PRECEPTOR MANUAL
DOCTOR OF NURSING PRACTICE PROGRAM
isu.edu/nursing
Idaho State University

School of Nursing

Preceptor Manual
Thank you!

Thank you for your service as a clinical preceptor. We value your contribution to quality educational experiences for DNP students enrolled in the School of Nursing at Idaho State University (ISU). This preceptor manual is provided to assist you in your preceptor role with our students. The clinical experience affords an opportunity for the DNP student to put theory and knowledge into practice and develop their assessment and patient management skills.

We appreciate your service!
After the first day of clinical rotations, you may contact the student’s faculty instructor:

Cathy Arvidson, PhD, FNP-BC, APRN, FAANP
Associate Professor
208-282-1105
arvidcath@isu.edu

Ryan Manwaring, DNP, APRN, PMHNP-BC
Clinical Assistant Professor
208-373-1750
manwryan@isu.edu

Kristy Crownhart, DNP, FNP-C, APRN
DNP Coordinator
Clinical Assistant Professor
208-373-1852
crowkri2@isu.edu

Melody Weaver, PhD, ACHPN, FNP-BC
Clinical Assistant Professor
208-282-5994
weavmelo@isu.edu

Vernon Kubiak, DNP, PMHNP-BC, CNS, CNP, RN
Clinical Assistant Professor 208-282-3583
kubivern@isu.edu

Michelle M. Anderson, DNP, APRN, FNP-BC, FAANP
Clinical Assistant Professor
(208)373-1785
Andemic9@isu.edu

Please visit our preceptor page at: https://www.isu.edu/nursing/dnp-program-preceptors/

Also, please visit the Preceptor Moodle Course where you will find helpful information on the School of Nursing DNP preceptorships: https://elearn.isu.edu/community/course/view.php?id=77. You will need to create a password to access the course.
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DNP Program Goals

The primary objective of the DNP degree program is to prepare experts in advanced nursing practice in specialized areas with emphasis on innovation and evidence-based application to improve health care outcomes. Specific program outcomes include:

1. Assume interprofessional leadership to advance clinical practice and health care delivery to rural and diverse populations.
2. Integrate nursing science into evidence-based care for individuals, families and communities to improve outcomes.
3. Incorporate practice initiatives to improve systems of health care delivery.
4. Advocate policy for healthcare

University Mission

Idaho State University is a public research-based institution that advances scholarly and creative endeavors through academic instruction, and the creation of new knowledge, research, and artistic works. Idaho State University provides leadership in the health professions, biomedical, and pharmaceutical sciences, as well as serving the region and the nation through its environmental science and energy programs. The University provides access to its regional and rural communities through delivery of preeminent technical, undergraduate, graduate, professional, and interdisciplinary education. The University fosters a culture of diversity, and engages and influences its communities through partnerships and services.

Mission and Vision Statements of the School of Nursing (SON)

The SON Mission: To prepare caring, exemplary nurse leaders who integrate education, service, and scholarship, through practice and research, to enhance the quality of life for rural and diverse populations.

The SON Vision: To be a distinguished School of Nursing committed to being as humanistic and compassionate as we are scientific and innovative.

School of Nursing Philosophy

The faculty in the School of Nursing subscribe to a common philosophy about human beings, nursing, and nursing education that encompasses both the undergraduate and graduate programs. Faculty strive to be leaders and visionaries in their roles as nurse educators, consumers and advocates for consumers of health care and health professionals.

Human beings are dynamic, holistic, and multidimensional. They have intrinsic worth and needs which are uniquely experienced and expressed within the totality of their environment. The manner in which those needs are met influences the individual, family, and community growth.
and development through the life cycle. Human beings have the right and the responsibility for their health and welfare. Moreover, they have the right to access basic services for health promotion, disease prevention, and treatment of acute or chronic illness.

To this end, the faculty recognizes their social and professional responsibility to sanction access for health care through educational, leadership, political, and public service activities.

Education is a community responsibility shared by recipients and providers of health care, students, and faculty. Faculty is committed to creativity in the learning process and continuous quality improvement in curriculum and program development. Faculty facilitate the educative process, promote an environment for effective application of knowledge integration, stimulate critical thinking, and professionalism. Learning is a lifelong process. Students are active participants in their education and are accountable for developing personal and professional knowledge.

Professional nursing is educative, facilitative, and caring. Professional nursing practice is grounded in sound scientific and humanistic knowledge formed from a complex and diverse field of study. Furthermore, nursing practice is a collaborative endeavor, which promotes health and wellness in a variety of ways and settings. Nurses administer healing arts and support families through normative and tragic transitions. Professional nurses use knowledge integration from theories, research, and practice, to plan and deliver holistic client care. Decision-making, teaching, learning, research, therapeutic communication, and critical thinking processes, are used by professional nurses. Utilization of nursing knowledge is the major focus in the undergraduate curriculum in the development of beginning level practitioners. The undergraduate program prepares graduates to meet the present and emergent community health concerns at local and global levels. Throughout the development of the professional role, students learn to view the recipients of nursing care as individuals, families, groups, or communities within cultural and environmental contexts. The population distribution and geographical nature of Idaho mandates that graduates be proficient in rural and frontier nursing.

Graduate education is built upon undergraduate education. Students are prepared to assume advanced practice roles by developing nursing knowledge through research, theory, and practice. At the graduate level, faculty and students contribute toward the application and elaboration of nursing theories to describe, explain, predict, and understand nursing phenomena. Graduate education facilitates learning environments where students can construct their own knowledge integration at an advanced level. Advanced practice nurses develop broad based knowledge and experience to facilitate or deliver personalized, holistic health care to clients over the lifespan in a variety of settings with an emphasis on rural practice.
Who can be a preceptor?

**Nurse Practitioners**
- Actively involved in clinical practice.
- Hold a minimum of master’s degree with at least 1 year of clinical NP experience.
- Hold current national certification as a nurse practitioner.
- Recognized as an NP in the state in which the clinical site is located with prescriptive authority OR recognized as NP meeting federal guidelines. [Federal facility requirements such as VA clinics, military, US Public Health Service Corps (USPHSC), etc.]

**Physicians**
- Actively involved in clinical practice.
- Board certified preferred.
- Licensed in the state the clinical site is in as MD, DO or recognized as MD/DO meeting federal guidelines.

**Physician Assistants**
- Actively involved in clinical practice.
- Board certified preferred.
- Licensed in the state the clinical site is in as a PA or recognized as a PA meeting federal guidelines.

**Verification and Documentation of Preceptor**
For purposes of accreditation, preceptors will maintain a current copy of the following at ISU within Typhon:
- Preceptor Professional Information sheet
- Current NP License

**Preceptor Interview**
Some preceptors request an interview with the student. The interview:
- Provides the preceptor with an understanding of the level, ability, and personality of the student.
- Enables the preceptor to assess if the student would be a “good fit” for the clinical site and the population it serves. The preceptor has the right to decide about whether any student is a good match for that particular practice.

**Scheduling of Clinical Hours**
Clinical/practicum hours are to be scheduled at the availability of the preceptor.
• Students are not to ask preceptors to conform to a schedule that meets their personal and employment needs.
• The student’s personal and work schedules are expected to accommodate the required number of clinical hours prescribed by the clinical course.
• Prior to beginning the clinical experience, students and preceptors are to agree on the days and times that the student will be in the clinical agency. A written schedule is optimal and to be shared with the clinical faculty.

Attendance

Student and preceptor should talk about the importance of a regular schedule and plan for vacations or seminars that the student or the preceptor would be attending. Some flexibility of scheduling is appropriate depending on the schedules of the preceptor and the student’s negotiations. Student and preceptor will discuss the mode of communication (phone call, text, e-mail) regarding schedule changes throughout the clinical experience.

• It is the student’s responsibility to monitor and document the number of clinical hours in Typhon.
• Extension of the clinical experience with the preceptor cannot be assumed.
• Unexpected illness of the student, family and/or preceptor should be discussed with clinical faculty and the parties involved.
• Failure to notify the preceptor of an absence or tardy as agreed upon by the preceptor and student is unacceptable and may place the clinical placement in jeopardy and the student at academic risk.
• Absences resulting in lost clinical hours must be completed before the end of the semester and at the convenience of the preceptor.

Professional Dress and Behavior

• Students present themselves as ambassadors of the ISU DNP program. Students are expected to be respectful to preceptors, staff, patients, and their families.
• Reports of unprofessional behavior will result in the student being counseled and is subject to review by the School of Nursing DNP Program Coordinator and appropriate Administration.
• Students should be professionally dressed (clinical site-specific attire) and wear a student name badge obtained from ISU, which includes first and last name with their credentials and DNP program.
Suggested Preceptor Techniques

- Arrange for a site orientation for the student, including introduction to staff, bathroom facilities, meal arrangements, parking policies, plan for documentation and how student approaches patient records.
- It is important for students and preceptor to review the Clinical Performance Criteria specific to the currently enrolled course. Course and individual student learning objectives could also be reviewed at this time, providing the student and preceptor with an opportunity to discuss expectations and responsibilities.
- Think aloud! Share your thought patterns with the student.
- Give the student your honest formative evaluation daily or more often if needed.
- Emphasize the positive aspects of the student’s clinical performance, but make sure to alert the student to your concerns about questionable practices or lack of progress.
- Consider having the student present in the patient’s room to allow the patient to verify the information and you do not have to request the same information again.
- Allow the student to follow through the entire patient visit, not just the history and physical.
- Ask the student to give an oral commitment to a diagnoses and plan of care. Provide formative feedback if the diagnoses or plans of care are not consistent with your own opinion or currently accepted clinical guidelines.
- Give the student time limits (i.e., “See the patient for 10 minutes and then give me your impression.”).
- Invite the student to verbally share why a decision was made (i.e. “What are the side effects of that medication?” or “Why do you feel that the antibiotic you selected is the appropriate choice for this diagnoses and this patient?”).
- Include the student in your daily routine: departmental meetings, morbidity and mortality conferences, educational seminars, and other activities.
- Give formative evaluations of the students charting techniques.
- If possible, allow 10 minutes at lunch or the end of the day to answer student questions or allow the student to ask questions.
- Ask the student to use the literature to review diagnoses of specific patients during the day and to report to you on one of the problems in a 3-minute bullet. If there is a particularly interesting patient, consider allowing the student to take an immediate break to review the case.
- Conduct discussions as you commute by car, by foot, etc.
- Utilize other personnel in your office to teach the student when possible including colleagues, business managers, receptionists, etc.
- Make the student feel special; welcome them as part of your team.
- Have your staff prepare a copy of the next day’s schedule and take a few moments at the close of the current day to review patient cases, thus allowing the student some guidance for reading activities to prepare for the next day.
- Have a plan if your patient refuses to allow the student to participate. Consider having the student work with a colleague, review labs, or prepare a presentation on how the student imagines a patient with the stated chief complaint of the refusing patient might present.
Typhon Group

The ISU School of Nursing utilizes Typhon Group to track students in clinical. Students enter patient information for patients they see in clinical as well as their schedule, procedures performed, etc. As a preceptor, you will have limited access to this information. However, your evaluation of the student will be done online through the Typhon Group website. If you do not have an account through ISU, you will be sent an email towards the end of the semester, which will allow you to login. If you do not receive this email, please let the faculty or clinical placement coordinator know and he/she will send it to you. This site is HIPAA compliant, however, no HIPAA protected information is entered by the student.

Preceptor Evaluation of the Student

Preceptor evaluation of the student will be conducted within the Typhon Group system. You will be notified by the student and the faculty member when student evaluations are needed.

The purpose of Preceptor feedback and evaluation is to:

- Improve and enhance performance.
- Enable the student to successfully complete course objectives.
- Mentor the student in the NP role and professional development.
- Provide ongoing and final evaluation.
- Assist clinical faculty in evaluation of student performance.

Evaluation techniques

The preceptor provides the student with two types of evaluations: formative and summative.

Formative evaluation

This is the ongoing evaluation provided over the course of the semester. Formative evaluation is valuable to students because feedback can build the student’s confidence, as well as identify areas needing improvement. It is helpful if you keep a record of performance, both positive and needing growth (specific examples are helpful) to use when completing student summative evaluation.

Summative evaluation

Summative evaluation is the final evaluation of the student’s performance at the end of clinical practicum. The preceptor will document the summative evaluation via an electronic survey within the Typhon database. Please review the course and individual student learning objectives with the student and your summative evaluation with the student before submitting the evaluation into Typhon. If you have any problems logging into the Typhon website, please contact Dr. Kristy Crownhart via email (crowkris@isu.edu), or phone at (208)373-1852.
Student Requirements
ISU School of Nursing ensures that the student documents listed below are actively maintained in Typhon Group. If the student records are not up to date, you will be notified, as the student is not allowed to participate in clinical experiences until records are up to date.

RN Verification
Verification of a current RN license is maintained throughout the DNP program.

Background Investigation
DNP students must have a background investigation performed annually through Castle Branch. The background check must be "in progress" or completed before the registration deadline for courses. No other background investigation will be accepted.

Current Immunization Status
Verification of current immunization status is verified prior to precepting in clinical experience and includes the following:

- Mantoux/PPD (TB) - negative test within the year prior to application or negative chest x-ray if tested positive along with a letter from physician stating completion of antibiotic therapy or a letter from physician stating student does not have active TB.
- MMR - second dose or positive titer.
- Adult DT/Td - Tdap one time and then Td booster every 10 years thereafter.
- Varicella - positive titer or vaccination date.
- Hepatitis B - 3 dose series and positive titer preferred or positive titer.
- Seasonal flu vaccination, or any other influenza vaccinations recommended by the Centers for Disease Control (CDC)(preferred).
- Any additional verifications specific to the clinical site.

CPR Certification
Proof of current CPR for Healthcare Provider certification must be maintained throughout the DNP program. Certification must be obtained through the American Heart Association. ACLS, or PALS may also be required by certain clinical sites.

Preceptor/Faculty Communication
It is important for faculty and Preceptors to have regular, ongoing communication with each other and students while in the clinical experience. Faculty will initiate communication however Preceptors are also encouraged to do so, particularly if there is a question or concern. Communications are documented in Typhon.

Faculty Clinical Site Visit/Evaluation
A faculty member will arrange, through the student, a clinical site visit each semester (except spring semester for 1st year students). Site visits will include faculty observance of the student in direct
patient care and discussion between faculty and preceptor of the student’s performance in the clinic. If a concern arises in the clinical setting by a student or preceptor at any time throughout the clinical experience, the supervising faculty must be contacted. The supervising faculty will make a decision regarding additional site visits and follow-up with preceptor and student.

How many hours of clinical or practicum are required for the program?

**Doctor of Nursing Practice:** Students are required to complete more than 1000 clinical hours in both the DNP-FNP and DNP-PMHNP programs. The number of hours varies per semester. Please visit our website to view our current curriculums: [http://www.isu.edu/nursing/programs/doctor-of-nursing-practice-dnp/](http://www.isu.edu/nursing/programs/doctor-of-nursing-practice-dnp/)

How are students assigned clinical sites?

The ISU SON Clinical Placement Coordinator will work with students to arrange clinical sites for Idaho students based on needs, availability of the preceptors, and the focus of the clinical course. Students may request clinical sites but the faculty and the Clinical Placement Coordinator make the final decision. It is mandatory that the students accommodate the preceptor’s schedule.

Students who reside outside of the state of Idaho, will be responsible for obtaining their own clinical sites. The School of Nursing Faculty and Clinical Placement Coordinator must approve clinical sites.

DNP Project Information

Each student completes a DNP Project during the final year of the program. The project integrates program coursework and clinical knowledge. DNP Projects are often designed to meet a quality improvement need or practice change. If you have a possible project for a student or would like to learn more, the DNP Project information is available upon request.
Program Overview: DNP Family Nurse Practitioner Option

The Family Nurse Practitioner (FNP) option prepares students for primary care throughout the lifespan in a variety of settings. FNP courses are designed to develop critical clinical decision-making skills necessary for primary care providers working with diverse and rural populations. Nurse practitioner faculty members maintain clinical skills through active practice. Students are required to complete seventy-eight semester credits. This includes a minimum of 1008 hours in clinical settings with a primary care emphasis.

Clinical Courses:

**NURS 6611L Advanced Health Assessment Lab (144 clinical hours)**

Spring Semester

Course Objectives
1. Demonstrate competency in advanced assessment skills.
2. Evaluate physical, psychosocial, and spiritual deviations in health in the individual and family.
3. Demonstrate clinical diagnostic reasoning of the health patterns of the individual and family.
4. Integrate the nurse practitioner’s role in advanced health assessment.

**NURS 6642L Primary Care of the Young Adult Lab (144 clinical hours)**

Fall Semester

Course Objectives
1. Analyze environmental effects on the health status of the young adult.
2. Identify signs and symptoms of acute and chronic physical and mental illnesses in the young adult.
3. Select appropriate diagnostic modalities and tools in assessing, diagnosing and managing the health needs of young adults.
4. Formulate, implement and evaluate plans for care for health promotion, disease prevention, and common acute and chronic illnesses with young adult individuals and families.
5. Integrate knowledge of physiology, pathophysiology and pharmacology into the evaluation and management of the client.
6. Integrate principles of cultural sensitivity when formulating and evaluating holistic plans of care.
7. Integrate epidemiology, research, critical thinking, and ethical principles when providing care.
8. Coordinate care through participation on a primary health care team through consultation and referral, involving all members of the team.
9. Evaluate process, outcomes, and cost effectiveness of primary care.
10. Examine and implement theories relating to nursing and primary health care of the young adult.
NURS 6643L Primary Care of the Child and Adolescent Lab (96 clinical hours)
Spring Semester
Course Objectives
1. Assess, diagnose, plan, implement, and evaluate the health care needs with a focus on children and adolescents.
2. Assess and diagnose the health problems that are commonly seen in the children and adolescents.
3. Manage the health problems commonly experienced in the children and adolescents using pharmacologic and non-pharmacologic therapeutic modalities.
4. Collaborate and refer to other health providers as indicated
5. Critique the FNP role as a primary health care provider within clinical settings.

NURS 6644L Primary Care of the Middle and Older Adult Lab (96 clinical hours)
Spring Semester
Course Objectives
1. Assess, diagnose, plan, implement, and evaluate health care needs with a focus on middle and older adults.
2. Assess and diagnose the health problems that are commonly seen in middle and older adults.
3. Manage the health problems commonly experienced in middle and older adults using pharmacologic and non-pharmacologic therapeutic modalities.
4. Collaborate and refer to other health providers as indicated
5. Critique the FNP role as a primary health care provider within clinical settings.

NURS 7740L Primary Care Throughout the Lifespan Lab (240 clinical hours)
Fall Semester
Course Objectives
1. Assess, diagnose, plan, implement, and evaluate the health care needs with a focus on the complex patient and special populations.
2. Assess and diagnose the complex health problems that are commonly seen in the primary care setting.
3. Manage the complex health problems commonly experienced using pharmacologic and non-pharmacologic therapeutic modalities.
4. Collaborate and refer to other health providers as indicated.
5. Critique the FNP role as a primary health care provider within clinical settings.
NURS 7780 FNP Practicum (288 clinical hours)
Spring Semester
Course Objectives
1. Assess, diagnose, plan, implement, and evaluate health care needs with a focus on middle and older adults.
2. Assess and diagnose the health problems that are commonly seen in middle and older adults. Manage the health problems commonly experienced in middle and older adults using pharmacologic and non-pharmacologic therapeutic modalities.
3. Collaborate and refer to other health providers as indicated.
4. Critique the FNP role as a primary health care provider within clinical settings.

Program Overview: Doctor of Nursing Practice PMHNP option
Nurse practitioner faculty members maintain clinical skills through active practice. Students are required to complete seventy-eight semester hours of credit. This includes a minimum of 1008 hours in clinical settings.

Clinical Courses:

NURS 6611L Advanced Health Assessment Lab (144 clinical hours)
Spring Semester
Course Objectives
1. Demonstrate competency in advanced assessment skills.
2. Evaluate physical, psychosocial, and spiritual deviations in health in the individual and family.
3. Demonstrate clinical diagnostic reasoning of the health patterns of the individual and family.
4. Integrate the nurse practitioner’s role in advanced health assessment.

NURS 7745L Adult Psychiatric Mental Health Practicum (192 clinical hours)
Fall Semester
Course Objectives
1. Apply therapeutic communication techniques regarding the assessment of mental illness, substance use and abuse, and for health promotion and risk reduction.
2. Assess the patient’s own as well as his/her family’s historical and current substance use patterns; include any past or current treatment for substance abuse.
3. Determine the role of substance use/abuse in the current clinical presentation; distinguish substances related to other underlying psychiatric mental health issues.
4. Document and communicate psychiatric evaluation, intervention, and follow up data in a retrievable form.
5. Select and organize salient data to concisely describe the patient’s clinical presentation and response to treatment, and to justify diagnostic and treatment decisions.
6. Differentiate diagnoses and construct treatment recommendations appropriate to clients.
7. Engage and collaborate effectively with other members of the treatment team and the system of care.

**NURS 7755L Child/Adolescent Psychiatric Mental Health Practicum (192 clinical hours)**

**Spring Semester**

**Course Objectives**
1. Integrate knowledge of physiology, pathophysiology and pharmacology into the evaluation and management of the client.
2. Integrate principles of cultural sensitivity when formulating and evaluating holistic plans of care.
3. Integrate epidemiology, research, critical thinking, and ethical principles when providing care.
4. Coordinate care through participation on a health care team through consultation and referral, involving all members of the team.
5. Evaluate process, outcomes, and cost effectiveness of mental health care.
6. Formulate, implement, and evaluate plans for care for health promotion, disease prevention, and common acute and chronic illnesses with children/adolescents and their families.
7. Select appropriate diagnostic theories, modalities, and tools in assessing, diagnosing, and managing the mental health needs of young adults.
8. Examine and implement theories relating to nursing and mental health care of the child/adolescent.

**NURS 7795L Individual, Group and Brief Therapies Lab (192 clinical hours)**

**Fall Semester**

**Course Objectives**
1. Compare, contrast, and differentiate between therapy models.
2. Critically analyze the theories and models of brief therapies in the context of advanced psychiatric mental health nursing practice.
3. Demonstrate development of short-term therapeutic goals and treatment plans with intervention strategies.
4. Demonstrate the understanding of the development of therapeutic relationships as the basis for assessment and intervention.
5. Monitor counter transference to avoid subjective errors in reporting.
6. Develop a biopsychosocial formulation and identify appropriate strategies and interventions for interventions for stabilization.
7. Demonstrate understanding of context of treatment environment and clinical issues in determining intervention approaches.
NURS 7798 Psychiatric Mental Health NP, Advanced Practicum (288 clinical hours)
Spring Semester
Course Objectives
1. Assess, diagnose, plan, implement, and evaluate psychiatric health care needs through the lifespan.
3. Collaborate and refer to other health providers as indicated for comprehensive care delivery.
4. Critique the PMHNP role as a primary health care provider within clinical settings.