adolescents, and Young Adults (3 cr.) and N698E Practicum: Primary Health Care of Children, Adolescents, and Young Adults (3 cr.) – must be taken concurrently.**

Content and practicum focus is on acquiring the knowledge and skills needed to assess, maintain, and promote the health and well being of culturally diverse children, adolescents, and young adults. Application of this knowledge occurs in the concurrent clinical practicum N698E. Students will select an agency and a preceptor in their community and engage in **168 hours** of practicum experiences to meet course objectives. The N698E UMass faculty will supervise this practicum course in conjunction with the student’s approved preceptor. Students must recruit a provider who services infants through young adults either in a family practice or in a practice that specializes in the care of children and young adults. Primary care and family practice NPs and MDs or pediatric NPs or pediatricians are appropriate choices for preceptors for this semester. Students will concentrate their experiences with patients with simple acute or stable chronic health problems.

**N620 Primary Health Care of Adults and Older Adults (3 cr.) and N698X Practicum: Primary Health Care of Adults (3 cr.) – must be taken concurrently.**

Content and practicum focus is on acquiring the knowledge and skills needed to assess, maintain, and promote the health and well being of culturally diverse adults and older adults. Application of this knowledge occurs in the concurrent clinical practicum N698X. Students will select an agency and a preceptor in their community and engage in **168 hours of practicum** experiences to meet course objectives. The N698X UMass faculty will supervise this practicum course in conjunction with the student’s approved preceptor. Students must recruit a provider who adult patients either in a family practice or in a practice that specializes in the care of adults and older adults. Primary care NPs and MDs and ANPs are preferred choices for preceptors. Internal Medicine Specialists, GNPs, or Geriatricians can be appropriate choices for preceptors for this semester as approved by the faculty. Students will concentrate their experiences with patients with simple acute or stable chronic health problems.

**N723 Complex Health Problems in Primary Care I (2 cr.) and N798K Practicum: Complex Health Problems in Primary Care (2 cr.) – must be taken concurrently.**

Content and practicum focus is on building knowledge and skills beyond the provision of primary care for singular simple acute or stable chronic conditions of separate populations of patients to a focus on health care of patients of all ages with complex health problems. Application of this knowledge occurs in the concurrent clinical practicum N798K. Students will select an agency and a preceptor(s) in their community and engage in **112 hours of practicum** experiences to meet course objectives. The N798K UMass faculty will supervise this practicum course in conjunction with the student’s approved preceptor. Students must recruit a family provider or a pediatric and an adult provider in order to assure that complex patients of all ages will be seen –providers can be NPs or MDs or a combination of both.

**N733/N706 Complex Health Problems in Primary Care II and N798KA Practicum Complex Health Problems in Primary Care II (2 cr.) – must be taken concurrently.**

This course provides students specializing in the advanced practice role of the Primary Care Family Nurse Practitioner the opportunity to build their knowledge and skills beyond that of the singular simple acute or stable chronic conditions of separate populations of patients that has been the focus of previous courses in the specialty. This course affords the opportunity to focus on health care of patients of all ages with complex health problems. Application of this knowledge occurs in the concurrent clinical practicum N798KA and completing **112 clinical practicum hours**.

## **Final Spring Semester of Study in the DNP Program**

### **N898D Final Immersion Practicum (2 cr.) -**

This final practicum is an essential component of the DNP program that affords students the opportunity to immerse themselves in their area of specialty practice as they complete **112 hours of practicum** experiences in one semester. This practicum provides an intensive immersion opportunity for students to further enhance and integrate their prior learning and to gain experience with designated DNP essentials and specialty competencies.

### **Public Health Nurse Leader (PHNL) - Role Course Sequence**

In the DNP/PHNL program curriculum, there is a series of 3 theory courses with 3 concurrent practicum courses that provide content and experience in the specialty area of advanced public health nursing. After completing these specialty courses, students will engage in the Final Immersion Practicum N898A, taken during their final semester in the DNP program. All PHNL students are required to take these courses, unless they have a Master's degree in Community or Public Health Nursing, and have received some course waivers at the time of admission.

The PHNL program consists of a total of 4 practicum courses, for a total of 840 practice hours. Three of these courses are 3 credit practicum courses that require 168 hours of supervised practice, for a total of 504 hours. In the final semester of the DNP program, students will take the Final Immersion Practicum N898A for 6 credits (336 hours – of which 150 hours may be used to implement the required Capstone Scholarly Project).

The three (3) theory courses in the PHNL sequence are designed to provide instruction in Advanced Public Health Nursing. In the 3 concurrent practicum courses, students implement the knowledge they acquire in the companion theory courses. These courses must be taken in sequential order, as they build upon each other. The Final Immersion Practicum course, N898A, is not taken until the last semester of the student's coursework in the DNP program.

### **PHNL Specialty Course Sequence**

**N640 Advanced Public Health Nursing I (3 cr.) (Fall) and N698G Practicum: Advanced Public Health Nursing I (3 cr.)** Content and practicum focus is on conducting a Comprehensive Community Assessment and a targeted Needs Assessment. Application of this knowledge occurs in the concurrent clinical practicum N698L. Students will engage in **168 hours of practicum experiences** to meet course objectives. This practicum is conducted in a community that the student chooses. The N698L UMass course faculty member will supervise this first practicum course. Students will not need an outside community preceptor for this course. However, by mid-semester students should be identifying a preceptor and an agency that they will affiliate with in the next practicum course, N798P, offered in next spring semester.

**N750 Advanced Public Health Nursing II (3 cr.) Spring and N798LL Practicum: Advanced Public Health Nursing II (3 cr.)** Content and practicum focus is on program development and evaluation in the field of public health. Application of this knowledge occurs in the clinical practicum N798P. This practicum should be conducted in the same community as the previous practicum course, N698L.

Students will select an agency and a preceptor in the community and engage in **168 hours of practicum experiences** to meet course objectives. The N798P UMass faculty member will supervise this practicum course in conjunction with the student's community preceptor.

**N760 Advanced Public Health Nursing III Contemporary Issues in Public Health Practice (3 cr.) and N798M Practicum: Contemporary Issues in Public Health Practice (3 cr.)** Content and practicum focus is on current issues in public health nursing practice. Students will select an agency and a preceptor in the community and engage in **168 hours of selected practicum experiences** to meet course objectives. The N798M UMass faculty member will supervise this practicum course in conjunction with the student's community preceptor.

### **Adult Gerontology Primary Care Nurse Practitioner (AGPCNP) - Role Courses and Sequencing**

Students enrolled in the DNP/AGPCNP specialty cannot begin AGPCNP specialty courses until they are able to progress through the specialty course/practicum sequence in 6 consecutive semesters, culminating in graduation and application for a national AGPCNP certification exam. Prior to beginning any specialty courses in the DNP/AGPCNP program, students must successfully complete N615 Advanced Pathophysiology, and N619 Advanced Pharmacology. Students must also have completed (or take concurrently) N703 Pharmacotherapy Management, N670 Family Systems and Interventions when enrolled in the first specialty courses in the sequence, N697AA Primary Health Care of Adolescents & Young Adults and N698AA Practicum: PHC of Adolescents & Young Adults.

In the DNP/AGPCNP program curriculum, there is a series of four theory courses with four concurrent practicum courses that provide content and experience in the specialty area of the advanced primary care/adult gerontology nurse practitioner. Students will engage in the Final Immersion Practicum and Residency (the 6<sup>th</sup> and final practicum course), taken during their final semester in the DNP program. All AGPCNP students are required to take these courses, unless they have a Master's degree in a nurse practitioner specialty, and have received some course waivers at the time of admission. These courses build upon each other and must be taken in the sequence outlined in the DNP/AGPCNP Plan of Study. This course sequence is offered every year, and students must follow their Plan of Study in order to efficiently progress in the program. Any deviance from the signed, current, Plan of Study will place students in jeopardy of falling out-of-sequence and will require a new Plan of Study with a new trajectory to graduation.

To further clarify the DNP/AGPCNP practicum component: the courses total a minimum requirement of 1120 clinical contact hours. Four of these courses are specialization credit practicum courses that require supervised practice for a total of 504 hours; Capstone II course is a 2-credit practicum for 112 hours and Capstone III course is a 1 credit practicum that requires 56 hours. In the final two semesters in the DNP program, students will also take the Final Role Immersion Practicums (Capstone IV & V). Students will participate in a Final Direct Care Residency for 2 credits in their last semester.

### **Course Descriptions and Preceptor Selection Suggestions:**

**N615 Advanced Pathophysiology (3 cr.)** - This course examines the conceptual basis and specific knowledge of pathophysiology and disease recognition for children and adults as observed in the primary care setting.

**N619 Advanced Pharmacology (3 cr.)** - This course reviews in-depth the principles of pharmacology for classes of drugs commonly used in various health care practices. The most pertinent drug classes for nursing practice are included in this course.

**N703 Pharmacotherapy Management (3 cr.)** – Integration of principles of pharmacology and therapeutic patient care management to construct, implement and evaluate optimal pharmacotherapeutic regimens for patients in various healthcare settings. This course includes an assignment with a local pharmacist.

**N670 Family Systems and Interventions (3 cr.)** - Selected concepts, theories and research related to family dynamics and family coping, with an emphasis on practice strategies to support family well-being and mental health.

**N614 Advanced Health Assessment and Clinical Reasoning (3 cr.)** and **N698A Practicum (1 cr.)** – **must be taken concurrently.** N698A is the first practicum course in the AGPCNP/DNP specialty concentration sequence. Content and practicum focus is on acquiring the knowledge and skills needed to perform comprehensive health assessments and develop enhanced capacity for clinical reasoning and laboratory test interpretation. Application of this knowledge occurs in the concurrent clinical practicum N698A, the first clinical practicum experience in the AGPCNP specialty that affords students the opportunity to develop competence and confidence in a precepted clinical experience while applying knowledge obtained in a concurrent theory course. Students will select an agency and a preceptor in their community and engage in 56 hours of practicum experiences to meet course objectives. The N698A UMass faculty will supervise this practicum course in conjunction with the student’s approved preceptor. This first practicum experience, which starts mid-way through the semester, concentrates on the “Art” of Clinical Reasoning and, therefore, most any qualified provider from a variety of healthcare settings can be appropriate. The concentration of the practicum is for students to learn the techniques and practices of the “Focused Case Visit” and the “Complete History and Exam Visit” to acquire a sound knowledge base in diagnostic reasoning and differential diagnosis prior to launching into the individual patient population courses. NPs and MDs who see patients of all ages in a primary care setting are preferred.

**N610 Primary Health Care of Children, Adolescents, and Young Adults (3 cr.)** and **N698E Practicum: Primary Health Care of Children, Adolescents, and Young Adults (3 cr.)** – **must be taken concurrently.**

Content and practicum focus is on acquiring the knowledge and skills needed to assess, maintain, and promote the health and well being of culturally diverse children, adolescents, and young adults. Application of this knowledge occurs in the concurrent clinical practicum N698E. Students will select an agency and a preceptor in their community and engage in **168 hours** of practicum experiences to meet course objectives. The N698E UMass faculty will supervise this practicum course in conjunction with the student’s approved preceptor. Students must recruit a provider who services infants through young adults either in a family practice or in a practice that specializes in the care of children and young adults. Primary care and family practice NPs and MDs or pediatric NPs are appropriate choices for preceptors for this semester. Students will concentrate their experiences with patients with simple acute or stable chronic health problems.

**N620 Primary Health Care of Adults and Older Adults (3 cr.)** and **N698X Practicum: Primary Health Care of Adults (3 cr.)** – **must be taken concurrently.**

Content and practicum focus is on acquiring the knowledge and skills needed to assess, maintain, and promote the health and well-being of culturally diverse adults and older adults. Application of this knowledge occurs in the concurrent clinical practicum N698X. Students will select an agency and a preceptor in their community and engage in **168 hours of practicum** experiences to meet course objectives. The N698X UMass faculty will supervise this practicum course in conjunction with the student’s approved preceptor. Students must recruit a provider who adult patients either in a family practice or in a practice that specializes in the care of adults and older adults. Primary care NPs and MDs

and ANPs and AGPCNPs are preferred choices for preceptors. Internal Medicine Specialists, GNPs, or Geriatricians can be appropriate choices for preceptors for this semester as approved by the faculty. Students will concentrate their experiences with patients with simple acute or stable chronic health problems.

**N723 Complex Health Problems in Primary Care I (2 cr.) and N798K Practicum: Complex Health Problems in Primary Care (2 cr.) – must be taken concurrently.**

Content and practicum focus is on building knowledge and skills beyond the provision of primary care for singular simple acute or stable chronic conditions of separate populations of patients to a focus on health care of patients of all ages with complex health problems. Application of this knowledge occurs in the concurrent clinical practicum N798K. Students will select an agency and a preceptor(s) in their community and engage in **112 hours of practicum** experiences to meet course objectives. The N798K UMass faculty will supervise this practicum course in conjunction with the student's approved preceptor. Students must recruit a family provider or a pediatric and an adult provider in order to assure that complex patients of all ages will be seen –providers can be NPs or MDs or a combination of both.

**N706 Complex Health Problems with Multiple Chronic Conditions 2 (2 cr.) and N798 Practicum: Complex Health Problems with Multiple Chronic Conditions 2 (2 cr.) – must be taken concurrently.**

This course provides students specializing in the advanced practice role of the Adult Gerontological Primary Care (DNP) Nurse Practitioner student the opportunity to build knowledge and skills beyond that of the singular simple acute or stable chronic conditions. This course affords the opportunity to focus on health care of adult and older adult patients (including frail elders) with multiple chronic conditions (MCC) and complex health problems. Application of this knowledge occurs in the concurrent clinical practicum N798. The N798 UMass faculty will supervise this practicum course in conjunction with the student's approved preceptor. Students must recruit a MD or NP geriatric/gerontology and adult provider in order to assure that complex patients will be seen –providers can be NPs or MDs or a combination of both for a total of **112 hours** (52 hours needs to be in sub-acute rehabilitation and long-term care practice environments).

**Final Spring Semester of Study in the DNP Program**

**N898D Final Immersion Practicum (2 cr.)** -This final practicum is an essential component of the DNP program that affords students the opportunity to immerse themselves in their area of specialty practice as they complete **112 hours of practicum experiences** in one semester. This practicum provides an intensive immersion opportunity for students to further enhance and integrate their prior learning and to gain experience with designated DNP essentials and specialty competencies.

**Psychiatric Mental Health Nurse Practitioner (PMHNP) - Role Courses**

**Course Descriptions:**

**N615 Advanced Pathophysiology (3 cr.)** - This course examines the conceptual basis and specific knowledge of pathophysiology and disease recognition for children and adults as observed in the primary care setting.

**N619 Advanced Pharmacology (3 cr.)** - This course reviews in-depth the principles of pharmacology for classes of drugs commonly used in various health care practices. The most pertinent drug classes for nursing practice are included in this course.

**N703 Pharmacotherapy Management (3 cr.)** – Integration of principles of pharmacology and therapeutic patient care management to construct, implement and evaluate optimal pharmacotherapeutic

regimens for patients in various healthcare settings. This course includes an assignment with a local pharmacist.

**N670 Family Systems and Interventions (3 cr.)** - Selected concepts, theories and research related to family dynamics and family coping, with an emphasis on practice strategies to support family well-being and mental health.

**N614 Advanced Health Assessment and Clinical Reasoning (3 cr.)** and **N698A Practicum (1 cr.)** – **must be taken concurrently.** N698A is the first practicum course in the PMHNP/DNP specialty concentration sequence.

Content and practicum focus is on acquiring the knowledge and skills needed to perform comprehensive health assessments and develop enhanced capacity for clinical reasoning and laboratory test interpretation. Application of this knowledge occurs in the concurrent clinical practicum N698A, the first clinical practicum experience in the FNP specialty that affords students the opportunity to develop competence and confidence in a precepted clinical experience while applying knowledge obtained in a concurrent theory course. Students will select an agency and a preceptor in their community and engage in **56 hours of practicum** experiences to meet course objectives. The N698A UMass faculty will supervise this practicum course in conjunction with the student's approved preceptor. This first practicum experience, which starts mid-way through the semester, concentrates on the "Art" of Clinical Reasoning and, therefore, most any qualified provider from a variety of healthcare settings can be appropriate. The concentration of the practicum is for students to learn the techniques and practices of the "Focused Case Visit" and the "Complete History and Exam Visit" to acquire a sound knowledge base in diagnostic reasoning and differential diagnosis prior to launching into the individual patient population courses. NPs and MDs who see patients of all ages in a primary care setting are preferred.

**Specialty courses include:**

**N643 Assessment and Diagnosis of Psychiatric and Mental Health Disorders-** This course introduces the diagnostic processes in mental health/mental disorders using DSM 5 diagnostic criteria, ICD coding, and other mental assessment tools while considering family, community, and cultural influences.

**N580 Integrative Therapies in Health Care-** This course will examine integrative health therapies including the cultural contexts of health and health care, telehealth, dynamics of systems and individual change, and evidence-based analysis of therapeutic effectiveness.

**N707 Neuropsychopharmacology (3 cr.)-** This course examines the pharmacological treatment of psychiatric mental health disorders and is structured to develop the student with a logical approach and treatment strategy to use when prescribing.

**N612 Advanced Practice Psychiatric Mental Health Nursing with Children and Adolescents (3 cr.)-** Content in the psychopathology, assessment, diagnosis and treatment of mental disorders affecting children and adolescents are presented.

**N698CA Practicum Advanced Practice Psychiatric Mental Health Nursing with Children and Adolescents ( 3 cr.)** – This course will consist of a supervised clinical practicum experience in a community-based health care agency providing advanced practice psychiatric mental health nursing care to children, adolescents and their families, **168 clinical practicum hours.**

**N622 Advanced Practice Psychiatric Mental Health Nursing with Adults and Older Adults (3 cr.)–** This course will consist of a supervised clinical practicum experience in a community-based health care agency/facility providing psychiatric mental health care to children, adolescents and their families.

**N698AD Practicum Advanced Practice Psychiatric Mental Health Nursing with Adults and Older Adults (3 cr.)-** This course will consist of a supervised clinical practicum in a community-based health agency or facility providing advanced practice psychiatric mental health care to adults and older adults, **168 clinical practicum hours.**

**N721 Advanced Psychotherapy Modalities with Individuals, Groups and Families (2 cr.)** – This course continues preparing students in developing advanced skills to deliver individual, group and family psychosocial therapeutics using evidence based psychosocial treatment models across the lifespan.

**N798GF Practicum Advanced Psychotherapy Modalities with Individuals, Groups and Families (2 cr.)** – This course consists of a supervised clinical practicum experience in a community based inpatient or outpatient mental health care agency providing psychotherapeutic mental health care to individuals, groups and families, **112 clinical practicum hours.**

**N722 Psychiatric Mental Health- Complex Health Problems (3 cr.)** - A refinement of advanced knowledge and skills required to deliver psychiatric mental health care to culturally diverse individuals of all ages with complex mental health and psychiatric issues.

**N798CH Practicum Psychiatric Mental Health- Complex Health Problems (3 cr.)-** This course will consist of a supervised clinical practicum experience in a health care agency/facility providing psychiatric mental health care to individuals, **112 clinical practicum hours.**

**N898D Final Direct Care residency (2 cr.)** -This final practicum is an essential component of the DNP program that affords students the opportunity to immerse themselves in their area of specialty practice as they complete **112 hours of practicum experiences** in one semester. This practicum provides an intensive immersion opportunity for students to further enhance and integrate their prior learning and to gain experience with designated DNP essentials and specialty competencies.

**University of Massachusetts Amherst College of Nursing  
Graduate Program  
Professional Conduct Policy for the College of Nursing  
Signature Sheet**

**Professional Conduct Standards**

In addition to the University's Code of Student Conduct Policy, the following behaviors are expected for all graduate nursing students. These include, but are not limited to:

- Student will adhere to HIPAA privacy requirements at all times, which include, but are not limited to: not removing, photocopying, or scanning documents that have personal identifiers from the clinical area, not leaving workstation computers open, and not engaging in discussion of clients outside accepted work area.
- Student will notify appropriate personnel before leaving a clinical learning assignment or changing or canceling hours.
- Student will practice within education level, experience, and responsibilities while in the role of graduate nursing student.
- Student will not engage in unauthorized photography in the clinical environment

**Acknowledgement**

I have read the University of Massachusetts Amherst College of Nursing Professional Conduct Standards. I understand that my behavior as a professional nursing student is expected to be consistent with these standards in all clinical activities. Violations of these Standards of Practice will result in immediate removal from the clinical area.

Name \_\_\_\_\_ Date \_\_\_\_\_

*University of Massachusetts Amherst College of Nursing Graduate Programs*

## **Overview of the DNP Project**

The DNP program is a practice-focused program that prepares advanced practice nurses for an increasingly complex evidence-based nursing practice. This includes translating research into practice, evaluating evidence, applying research in decision-making, implementing viable clinical innovations to change practice, and conducting and evaluating program development projects. The Final Scholarly Requirement of the DNP program is the DNP Project

The student, with assigned faculty advisor assistance, will select a mentor/preceptor with whom to work. This mentor/preceptor will be an acknowledged expert in the field of interest. The student may prefer or need more than one mentor and/or preceptor to fulfill identified teaching/learning goals. The residency must provide access to and authority for expanded scope of practice (for example: temporary entry into secured data systems, medical records), which will allow students to practice at the highest level.

Although the residency must take place in an approved setting, this setting may or may not be located within the New England area. However, attendance in online courses and seminars at UMass Amherst CON is required. During the residency, the DNP project is refined and actualized and the academic portfolio is completed and submitted as a required criterion for degree completion.

## **II. PRECEPTORSHIP**

### **The Preceptor Role**

A Preceptorship is a professional relationship that assists a student to acquire professional knowledge, attitudes and skills. Because nursing is a practice-based profession, it is critical for nursing students to be able to increase their competency and confidence in decision-making, clinical skills and application of knowledge, within the clinical setting to which they are assigned. While Preceptorships are typically time-limited, they often can evolve into mutually satisfying mentoring relationships between preceptor and student.

As a preceptor, you have a unique opportunity to share your knowledge, attitudes and skills with an advanced practice nursing student who has only limited experience in your clinical area. As a preceptor, you are the expert and will facilitate the student's learning about your practice setting and your clinical specialty, thus you will play an important role in the student's transition to advanced practice nursing and beyond.

As a guide and director, you will be allowing the student to provide direct patient care or other activities under your supervision. You and the student will decide what specific learning experiences need to take place to meet the course objectives and the student's goals for professional growth. The student is under your guidance as the preceptor; so working closely together will be a challenging opportunity.

While serving as a role model, it is helpful to remember what it was like for you when you first began your clinical career. The student will need your empathy as well as your knowledge to support effective learning. Not all students are alike, and the faculty at the CON value and support the individuality and diversity of each student, encouraging flexibility in learning and teaching to accomplish educational goals.

### **Students as Adult Learners**

Graduate students are adult learners who are motivated by professional and personal attributes. While every student experiences some anxiety and uncertainty, he/she is here to learn. Knowles (1990) identified the characteristics of an adult learner:

1. Adults prefer to know the rationale for learning something before undertaking to learn it.
2. Adults will invest considerable energy to learn what they perceive as valuable in learning.
3. Adult learners wish to be treated with respect and they are capable of self-direction.
4. Adults bring with them a volume of past experiences, including experiences with learning. These past experiences can be positive or serve as a barrier.
5. Adults want to learn materials that have practical application.

## **Teaching Learning Methods**

There is no one “right way” or method to teach clinical or leadership skills. It is a process with choice of methods to consider, depending on the learner's needs and style of learning, and the characteristics of the learning setting.

Experiential Learning. This provides the opportunity for direct practice and for interaction with other members of the health care team. The student develops critical thinking and problem solving skills by confronting unfamiliar situations with preceptor support and supervision. Students log cases into Typhon and reflect in class discussions with their clinical faculty member. The faculty member is responsible for evaluating the quality of the work with input on clinical performance from the preceptor for purposes of student grading.

Problem Solving. This method allows the learner to analyze a clinical, or other, situation in depth. It can be initiated by asking the student to clearly explain a specific problem related to individuals or groups and consider multiple interventions, or make differential diagnoses and management decisions based on patient historical and assessment data. As gaps in knowledge are identified, they can become learning goals.

Conference. This is a discussion involving two or more individuals. Problem solving is encouraged as well as the development of communication skills and group process skills. Problem solving, time management and clinical problem presentation are all possible areas for conference topics.

Observation. This method allows a student to experience an area on a short- term basis. An observation may be participatory in which the student contributes by performing limited activities or the student can observe a new professional role or procedure being performed.

## ***Learning Styles***

Students learn in many ways, but often they have preferred learning styles that sometimes differ from those of their preceptors. It is helpful but not necessary for the preceptor and student to have similar learning styles. If the preceptor and student can recognize their differences in preferred learning styles, teaching or learning methods can be adjusted for maximum student benefit (Anderson, 1998).

Extrovert versus Introvert. “Extroverts” prefer to learn by talking. They enjoy being active, as seen in their preference for performing psychomotor skills and working as a member of a group. In contrast, “introverts” prefer to read and use internal processing for learning. They need time to do this and do not like to have their thoughts interrupted. They also prefer to work individually.

Thinking versus Feeling. “Thinkers” prefer organization as a trait of the individual doing the teaching, enjoy objective materials to study and learn from, and find specific performance criteria useful. In contrast, those who learn best through “feeling” enjoy having a good rapport with the person doing the teaching and learning is enhanced by personal relationships.

Doing versus Watching. “Doers” prefer a hands-on approach to learning. They may never feel they have learned something until they have “done it themselves.” In contrast, “watchers” prefer to observe an activity one or more times to assimilate it before practicing it themselves.

## **Creating an Environment for Learning**

A welcoming manner not only creates a sense of being valued but also assists the student to work at his or her best level of performance. Other ways to create an environment for learning include the following:

- Introduce the student to the other members of the health care team and give them a physical tour of the unit.
- Share information needed to work successfully on the unit. These include codes to supply rooms, break rooms, and the location of items such as policies and procedures, key items, phone lists, and others.
- Choose over time assignments that will be challenging but will not cause unnecessary frustration and impede student success. Learning usually proceeds better when following a “simple to complex” pattern.
- Seek out and share complex or difficult patient situations so the student can learn to manage them while in the “protected” or supported student role.
- Acknowledge that no one knows everything, but be open to finding and sharing information with the student.
- Set aside a specified short period each day to communicate with the student solely about his or her learning.
- Celebrate the student’s successes.

## **Useful Communication Techniques**

To maximize a student’s learning in the clinical setting, communication must be open and honest:

- Be generous in providing praise, support, and encouragement (remember what it felt like to be a student).
- Listen fully and openly to what the student is saying.
- Be gentle, honest and constructive when critiquing performance.
- Use a “feedback sandwich” approach when critiquing performance. Begin with a positive comment, add constructive comments, and end with a positive comment. Be sure to be specific and genuine.
- Provide feedback immediately after a new skill or other event.
- Provide feedback in a safe environment away from patients, families, or other staff.
- Make it a habit to provide daily feedback as well as the more formal weekly feedback.
- Self-evaluate the nature of your feedback. (Specific vs. general, Factual vs. opinionated, Descriptive vs. judgmental)
- Encourage questions from the student and reassure them that no question is unimportant.
- Share questions and concerns with the faculty member. It is far easier to address a problem that is identified early in the semester than near the end.

## **Strategies for communication to enhance ongoing learning:**

- “Think out loud.” Explain the rationale for actions as they occur so the student hears the decision-making and prioritization processes. This is especially useful near the beginning of the learning experience when the student may be more self-conscious about asking questions independently.
- Ask questions. This stimulates the student’s thinking about what is important in any given

clinical situation. Allow the student time to formulate a response.

- Answer questions. Provide answers and also show the student where to find the answer to similar questions, so the student can be more self-reliant in the future.
- Use demonstration and return demonstration to assist students in skills development.

### **Assessing Student Progress**

Always develop clear and specific plans regarding those aspects of care for which the student will be held responsible. Continuously communicate with the student. Share responsibility. Evaluate the student's performance with both positive and constructive feedback. The student will ultimately be evaluated to the degree that he or she meets the course objectives, which are listed on the course's clinical evaluation tool. Each course objective has specific behaviors written beneath it, to help guide decision-making about the degree to which the overarching objective has been met. It is the faculty member's responsibility to officially evaluate the student, but preceptors are asked to provide input using weekly communication tools and at specified points, such as mid-course and end-of-course.

### **Criteria for Preceptor Selection**

1. Preceptors are chosen on the basis of their knowledge of the agency, their interest in working with students, and ability to be a realistic role model.
2. Current licensure as an APRN, MD or PA in the state where the practicum is held
3. Master of content or certification in a specialty area.
4. Educational requirements/preparation for the specialty area.
5. Recognized expertise in clinical practice.
6. Ability to guide students in meeting the objectives for the practicum.
7. Effective interpersonal skills for supporting a beginner, providing orientation to the experience, identifying student strengths and weaknesses, and giving feedback in a constructive manner.
8. Agency support for the experience and preceptor recommendation.
9. Students are encouraged to be active participants in the preceptor selection process by identifying appropriate potential preceptors. All student-identified preceptors or clinical experiences must be appropriate for meeting practicum objectives and must be approved by the student's College of Nursing program faculty member.

### **Student Health Requirements**

Prior to beginning the first clinical experience, the student is required to provide documentation of findings of a physical examination, evidence of immunizations against or positive titers for measles, mumps, rubella, tetanus/diphtheria/varicella, and chicken pox, along with evidence of serology testing and 2-step Tuberculin (TB) testing. Immunizations against Hepatitis B and flu are required.

Thereafter, all students must submit evidence of TB testing with date and result via **Castlebranch** to the College of Nursing annually. Students are required to notify the College of Nursing of any significant change in their health status that may affect participation in clinical experiences.

Students must provide the College of Nursing with the required appropriate documentation of health status to participate in the clinical practicum. A delay in returning the necessary documentation may result in the loss of a preferred clinical placement.

All clinical absences due to illness or injury must be made up. The nature of the make-up clinical experience will be the decision of the faculty in consultation with the preceptor.

### **Student Illness/Injury during the Preceptorship Sessions**

If an injury occurs during the scheduled hours of the clinical rotation or other precepted experience, agency policy should be followed. For example, in a medical emergency, needle stick, or other serious clinical injury as defined by the clinical or other preceptor, the student may be seen in the agency's health service or emergency room or if none, sent to the nearest emergency room. It is the responsibility of the preceptor to alert the faculty member and together they will determine if and what forms are to be completed to the satisfaction of both agencies. In non-emergency situations, the student may verbally tell the faculty that they elect to seek care from a private physician/clinic. The student's preceptor will notify the faculty member of any of these events. The student will cooperate with the preceptor in providing information necessary for the faculty member to report the event and/or for the preceptor to complete any required agency forms.

### ***Frequently Asked Questions***

#### ***How many hours each week will the student need to be in the clinical facility?***

This varies depending on the course. Students will be logging their clinical hours into our electronic tracking system Typhon and are responsible for reporting them to their clinical faculty member. Preceptors will be asked to verify that these hours have been completed. Each clinical course has a set number of hours required which students may split between placements. The student should negotiate a schedule with the agency that is mutually beneficial.

#### ***Can they work with only 1 preceptor?***

No. One preceptor is assigned by the agency as the primary supervisor for the student. However, due to scheduling issues, such as sick calls or cancellations, or other unforeseen circumstances, a second preceptor may be assigned to the student. The primary Preceptor may also assign the student to others during the preceptorship experience to further achievement of course objectives.

#### ***How much time will be required?***

Time requirements will vary depending upon the course and back/ground experience of the student. Faculty will provide this specific information. It is suggested that at least a one half hour meeting with the student each week be planned to discuss weekly goals/objectives and progress. The faculty member prior to the beginning of a semester will provide all educational materials and evaluation forms to the preceptors.

#### ***How much flexibility do the student and the preceptor have in designing the clinical experience?***

There is a significant amount of flexibility in terms of the type of activities students are involved with. The goal is to provide the student with educational activities specific to their individual needs and career aspirations. Each course has objectives that guide the preceptor in helping the student select experiences intended to meet these objectives. Please feel free to check in with the course faculty with any questions.

***How available are faculty members during each student experience?***

Faculty members will be available by phone or e-mail, on an on-going basis. Faculty members and our clinical coordinator will be present at our regional agencies by request, for periodic site visits, and as mutually agreed upon between the faculty member, the preceptor and the student.

***Is there payment for being preceptor?***

No. The College of Nursing is unable to provide financial compensation at this time. However, the College will be offering select continuing education seminars free of charge to preceptors, and will complete ANCC certification forms for hours served on request for APRNs seeking recertification

**REFERENCES**

Anderson, J. (1998). Orientation with style: Matching teaching/learning style. *Journal for Nurses in Staff Development*, 14(4), 192-197.

Boyer, E. L. (1990). *Scholarship reconsidered: priorities of the professoriate*. New York, New York: John Wiley and Sons.

Hayes, E. (2005a). Athena's work: The Tao of mentoring in the NP preceptor/student relationship. In *Mentoring: Ensuring the future of NP practice and education*. L. Rauckhorst (Ed.), Washington, DC: National Organization of Nurse Practitioner Faculties.

Hayes, E. (2005b) *Mentoring Research in the NP preceptor/student relationship*. In *Mentoring: Ensuring the future of NP practice and education*. L. Rauckhorst (Ed.), Washington, DC: National Organization of Nurse Practitioner Faculties.

Knowles, M (1990). *The adult learner: neglected species* (4th Ed.). Houston: Gulf. Lawrence,G. (1993). *People types and tiger stripes* (3rd Ed.). Gainesville, FL: Center for Application of Psychological Type.

### **Nursing Program/Faculty Responsibilities:**

1. Require that preceptors meet qualifications.
2. Require that there are current written agreements, which delineate the functions and responsibilities of the clinical preceptor and associated agency and nursing program.
3. Require that practicum experiences using preceptors occur only after the student has received basic theory and clinical experiences necessary to safely provide care to clients (within course or curriculum).
4. Orient both the student and the preceptor to the practicum experience.
5. Provide the preceptor with course syllabus that covers course requirements and clinical objectives. Discuss student expectations, skills' performance, student guidelines for performance of activities and/or procedures, and methods of evaluation.
6. Assume overall responsibility for teaching and evaluation of the student.
7. Assure student compliance with standards on immunization, screening, HIPAA compliance, OSHA standards, CPR, criminal background check as needed, current liability insurance coverage, and current professional nursing licensure
8. Work cooperatively with the preceptor and the agency to determine student learning needs and appropriate assignments.
9. Collaborate with preceptor and student to identify appropriate student assignments.
10. Communicate assignments and other essential information to the preceptors.
11. Maintain contact with the clinical preceptor and the student in order to monitor and evaluate the learning experience.
12. Monitor student's progress through student-faculty-preceptor meetings; practicum seminars and review of student practicum assignments.
13. Be available, e.g., telephone or e-mail for consultation with preceptors.
14. Receive feedback from the preceptor regarding student performance.
15. Provide recognition to the preceptor for participation as a preceptor.

### **Student Responsibilities:**

1. Verify clinician's/administrator's eligibility to function as preceptor.
2. Maintain open communications with the preceptor and faculty.
3. Maintain accountability for own learning activities.
4. Completely prepare for each practicum experience.
5. Be accountable for own nursing actions while in the practicum setting.
6. Arrange for preceptor's supervision when performing procedures and/or new activities.
7. Contact faculty by telephone or e-mail if faculty assistance is necessary.
8. Respect the confidential nature of all information obtained during practicum experiences.
9. Wear appropriate professional attire and university name-tags when in the practicum site.

# Instructions for Preceptor

1. Student-Preceptor Form
  - a. Your student will collect information from you to complete the online **Student-Preceptor Form**: contact information, address, and credentials.
  - b. The student will electronically sign the **Student-Preceptor Form**. It will be sent to Andrea “AJ” Juno, [ajuno@nursing.umass.edu](mailto:ajuno@nursing.umass.edu), who will send it to you via email from Adobe E-Sign. Open up the email and follow instructions to sign. The completed form will be sent back to AJ Juno and also, to your inbox for your files.
2. We encourage you to send AJ Juno, [ajuno@nursing.umass.edu](mailto:ajuno@nursing.umass.edu), your CV/Resume or give it to your student to send.
3. TYPHON Database
  - a. Typhon is the web based application that you will be using with your student to track their practicum experiences. Before your first clinical experience begins, your student will email AJ Juno to have an email sent to you to obtain your password. The email header will read: **“Typhon Group Preceptor Login Information - Acct #7313”**. The link in the email expires in 7 days, but you can easily obtain the password by these instructions:
    - Go to this link: <https://www.typhongroup.net/np/>
    - Click Preceptor/EASI Login
    - Acct # is: 7313
    - Email address: is the email the preceptor listed on Student-Preceptor Form.
    - Click link: Forgot Password
  - b. There are tutorials within the system that will explain how to use Typhon. Click **HELP TOPICS** at the bottom of the login screen.
  - c. You will be going into **Time Logs** (under **Student Reports**) to APPROVE the student hours (click **APPROVE DAY** under **Shift Time** column). Select your student from the drop down list, **Apply Filters**, then **Approve hours**. The student is responsible for inputting their **Case Logs**.
  - d. Once you have an account, you will be able to access it for all future students you precept. If you forget the password, follow the instructions listed above.
  - e. For any questions or problems with Typhon, contact AJ Juno, [ajuno@nursing.umass.edu](mailto:ajuno@nursing.umass.edu), with any questions or concerns. You may also phone her at 413-545-5056.

4. Evaluations:

- a. Your student will tell you when you can complete the evaluations. You can find the link for the evaluations at the top of your Typhon login screen. For all students, except Public Health Nurse Leaders, you will complete the **Mid Semester Clinical Eval-002** and the **Final Clinical Eval-002**.

For Public Health Nurse Leader students: complete **Public Health NL- Mid Semester Clinical Eval** and **Public Health NL- Final Clinical Eval**.

- b. If you prefer to complete the evaluation by hand, email AJ Juno, [ajuno@nursing.umass.edu](mailto:ajuno@nursing.umass.edu), and ask her to send you a PDF of the evaluation. You may scan it and send it to the student's faculty instructor or give it to the student to send it in.