

# The Clinical Preceptorship: Guidelines for Success

For Students in  
Graduate Nursing Programs

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Dear Colleagues:

On behalf of the faculty and students at the University of Michigan School of Nursing, I would like to express our sincere appreciation that you have chosen to take on the role of preceptor. As you know from your own nursing education, having good mentors is critical to helping nursing students become first-class nursing professionals. Your leadership and guidance as well as your constructive feedback is key in developing our students into competent nurses ready to take on the real world challenges in health care. We truly thank you for your time and the investment you are making in the education of our students.

I hope that the following handbook is useful to you. Our purpose in creating it is to guide you through your work with our students and to provide you with the necessary resources and tools so that this is a positive and enjoyable experience for you as well.

Should you have any questions or concerns, please contact the Office of Clinical Placements at 734-764-0659.

Best regards,



Lisa Kane Low, PhD, CNM, FACNM, FAAN  
Associate Dean for Practice and Professional Graduate Studies  
Professor

## **Introduction**

This handbook will serve as a guide to establish guidelines, facilitate student role development, and provide materials for use by advanced practice nursing (APN) students and student nurse midwives (SNM) during their clinical preceptorship experiences.

## **Selection of Clinical Preceptors and Sites**

Developing a skilled advanced practice nurse depends upon the cohesiveness and congruency between academic learning in the classroom and its partnering with appropriate experiences in practice. Following University guidelines and according to the needs of the individual programs, the Office of Clinical Placements carefully selects clinical sites and preceptors for student placements. The Clinical Placement Administrator is the central contact for these assignments, and is responsible for contacting, coordinating and corresponding with preceptors with the assistance as needed of the clinical coordinator in each course.

Students should not contact preceptors directly to ask them for a placement as many sites have a central process in place for this type of contact and there are a number of requirements that the Clinical Placement Administrator needs to consider prior to establishing a placement. The School of Nursing has a wealth of clinical preceptorships that are offered for student experiences. However, students can also provide site/preceptor suggestions. Students may submit preceptor names to the Clinical Placement Administrator, but should do so at least 3 months prior to the desired clinical date. This will ensure adequate time to evaluate the clinical site, ascertain preceptor credentials and gather the appropriate information needed to formalize a contractual agreement between the University and the facility if one does not already exist.

Carefully selecting sites that can provide the clinical experiences for the specific course objectives is critical; therefore, most students will have preceptorships in a variety of sites. As is typical for graduate nursing programs, students will work a variety of hours in the clinic and in the hospital. Typically, most students will work Monday-Friday during usual office hours for primary care placements, however hospital-based placements may use the full availability of 24 hours, seven day a week with placements on nights and/or weekends included. Students are expected to be flexible in order to maximize their learning experience opportunities. If students' need unique clinical schedules or desire specialty experiences i.e., dermatology, wound care, rheumatology, oncology, IUD insertion, first assist, etc., in preparation for specific clinical interests or career goals, the Office of Clinical Placements should be informed of these interests or needs as early as possible in the placement process.

## **The APN Student: Responsibilities and Accountability**

Students enter the clinical arena for mentoring and clinical preceptorship when they have progressed to a specific point in their education e.g. completed sciences, theoretical, and assessment courses. It is important for APN students to understand their roles and responsibilities as a student APN. When assigned to or selecting a clinical site and preceptor, the student is expected to fulfill basic requirements. Meeting the clinical requirements will assist the student in optimizing the learning experience. Within the partnerships between the APN student and course faculty and preceptor, there are roles which each partner must fulfill.

### Clinical Placement Requests

Students will complete and submit the APN program's clinical request form by the date assigned. Typically, these requests are emailed to the students by the Clinical Course Coordinator, 2-3 months ahead of time. It is very important for the student to note any restrictions they need to place on their clinical time/placements. Examples include family responsibilities and work commitments. If the student can only be at a site on select days and time during the week, this should be noted on the form. Minimally, students should expect to spend 4 hours per day at a clinical site. An 8-12 hour clinical day is the most typical scenario and may encompass a variety of clinical care, client rounds, procedures, home visits, journal club and births (for student nurse midwives), chart reviews and other experiences.

### Student Health Requirements/Compliance

The School of Nursing has standard health requirements that all students must complete prior to participating in any clinical experience. These health/compliance requirements include:

- Criminal background check
- Statement of Physical Fitness (from student's healthcare provider)
- Statement of Skills and Abilities for Degree Completion
- Annual TB test
- Current CPR certification
- Annual Flu Vaccination
- Current immunizations:
  - Hepatitis B
  - Varicella (or proof of disease)
  - Measles/Mumps/Rubella
  - Tetanus/Diphtheria/Pertussis

\*Fingerprinting, Drug Screen and site specific criminal background check done upon request.

Information on or proof of these health requirements can be obtained by contacting the Office of Student, Academic & Multicultural Services Affairs by email at [sn-compliance@umich.edu](mailto:sn-compliance@umich.edu).

If your agency has unique healthcare requirements in addition to what is listed above, you can work directly with the student to collect the necessary documentation (unless otherwise stipulated in the Clinical Affiliation Agreement).

Your organization may require the University of Michigan's Certificate of Medical Professional Liability. This certificate can be found in Appendix A of this document.

All students are responsible for submitting updated documentation for health requirements. **Students will not be allowed to participate in clinical experiences without completion of the appropriate paperwork.** If any of the necessary documentation expires mid-semester, the student is expected to update their records immediately.

### Preceptor Interview

Some preceptors require an interview with the student seeking placement with them. The purpose of the interview is to:

1. Provide the preceptor with an understanding of the level, ability, and personality of the student.
2. Enable the preceptor to assess if the student would be a “good fit” for the clinical site and the population it serves.

Questions from a preceptor may include:

1. Why do you want me as a preceptor? What are your expectations? What are your primary clinical objectives for this semester?
2. Why do you want to be an advanced practice nurse? What are your future goals?
3. Tell me what an advanced practice nurse is? How will you explain this role to client?
4. What are your strengths/weaknesses?
5. How do you handle mistakes?
6. How often do you like to have feedback? Do you prefer a formal evaluation or informal evaluation? Do you prefer a “wrap-up” at the end of every day?
7. What hours do you expect to be here? When do you wish to start? Do you have certain days that are available?
8. Along with providing nursing care, I also can provide other experiences such as family planning, home visits, etc. Do you want to participate?
9. How long have you been a nurse? What types of patients do you prefer to care for?

## Scheduling of Clinical Hours

***Clinical practicum hours are to be scheduled at the convenience and 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 participation in the required number of clinical hours prescribed by the clinical course. Students and preceptors need to agree on the days and times that the student will be in the clinical agency **prior to** beginning the practicum experience. When determining the hours, it is wise to schedule several "contingency" days. These are days that can be used as "make-up" time in the event that the preceptor or student is unavailable i.e., ill, the clinic is closed, or weather events make travel hazardous.

## Attendance

Completion of clinical hours at the negotiated days/times with the preceptor is required. Often, specific days of the week are chosen by the preceptor due to client availability, client mix, or the availability of extra examination rooms. It is the student's responsibility to monitor the number of hours completed, and plan on completing the required hours within the semester. The student is responsible for adjusting his/her personal and employment commitments so that the required number of clinical hours can be completed. If the student does not complete the required number of clinical hours for the semester, he/she cannot expect the preceptor to continue the precepting relationship. Extension of the clinical period with the preceptor cannot be assumed but is granted only by agreement with the preceptor, clinical agency and clinical course faculty. Exceptions related to unexpected illness of the student/family and or preceptor should be discussed with course faculty and the parties involved.

*When the student cannot attend clinical on a day that is scheduled, the preceptor and clinical course faculty must be notified immediately.* The student should obtain a telephone number and discuss the procedure of notifying the preceptor and faculty for unexpected absences. Failure to notify the preceptor as negotiated, prior to the beginning of the scheduled clinical day is unacceptable and may place the student and clinical placement in jeopardy. The student should present the faculty and preceptor with a plan to complete the lost clinical time.

## Attire and Behavior

Students are representatives of the University of Michigan School of Nursing and must present themselves as ambassadors to their programs. Students are expected to be respectful to preceptors, faculty, staff, patients, and their families. Reports of unprofessional behavior will result in the student being counseled by clinical course faculty.

Interactions with clients, staff, other health providers and students are learning opportunities for the student to role model clinical expertise. The clinical preceptorships are designed to provide advanced practice nursing experiences but in the early semesters of clinical it is not uncommon for students to fall back into a comfortable "staff nurse" role. Students are highly encouraged to observe their preceptor's interactions with support staff and others as it relates to advanced practice.

Some clinical sites may require that lab coats or other specialized garb are worn in client care areas. Students are encouraged to determine the appropriate dress attire prior to the first clinical day.





## Evaluations & Clinical Objectives

Each course may have a unique evaluation process. Course-specific information and Evaluation forms can be found in Appendix B of this document. In general, it is the responsibility of the student to arrange for evaluations to occur with her preceptor. Evaluations should involve a brief summary of the experiences as well as a reflective and thorough self-evaluation of strengths and weaknesses, progress and needs, and future plans. In addition to this evaluation the student should construct and provide the preceptor with student-specific clinical objectives for future clinical practicums. The student should fill out the evaluation form first. It should be completed and signed off by both the student and the preceptor at the end of the session.

The student should reflect and develop individual learning objectives that will meet and facilitate his/her learning needs and previous clinical nursing experience (e.g. assessment via ultrasound , skills acquisition-clinical use of the microscope or phlebotomy, suturing, etc.) that are not explicit in the course or clinical objectives. Guidelines for developing clinical objectives include:

1. The student will write specific clinical objectives according to individual learning needs. These objectives should be discussed with the preceptor each week. The objectives should also be submitted to the clinical faculty when evaluations are submitted.
2. Examples of clinical objectives include APN skills, diagnostic reasoning, diagnostic labeling, interventions, evaluation methods, program development, human resource-related activities and record audits.
3. Clinical objectives must be measurable and evaluated at the end of the clinical day. Written objectives do not provide learning feedback unless evaluation occurs. If the objective is not completed, it may be used in subsequent clinical days until it is met.
4. Clinical objectives should reflect the level of competency the student would like to achieve at the end of the practicum, e.g., minimal competency, proficient, etc.

### Preparation for Clinical Practicum

The clinical practicum extends the learning environment of the classroom to integrate theoretical concepts with clinical practice. Students should prepare for the clinical practicum by developing individual learning objectives, as previously discussed. Students should prepare for clinical by reading course texts and professional journals, and using other audiovisual and electronic learning aids as necessary.

The preceptor may recommend additional materials and topics for review prior to the first clinical day. The student should review the common clinical problems relevant to the clinic's population. Follow-up reading of current reference material following the clinical day provides the student with the opportunity to increase the breadth of scientific and clinical knowledge from that gained in the clinical arena.

### **Guidelines for Clinical Preparation for Clinical Courses**

1. Students are expected to have full knowledge of entrance requirements for clinical, including credentials, dress, location, timing, security clearances, etc., before scheduling the first clinical day at the agency.
2. Students are responsible for their own health records and other requirements, such as current CPR certification and immunizations, in order to fulfill the clinical requirements on the first day. In accordance with school and agency policy, students without appropriate clearance will not be allowed to enter the clinical setting.
3. Whenever possible, discussion with other students who have the same or similar placements may be beneficial.
4. On the first clinical day, discuss questions about computer access, the procedure for preceptor co-signing documents, eating and parking arrangements, and the communication with other disciplines.
5. Learn something about the preceptor, when possible, in order to acknowledge the preceptor's background and broaden the student's educational experience.

### **Clinical Faculty Responsibilities – For Clinical Courses**

Each student will have a clinical faculty member assigned to them for the duration of the semester. The role of the clinical faculty is to facilitate the student's learning via personal observation of the student's clinical skills and clinical conferences. Pairing of clinical faculty with a student also provides sensitivity to the student's life experiences, expertise, unique perspectives, learning preferences, and career goals. The clinical faculty also acts as a role model for the numerous dimensions of the APN role.

The clinical faculty member is responsible for the completion of student site visits, assessing the student's (e.g. evaluations, clinical documentation), clinical objectives and progression in the clinical sequence, communications with the preceptor via telephone, emails or onsite visits, and for providing timely and constructive feedback to the student. The clinical faculty also communicates regularly with the course faculty and track coordinators regarding student progress and achievement.

Students should contact the clinical faculty immediately if concerns arise about the clinical experience or their ability to successfully adhere to the original agreements made with the preceptor. Also, the student should seek advice from the clinical faculty should challenges occur at the clinical site that the student cannot reasonably resolved on their own.

The clinical faculty will have a midterm and final conference with each student to review academic/clinical progress, set objectives for the remaining or upcoming semester, and provide constructive feedback.

## **Documentation of the Clinical Encounter**

Each clinical encounter performed by the student must be documented in the client's record. Documentation should be consistent with current billing and coding guidelines and adhere to the current national and facility standards of care.

Typically, clinical documentation (e.g.) the preferred format of documentation using paper, electronic, digital or taped methods. However, many agencies now have templates, check sheets and other formats to document the clinical encounter. Before submitting clinical documentation for review by the clinical faculty, the student is highly encouraged to discuss the format/method.

All clinical documentation is co-signed by the preceptor. It is highly encouraged that the preceptors do more than simply sign the note. Many facilities now have stipulations regarding the meaning i.e., legal and reimbursement designations, of a preceptor signature and have developed their own policies on co-signing. Following are some suggested wording that may be used if the agency does not have guidelines in place.

1. Agree with the above. Signed \_\_\_\_\_.
2. Agree with the above. Also include------. Signed \_\_\_\_\_.
3. Agree with the above documentation. Present during visit. Signed \_\_\_\_\_.
4. Visit performed by student and dictated by me. Signed \_\_\_\_\_.

Students enrolled in any of the Primary Care Nurse Practitioner programs and Nurse Midwifery students enrolled in Primary Care (Nursing 566) need to record all client visits in the electronic clinical log. This log is used to document the breadth and depth of the student's clinical experiences. The clinical, course and program faculty also use the log as a tool to assess and evaluate the appropriateness of clinical placement and the increasing independence of the student's clinical skills. The summative data from the log will be used in the student's portfolio that is developed in the final semester of coursework. Student Nurse Midwives need to continue to provide a thorough count of all clinical activities on the provided excel documents for each course but do not need to continue using the electronic clinical log. These summary statistics should be used by the student, preceptor, and course faculty to guide future objectives and learning experiences.

Students are required to track their experiences. Methods of tracking experiences will vary by program.

## **The Clinical Site Visit – For Clinical Courses**

Clinical site visits are completed at designated intervals throughout the student's program of study. The site visit facilitates the clinical faculty's understanding of student progress via direct observation of their clinical skills, enables the student to demonstrate their expertise and to conference with their clinical faculty member, and allows the preceptor to share their experiences regarding the student's accomplishment and their precepting with the clinical faculty. Each member of the team plays an important role in a successful site visit as noted below.

### The student is responsible for:

1. Coordinating the date of the site visit with the clinical faculty member, providing important contact numbers that can be used while the faculty member is en route to the site should something occur, and confirming the site visit one day prior to the event.
2. Ascertaining with the preceptor that client's will be available the day of the site visit and selecting several that can be seen by the student.
3. Introducing the faculty member to the preceptor and support staff, providing a "tour" of the facility if appropriate, discussing charting procedures, and how clients are selected for the student.
4. Reminding the preceptor that the clinical faculty will be arriving for a site visit and that the faculty will need several minutes of their time to discuss the student's progress.

### The clinical faculty is responsible for:

1. Observing the student during 2 clinical encounters. This will include observing oral summaries given to the preceptor and any subsequent client management.
2. Observing the student's interactions with the environs of the site: preceptor, clinical staff, support staff, clients and their support persons, use of technology at the site and others.
3. Conferencing with the preceptor regarding the student's abilities and progress, learning goals and suggested changes.
4. Providing constructive feedback regarding the encounters and the whole of the site visit as well as making recommendations to facilitate clinical expertise.
5. Completing the site visit evaluation and sharing the results with the student.

### The preceptor is responsible for:

1. Completing the Preceptor Profile Form (found in Appendix A). This form only needs to be completed the first time you serve as a Preceptor.
2. Providing appropriate site visit clients for the students.
3. Providing feedback to the student and the clinical faculty regarding the student's experiences and abilities at the site.
4. Providing feedback on the student's documentation of client visits, attendance, professionalism, and other components of the APN role.
5. Completion of the appropriate student evaluations for clinical.

The site visit day should be conducted as a normal clinical day for both the student and the preceptor. Although the student is usually nervous at the prospect of being observed, the faculty and preceptor are well aware of this and try to place the student at ease. Also, it is important that the clinical faculty observe the flow of the clinic or floor at large, the interaction of the staff with the various care providers, the client mix and the student's interactions within all of these arenas. This assists in not

only evaluating the student but ascertaining the appropriateness of the clinical site for the current and/or future students.

## **Problem/Conflict Management**

The potential for conflict and disagreement in interpersonal relationships is common and should be anticipated. In the clinical setting, preceptors are under pressure to be productive which may constrain time that can be fully devoted to teaching. Other factors, such as level, ability, communication style and motivation of the student coupled with the uniqueness of the preceptor's client load can provide fertile ground for conflict. It is the student's, preceptor's and faculty responsibility to use the appropriate resources for problem-solving while optimizing learning experiences.

Examples of potential conflict situations include:

1. Placement of a student with preceptor with a conflict of interest that is personal, family-related or via job alliances.
2. Cultural differences between the student and preceptor in communication to clients and other providers.
3. Inappropriate matching of student competence level with preceptor expectations.
4. Inexperience of preceptor in coping with student's unacceptable behaviors.
5. Preceptor is not providing expected level of mentorship or clinical care.

Intervention strategies for conflict resolution are dependent upon the urgency of the matter. In instances where an immediate response is needed, the course faculty should be notified first. If there is no response, then the Clinical Course Coordinator and/or Lead Faculty for Clinical Education should be notified immediately.

## Appendix A: University of Michigan Information & Preceptor Profile Form

### The University of Michigan Medical Professional Liability

**Insured** Any employee or appointee, while acting within the scope of duties for the University of Michigan. All “students in training” while in the performance of an approved course of studies in the healing arts and related services under the auspices of The University of Michigan.

**Insurance Company** A single parent captive insurance company, Veritas Insurance Corporation, a wholly owned subsidiary of the University of Michigan, underwrites this program. Veritas was incorporated in Vermont in 1986.

**Policy Detail** The policy period renews each July 1st. The program is continuous, succeeding the first policy effective July 1, 1986. Limits of the program are maintained at levels to provide coverage to employees and the institution.

Primary Limits Exceed: \$ 1,000,000 Occurrence  
\$ 3,000,000 Aggregate

The policy is structured on an occurrence basis.

**Policy Administration** The University of Michigan  
Risk Management Department  
Argus II Building, 400 S. Fourth Street  
Ann Arbor, MI 48103-4816  
Phone: (734) 764-2200  
Facsimile: (734) 763-2043

**Current policy number VMPL-2016 (policy period: July 1, 2016 to July 1, 2017)**  
**Coverage does not apply to activities performed at off-site, non-university locations, unless approved by The University of Michigan.**



Chip Hartke  
Underwriter

Risk Management Produced May 27, 2016

# Preceptor Profile Form

## Form Use and Instructions:

The information below is needed by the School of Nursing Clinical Placements Office. The Preceptor Profile information only needs to be submitted the first time a preceptor serves the School of Nursing and then only as updates are necessary. Please send the completed form to the School of Nursing Clinical Placements Office via e-mail to [umsn-clinicalplacement@med.umich.edu](mailto:umsn-clinicalplacement@med.umich.edu) or via Fax 734-647-1419.

### Section I: Preceptor Profile

Name	Position/Job Title	Agency Name	Clinical Site (Physical Location)	Clinical Unit
Email Address	Work Phone #	Cell Phone #	Pager #	School of Nursing Contact
Business Address		City	State	Zip Code

### Section II: Educational Degrees: *(Check all that apply)*

ADN	BA	BS	BSN	BSW	MA	MBA	MPH	MS	MSA
MS Ed	MSN	MSW	EdD	DNP	DNS	PhD	MD	DO	Other

### Section III: Professional Licensure & Information:

License Type (i.e. RN, NP, DO, MD, Midwifery)	Issuing State	Expiration Date	License Number

### Section IV: Certification Information

Certification Agency (i.e. AANC, ONCC, NCC, PNCB, AANPCP, AMCB, AANA, AAOHN)	Certification Type (e.g. Adult – ANP-BC, Pediatric Nurse – CPN, Certified Midwife – CNM)	Certification Number	Certification Expiration Date

### Section V: Clinical Practice Specialties: *(Check all that apply)*

Acute Care Adult Medicine/Surgery	Administration	Ambulatory/Primary Care	Community/Public Health	Geriatrics
Home Care and/ or Hospice	Long Term Care	Occupational Health	Obstetrics/Women's Health	Pediatrics
Psych/Mental Health	Other			

## **Appendix B: Program-Specific Information**

Individual course information will be provided for each preceptor prior to the start of the clinical rotation. Below are links to the most common evaluations per program.

### **Adult-Gerontology Acute Care Nurse Practitioner (AGACNP)**

[AGACNP Clinical Evaluation Form](#)

### **Adult-Gerontology Acute Care Clinical Nurse Specialist (AGCNS)**

[AGCNS Clinical Evaluation Form](#)

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

[AGPCNP Mid-Term Clinical Evaluation Form](#)

[AGPCNP End of Term Clinical Evaluation Form](#)

### **Primary Care Family Nurse Practitioner (PCFNP)**

[PCFNP Mid-Term Clinical Evaluation Form](#)

[PCFNP End of Term Clinical Evaluation Form](#)

### **Primary Care Pediatric Nurse Practitioner (PPCNP)**

[PPCNP N547 Clinical Evaluation Form](#)

[PPCNP N549 Clinical Evaluation Form](#)

[PPCNP N649 Clinical Chronic Evaluation Form](#)

[PPCNP N649 Clinical Primary Evaluation Form](#)

### **Nurse-Midwife (CNM)**

[CNM Clinical Evaluation Process](#)

[CNM-Daily-Weekly Clinical Evaluation Form](#)

[CNM-Midterm Clinical Evaluation Form](#)

[CNM-End of Term Clinical Evaluation Form](#)

### **Family Psychiatric Mental Health Nurse Practitioner (FPMHNP)**

[FPMHNP Clinical Evaluation Form](#)

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

[DNP Residency Description and Evaluation Form](#)