Graduate Preceptor Handbook For Faculty, Preceptors, and Students

South Dakota State University

College of Nursing Department of Graduate Nursing

Academic Year 2020-2021

Content in this handbook is congruent with professional nursing standards and guidelines listed below, and with the mission, goals, and outcomes of the South Dakota State University College of Nursing.

This handbook is maintained by Nicole Gibson, DNP, RN, FNP-C; APRN Clinical Coordinator and Clinical Assistant Professor.

Professional Nursing Standards and Guidelines

- *The Essentials of Master's Education for Advanced Nursing Practice (AACN, 2011)*
- *The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006)*
- *Criteria for Evaluation of Nurse Practitioner Programs, 5th Edition* (NTF, 2016)
- *Nurse Practitioner Core Competencies with Curriculum Content* (NONPF, 2017)
- *Common Advanced Practice Registered Nurse Doctoral-Level Competencies* (NONPF, 2017)
- *Population Focused Competencies for Nurse Practitioners* (NONPF, 2013)

Table of Contents

	Page
About the College of Nursing	5
Masters (MS) Program Purpose	5
MS Program Outcomes	5
MS Student Learning Outcomes	5
MS Program Admission Requirements	6
Doctor of Nursing (DNP) Practice Program Purpose	6
DNP Program Outcomes	6
DNP Student Learning Outcomes	7
DNP Admission Requirements	8
Post Graduate (PG) Certificate Program Purpose	8
PG Certificate Program Outcomes	8
PG Certificate Student Learning Outcomes	9
PG Certificate Admission Requirements	9
Curriculum and Specialization (Introduction and Specialization)	10
Program Location/Full and Part time study (MS, DNP, PGC)	10-12
Policies	12-16
Class Absences	12
Academic Dishonesty	13
Clinical Setting Selection	13
Students in Clinical Facilities	13-14
Clinical Attire	14
General Guidelines Regarding Clinical Practicum	14
Attendance at Clinical Experiences	15
Student Health Requirements	15
COVID-19	15-16
Faculty Contacts and Support	17
Faculty Responsibilities	17-19
Preceptor / Site approval and verification of current contracts	17
Communication with preceptors	17
Use of Social Media	18
Clinical Objectives	18
Preparation of student	18
Facilitation of Clinical activities	18
Communication with students	18
Evaluation of student	18
Evaluation of clinical site and preceptor	19
Preceptor Responsibilities	19-21
Roles	19
Communication with Faculty	19
Communication with student	19
Evaluation of student	19
Documentation of Credentials	19
Guidelines for Preceptors	19-21

Student Responsibilities 21-23

Selection of Preceptor 21
Negotiation of clinical hours 21
Preparation for Clinical 21-22
Attendance at Clinical 22
Malpractice Insurance 22
BLS & ACLS certification 22
Licensure 22
Evaluation of clinical site and preceptor 22
Confidentiality of Information 23

Course Descriptions, Objectives, and Expectations 23-27

NURS 631 23-24
NURS 765 24
NURS 768..... 24-25
NURS 771 25
NURS 776..... 25-26
NURS 875 26
NURS 736 26-27
NURS 737 27

Appendices

Preceptor Profile..... Appendix A
FNP Preceptor Evaluation of Student ..... Appendix B
FNP Faculty Evaluation of Student /Site Visit ..... Appendix C
FNP Clinical Hours Face Sheet ..... Appendix D
PMH NP Preceptor Evaluation of Student..... Appendix E

About the College of Nursing

The Master's in Science and Doctor of Nursing Practice programs are accredited by the Commission on Collegiate Nursing Education (CCNE) under the American Association of Colleges of Nursing (AACN).

Purpose of the Master's in Science (MS) in Nursing Program

The purpose of the MS program is to prepare nurses for advanced practice in nursing administration, leadership, clinical practice, or education. Achievement of this purpose includes study in related fields and application of theory and research methods to the examination of nursing issues.

The MS Family Nurse Practitioner (FNP) program is designed to incorporate current issues and trends in advanced nursing practice as well as developments in education of advanced practice nurses. As a state-supported program in a land-grant university, an emphasis is placed on health care for all citizens.

Program Outcomes

To prepare Nurse Administrators, Clinical Nurse Leaders, Family Nurse Practitioners, and Nurse Educators who:

1. apply knowledge of evidence-based practice,
2. engage in life-long learning,
3. serve South Dakota, the region, the nation, and the world in urban, rural, and frontier health care settings, and function in leadership roles.

MS Student Learning Outcomes

The graduate of the MS in Nursing Program will:

1. Incorporate knowledge and theories from nursing and other supportive disciplines to promote and translate evidence into practice to effectively tailor health care to diverse populations.
2. Use leadership strategies at the organizational and individual level to work with interprofessional teams to recommend quality improvement initiatives to provide safe healthcare delivery and improve population health.
3. Assume accountability to influence health policy, improve healthcare delivery, decrease health disparities, and address the diversity of health care needs.
4. Utilize informatics to enhance delivery of healthcare to a population.

Master's Specialization specific Student Learning Outcomes:

- Nurse Administrator: Analyze and apply a broad spectrum of administrative functions such as management principles and business skills to influence health care delivery systems.
- Nurse Educator: Utilize acquired knowledge and skills to develop and implement a nurse educator evidence-based practice in a variety of settings.
- Clinical Nurse Leader (CNL): Utilize microsystem assessment date to design, implement and evaluate evidence-based interventions that improve safety and quality for selected populations.
- Family Nurse Practitioner (FNP): Collaborate with the interprofessional team in the translation, implementation, analysis, and dissemination of evidence-based practice to improve healthcare outcomes.

MS Program Admission Requirements

In addition to the requirements for admission to the SDSU Graduate School, the College of Nursing requires:

- Completion of a bachelor's degree in nursing from a CCNE or National League for Nursing Accrediting Commission (NLNAC) accredited* program
    - **Note: Program accreditation must have been obtained prior to completion of degree.*
- Minimum cumulative grade point average (GPA) of 3.0 on a 4.0 grading scale
- 1500 hours of documented nursing practice experience prior to the first clinical course
- Completion of an approved statistics course (containing both descriptive and inferential statistics) within 5 years of enrollment in SDSU Course: Nurse 626 – Research in Nursing & Healthcare
- Current licensure as a Registered Nurse in the United States or its' territories prior to enrollment in first graduate nursing course
- Letter to the SDSU graduate nursing program from the dean/director of applicant's former/current program that includes applicant's current standing and/or standing upon exit. *
    - **For applicants who have begun but not completed a graduate nursing program at another university.*
- Online interview
- Online written assessment
- Coverage by non-employer sponsored RN liability insurance (1 million / 5 million)
- Additional Specialty Coverage, e.g. student coverage (CNP or CNS), OR APRN coverage
- Basic life support
- Advanced cardiac life support
- Background check/FBI rolled fingerprints (admission to a program is conditional based on the results of the background check)
- Drug screen (admission to a program is conditional based on the results of the drug screen)
- Required immunizations (admission to a program is conditional based on completion of the required immunizations)
- For applicants with English as a second language, one the following tests for English proficiency must be completed within 2 years preceding the requested semester of admission:
    - TOEFL of 600 paper-based, 250 computer-based or 100 Internet-based score, or
    - IELTS score of 7.0 total band.

Purpose of the Doctor of Nursing Practice (DNP) Program

The purpose of the DNP program is to prepare Advanced Practice Registered Nurses (APRNs) to transform clinical practice as expert clinicians and leaders with a special focus on rural and underserved populations.

DNP Program Outcomes

1. To prepare graduates as clinicians and leaders with a special focus on rural and underserved populations.
2. To prepare graduates to deliver evidence-based direct patient care to individuals across the lifespan in primary care settings.
3. To prepare graduates to produce and implement scientific evidence to guide practice.
4. To prepare graduates to work collaboratively with frontier, urban, and rural communities in an effort to reduce health disparities.

DNP Program Student Learning Outcomes

At the completion of the program, the graduate will successfully demonstrate the following student learning

outcomes:

1. Integrate theoretical and scientific underpinnings of nursing and other disciplines to address emerging healthcare and practice issues.
2. Engage in health policy at all levels to influence healthcare delivery concerns, such as health disparities, cultural sensitivity, ethics, access to care, health finance, and quality of care.
3. Employ evidence-based practice and advanced clinical judgment to comprehensively assess, design, and deliver care for individuals across the lifespan.
4. Demonstrate leadership at the organizational and/or systems level to address health outcomes of individuals and populations though evidence-based initiatives.
5. Utilize advanced nursing knowledge and information systems/technology related to clinical prevention and health promotion to address gaps in healthcare.
6. Collaborate with the interprofessional team in the translation, implementation, analysis, and dissemination of evidence-based practice to improve healthcare outcomes.

Doctor of Nursing Practice Specialization Specific Student Learning Outcomes:

- BS-DNP-Family Nurse Practitioner: Employ evidence-based practice and advanced clinical judgment to comprehensively assess, design, and deliver care for individuals across the lifespan.
- Master's DNP: Employ evidence-based practice and advanced clinical judgment to comprehensively assess, design, and deliver care for individuals or populations

Bachelor of Science (BS) to DNP Program- Admission Requirements

- Current licensure as a Registered Nurse in the United States or its' territories prior to enrollment in first graduate nursing course.
- Bachelor's degree in nursing from an NLNAC or CCNE Accredited program with a minimum cumulative 3.3 GPA.
- Letter to the SDSU graduate nursing program from the dean/director of applicant's former/current program that includes applicant's current standing and/or standing upon exit.*
    - **For applicants who have begun but not completed a graduate nursing program at another university.*
- Online interview
- Online written assessment
- Completion of an approved statistics course (containing both descriptive and inferential statistics) within 5 years of enrollment in SDSU Course: Nurse 626 – Research in Nursing & Healthcare
- 1500 hours of documented nursing practice experience prior to the first clinical course
- Additional Specialty Coverage, e.g. student coverage (CNP or CNS), OR APRN coverage
- Basic life support
- Advanced cardiac life support
- Background check/FBI rolled fingerprints (admission to a program is conditional based on the results of the background check)
- Drug screen (admission to a program is conditional based on the results of the drug screen)
- Required immunizations (admission to a program is conditional based on completion of the required immunizations)
- For applicants with English as a second language, one the following tests for English proficiency must be completed within 2 years preceding the requested semester of admission:
    - TOEFL of 600 paper-based, 250 computer-based or 100 Internet-based score, or
    - IELTS score of 7.0 total band.

MS to DNP Program Admission Requirements

- Master's degree in nursing with a Nurse Practitioner, Nurse Anesthetist, Nurse Midwife or Clinical Nurse Specialist focus from an NLNAC or CCNE accredited program with a minimum cumulative 3.3 GPA.
- Bachelor's degree in nursing from an NLNAC or CCNE Accredited program with a minimum cumulative 3.3 GPA.
- Current licensure as a Registered Nurse in the United States or its' territories prior to enrollment in first graduate nursing course.
- National certification as a Nurse Practitioner, Nurse Anesthetist, Nurse Midwife or Clinical Nurse Specialist.
- Letter to the SDSU graduate nursing program from the dean/director of applicant's former/current program that includes applicant's current standing and/or standing upon exit.*
    - **For applicants who have begun but not completed a graduate nursing program at another university.*
- Online interview
- Online written assessment
- Completion of an approved statistics course (containing both descriptive and inferential statistics) within 5 years of enrollment in SDSU Course: Nurse 626 – Research in Nursing & Healthcare
- 1500 hours of documented nursing practice experience prior to the first clinical course.
- Additional Specialty Coverage, e.g. student coverage (CNP or CNS), OR APRN coverage
- Basic life support
- Advanced cardiac life support
- Background check/FBI rolled fingerprints (admission to a program is conditional based on the results of the background check)
- Drug screen (admission to a program is conditional based on the results of the drug screen)
- Required immunizations (admission to a program is conditional based on completion of the required immunizations)
- For applicants with English as a second language, one the following tests for English proficiency must be completed within 2 years preceding the requested semester of admission:
    - TOEFL of 600 paper-based, 250 computer-based or 100 Internet-based score, or
    - IELTS score of 7.0 total band.

Post-Graduate Certificate Program Purpose

The purpose of the Post Master's Certificate is to prepare nurses for advanced practice in leadership, education, and clinical practice.

Post-Graduate Certificate Program Outcomes

To prepare Clinical Nurse Leaders, Nurse Educators, and Family Nurse Practitioners, and Psychiatric Mental Health Nurse Practitioners who:

1. apply knowledge of evidence-based practice,
2. engage in life-long learning, and
3. serve South Dakota, the region, the nation, and the world in urban, rural, and frontier health care settings

Post-Graduate Certificate Student Learning Outcomes

- Display competence within the legal scope of practice for chosen specialization.
- Evaluate and utilize research within advanced nursing practice.
- Integrate cultural learning into nursing practice to effectively tailor health care to the diverse lifeways of clients.

Post-Graduate Specialization specific Student Learning Outcomes:

- Nurse Educator: Utilize acquired knowledge and skills to develop and implement a nurse educator evidence-based practice in a variety of settings.
- Clinical Nurse Leader (CNL): Utilize microsystem assessment date to design, implement and evaluate

evidence-based interventions that improve safety and quality for selected populations.

- Family Nurse Practitioner (FNP): Collaborate with the interprofessional team in the translation, implementation, analysis, and dissemination of evidence-based practice to improve healthcare outcomes.
- Psychiatric Mental Health Nurse Practitioner: Employ evidence-based practice and advanced clinical judgment to comprehensively assess, design, and deliver mental health care for individuals across the lifespan.

Post-Graduate Certificate Program Admission Requirements

In addition to the requirements for admission to the SDSU Graduate School, the College of Nursing requires:

- Master's degree in nursing with a Nurse Practitioner, Nurse Anesthetist, Nurse Midwife or Clinical Nurse Specialist focus from an NLNAC or CCNE accredited program with a minimum cumulative 3.3 GPA.
- Bachelor's degree in nursing from an NLNAC or CCNE Accredited program with a minimum cumulative 3.3 GPA.
- Current licensure as a Registered Nurse in the United States or its' territories prior to enrollment in first graduate nursing course.
- National certification as a Nurse Practitioner, Nurse Anesthetist, Nurse Midwife or Clinical Nurse Specialist.
- Letter to the SDSU graduate nursing program from the dean/director of applicant's former/current program that includes applicant's current standing and/or standing upon exit.*
    - **For applicants who have begun but not completed a graduate nursing program at another university.*
- Online interview
- Online written assessment
- Completion of an approved statistics course (containing both descriptive and inferential statistics) within 5 years of enrollment in SDSU Course: Nurse 626 – Research in Nursing & Healthcare
- 1500 hours of documented nursing practice experience prior to the first clinical course.
- Additional Specialty Coverage, e.g. student coverage (CNP or CNS), OR APRN coverage
- Basic life support
- Advanced cardiac life support
- Background check/FBI rolled fingerprints (admission to a program is conditional based on the results of the background check)
- Drug screen (admission to a program is conditional based on the results of the drug screen)
- Required immunizations (admission to a program is conditional based on completion of the required immunizations)
- For applicants with English as a second language, one the following tests for English proficiency must be completed within 2 years preceding the requested semester of admission:
    - TOEFL of 600 paper-based, 250 computer-based or 100 Internet-based score, or
    - IELTS score of 7.0 total band.

Compliance Requirements

The list of specific program compliance requirements is located as a link on the College of Nursing Current Students webpage

Computer Requirements

The list of specific computer hardware and software requirements is located as a link on the College of Nursing application and admission webpages.

CURRICULUMandSpecialization

Introduction

Registered Nurses with a Master's Degree in nursing with CNP, CRNA, CNS, or CNM focus from an NLNAC or CCNE accredited program are required to complete a minimum of 31-36 semester hours of credit. *Registered Nurses with a Master's Degree in Nursing (non-clinical focus) from a NLNAC or CCNE accredited program* are required to complete a minimum of 69 semester hours of credit. The student may be required to complete additional semester hours of credit if the student chooses to pursue a specialization that is different from their current certification.

Students in the BS-DNP Program are required to complete between 78-84.5 semester hours of credit depending on the chosen specialization. Plans of Study vary based on the specialization.

Students in the MS in Nursing program will complete a plan of study with credits appropriate for their plans of study for their specialization.

Specializations

All MS program students select a specialization of

- Family Nurse Practitioner
- Nurse Educator
- Clinical Nursing Leader
- Nurse Administrator

All BS-DNP program students select a specialization of

- Family Nurse Practitioner

All Post-Graduate Certificate program students select a specialization of

- Family Nurse Practitioner
- Nurse Educator
- Clinical Nurse Leader
- Psychiatric Mental Health Nurse Practitioner

Program

MS Program

Specialization	Location	Program Length
Nurse Educator	Online	2 years * 3 years *
Clinical Nurse Leader	Online	4 years *
Nurse Administrator	Online	3 years * *+Less time if increased course load*
Family Nurse Practitioner	Blended online & face-to-face	Full-time (3 years) *

*includes summer semesters

DNP Program

Specialization	Location	Program Length
BS-DNP	Blended online & face-to-face	4 years *

MS-DNP	Blended online & face-to-face	3 years *
MS-DNP/FNP	Blended online & face-to-face	3 years* 4 years*

*includes summer semesters

Post-Graduate Certificate

Specialization	Location	Program Length
Nurse Educator	Online	2 years *
Clinical Nursing Leader	Online	2 years *
Family Nurse Practitioner	Blended online & face-to-face	2 years *
Psychiatric Mental Health Nurse Practitioner	Online	2 years

* includes summer semester

Policies

Class Absences

Graduate Class Attendance Policy: SDSU's general attendance policy stated in the Graduate School Catalog will be followed.

Attendance at all on-campus sessions is expected. Attendance for an on-campus session at the end of the semester to evaluate clinical competence is also required.

All students are held accountable for attaining the course outcomes criteria despite absences. Students will notify course faculty of all absences prior to the absence or immediately thereafter in the case of an emergency. Students hold the responsibility for making up missed content and will submit written proposed plans to make up the missed class activities. After submission, the faculty will review the proposed written plans and will take one or more of the following actions:

1. Approve the student's proposed methods to make up class materials;
2. Require students to complete additional assignments under faculty direction;
3. Lower student's participation grade for the missed class and associated assignment(s);
4. Lower student's total course grade, or;
5. Fail the student, based on professional accountability violations.

The written plan is due a minimum of one week prior to a planned absence. In cases of emergency where students are unable to submit written plans prior to the absence, the written plan is due within one week of the missed class period.

Clinical Practicum Absences

Attendance at all scheduled clinical practicum is expected and required. Students are required to notify course faculty members and the preceptor of all absences prior to the absence or immediately thereafter in the case of an emergency. Students hold the responsibility for making up missed clinical days. **Students are highly discouraged from traveling for personal reasons not covered in the excused absences section, during the academic year.**

Excused Absences

There are activities that are regarded as College of Nursing approved events for excused absences from nursing classes, labs, or clinical practicum. To be an excused absence, students must be attending these events either in conjunction with their participation in a professional organization, as a class assignment, or as a professional board or committee member. Students must arrange in advance with the course faculty member and or clinical preceptor to request an excused absence from class and/or lab or practicum experience to attend approved events. The student is responsible for any missed course content.

Such events include but are not limited to the following: the South Dakota Nurses' Association Convention or board meetings; Nurses' Day at the Legislature; Sigma Theta Tau Research Day or regional and national research meetings; wellness or health events on campus which are sponsored as University events; the Ethel Austin Martin Nutrition Forum; South Dakota Rural Health Conference; South Dakota Environmental Health Association, South Dakota Public Health Association. Additional excused absences include illness, emergency, poor weather conditions, and death.

Events not included in this list will be reviewed on an individual basis by the course professor in the context of this policy. Absences from non-nursing courses are regulated by the respective course professor. University policies pertaining to absences, trip permits, and travel must be followed.

Academic Dishonesty

Student Academic Integrity and Appeals: The University has a clear expectation for academic integrity and does not tolerate academic dishonesty. University Policy 2.4 sets forth the definitions of academic dishonesty, which includes but is not limited to, cheating, plagiarism, fabrication, facilitating academic dishonesty, misrepresentation, and other forms of dishonesty relating to academics. The Policy and its Procedures also set forth how charges of academic dishonesty are handled at the University. Academic Dishonesty is strictly proscribed and if found may result in student discipline up to and including dismissal from the University.

Clinical Setting Selection

1. Faculty members select MS, PG-Certificate, & DNP student practicum sites and preceptors based on feasibility of achieving specified learning outcomes.
2. Student input into selection of a clinical area/facility and preceptor *may* be solicited for *some* courses. In general, sites of direct employment (e.g. unit student works on or clinic student works in) cannot be used as clinical site. Additionally, family members CANNOT be used as preceptors.
3. To obtain specific clinical experiences to meet course objectives, students may be required to travel to clinical settings in a variety of geographic settings. Students should be aware of the possibility of direct and indirect expenses associated with such travel.
4. To maximize learning outcomes, students may be required to travel to distant or out-of-state clinical sites.
5. Student refusal to accept a clinical site may result in the student's inability to complete the clinical hours requirement – which may delay and/or impede progress in the program plan of study.
6. Clinical agency contracts and preceptor agreements must be in place prior to starting any clinical experience.
7. Students should be aware that clinical site and preceptor placement by the APRN Clinical Coordinator or designated faculty is not a guarantee and is based on clinical site and preceptor availability and which may delay and/or impede progress in the program plan of study. Student assistance with clinical site and preceptor placement may be required under certain circumstances.

Students in Clinical Facilities (specific policies)

1. Professional apparel that meets clinical experience agency guidelines and program requirements is expected (see below for program dress code requirements).
2. The student will work within the policies of the agency and maintain a constructive relationship with the agency.
3. The student is required to provide personal health information and background checks to clinical experience agencies as requested, including, but not limited to, information required by Veteran's Administration or Indian Health Service facilities.
4. The student is required to wear a name badge with a picture which identifies their status as a South Dakota State University graduate nursing student.
5. The student is responsible for their own individual costs related to clinical experiences. This may include transportation, overnight hotel, and meal costs.

SDSU Graduate Nursing ARPN Practicum/Clinical and Lab Attire:

- Men's and women's pants should be no shorter than ankle length and they should not touch the ground. Leggings should not be worn as pants. No blue jeans.
- If skirts/dresses are worn, they must be no shorter than just above the knee.
- No wearing of clothing items that are transparent, midriffs, low cut tops, tank tops/camisoles, and no exposed undergarments. No clothing with graphic designs or any clothing that may be considered disrespectful.
- Closed toes shoes and stockings must be worn. Sandals and high heel shoes are not acceptable.
- Lab coats and name/picture badges must be worn.

- Clothing or jewelry that may dangle or hang low, such as bulky scarves or cardigans with wide collars, bangle bracelets, or long necklaces is not allowed.
- Hair should be worn above the collar and off the face or pulled back into a ponytail in clinical situations that warrant this such as while performing or observing sterile procedures.
- Engagement and wedding rings may be worn but may need to be removed when safety or infection control is a concern. There is a limit of one ring worn per hand.
- Clean-shaven or a neatly trimmed beard or mustache is acceptable.
- Fingernails should be clean, short, neatly trimmed, and unpolished. The definition of "short" is that when you look from the palm side of the hand you should not see the fingernail.
- All body and facial piercing jewelry should be removed when in clinical or lab.
- If removal of pierced jewelry is not an option and the reason is justified, the jewelry will need to be covered. Ear piercing is the exception to this rule. Small stud earrings may be worn with a limit of two per ear. No dangling or hoop earrings.
- Tattoos should be covered as much as possible.
- Clinical site policies supersede College of Nursing policies if more stringent.

General Guidelines Regarding APRN Clinical Practicum

The Student will:

1. Participate in approved clinical experiences at the required number of hours for each specific course; must be prepared, active, informed, accountable, and professional.
2. Demonstrate effective and appropriate communication skills.
3. Demonstrate effective and appropriate documentation on patient's records, and clinical logs, including correct spelling.
4. Meet with the preceptor and clinical faculty for the faculty site visit.
5. Complete clinical logs documenting a variety of experiences using the required system.
6. Complete clinical conferences with faculty (midterm & final) as required.
7. Complete personal/professional reflection and self-evaluation of progress.
8. Complete a *Clinical Rotation Requirements* document. The document is designed to assist the student in acquiring targeted clinical experiences to support their learning in the course. The student is required to partner with the preceptors to secure all of the clinical experiences listed on the document. These experiences are considered foundational and practice with these disorders in a natural clinical environment is essential. The document requires the initials of both the preceptor *and* the student for each item as it is completed.

Attendance at Clinical Experiences

- Students are to negotiate acceptable hours with the preceptor **PRIOR** to starting the clinical practicum.
- The student is expected to accommodate the preceptor's availability and schedule.
- Students are expected to treat the agreed upon clinical hours as they would a place of employment.
- If the student is to be absent for a scheduled clinical day due to illness, weather, or emergency, the preceptor should be notified prior to the beginning of the clinical day. Students are not allowed to be absent from already scheduled clinical experiences for personal travel reasons.
- The student should negotiate the procedure for contacting the preceptor in case of absence prior to starting clinical practicum. Make-up hours are then to be negotiated.
- Students also must contact the faculty member promptly.
- Students are required to keep a log of completed clinical hours. Specific intervals required are set by each course.
- If the student is not attending clinical as scheduled, the faculty member needs to be notified promptly.

Graduate Student Health Requirements

Students are required to complete the Health Status Report upon admission to the College of Nursing and are required to be immunized with Hepatitis B vaccine.

Annual TB Mantoux or QuantiFERON-TB Gold and annual Influenza tests are also required.

General Statement on COVID-19 Pandemic

Participants in this course are subject to, and expected to comply with, the policies, procedures, rules, and regulations of the SDBOR and SDSU as modified throughout the duration of the course. Due to the current COVID-19 Pandemic, the SDBOR and SDSU have adopted provisions to minimize COVID-19 exposure to the SDSU community that are compliant with changing CDC and SD DOH guidelines. These guidelines apply to all classes and activities held by SDSU. Anyone who does not comply with these important provisions may be subject to the SDSU Student Conduct Code 3:1 and other applicable policy provisions found in SDBOR and SDSU policies. Current information concerning SDSU updates to the provisions applicable during the COVID-19 Pandemic may be viewed online at the https://www.sdstate.edu/jacksrback and https://www.sdstate.edu/covid-19 webpages. Please check these sites frequently for updates.

Temporary COVID-19 Class Attendance Policy for Fall 2020

Please note: This temporary policy is provided by the Office of the Provost pursuant to the SDSU policy giving authority for exceptions to the comprehensive SDSU Class Attendance Policy (SDSU Policy 2:5). These policies rely in part on the honor system, but nonetheless are subject to the Student Conduct Code (SDSU Policy 3:1): *Students are trusted to provide accurate information regarding the reason(s) for their absences.*

Students who are experiencing symptoms of COVID-19, engaging in self-quarantine, or are in isolation based on a positive COVID-19 test, should not attend in-person classes. For those absences, students shall not be required to provide formal documentation, nor shall they be penalized, but they must confer with their instructors to determine whether remote participation, an Incomplete grade, or withdrawal is most appropriate.

Students who are absent due to experiencing COVID-19 symptoms, engaging in self-quarantine, or in isolation due to a positive test, shall

- notify instructors of their absence in a timely manner, in advance if possible;
- participate in synchronous and asynchronous online learning activities, as able;
- keep up with coursework, as able; and
- work with instructors to reschedule online or on-campus exams, labs, assignments, and other academic activities, as needed.

For more details regarding attendance policies, see the *SDSU Class Attendance Policy (SDSU Policy 2:5)* and the Student Conduct Code (SDSU Policy 3:1). For details regarding what to do in case of a suspected or known COVID-19 infection, visit the What if I Get Sick? page located on the JacksRBack Students page: Please note that a student must notify the Office of the Vice President of Student Affairs upon experiencing symptoms or having a presumptive or confirmed COVID-19 test.

Faculty Contacts & Support

Contacts and Support

Course faculty are available for contact and support. See course syllabus for faculty contact information or call 605-688-4114.

Associate Dean for Academic Programs:
Melinda Tinkle, PhD, RN, WHNP-BC, FAAN
Associate Dean for Academic Programs
& Associate Professor
SDSU College of Nursing Box 2275
Brookings, SD 57007
605-688-6153
Email: Melinda.Tinkle@sdstate.edu

SF FNP Program Contact:
Nicole Gibson, DNP, RN, FNP-C
Clinical Assistant Professor &
APRN Clinical Coordinator
2300 N. Career Ave. Ste. 260
Sioux Falls, SD 57107
605-782-3223
Email: Nicole.Gibson@sdstate.edu

Psychiatric Mental Health NP Program:
Kay Foland, PhD, RN, PMHNP-BC, PMHCNS-BC, CNP
Professor Emerita
South Dakota State University College of Nursing
Rapid City Nursing
1220 Mt. Rushmore Road, Suite 2
Rapid City, SD 57701
605-394-2878
Email: Kay.Foland@sdstate.edu

Rapid City FNP Program Contact:
LeAnn Lamb, MSN, RN, WHNP-C
APRN Clinical Coordinator
College of Nursing-Rapid City
Health Science Building
1011 11th St.
Rapid City, SD 57701
210-846-2389
Email: LeAnn.Lamb@sdstate.edu

Faculty Responsibilities

Preceptor/Site approval and verification of current contracts

Students may be asked to submit preceptor requests to the APRN Clinical Coordinator or designee utilizing the appropriate forms. All preceptors and clinical sites must be approved by the coordinator or designee prior to a final agreement with the preceptor. A preceptor agreement, preceptor profile, and the clinical agency contract must be in place prior to the student being on site for clinical experience.

Communication with preceptors

Faculty provide written communication regarding course requirements; level of prospective student; time and method of regular communication; expectations of the preceptor; and methods of student performance evaluation. Faculty will also communicate with the preceptor at the time of the site visit. Additional communications as necessary will occur as needed. Communication between faculty and preceptor can be initiated by either party.

Student professional behavior is expected both in and outside the classroom. This includes all interactions with colleagues, faculty, CON staff, preceptors, clinic staff, and patients in person, via email or telephone. Patient confidentiality and adherence to the HIPAA guidelines are assumed and will be expected both in class and at clinical sites.

Cell phones may not be turned on during clinical time unless approved by clinic preceptor. Cell phones must be on vibrating if approved. If the student abuses the use of the cell phone at the clinic site, they can be asked to leave the clinical site. Students are not allowed to utilize social media websites or personal texting during clinical hours. Cell phones need to be sanitized per facility requirements. Students are to comply with HIPAA regulations.

Use of Social Media

The College of Nursing recognizes that social media websites such as, but not limited to, Facebook, Twitter, LinkedIn, and YouTube are important means of communication and learning. However, students who use these web sites and applications must be aware of the critical importance of who has access to these sites. Additionally, students must recognize that posting certain information may be illegal. Students should review the South Dakota State University College of Nursing Social Media Policy prior to utilizing these sites and applications. Students are also encouraged to review the American Nurses Association Social Media Fact Sheet and the National Council of State Boards of Nursing white paper on the use of social media.

Clinical Objectives

The preceptor coordinator or their designee will provide the preceptor with a copy of the course objectives and content. Students are also responsible for developing clinical objectives for each clinical course. These objectives should align with course content, areas identified for improvement in skill, knowledge, or experience, program outcomes, or essentials. Students may seek preceptor input into the development of the objectives but must approve the objectives. Students will be evaluated by faculty on their progress toward meeting their objective midway through their clinical hours and at completion of the clinical hours.

Preparation of student

Faculty are responsible for verifying that students meet pre-clinical requirements prior to entering the clinical setting. This includes verifying the student has completed pre-requisite course work, holds a current state RN license, has passed all required background checks, has immunizations that are up-to-date, has current liability insurance, and is appropriately certified in Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS) as required by the course level. Methods to orient the student to their responsibilities include, but are not limited to, verbal and written communication.

Facilitation of clinical activities / site visits

The faculty member will make scheduled visits to the clinic site. The date and time are confirmed with the student. It is the student's responsibility to inform the preceptor and faculty of the date/time of the visit. Purposes of the site visit include observation, evaluation, and instruction of the student in actual patient care situations as well as student's interaction with staff and preceptor. Additionally, the site visit provides the faculty member, the preceptor, and the student an opportunity to discuss the student's progress.

Communication with students

Faculty will have regularly scheduled meetings with students to discuss their progress. Clinical logs will be reviewed on a regular basis.

Evaluation of student

The course syllabus and clinical evaluation forms include the requirements and evaluation criteria for successful student performance. Evaluations by the faculty member with input from the preceptor are important components of the student performance. Open communication between the faculty, preceptor, and student is essential. Faculty assume the ultimate responsibility for the evaluation of the student. Faculty employ several evaluation methods including making site visits to observe the student in actual patient care situations as well as interactions with staff and preceptor. Additionally, regular review of student's clinical logs documenting the student's clinical experiences, patient-based learning assignments, and supportive evidence from the clinical preceptor are utilized.

Evaluation of clinical site and preceptor

Faculty will complete a regular review of each preceptor using information from the faculty and student evaluations. These documents will be used for continued approval as a preceptor.

Preceptor Responsibilities

Roles

The preceptor's primary role is teaching. Preceptors assist the student to integrate and apply knowledge from their foundational courses incorporating the information in the assessment and management plan. Preceptors stimulate clinical decision making through questioning the student regarding their observations and reasoning. This process assists the student to reflect and describe their assessment and recommend differential diagnoses, diagnostic testing, and treatment plans. Additionally, preceptors assist the student in accurate and complete documentation of pertinent information. The preceptor has the opportunity to model interpersonal relationship skills with colleagues, patients, and families. Preceptors model behaviors to navigate the organizational system such as experiences with managed care and interagency referrals. Furthermore, the preceptor models the role of a health care provider and an interprofessional team member.

Communication with Faculty

While preceptors are encouraged to contact the faculty person at any time, preceptors should contact faculty as soon as possible for situations involving a student's unsafe practice, unethical conduct, or any changes in the preceptor's availability to precept. Any agency concerns should also be related to the faculty member. Additionally, preceptors will have the opportunity to discuss student progress with the faculty member when site visits are made.

Communication with student

Preceptors are encouraged to provide regular feedback to the student including brief discussions of the student's daily performance, as well as midterm and final evaluations. Preceptors are encouraged to relate concerns to the student at the time of occurrence for the student to address any concerns as soon as possible.

Evaluation of student

While the faculty member assumes ultimate responsibility for the formal written evaluation, the preceptor's input will provide supportive evidence for the ratings. The "Competency Based Evaluation" tool provides a framework that assists with collecting objective and subjective data about student performance. The preceptor's primary role is teaching. In the teaching process, the preceptor will observe the student in practice and fit those observations into the evaluation framework. Preceptors are able to collect data that provides evidence of student competence. Additionally, preceptors have an opportunity to support professional practice standards. Observations of the student's performance should be compared with practice standards, validated with faculty, and shared with the student. The student's response to day-to-day feedback also serves as part of the preceptor's evaluation data.

Documentation of Credentials

A preceptor profile or curriculum vitae (CV) for each preceptor is required to be on file. Documentation of preceptor license and credentials to practice is important to ensure the quality of providers who mentor students. These documents must be available to the visiting accrediting bodies during program evaluation and renewal.

Guidelines for Preceptors

Beginning Student

- Spend the first day observing the preceptor
- The second day of clinical, take on increasing aspects of the provider-patient encounter
- Direction from the preceptor is needed, at times much direction; over time the preceptor learns to trust the students' knowledge base and competency; less prompting is required as the student's skill level increases

- The Preceptor begins to delegate and allow the student to take on more independent responsibilities

Intermediate Student

- The student is more proficient in analyzing data, more knowledgeable and comfortable with the diagnostic process and management planning
- The student is more proficient with the use of time and resources
- The student may require less prompting from the preceptor, but still may need help to remain focused
- The student is ready to explore other provider role functions, such as teaching and quality assurance activities
- The student will still require support and assistance for more complex patient cases.

Advanced Student

- The student is expected to perform all role function for an increasingly complex case load in a more thorough, efficient, organized, skillful, and independent fashion.

Orientation Strategies

- Identify ground rules (i.e. patient selection, reviewing protocols specific to the setting)
- Review charts to outline documentation requirements used in the setting
- Explain the role of the preceptor (i.e. how you will introduce the student to patients; how you will check the student's findings on physical examination)
- Share your expectations of the student with the student
- Get to know the student (i.e. what the student's past professional and student experiences are; the student's perceptions of their learning needs)

Strategies to Assist Students to Learn in the Clinical Setting

- Create an environment to decrease anxiety and enhance learning (i.e. give positive feedback; reassure the student that you are ultimately responsible for the patient's care; reinforce their sense of competency by reminding them of their nursing experience to date)
- Role model (i.e. demonstrate components of the physical exam; joint counseling and educating the patient)
- Use charting/documenting as a teaching tool
- Use pre and post conference as appropriate
- Assign readings for specialty areas or interesting cases'
- Use detailed, guided questioning with the student (it helps the student to focus and to give rationale for the actions taken)

Indicators of student readiness for increased responsibility

- There is a mutual increase in comfort, almost intuitive, a mutual decision
- Trust is built between you and the student; it helps the student not get in over their head and to be responsible for their actions and decisions
- The student proves they will not miss anything important
- There is no longer a need to review every detail with the preceptor
- The student gives accurate clinical presentation of significant positives and negatives
- The data presented by the student proves they have covered all the bases with the patient; they have not only met the patient's needs, but has not found anything wrong with the normal patient
- The students demonstrate the ability to incorporate past experiences with new skills and apply them to new scenarios
- The student recognizes their limits of knowledge; admits to weaknesses
- The student asks appropriate questions
- The student becomes a self-starter; can cope with an unstructured setting or a change in schedule
- The student asks for more challenging experiences; exhibits confidence

Student Responsibilities

It is important for students to recognize their role as a student and their responsibilities to the clinical site and preceptor. The student can optimize their clinical learning experience by following these guidelines.

Preceptors need to remember that they do not fail students or stall a student's progress. Instead, the student's performance either meets or fails to meet criteria.

As a rule, preceptors for family nurse practitioner students are asked to fill out the "Competency Based Evaluation" Tool form midway through the student's hours and near the end of the completion of hours. Preceptors are encouraged to contact the faculty at any time with any questions or concerns.

Selection of Preceptor

Students may be given the opportunity to provide input into the selection of their clinical preceptor. If so, students can suggest a preceptor to the clinical coordinator or designee based on the potential preceptor's experience with students from the program, recommendations from faculty, geographic need, preceptor specialty/subspecialty, and experience of the preceptor. All preceptors and clinical sites must be approved by the clinical coordinator or designee prior to a final agreement with the preceptor. The preceptor must have a minimum of one-year clinical practice experience in which the clinical will occur. Students should be aware that clinical site and preceptor placement by the APRN Clinical Coordinator or designee is not a guarantee and is based on clinical site and preceptor availability and acceptance – which may delay and/or impede progress in the program plan of study. Student assistance with the clinical site and preceptor placement may be requested under certain circumstances. Students CANNOT have a family member serve as a clinical preceptor.

Negotiation of Clinical Hours

Students are to negotiate acceptable hours with the preceptor prior to starting the clinical practicum. The student is expected to accommodate the preceptor's availability and schedule. Students are expected to arrange their personal and work schedules to accommodate participation in the required number of clinical hours specified by the clinical course. The clinical hours face sheet should be completed and a copy for the preceptor, faculty, and student provided. Changes to the clinical schedule are provided in writing to the preceptor and the clinical professor. **Students are highly discouraged from traveling for personal reasons not covered in the excused absences section, during the academic year.**

Preparation for Clinical

The student is expected to prepare for the clinical practicum as recommended by the faculty and preceptor. This preparation includes developing individual learning objectives, conferring with faculty and preceptor on areas of weakness, and seeking independent learning experiences that will provide the student with a higher level of self-confidence. Students are to meet with the preceptor prior to beginning clinical hours. The student should be prepared with a short CV/resume, written clinical objectives, and a clinical calendar form to negotiate clinical hours for the semester.

The student should discuss with the preceptor the patient population in the preceptor's practice and the most common clinical problems that s/he can expect to encounter in the clinical site. The student is expected to prepare for the clinical practicum by reading current reference material for the patient population and patient clinical problems most often encountered by the preceptor. Preparation should also include reading appropriate reference material to expand knowledge regarding clinical situations encountered by the student during the practicum hours.

Attendance at Clinical

Students are to negotiate acceptable hours with the preceptor prior to starting clinical practicum. The student is

expected to accommodate the preceptor's availability and schedule. Students are expected to treat the agreed upon clinical hours similar to work hours. If the student is to be absent for a scheduled clinical day due to illness or emergency, the preceptor should be notified prior to the beginning of the clinical day. The student should negotiate the procedure for contacting the preceptor in case of absence prior to starting clinical practicum. Make-up hours are then to be negotiated. Students also must contact the faculty member promptly. Students are required to keep a log of completed clinical hours. Specific required intervals for submission of hours to clinical faculty are set by each course. **Students are highly discouraged from traveling for personal reasons not covered in the excused absences section, during the academic year.**

The student should provide a one to two-page summary of their education, work history and clinical experience if required. Include clinical and other pertinent courses completed in the nurse practitioner program and previous student NP clinical experiences.

Malpractice Insurance

Coverage by professional RN liability insurance (1 million/5 million) prior to enrollment in the first graduate nursing core course is required. Malpractice/liability insurance covering Nurse Practitioner students is required once the student enters the Nurse Practitioner Practicum courses.

BLS & ACLS Certification

Successful completion of BLS prior to their first graduate clinical course is required. Successful completion of an ACLS course is required prior to NURS 765.

Licensure

Licensure is required as an RN in South Dakota prior to enrollment in the first graduate nursing core course, and for MS-DNP students, APRN license. Licensure may also be required in the state where clinical hours will be completed. Multi-state licensure compacts recognized by the South Dakota Board of nursing are acceptable.

Students are required to maintain current licensure during the program. Students are responsible for submitting appropriate documentation in a timely manner to the graduate nursing program office.

Evaluation of Clinical Site and Preceptor

Selected courses will require faculty visit the student's practicum site.

- Students within the state of South Dakota or < 200 miles from Brookings, Sioux Falls, or Rapid City will not be required to pay additional charges.
- Students outside the state of South Dakota or >200 miles from Brookings, Sioux Falls, or Rapid City **will be** required to pay for faculty travel to the site(s) for 1-3 site visits per semester including:
    - Airfare or mileage (or both is a rental car is required);
    - Motel for the number of nights required
    - Rental Car fees
    - The student may also choose to travel to Brookings, Sioux Falls, or Rapid City to do the "site visit" and pay his or her own travel expenses to their home campus.

Should a student fail a site visit requiring an additional follow-up visit by faculty, the student will be responsible for all associated travel expenses for repeat visits, etc.

Confidentiality of Information

Students will maintain confidentiality while communicating data, plans, and results in a manner that preserves the dignity and privacy of the client and provides a legal record of care.
For purposes of accreditation, students will assemble certain information in relation to their participation in the care

of patients, but subsequent use of the information will be in redacted from meeting HIPAA Limited Data Set requirements.

When recording data to document student experiences, the student will remove any patient identifying data as identified as "Limited Data Sets." Limited Data Sets are Protected Health Information (PHI) with the following twelve identifiers regarding the patient, the patient's employer, the patient's relatives and the members of the patient's household removed from it: 1) name; 2) street address; 3) telephone and fax numbers; 4) e-mail addresses; 5) social security numbers; 6) certificate/license numbers; 7) vehicle identifiers and serial numbers; 8) URLs and IP addresses; 9) full face photos and other comparable images; 10) medical record numbers, health plan beneficiary numbers, and other account numbers 11) device identifiers and serial numbers: and 12) biometric identifiers, including finger and voice prints.

Graduate Nursing Program Clinical Course Descriptions & Learning Outcomes

The following courses are required for the MS, PG-Certificate, BS-DNP FNP Students:

NURS 631 Assessment Across the Lifespan

Course Description

This course builds on basic skills of individual health assessment. It includes assessment of physiological and psychosocial processes relevant to the health of all age groups, and the assessment of selected human pathologies. Advanced assessment skills and tools necessary to identify health care needs and apply health maintenance protocols are included.

Student Learning Outcomes

1. Demonstrate sound critical thinking and clinical decision-making utilizing health assessment tools to develop advanced, refined health assessment skills.
2. Develop a comprehensive data-base, including complete functional assessment, episodic and complete health history including a three-generation pedigree and physical examination appropriate for the individual's health status, developmental, gender, cultural, and ethnic background, as well as, end of life considerations.
3. Perform a risk assessment of the client including assessing lifestyle and other risk factors related to all health dimensions including common emotional illnesses.
4. Select and interpret the appropriate laboratory and other diagnostic tests taking into consideration factors of cost, access, quality, ethics, and safety, and their influence on health care.
5. Integrate assessment findings, along with screening and diagnostic strategies, with pathological and physiological changes, to generate differential diagnoses and establish an accurate diagnosis.
6. Critically synthesize data, research, and evidence to develop an effective and appropriate evidence-based plan of care for the client, taking into consideration personal history and health status, gender, life circumstances, and genetic, ethical, cultural, ethnic, and developmental variations to ensure the delivery of high quality care to patients in the primary care setting.
7. Demonstrate information literacy through utilization of current recommendations, evidence based-practice and clinical guidelines for disease prevention, health protection, anticipatory guidance, counseling, and health promotion in an individualized application which is appropriate to age level, gender, cultural variations, education needs, and personal history including considerations for the rural and underserved.
8. Integrate and communicate research literature and theory readings into clinical laboratory practice knowledge effectively both orally and in writing.

NURS 765 FNP Integration: Practicum I

Course Description

The emphasis of the course is on the application of evidence-based knowledge to clinical practice in primary care settings. Students will strengthen their health history and physical examination skills in the formulation of differential diagnoses and clinical decision-making relative to common primary care conditions and developmental

variations such as pregnancy. Development of initial primary care procedural skills along with ordering and interpreting diagnostic testing will be included. This course provides the basis for integrating clinical data with knowledge of pathophysiology to formulate diagnostic hypotheses for clients across the lifespan.

Student Learning Outcomes

1. Demonstrate information literacy in the management and delivery of healthcare in primary care settings.
2. Collect & organize clinical data using knowledge of specific illnesses and symptom complexes, pharmacotherapeutics, genomics, and knowledge from related sciences to formulate diagnostic hypotheses/differentials.
3. Engage in patient-centered care to formulate and implement a holistic treatment plan, focusing on health promotion, illness prevention, and illness management, while incorporating cultural, environmental, and genetic assessment information.
4. Maintain a high level of professional accountability, uphold professional standards, and function within the scope of practice for family nurse practitioners.
5. Apply ethical and legal principles to advance practice nursing decisions in primary care settings.
6. Utilize current evidence-based practice guidelines and research to ensure the delivery of high-quality care to patients in the primary care setting.
7. Use clinical investigative skills to identify practice issues at the individual, population, systems/organization, and policy levels.
8. Participate in intraprofessional and interprofessional collaboration to improve patient outcomes through application of evidence-based care and to enhance healthcare delivery.
9. Contribute to a culture of nursing excellence through quality improvement practices.

NURS 768 FNP Integration: Practicum Ⅱ

Course Description

Emphasis is placed on obtaining an accurate health history and performing an appropriate physical examination skill to formulate differential diagnoses and utilize clinical decision-making relative to common primary care conditions. Developmental variations, culture, and patient preference are considered to determine appropriate diagnostic tests as well as pharmacologic and non-pharmacologic treatment plans.

Student Learning Outcomes

1. Demonstrate information literacy in the management and delivery of healthcare in primary care settings.
2. Collect & organize clinical data using knowledge of specific illnesses and symptom complexes, pharmacotherapeutics, genomics, and knowledge from related sciences to formulate diagnostic hypotheses/differentials.
3. Engage in patient-centered care to formulate and implement a holistic treatment plan, focusing on health promotion, illness prevention, and illness management, while incorporating cultural, environmental, and genetic assessment information.
4. Maintain a high level of professional accountability, uphold professional standards, and function within the scope of practice for family nurse practitioners.
5. Apply ethical and legal principles to advance practice nursing decisions in primary care settings.
6. Utilize current evidence-based practice guidelines and research to ensure the delivery of high-quality care to patients in the primary care setting.
7. Use clinical investigative skills to identify practice issues at the individual, population, systems/organization, and policy levels.
8. Participate in intraprofessional and interprofessional collaboration to improve patient outcomes through application of evidence-based care and to enhance healthcare delivery.
9. Contribute to a culture of nursing excellence through quality improvement practices.

NURS 771 FNP Integration Practicum II

Course Description

Emphasizes the integration of pathophysiology and specific disease and symptom complexes in the formulation of differential diagnoses and clinical management of acute and chronic health problems.

Student Learning Outcomes

1. Demonstrate information literacy in the management and delivery of healthcare in primary care settings, utilizing technology to document health history and physical examination findings, diagnosis, and treatment plans.
2. Collect & organize clinical data using knowledge of acute and chronic illnesses and symptom complexes, pharmacotherapeutics, genomics, and knowledge from related sciences to formulate diagnostic hypotheses/differentials.
3. Engage in patient-centered care to formulate and implement a holistic treatment plan, focusing on illness management, while incorporating health promotion, illness prevention, and cultural, environmental, and genetic assessment information.
4. Maintain a high level of professional accountability, uphold professional standards, and function within the scope of practice for family nurse practitioners.
5. Independently apply ethical and legal principles to advance practice nursing decisions in primary care settings.
6. Utilize current evidence-based practice guidelines and research to ensure the delivery of high-quality care to patients in the primary care setting.
7. Use clinical investigative skills to identify practice issues at the individual, population, systems/organization, and policy levels.
8. Participate in intraprofessional and interprofessional collaboration and teamwork to improve patient outcomes through application of evidence-based care and to enhance healthcare delivery.
9. Contribute to a culture of nursing excellence through quality improvement practices.
10. Provide timely, knowledgeable, and appropriate interventions and/or referrals to patients in a family practice setting to provide safe, continuous care.
11. Identify appropriate research questions arising from clinical observations in primary care settings.

NURS 776 FNP Integration- Practicum IV

Course Description

The clinical internship offers the advanced practice nursing student the opportunity to synthesize and apply theoretical concepts derived from nursing and other health-related disciplines to the clinical practice settings for the provision of primary care to clients across the lifespan. Independent and interdependent clinical decision making is expected, and interdisciplinary collaboration and referral are emphasized.

Student Learning Outcomes

1. Provide safe, evidence-based, holistic, continuous, comprehensive, and patient-centered health management, health promotion and disease prevention, and palliative and end-of-life care to patients and families across the lifespan and through the health/illness continuum.
2. Synthesize clinical knowledge from the natural/behavioral sciences, nursing, and evidence-based practice as a foundation for managing physical and emotional illness.
3. Analyze the role of the nurse practitioner in health care settings and the dynamic health care arena and demonstrate leadership to practice within the scope of practice.
4. Demonstrate competence in the use of technology and information literacy as part of clinical decision making in the management and quality improvement of clinical practice.
5. Collaborate with patients and inter-professional colleagues to develop and implement a treatment plan for health promotion, illness prevention, and/or illness management incorporating cultural, environmental, and genetic assessment information.
6. Identify ethical considerations in healthcare practice and utilize ethical foundations to propose practice solutions.
7. Analyze and evaluate evidence-based research, guidelines, and practice knowledge to provide the full spectrum of care, to seek out answers to clinical questions, and to improve the healthcare delivery system and the quality of care.

The following courses are required for the DNP Students:

NURS 875 DNP Intensive

Course Description

Focused clinical experiences aligned with the practice doctorate. Students and the program adviser and/or faculty will develop clinical experiences that augment current practice expertise.

Student Learning Outcomes

1. Demonstrate increased knowledge and skills based in the clinical field of the student's choosing.
2. Additional learning outcomes to be determined by the student.

The following courses are required for the PG-Certificate Psychiatric Mental Health Students:

NURS 736 Advanced Psychiatric Assessment and Differential Diagnosis Across the Lifespan I

Course Description

Communication skills, comprehensive history-taking techniques, advanced psychosocial and physical assessment skills, screening/diagnostic testing, and diagnostic reasoning skills required in advanced nursing practice are developed. The focus is on developing these skills from an evidence-based, culturally responsive perspective.

Student Learning Outcomes

1. Utilize therapeutic communication skills to conduct and document a comprehensive mental health assessment across the lifespan
2. Develop communication techniques to address challenging interviewing situations
3. Identify screening tools and instruments that will aid in screening and diagnosis of mental health disorders
4. Conduct a suicide risk assessment of individuals and organizations
5. Examine legal, ethical, and professional issues associated with suicidal homicidal risk and involuntary detainment or hospitalization
6. Apply the American Psychiatric Association system of classification of mental illness to establish a working and differential diagnosis.
7. Apply environmental, psychosocial, developmental, and cultural factors in establishing differential diagnosis.
8. Utilize evidence- based approaches to establish initial treatment approach for major mental health disorder.
9. Incorporate prevention and health promotion strategies into the treatment approach
10. Deliver an effective written case presentation of a mental health disorder with consideration of differentiating between diagnosis and determining evidence based treatment approach.

NURS 737 Psychiatric/Mental Health Advanced Practice Across the Lifespan II

Course Description

This course expands clinical training in the full role of the psychiatric mental health nurse practitioner. Emphasis is on the integration of content areas to advance competences in the ethical, safe, collaborative, and evidence-based provision of mental health care for all ages.

Student Learning Outcomes

1. Establish therapeutic and culturally sensitive relationships with clients and families.
2. Diagnose common conditions relevant to student's area of practice.
3. Develop evidence-based management plans (including pharmacological interventions) to address conditions relevant to student's area of practice.
4. Integrate legal, ethical, socioeconomic, psychosocial, and cultural factors into delivery of care.
5. Evaluate the effectiveness of therapeutic interventions and adjust the management plan as needed.
6. Provide education to patients and families
7. Adapt teaching approaches to meet the learning and cultural needs of the client, family and/or caregiver.
8. Participate in and/or lead interprofessional teams to meet client needs.
9. Relate the role of the nurse practitioner to various patient care situation

Appendix A

Preceptor Reference Data (please print)

Last Name:_____ First Name:_____

Credentials:_____

Preceptor Employer: _____

Preceptor Employer Address:_____

Preceptor Agency/Site:_____

Address:_____

City, State, Zip Code:_____

Phone Number:_____

Fax Number:_____

Email Address:_____

Practice Specialty:_____

Certification:_____Expiration Date:_____

Years of Practice in Each Specialty:_____

State(s) in which you are licensed:_____

State License Number(s):_____

Expiration Date:_____

Appendix B

Competency-Based Clinical Evaluation Tool
Preceptor Evaluation of Student

Date: _____

Student: _____ Faculty: _____

Preceptor: _____ Clinical Site: _____

Patient Encounter(s):

Patient age: _____ Gender: _____ CC/Diagnoses: _____

Patient age: _____ Gender: _____ CC/Diagnoses: _____

Patient age: _____ Gender: _____ CC/Diagnoses: _____

Course	Description
765	Novice student. Focus is on completion of acute visits and well exams.
768	Advanced beginner student. Focus is on the enhancement of acute visits and well exams
771	Competent student. Focus is the addition of chronic diseases to previously learned acute content
776	Proficient student. Focus is the addition of complex disease processes to previously learned content.

**Students may not utilize the EMR templates during the clinical site evaluation.*
**If students are going to access electronic databases for reference during the site visit evaluation (i.e. UpToDate, Epocrates, etc.), this must be done in conjunction with the site visit evaluation faculty.*

Criteria	Did Not Meet Expectations	Met Expectations	Not Observed	Comments (required if criteria/expectations are not met)
Obtains a comprehensive and/or problem focused HPI from the patient and/or family.				
Obtains a comprehensive and/or problem-focused ROS from the patient and/or family.				
Obtains a comprehensive and/or problem focused PMH, FH, SH from the patient and/or family.				
Performs a comprehensive and/or				

problem-focused physical examination using correct assessment technique and equipment.				
Differentiates between normal, variations of normal, and abnormal findings.				
Demonstrates critical thinking in diagnostic ordering and interpretation.				
Organizes clinical information to arrive at appropriate differentials and final diagnosis.				
Formulates and prioritizes a plan of care based on scientific rationale, evidence-based standards of care, and clinical practice guidelines.				
Safely prescribes appropriate patient-centered pharmacological treatment modalities.				
Integrates and counsels the patient on the use of non-pharmacologic therapies based on patient-centered characteristics.				
Develops and implements patient-centered health promotion/disease prevention plans.				
Provides anticipatory guidance and counseling for patients and/or families.				
Verbally communicates the patient's health status accurately to the preceptor in a timely and succinct manner.				
Evaluates results of previous or current interventions and revises plan appropriately.				
Collects, maintains, and documents the patient's health care information in a confidential and timely manner.				
Assesses the patient's and/or family's need and readiness for learning based on personal characteristics.				
Provides appropriate teaching, educational materials, guidance, and counseling regarding management of health/illness conditions.				
Communicates with the patient and faculty using effective and appropriate techniques.				
Uses available community resources in designing patient-centered plans of care.				
Consults and refers appropriately with the preceptor and other health care team				

members.				
Demonstrates behaviors of self-efficacy, ethics, and advocacy in patient encounters.				
Demonstrates professional behavior.				
Engages in self-evaluation concerning practice.				
Uses strategies to reduce common errors.				
Considers barriers to access, cost, efficacy, and quality when making health care decisions.				
Utilizes informatics appropriately.				

1. Strengths of student:

2. Areas for improvement:

_____ _____

Signature & Date of Preceptor Signature & Date of Student

Appendix C

Competency-Based Clinical Evaluation Tool
Faculty Evaluation of Student

Date: _____

Student: _____ Faculty: _____

Preceptor: _____ Clinical Site: _____

Patient Encounter(s):

Patient age: _____ Gender: _____ CC/Diagnoses: _____

Patient age: _____ Gender: _____ CC/Diagnoses: _____

Patient age: _____ Gender: _____ CC/Diagnoses: _____

Course	Description
765	Novice student. Focus is on completion of acute visits and well exams.
768	Advanced beginner student. Focus is on the enhancement of acute visits and well exams
771	Competent student. Focus is the addition of chronic diseases to previously learned acute content
776	Proficient student. Focus is the addition of complex disease processes to previously learned content.

**Students may not utilize the EMR templates during the clinical site evaluation.*
**If students are going to access electronic databases for reference during the site visit evaluation (i.e. UpToDate, Epocrates, etc.), this must be done in conjunction with the site visit evaluation faculty.*

Criteria	Did Not Meet Expectations	Met Expectations	Not Observed	Comments (required if criteria/expectations are not met)
Obtains a comprehensive and/or problem				

focused HPI from the patient and/or family.				
Obtains a comprehensive and/or problem-focused ROS from the patient and/or family.				
Obtains a comprehensive and/or problem focused PMH, FH, SH from the patient and/or family.				
Performs a comprehensive and/or problem-focused physical examination using correct assessment technique and equipment.				
Differentiates between normal, variations of normal, and abnormal findings.				
Demonstrates critical thinking in diagnostic ordering and interpretation.				
Organizes clinical information to arrive at appropriate differentials and final diagnosis.				
Formulates and prioritizes a plan of care based on scientific rationale, evidence-based standards of care, and clinical practice guidelines.				
Safely prescribes appropriate patient-centered pharmacological treatment modalities.				
Integrates and counsels the patient on the use of non-pharmacologic therapies based on patient-centered characteristics.				
Develops and implements patient-centered health promotion/disease prevention plans.				
Provides anticipatory guidance and counseling for patients and/or families.				
Verbally communicates the patient's health status accurately to the preceptor in a timely and succinct manner.				
Evaluates results of previous or current interventions and revises plan appropriately.				

Collects, maintains, and documents the patient's health care information in a confidential and timely manner.				
Assesses the patient's and/or family's need and readiness for learning based on personal characteristics.				
Provides appropriate teaching, educational materials, guidance, and counseling regarding management of health/illness conditions.				
Communicates with the patient and faculty using effective and appropriate techniques.				
Uses available community resources in designing patient-centered plans of care.				
Consults and refers appropriately with the preceptor and other health care team members.				
Demonstrates behaviors of self-efficacy, ethics, and advocacy in patient encounters.				
Demonstrates professional behavior.				
Engages in self-evaluation concerning practice.				
Uses strategies to reduce common errors.				
Considers barriers to access, cost, efficacy, and quality when making health care decisions.				
Utilizes informatics appropriately.				

1. Strengths of student:

2. Areas for improvement:

Student has met expectations of the site visit. **Yes _____** **No_____**

_____ _____

Signature & Date of Evaluator Signature & Date of Student

Appendix D

SDSU College of Nursing NURS N765/771/768/776 Clinical Hour Face Sheet							
Tentative schedule must be provided in the dropbox ***prior*** to starting clinical hours.		If you schedule changes, you must provide an updated Clinical Hours Face Sheet to the dropbox within 24 hours.		Students are required to keep a running total of all hours to be submitted at mid-term and final evaluations. The clinical Hours Face Sheet must match the hours logged in Medatrax.		For this sheet: 15 mins=.35, 30 mins=.5, 45 mins=.75, 20 mins=.33 1 hour 20 mins=1.33 (take amount of time and dive by 60)	For Medatrax: 15 mins=0:15 30 mins=0.30, 45 mins=0:45 20 mins=0:20 1 hour 20 mins=1:20 (Listed in clock hours)
Date Submitted/Updated							
				Preceptor 1	Preceptor 2	Preceptor 3	Add more columns as needed
Student Name			Preceptor Name and Credentials				
Student Cell Number			Preceptor Clinical Site and Address				
Student Home Number			Preceptor Phone				

			Number				
Course Number			Type of Practice (Family, Derm., etc.)				
Course Faculty Name			Total Hours Spent with Preceptor				
Day/Date	Preceptor Name & Credentials	Scheduled Clinical Hours (Example: 8AM- 2PM and 1PM-5PM)	Total Clinical Hours for the Day (subtract lunch and personal time)	Cumulative Hours			
				0			
				0			
				0			
				0			
				0			

Appendix E

South Dakota State University College of Nursing
Psychiatric and Mental Health Nurse Practitioner Program
Preceptor Observed History and Mental Status Exam

The Preceptor Observed History and Mental Status Exam should be completed as the culminating assignment for N736. Your preceptor should observe the evaluation and provide constructive feedback. After you have completed the assessment and your preceptor has offered comments, evaluation, and signature on this document, please send to your clinical faculty. As part of this assignment, your written psychiatric evaluation/assessment should accompany this document after reviewed by your preceptor. All patient identifiers must be deleted/blackened

Date of Observation_____

Patient Age and Sex_____

Preceptor Signature_____

PMH Student Signature_____

TOPIC TO BE ASSESSED	PRECEPTOR INITIAL AS STUDENT COMPLETES	PRECEPTOR COMMENTS
Introduction to client including review of role, confidentiality, and limits of		
A. Client History and Mental Status Exam **Identifying information**, presenting problem, and referral source.		
History of Present Illness (location, quality, severity, duration, timing, context, modifying factors, associated signs, and symptoms)		
Psych Single System & pertinent		
Mood		
Anxiety		
Temperament		
Sleep/Initiation/maintenance		
Energy		
Interest		
Concentration		
Memory		
Psychomotor changes		
Appetite changes		
Thought patterns (guilt, delusions, hallucinations)		
Suicidal Thoughts		
Self-injurious		
Aggressive/homicidal thoughts/behaviors		

TOPIC TO BE ASSESSED	PRECEPTOR INITIAL AS STUDENT COMPLETES	PRECEPTOR COMMENTS
Social Impact of symptoms		
Other		
Psychiatric Review of Past Symptoms **Affective Disorders** **Anxiety:** **GAD, OCD, Phobias, etc.** **Trauma History** **PTSD** **Thought Disorders** **ADHD** **Head injury** **TBI**		
Past Psychiatric History *Inpatient and Outpatient History* Age- Duration- Reason- Treatment - Comments - Suicidal gestures Self-injurious gestures Violence history		
Previous Psych Meds Dose and Length of Treatment Reasons for Discontinuation Side Effects etc.		
Other Therapies		
Medical History: Allergies-- *Surgeries*		
OB/GYN *Onset to Menses* *Para /Gravida* *Problems/Complications*		
Present Medications (psych and medical) Prescribed by-		
Social and Developmental History:		
Pertinent Family History		
Significant Stressors not Previously Described		
Mental Status Exam		
Appearance		
Cognition		

TOPIC TO BE ASSESSED	PRECEPTOR INITIAL AS STUDENT COMPLETES	PRECEPTOR COMMENTS
Affect		
Mood		
Speech		
Thought Processes		
Insight		
Motor Abilities		
Suicidal Thought		
DSM 5 Diagnoses and Code		
GOALS of Care		
MED Teaching done on -		
NEW ORDERS		
Records Requested/Release/Exchange of Information		
Other		
B. Interview Techniques		
Ability to establish rapport		
Use of Communication skills		
Support and empathy		
Summary and feedback to patient		
Follows up incomplete comments and seeks clarification		
Begins to establish a therapeutic alliance		
Voice and manner encourage trust		
Makes pertinent physical observations and describes appearance		
Other		
C. Organization		
Proceeds in orderly manner		
Proceeds in an efficient and smooth manner		
Approaches stress areas gently and with tact		
D. Summary of Report		

TOPIC TO BE ASSESSED	PRECEPTOR INITIAL AS STUDENT COMPLETES	PRECEPTOR COMMENTS
Provides organized, concise written and /or oral conclusions to history and MSE including:		
Summary of Findings		
DSM5 Diagnosis		
Differential Diagnosis		
Recommended Medications and Therapies/Treatments/Placements		
Referrals		
Duration_____Minutes		
E. Additional Comments		

TOPIC TO BE ASSESSED	PRECEPTOR INITIAL AS STUDENT COMPLETES	PRECEPTOR COMMENTS
F. Conclusions on Student Performance **Perceptor –**		
G. Student Comments		