

THE UNIVERSITY OF TEXAS AT TYLER
SCHOOL OF NURSING AND HEALTH SCIENCES



The University of Texas at
TYLER Nursing

PRECEPTOR PROGRAM
2019

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PRECEPTOR PROGRAM

The purpose of the clinical preceptor program is to provide the students with a professional role model whose guidance will enhance the attainment of student learning. The preceptor will act as a facilitator and resource person to the student during the clinical learning experiences and will participate in the evaluation of the student's learning.

School of Nursing Mission Statement

To empower students to excel as nurse clinicians, leaders and scholars in a caring, learner-centered, strengths-based environment.

Vision Statement

We aspire to be the leader in transforming lives through excellence in nursing education.

Value Statements

- **Caring:** *Professional* practice that embodies empathy, presence, and advocacy, resulting in compassionate, patient-centered care.
- **Excellence:** The dynamic effort to exceed *professional* nursing standards of practice, education, and scholarship.
- **Professionalism:** The outward expression of an individual's respect for self and others; taking responsibility for behaviors that adhere to professional standards and codes of conduct.
- **Integrity:** Actions that reflect moral accountability in practice, education, and scholarship consistent with *professional* nursing values.
- **Spirit of inquiry:** A relentless curiosity towards nursing practice resulting in generation of new knowledge, evidence-based decision-making, and improved clinical outcomes.
- **Leadership:** Establishing a clear-shared vision; providing the information, knowledge, and resources to realize that vision; coordinating and balancing varied interests of stakeholders; and inspiring others to engage in achieving mutual goals.

School of Nursing Conceptual Model

Curriculum Pillars



Program Student Learning Outcomes

BSN graduates will:

Professionalism: Uphold standards of practice using moral, altruistic, ethical, and humanistic principles, while maintaining legal and regulatory standards.

Patient Centered Care: Recognize individual's preferences, values, and needs: anticipate the uniqueness of all individuals, families, and populations: and incorporate the patient/family/population the plan and implementation of care.

Evidence-Based Practice: Synthesize and apply evidence, along with clinical expertise and patient values, to improve patient outcomes.

Informatics & Technology: Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making.

Quality Improvement: Use a systematic, data-guided approach to continuously improve outcomes and processes for the patient and healthcare systems.

Teamwork and Collaboration: Function effectively in nursing and Interprofessional teams and foster communication, mutual respect, and shared decision-making to achieve quality patient care.

Wellness and Prevention: Assess health and wellness in individuals, families, groups, communities, and populations to promote health outcomes.

Leadership: Promote the practice of professional nursing through leadership and advocacy.

Safety: Implement measures to promote quality and a safe environment for patients, self, and others.

Strengths: Evaluate how strengths (signature talent themes) influence the role of the student nurse and clinical decision-making.

FUNCTIONS AND RESPONSIBILITIES

FUNCTIONS AND RESPONSIBILITIES OF THE AGENCY:

1. Retain responsibility for the nursing care of patients.
2. Retain responsibility for the preceptor's salary, benefits, and liability.
3. Provide Nursing Faculty a list of skills Nursing Students are not allowed to perform (if applicable).
4. Orient other agency personnel to the preceptor program and the clinical expectations for students as necessary.
5. Ensure that the Clinical Preceptors shall have the following qualifications:
 - competence in designated areas of practice;
 - philosophy of health care congruent with that of the nursing program;
 - current licensure to practice as a registered nurse in the State of Texas.

FUNCTIONS AND RESPONSIBILITIES OF NURSING FACULTY:

1. Develop course specific expectations for preceptors and students as appropriate to the preceptor experience and student skill level.
2. Provide an orientation to the preceptor regarding the School of Nursing's Mission, Vision, Values and BSN Program Learning Objectives.
3. Provide a Clinical Orientation for the Nursing Students prior to their scheduled clinical rotation.
4. Post list of skills that nursing students are not allowed to perform from each agency (if applicable) on the Canvas site and review with students in clinical orientation.
5. Evaluate the preceptor's performance based on preceptor responsibilities.
6. Cooperate with the preceptor and agency to identify student learning and assure they have appropriate student assignments.
7. Monitor student progress through rounds, student clinical seminars, student/preceptor/faculty conferences, and reviewing nursing student assignments and activities.
8. Complete the Clinical Rounding tool and reviews the Nursing Student's Goal/Objectives form as well as Clinical Skills and various clinical assignments during rounds.
9. Be responsible for the overall teaching and evaluation of the students. Collaborate with the preceptor to complete written and verbal student evaluations.
10. Assume responsibility that all clinical requirements such as immunizations, screenings, OSHA standards, CPR, and current liability insurance coverage are completed. This information is maintained in the CastleBranch system.
11. Be an available resource for consultation when students are in the clinical area.
12. Provide recognition to the preceptor for participation.
13. Complete Clinical Evaluation tool and review with nursing student at conclusion of the clinical portion of their course.

FUNCTIONS AND RESPONSIBILITIES OF THE PRECEPTOR:

1. Participate in a preceptor orientation and/or review the Undergraduate Preceptor Orientation Guide.
2. Function as a role model in the designated clinical area.
3. Orient the student to the agency and/or clinical area.
4. Review the clinical goals and objectives the Nursing Student has identified as learning needs for each clinical assignment. These should be reviewed at the beginning of the clinical shift with the student. The Clinical Faculty will also review these when they make their rounds.
5. Review and sign the Preceptor Agreement form located on the back of the Goal sheet. (You may make a copy of this form if you are wanting to participate in the benefits of the Preceptor Program.)
6. Supervise no more than 2 students at one time to facilitating learning activities.
7. Assure safe nursing practice by supervising the student's performance of clinical skills. The student will have their skills checklist with them and the preceptor may check off the skills performed in accordance with their student's level.
8. Assist the student in identification and monitoring of available activities, which accomplish the

clinical objectives.

9. Communicate with the student and collaborate with the faculty regarding student performance.
10. Contact the faculty if assistance is needed related to poor student performance when needed or if any problems occur.
11. Participate in an evaluation of the clinical activities of the students.

FUNCTIONS AND RESPONSIBILITY OF THE STUDENT:

1. Prepare for each clinical experience and participate in the selection of day-to-day clinical activities to meet clinical objectives.
2. Maintains and keeps current certifications and immunizations updated in the CastleBranch system.
3. Complete facility orientation as required by the facility. (if applicable)
4. Present the Preceptor Agreement to the assigned preceptor and complete signatures. Upon completion of the agreement the student will then capture a screenshot and submit to the appropriate canvas site.
5. Write clinical goals and objectives to identify learning needs in collaboration with the faculty and preceptor. These are to be reviewed at the beginning of the clinical shift with preceptor and faculty.
6. Maintain responsibility for the clinical skills checklist and accountability for his/her learning activities.
7. Be accountable for nursing actions while in the clinical setting. Arrange for preceptor's supervision when performing procedures.
8. Share learning experiences in rounds, clinical seminars, and student/preceptor/faculty conferences.
9. Keep open communication with preceptor and faculty. Contact faculty if assistance is needed.
10. Keep all patient and agency information obtained during clinical experiences confidential.
11. Follow safety principles and legal standards regarding nursing practice.
12. Complete all required course assignments and submits to Canvas site as outlined in course.
13. Complete evaluation of preceptor(s) and submits to Clinical Faculty or as outlined in course.
14. Complete self-evaluation(s) on the Clinical Evaluation form as outlined in the clinical course and attends clinical evaluation meeting with Clinical Faculty at the conclusion of the clinical portion of the course.

Reference:

https://www.bon.texas.gov/pdfs/education_pdfs/education_nursing_guidelines/3.8Clinical_Learning_Experiences/3-8-3-a.pdf

The following excerpt is from the Texas Board of Nurse Examiners Rules and Regulations related to the use of preceptors in professional nursing education:

TEXAS BOARD OF NURSING
RULES AND REGULATIONS *relating to* NURSING EDUCATION, LICENSURE AND PRACTICE
Published: December 2015 <https://www.bon.texas.gov/index.asp>

Portions of Rules and Regulations that apply to the use of preceptors:

§215.1 General Requirements and Purpose of Standards . . .

§215.2 Definitions – Words and terms, when used in this chapter, shall have the following meanings unless the context clearly indicates otherwise:

(10) Clinical preceptor--a registered nurse who meets the requirements in §215.10(j)(6) of this chapter (relating to Clinical Learning Experiences), who is not employed as a faculty member by the governing entity, and who directly supervises clinical learning experiences for no more than two (2) students. A clinical preceptor assists in the evaluation of the student during the experiences and in acclimating the student to the role of nurse. A clinical preceptor facilitates student learning in a

manner prescribed by a signed written agreement between the governing entity, preceptor, and affiliating agency (as applicable).

(11) Clinical teaching assistant--a registered nurse licensed in Texas, who is employed to assist in the clinical area and work under the supervision of a Master's or Doctorally prepared nursing faculty member and who meets the requirements of §215.10(j)(8) of this chapter.

(12) Non-nursing faculty--instructors who teach non-nursing content, such as pharmacology, pathophysiology, research, management and statistics, and who have educational preparation appropriate to the assigned teaching responsibilities.

(13) Observation experience--a clinical learning experience where a student is assigned to follow a health care professional in a facility or unit and to observe activities within the facility/unit and/or the role of nursing within the facility/unit, but where the student does not participate in patient/client care.

(14) Supervision--immediate availability of a faculty member, clinical preceptor, or clinical teaching assistant to coordinate, direct, and observe first-hand the practice of students.

§215.10

Clinical Learning Experiences

- (a) Faculty shall be responsible and accountable for managing clinical learning experiences and observation experiences of students.
- (b) Faculty shall develop criteria for the selection of affiliating agencies/clinical facilities or clinical practice settings which address safety and the need for students to achieve the program outcomes (goals) and course objectives through the practice of nursing care or observation experiences.
Consideration of selection of a clinical site shall include:
 - (1) client census in sufficient numbers to meet the clinical objectives/outcomes of the program/courses; and
 - (2) evidence of collaborative arrangements for scheduling clinical rotations with those facilities that support multiple nursing programs.
- (c) Faculty shall select and evaluate affiliating agencies/clinical facilities or clinical practice settings which provide students with opportunities to achieve the goals of the program.
 - (1) Written agreements between the program and the affiliating agencies shall be in place before clinical learning experiences begin and shall specify the responsibilities of the program to the agency and the responsibilities of the agency to the program.
 - (2) Agreements shall be reviewed periodically and include provisions for adequate notice of termination and a withdrawal of participation clause indicating a minimum period of time to be given for notice of such withdrawal.
 - (3) Affiliation agreements are optional for those clinical experiences which are observation only.
- (d) The faculty member shall be responsible for the supervision of students in clinical learning experiences and for scheduling of student time and clinical rotations.
- (e) Clinical learning experiences shall include the administration of medications, health promotion and preventive aspects, nursing care of persons throughout the life span with acute and chronic illnesses, and rehabilitative care.

- (1) Students shall participate in instructor supervised patient teaching.
 - (2) Students shall also be provided opportunities for participation in clinical conferences.
 - (3) Simulated laboratory experiences may also be utilized as a teaching strategy in classroom and clinical settings to meet objectives and may be counted as either classroom or clinical hours for the purpose of calculating the hours in the curriculum.
- (f) Faculty shall be responsible for student clinical practice evaluations. Clinical evaluation tools shall be correlated with level and/or course objectives and shall include a minimum of a formative and a summative evaluation for each clinical in the curriculum.
- (g) The following ratios only apply to clinical learning experiences involving direct patient care:
 - (1) When a faculty member is the only person officially responsible for a clinical group, the group shall total no more than ten (10) students.
 - (2) Patient safety shall be a priority and may mandate lower ratios, as appropriate.
 - (3) The faculty member shall supervise that group in only one (1) facility at a time, unless some portion or all of the clinical group are assigned to observation experiences in additional settings.
 - (4) Direct faculty supervision is not required for an observation experience.
- (h) Clinical preceptors may be used to enhance clinical learning experiences after a student has received clinical and didactic instruction in all basic areas of nursing, or after a student has received clinical and didactic instruction in the basic areas of nursing for the related course or specific learning experience.
 - (1) In courses which use clinical preceptors for a portion of clinical learning experiences, faculty shall have no more than twelve (12) students in a clinical group.
 - (2) In a course which uses clinical preceptors as the sole method of student instruction and supervision in clinical settings, faculty shall coordinate the preceptorship for no more than twenty-four (24) students.
 - (3) The preceptor may supervise student clinical learning experiences without the physical presence of the faculty member in the affiliating agency or clinical practice setting.
 - (4) The preceptor shall be responsible for the clinical learning experiences of no more than two (2) students at a time per clinical group.
- (i) Clinical teaching assistants may assist qualified, experienced faculty with clinical learning experiences.
 - (1) In clinical learning experiences where a faculty member is supported by a clinical teaching assistant, the ratio of faculty to students shall not exceed two (2) to fifteen (15).
 - (2) Clinical teaching assistants shall supervise student clinical learning experiences only when the qualified and experienced faculty member is physically present in the affiliating agency or alternative practice setting.
- (j) When faculty use clinical preceptors or clinical teaching assistants to enhance clinical learning experiences and to assist faculty in the clinical supervision of students the following applies:

- (1) Faculty shall develop written criteria for the selection of clinical preceptors and clinical teaching assistants.
- (2) When clinical preceptors or clinical teaching assistants are used, written agreements between the professional nursing education program, clinical preceptor or clinical teaching assistant, and the affiliating agency, when applicable, shall delineate the functions and responsibilities of the parties involved.
- (3) Faculty shall be readily available to students and clinical preceptors or clinical teaching assistants during clinical learning experiences.
- (4) The designated faculty member shall meet periodically with the clinical preceptors or clinical teaching assistants and student(s) for the purpose of monitoring and evaluating learning experiences.
- (5) Written clinical objectives shall be shared with the clinical preceptors or clinical teaching assistants prior to or concurrent with the experience.
- (6) Clinical preceptors shall have the following qualifications:
 - (A) competence in designated areas of practice;
 - (B) philosophy of health care congruent with that of the nursing program;
 - (C) current licensure or privilege to practice as a registered nurse in the State of Texas.
- (7) When acting as a clinical teaching assistant, the registered nurse shall not be responsible for other staff duties, such as supervising other personnel and/or patient care.
- (8) Clinical teaching assistants shall meet the following criteria:
 - (A) hold a current license or privilege to practice as a registered nurse in the State of Texas; and
 - (B) have the clinical expertise to function effectively and safely in the designated area of teaching.

The provisions of this §215.10 adopted to be effective January 9, 2005, 29 TexReg 12190; amended to be effective May 2, 2007, 32 TexReg 2361; amended to be effective October 19, 2008, 33 TexReg 8509; amended to be effective October 23, 2012, 37 TexReg 8304

ORIENTATION INFORMATION FOR PRECEPTORS

Preceptors will acknowledge completion of an orientation to the preceptor role by signing of the Preceptor Agreement. Orientation can be completed by reviewing the Preceptor Program online at [>Link](#) or by receiving the Undergraduate Preceptor Program Guide Handout available by the Faculty.

Notice about Information Laws and Practice

With few exceptions, you are entitled on your request to be informed about the information The University of Texas at Tyler collects about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information. Under Section 559.004 of the Texas Government Code, you are entitled to have The University of Texas at Tyler correct information about you that is held by us and that is incorrect, in accordance with the procedures set forth in The University of Texas System Business Procedures Memorandum 32. The information that The University of Texas at Tyler collects will be retained and maintained as required by Texas records retention laws (Section 441.180 et seq. of the Texas Government Code) and rules. Different types of information are kept for different periods of time.

ANSWERS TO OFTEN ASKED QUESTIONS AND OTHER HELPFUL HINTS

1. What students use preceptors?

Students in the second, third and fourth levels students will utilize preceptors for clinical experiences. The second level students have completed Pathophysiology, Holistic Health Assessment, Fundamentals in Nursing, and Pharmacology and Wellness & Health Promotion; the third level students have completed Chronic Care Coordination, Caring for the Chronically Ill, and Population Health, the fourth level students have completed Caring for the Acutely Ill, Special Populations (Maternal/Child & Mental Health) and Evidence Based Decision Making courses. The fourth levels students will currently be taking Transitions to Practice, Clinical Immersion and Capstone courses.

2. How will the students function?

This is limited only by your imaginations. Any ideas or recommendations from you are most welcome. We want the students to join you at the hip and see how an expert nurse manages a caseload of patients. Whatever your patient assignment is, it is also the student's assignment. We hope that the students will gradually take over more and more of the responsibility with you by their side. We have told the students that, for example, on the first day they may be comfortable performing only basic care but will need assistance performing patient assessments. Perhaps new skill opportunities will arise. The preceptor can perform the skill and the next time the student can do the skill. Students may not have time to prepare to give the first medications of the shift but could look up meds to be given later in the day. There are no hard and fast rules, only opportunities. The advantage of this arrangement is that you will get to know the student well and can build on your previous time together.

3. What skills can the students perform?

The students have been instructed in most nursing skills. However, some may not have had the opportunity to perform them on "real" patients. Nursing Skills Checklists are included in the handbook. Additional information is found in their syllabus regarding some limitations on certain drug administrations and specialty procedures.

4. What about the faculty?

As faculty, we will regularly spend time with each student and preceptor. We are available by phone at all times that a student is with a preceptor. The Clinical Faculty phone number will be listed on the Preceptor Agreement for each student.

5. Who is responsible for evaluating the student?

The ultimate responsibility for student evaluation lies with the faculty. However, your input will be invaluable and we will discuss the student's progress with you. A copy of the student's clinical evaluation is found in the addendum. Course specific mastery skills list will be provided by the faculty.

6. What happens if a student is ill or injured during clinical?

The student and/or preceptor must contact the faculty regarding the illness or injury as soon as possible. The student may be seen in the agency emergency room or contact his/her private physician or nurse practitioner or the UT Tyler Health Clinic for an appointment. If the student is in a clinic or community setting, the preceptor and/or student must contact the faculty member to determine the course of action. The preceptor and student must complete any documentation required by the agency and as outlined in the School of Nursing Student Guide available at [>Link](#). The student is responsible for any payments required as a result of the illness or injury. The University of Texas at Tyler and the School of Nursing are not responsible for payment of any medically related bills incurred by the student during the clinical experience.

Please do not hesitate to call us if there are concerns or issues regarding the student's experience. We hope that you enjoy this time and find that the experience is well worth the effort for you and your patients.

CLINICAL GUIDELINES FROM THE COURSE SYLLABUS:

1. Unsafe Clinical Practice: Any act of omission or commission which may result in harm to the patient is considered unsafe clinical practice. During the clinical practicum, unsafe clinical practice is defined as any one of the following: When the student:

- a. Violates or threatens the physical, psychological, microbiological, chemical, or thermal safety of the patient.
- b. Violates previously mastered principles/learning objectives in carrying out nursing care skills and/or delegated medical functions.
- c. Assumes inappropriate independence in action or decisions.
- d. Does not adhere to current CDC guidelines for infection control.
- e. Fails to recognize own limitations, incompetence, and/or legal responsibilities.
- f. Fails to accept moral and legal responsibility for his/her own actions thereby violating professional integrity as expressed in the Code for Nurses.
- g. Arrives at clinical settings in an impaired condition as determined by the clinical instructor. Failure to comply with any of the above requirements may result in an unexcused clinical and/or negative clinical evaluation.

2. Student Accountability:

a. Students may **NOT**:

- 1) Take verbal or telephone orders from physicians, midwives or physician assistants
- 2) Transcribe or note physician, midwife orders or those from a physician assistant
- 3) Witness operative or procedural permits
- 4) Perform any delegated **medical** act (skill that violates the Nurse Practice Act), even if under a physician's supervision (i.e.: removal of chest tube, arterial line, pacer wires)
- 5) Discontinue central IV lines, including PICC lines
- 6) Access central venous access devices (i.e. Port-a-cath, mediport)
- 7) Administer chemotherapy
- 8) Initiate or adjust IV Pitocin drips during the labor process
- 9) Initiate IV therapy in the nursery
- 10) Sign out narcotics, witness wasting or stocking of narcotics
- 11) Initiate infusion of blood products

b. Students **MUST** be supervised by the instructor/preceptor when:

- 1) Performing any or central IV related procedures (including IV initiation, hanging solutions, changing tubing, flushes, IVPB, IVP, or site dressing change)
- 2) Performing skills listed on the Student Skills Checklist
- 3) Administering medications by any route

c. If present during a code, student may only:

- 1) Perform CPR except on a newborn
- 2) **NOT** document code procedures
- 3) **NOT** administer drugs or perform skills other than basic CPR

3. If the student knows that he/she will be late or absent to clinical, the student must notify the assigned clinical unit, the preceptor, and/or the clinical instructor (depending on the facility and your clinical instructor) at least sixty (60) minutes prior to the beginning of the shift.

4. The student may be sent home with an unexcused absence from clinical for four primary reasons (not exclusive):

- a. Tardiness
- b. Unprepared for patient care (written or otherwise)
- c. Violation of dress code
- d. Violation of safe patient care

Undergraduate Dress Requirements

Regardless of the academic setting, adherence to dress code standards are at the discretion of the faculty. Students must adhere to the faculty determination of appropriate appearance. It is the philosophy of the SON that the student has a responsibility to be neatly groomed and modestly dressed. Appearances should promote good health, safety and general well-being of the student. Clothing should avoid brevity and/or design that are offensive to the dignity and rights of others. School officials have the right and responsibility to counsel with the student or take any other corrective action. Types of clothing (other than those specified in this document) may be worn at the direction of the nursing instructor for special events.

Classroom: Casual or everyday business wear is recommended. This includes but is not limited to the following: slacks or skirt; sweater, blouse, and shirt. Jeans as well as conservative shorts (mid-thigh or longer) may be worn, but avoid frayed or soiled items. Shoes must be worn.

Professional/Clinical Presentations: Business or dressy day social: suit, dress, dressy separates, jacket, tie, nice fabrics, and dress shoes. Denim, jeans, t-shirt or other casual clothes are not considered appropriate and are not allowed. For workshops/seminars attended by students, professional/business attire will be worn. Students will wear the approved UT Tyler SON white lab coat, with the UT Tyler SON patch, over professional attire at the discretion of the nursing instructor.

Pre- or Post-Clinical Experiences in the Health Care or Community Setting: Students may be required to attend conferences or visit the clinical areas as part of their course requirements. Students will wear the approved lab coat with name badge and UT Tyler school patch. Professional dress will be worn under the lab coat. The following items will be avoided in the clinical areas: jeans, shorts, sandals, jogging/athletic suits, t-shirts, and ball-caps. Alternatively, UT Tyler scrubs may be worn with a name badge. Faculty discretion may be used for particular events.

Skills Laboratory, Simulation, and Clinical Experience: Unless instructed otherwise by faculty, when attending any clinical experience students are required to wear the adopted student uniform with name badge and school patch. As a representative of UT Tyler and the SON, students are expected to be professional in appearance and behavior at all times. Students will refrain from wearing student uniforms to non-UT Tyler related activities (e.g. restaurants, shopping, etc.).

When student uniforms are required for clinical experiences, as specified by the course, the following guidelines must be adhered to:

- a. School patch on the front left pocket area of lab coat and uniform top.
- b. The UT Tyler name badge with photo will be worn in all clinical settings. Name tag must be worn above the waist, so name and title are clearly visible.
- c. White or neutral hose are worn with dress/skirt; neutral hose, knee highs or white socks are worn with pants. Socks must cover ankles.
- d. Clean, white clinical shoes or white leather athletic shoes should be worn, no canvas, mesh, or clogs (shoes may be mostly white and if stripes or logos are on shoes, these must be minimal and light colored). Shoes must be closed toe and heel.
- e. Jewelry: wedding or engagement rings only; single stud earrings and only 1 in each lobe (no dangling or hoops); no rings or studs in the nose, tongue, lip or any other visible facial or body piercing; no necklaces or bracelets (only Medic Alert). Students must have a watch with a second hand.
- f. Make-up, hair, and grooming should be conservative. Hair color must be natural shades (no colors such as pink, blue, mahogany reds, etc.) Hair shoulder length or longer must be pulled neatly back in a ponytail or bun and restrained so that the hair does not fall forward when bending over providing care. Hair clips, bands, etc. shall be functional, not decorative (no bows) or distracting adornments. Mustaches and beards must be clean, neatly groomed, and trimmed short.
- g. Tattoos must be covered and not visible.
- h. Nails are to be clean and neatly trimmed to no more than fingertip length; no polish or artificial nails are permitted.
- i. No perfume, after-shave or other strong scents since this causes nausea and /or difficulty in breathing for many patients.
- j. Gum chewing is not allowed.

Students having questions concerning adherence to the dress code should discuss this with their course instructor; faculty have final discretion.

In order to meet the variety of needs for warmth the following options for undershirts and/or jackets are permissible:

- k. No undershirt for females are required if uniform top neckline is such that complete modesty is maintained, no cleavage is to be showing.
- l. Sleeveless white round neck tank top.
- m. A short sleeve, round neck, royal blue or white top available through designated vendor.
- n. A 3/4 length sleeve, white top available through designated vendor.
- o. Men will wear a round neck white undershirt without visible logos or advertising. Short sleeves should not be visible hanging from under sleeve of uniform top.
- p. Long sleeve or turtleneck tops are not acceptable options.
- q. An approved royal blue jacket is available through a designated vendor with the UT Tyler SON logo or patch on the upper left pocket area, may be worn over the student's matching UT Tyler uniform.

Failure to comply with the above requirements may result in an unexcused clinical absence and/or negative clinical evaluation. Some individual situations may require collaborative effort by faculty to reach an appropriate solution to best deal with tattoos', skin disorders etc.

(Policy updated 12.17.2018)

Items to be avoided in all School-related Functions (including but not limited to): overly frayed, worn or soiled garments; costume look, transparent blouses, bare midriff shirts, tank tops, spaghetti straps, muscle shirts, overtly sexual styles, gang colors or logos, facial or body piercing, obscene slogans or pictures, bedroom wear, short-shorts, short skirts, or clothing that may be offensive to others.

If the dress code rules are broken and a change of clothes is not available, the student may be removed from the school-related function for the remainder of the day. Appropriate disciplinary action will be taken for repeated violations of this code.

PRECEPTOR BENEFITS

The following benefits are available to the preceptor:

1. Benefits are effective the semester following your service as a Preceptor include:
 - a. Library privileges at The University of Texas at Tyler Muntz Library.
 - b. Eligibility for faculty discounts at Cowan Center events. (10%)
2. As a preceptor, you are entitled to educational benefits as defined by the Coordinating Board. The most current information is available at the University of Texas at Tyler website <http://www.uttyler.edu/financialaid> under Exemption program for Clinical Preceptors and Their Children. This links to the College for All Texans website <http://www.collegeforalltexans.com/apps/financialaid/tofa2.cfm?ID=546> This site provides information on eligibility (time period the program conducts clinicals during a semester or other academic term that ended less than one year prior to the beginning of the semester or term in which the exemption is to be used), where benefits are accepted, and how to apply. A copy of the Preceptor Agreement should be kept by the Preceptor to validate qualifications of benefits.

Library privileges at The University of Texas at Tyler Muntz Library

The Muntz Library and its satellite locations in Palestine and Longview have several services which are available through the Preceptor Program in the College of Nursing and Health Sciences at The University of Texas at Tyler. The Preceptor Package includes "Library privileges at The University of Texas at Tyler Muntz Library."

On site at the library, Preceptors may use the periodical collection, copy machines at the student rate, library computers to search on-line library collections, as well as libraries across the nation, and check-out privileges. Currently, three books may be checked out for one week.

The Tyler site has an educational program for faculty, preceptors, and students in the use of on-line searching. Small group and individual classes can be arranged through a reference librarian.

Preceptors can use the resources from the 2nd floor of Muntz library in the reference section or from their personal laptop or device when connected to PatriotAir on campus.

When an agreement is signed by a Preceptor and the Clinical Faculty, they must be submitted by the nursing faculty to the Dean's office. The Preceptor name is forwarded to the Muntz Library. At that time, the Preceptor can request the privileges directly from the Muntz Library. If the preceptor has difficulty with the process, please call the associate dean's administrative assistant at (903) 566-7032.

Faculty and Preceptor Discounts at Cowan Center events

The Cowan Fine and Performing Arts Center has several types of events and series, some of which are available at discounted prices through the Preceptor Program in the College of Nursing and Health Sciences at The University of Texas at Tyler. The Preceptor Package includes "Eligibility for faculty discounts (10%) at Cowan Center events." Not all of the Cowan performances are available for "faculty discounts."

The Cowan Center offers 15 events this season: All events go on sale one month prior to the event. You must request your discount at the time of purchase. The Cowan Center will verify your name on the list and apply a discount for up to 2 tickets per event, with the exception of Special Events, that do not have a discount. Show information is available at CowanCenter.org.

Renters and outside users of the building do not offer discounts for University employees, these include The East Texas Symphony Orchestra, The Texas Rose Festival and campus organizations. Please contact the Cowan Center at 903-566-7424 for the events that are discounted for faculty and for Preceptors for the current semester.

When an agreement is signed by a Preceptor and the Clinical Faculty, they must be submitted by the nursing faculty to the Dean's office. The Preceptor's name is forwarded to the Box Office at the Cowan Center. At that time, the Preceptor can request the Preceptor privileges directly from the Cowan Center. If the Preceptor has difficulty with the process, please call the associate dean's administrative assistant at (903) 566-7032.

APPENDICES

University of Texas at Tyler – College of Nursing
NURS_____ – _____
Student Daily Clinical Goals and Objectives

Student Name: _____

Date: _____

Students should develop 2 clinical goals and at least 5 objectives for each clinical day and share with preceptor at the beginning of the shift and review with your Clinical Instructor when they round.

Goals may relate to broad areas that are being studied in class, and objectives relate to specific things (example – skills) that need to be practiced or required for the course.

For example:

Goal – To learn about care of the patient with an arrhythmia.

Objectives: 1.) Practice analyzing EKG strips; 2.) Identify drugs that are used to treat a patient's arrhythmia; 3.) Place telemetry electrodes on a patient; 3.) Identify signs and symptoms that may be associated with an arrhythmia and the nursing interventions to address the problem; 4.) Teach a patient about medications that are used to control arrhythmias; 5.) Conduct a thorough cardiac assessment on patient with an arrhythmia and practice charting significant findings.

***Refer to Course Skill Checklist for listing of skills required for this course.**

My goals for today are:

1.) _____

2.) _____

My clinical objectives for today are:

1.) _____

2.) _____

3.) _____

4.) _____

5.) _____

I understand that there may be skills a Student Nurse cannot perform. I understand that it is my responsibility to perform only those skills that are allowed in accordance with the School of Nursing policies and/or Clinical Facility.

Be sure to sign and complete the Preceptor Agreement on the back side. Once form is completed – take a screen shot of both sides and submit to your assigned Canvas site.

THE UNIVERSITY OF TEXAS AT TYLER
School of Nursing and Health Sciences
Baccalaureate Nursing Program

PRECEPTOR AGREEMENT

I, (Print Preceptor's Name) _____, verify that:

- A. I have completed or will complete preceptor orientation provided by the organization and/or UT Tyler School of Nursing.
- B. I will precept the nursing student _____ from NURS _____ according to course objectives during _____ semester/year.
- C. I will follow the functions and responsibilities of the preceptor as outlined in the UT Tyler Preceptor Program.
- D. I understand if I have any questions, I may call the faculty member at any time. I have received Information on how to contact the appropriate faculty.

Contact Number for Clinical Instructor: _____

- E. As a preceptor, you are entitled to educational benefits as defined by the Coordinating Board.
<http://www.collegeforalltexas.com/apps/financialaid/tofa2.cfm?ID=546>



Preceptor Signature

Date

Agency

Unit (if applicable)

My signature validates that I will follow the functions and responsibilities of my role as outlined in the UT Tyler Preceptor Program.

Nursing Student Signature

Date

Faculty Signature

Date

Preceptors may copy this sheet for their records regarding proof of eligibility to receive Preceptor Benefits.

THE UNIVERSITY OF TEXAS AT TYLER
School of Nursing and Health Sciences
Baccalaureate Nursing Program
NURS _____

Preceptor Evaluation of the Student

Please complete and return in the provided envelope. This evaluation will be treated in a confidential manner and **should not be viewed or shared with the student**. Your feedback is very important as well as much appreciated. This information will be included in the Instructor's clinical evaluation of the student.

Date: _____ Student's Name: _____

Total number of hours (estimated) that you worked with this student: _____

Unit in which you work: _____

Please read each item carefully, and then place a check mark under the number that corresponds.

0= Unsafe

1= Unsatisfactory

2= Meets Expectations

3= Exceeds Expectations

Content	0	1	2	3
1. The student demonstrated a positive professional image.				
2. The student upheld patient confidentiality.				
3. The student arrived at assigned time and complete assigned shift.				
4. The student demonstrated readiness to learn and perform expected skills.				
5. The student demonstrated critical thinking skills				
6. The student used clinical time effectively and appropriately.				
7. The student met clinical goals and objectives they identified.				

What is one thing the student did well?

What is one thing the student could improve? _____

Your comments are appreciated.

Preceptor's Name: _____

Date

Fax to: _____ or

Return to the nursing student in a sealed envelope (provided by the student).

Approved COC 8/14/19

SAMPLE STUDENT/PRECEPTOR SCENARIO

1. Meet for the first time
 - a. Orient and tour of the unit (include critical phone numbers/key personnel/policy & procedure manuals/locker if available)
 - b. Discuss student's past experiences, perceived strengths/weaknesses
 - c. Review student objectives
 - d. Review what student can/cannot do
 - e. State your expectations (professional, prepared and positive)
 - f. Examine schedule to determine days/times to work together
 - g. Exchange phone numbers
2. First day
 - a. Shadow
 - b. Explain what you are doing and why
 - c. Demonstrate quick head to toe assessment
 - d. Have student perform assessment(s)
 - e. Have student describe stress level; ask student for feedback
3. Next...
 - a. Assign 1 to 3 patients to student depending on experience and student objectives
 - b. Observe students interactions/assessments/medication; provide immediate feedback
 - c. Student continues to observe your usual activities/explain how you are prioritizing your day
 - d. Demonstrate/question/explain/help student critically think through problems rather than answering student's questions
 - e. Remember you are guiding their practice to develop mastery
4. As time goes on....
 - a. Student gradually takes more and more responsibility
 - b. Ask the student questions – stretch their thinking
 - c. Continue to increase patient load; include all aspects of care
 - d. Review frequently

SUGGESTIONS

- 1 Medications:
 - a. Preceptor gives early shift meds while student investigates medications before administering
 - b. Some students already have a list of medications commonly used on unit
- 2 Assessments:
 - a. Ask student to identify most critical assessment for patient prior to entering room
 - b. Demonstrate quick head to toe
 - c. Observe student and give immediate feedback include strengths and weakness
 - d. Suggest alternative ways of completing assessment
 - e. Repetition is important – perform multiple assessments each day even if student is not primarily responsible for the patient
- 3 Skills:
 - a. Have student review policy and procedure and explain prior to entering the patient's room
 - b. Have student talk through procedure prior to performing
 - c. Observe and intervene if patient safety is an issue
 - d. Once completed and outside the patient room, provide immediate feedback
 - e. If the student needs more help, please contact the faculty
- 4 Documentation:
 - a. Have student observe Preceptor document on the electronic medical record
- 5 Critical thinking:
 - a. Do not necessarily respond to question with direct answer
 - b. Ask the student "why" about everything! Why is the patient receiving this med? Why is this lab value important to know? Why are this patient's ankles so swollen? Why is this patient angry?
 - c. Offer alternatives – let the student know there are multiple ways to approach a problem
 - d. Ask the student to identify critical assessments to be made/labs to be checked/their priority intervention

**THE UNIVERSITY OF TEXAS AT TYLER
COLLEGE OF NURSING
SAMPLE OF THE CLINICAL EVALUATION TOOL**

NURS: Course Name

Term Fall _____ Spring _____

Student Name: _____

Expected clinical behaviors are evaluated throughout the required clinical experience.

1. 1. A score of 2 or 3 must be obtained for successful completion of the clinical objective of the course
2. A score below 2 will result in a written contract with expected measures to demonstrate improvement. Failure to demonstrate improvement will result in clinical failure and failure of the clinical course.
3. A score of 0 in any behavior at any time may result in automatic failure in the clinical component of the course and failure of the clinical course.
4. Mastery Level Clinical Skills are skills deemed necessary to accomplish in order to complete, satisfactorily, the clinical component of the course.

A. PROVIDER OF CARE: defined by each course

EXPECTED BEHAVIOR	MID-CLINICAL				FINAL				COMMENTS
	3	2	1	0	3	2	1	0	
1. Assessment Data									
2. Diagnostic Statement									
3. Patient Outcomes									
4. Delivery of Care									
5. Evaluation of Patient Outcomes									

B. COORDINATOR OF CARE: defined by each course

EXPECTED BEHAVIOR	MID-CLINICAL				FINAL				COMMENTS
	3	2	1	0	3	2	1	0	
1. Time Management									
2. Clinical Decision-Making									

C. MEMBER OF THE PROFESSION: Demonstrate responsibility and accountability for own actions. Abide by the laws and standards designated by The University of Texas at Tyler College of Nursing, Texas State Board of Nurse Examiners, and the American Nurses Association Code of Ethics. Project a professional image by adhering to the dress code and meeting the attendance requirements

EXPECTED BEHAVIOR	MID-CLINICAL				FINAL				COMMENTS
	3	2	1	0	3	2	1	0	
Professional Values									
1. Accountability/ Responsibility									
2. Professional Awareness									
3. Integrity									
4. Advocacy									
5. Moral Conduct									
Ethical/Legal Conduct									
1. Confidentiality									

2. Professional Standards									
Professional Image									
1. Dress Code									
2. Attendance									

D. COMMUNICATION: defined by each course

EXPECTED BEHAVIOR	MID-CLINICAL				FINAL				COMMENTS
	3	2	1	0	3	2	1	0	
1. Written Documentation									
2. Verbal Communication									
3. Interpersonal/Psychological									

E. SAFETY: Provide safe care by accurately administering medications in real and simulated situations. Accurately identify safety risks and appropriately intervene to provide a safe patient environment

EXPECTED BEHAVIOR	MID-CLINICAL				FINAL				COMMENTS
	3	2	1	0	3	2	1	0	
1. Medication administration/Simulations									
2. Environmental									

MASTERY SKILLS

NURS 3605 FUNDAMENTAL OF NURSING

ESSENTIAL CLINICAL SKILLS LEVEL 1

1. Foley catheter
2. Sterile wound care
3. Medical Administration
4. NG Tube insertion

NURS 3611 MEDICAL SURGICAL NURSING

ESSENTIAL CLINICAL SKILLS LEVEL 2

1. IV Therapy
2. Blood administration
3. Total parenteral nutrition
4. Airway management

NURS 4723 FAMILY HEALTH

ESSENTIAL CLINICAL SKILLS LEVEL 3

1. Performs Leopold's Maneuvers
2. Demonstrate placement of external fetal monitor
3. Performs postpartum assessment including vital signs
4. Discuss discharge teaching of a patient and newborn
5. APGAR score
6. Demonstrate assessment of newborn reflexes
7. Performs newborn maturity rating assessment
8. Demonstrate use of bulb syringe
9. Demonstrate newborn positioning and swaddling
10. Perform newborn intramuscular injection and ophthalmic medication administration

**NURS 4632 MEDICAL SURGICAL NURSING
ESSENTIAL CLINICAL SKILLS LEVEL 3**

1. Head to Toe Assessment
2. Focus assessment of CV system
3. Focus assessment of neurological system
4. Score neurologically impaired patient according to Glasgow coma scale
5. Perform patient teaching
6. Apply ECG electrodes
7. Identify life-threatening dysrhythmias
8. Coordinate care for multiple patients

**NURS 4631 NURSING LEADERSHIP AND MANAGEMENT
ESSENTIAL SKILLS LEVEL 4**

1. Work up to a full patient load
2. Receive report from outgoing/oncoming shift on all preceptor's patients
3. Head to Toe Assessment
4. Review assigned patients H&P, Progress notes, lab, diagnostics, blood glucose, I&O, VS, etc.
5. Review and administer all medications
6. Review new orders
7. Complete documentation in the EMR (as appropriate with preceptor)
8. Round with care providers
9. Conduct patient teaching as needed
10. Give hand-off report to oncoming shift on assigned patients; give/receive transfer reports
11. Complete at least one admission during rotation
12. Complete at least one discharge during rotation
13. Charge Nurse Role Identify key roles of Charge RN Responsibilities (with CRN preceptor)
14. Management Role – Identify key roles of Management Responsibilities (if applicable)

University of Texas at Tyler- School of Nursing

Undergraduate Preceptor Program Orientation Guide

The University of Texas at Tyler Nursing Students and Faculty would like to thank you for agreeing to serve as a preceptor. We are especially grateful for your contribution as a clinical expert in our program. You are one of over a 1000 preceptors in the East Texas area in partnership with the School of Nursing. Sharing your clinical expertise and the one-on-one attention given to our students is invaluable in their pursuit of their educational goals, and is also invaluable to the profession.

The benefits of serving as a preceptor are many and are outlined in the UT Tyler Preceptor Program. Certainly, the biggest reward is the experience of assisting a novice nurse to learn and grow into the profession. It is especially exciting when the student can see the application of theory at the bedside. There are often benefits to your practice as well. You will find yourself in a learning mode also, as the teacher often learns a great deal more than the student.

This document serves as an overview and brief orientation of the Preceptor Program and information regarding the expectations established for the students. For more details, please refer to the online Preceptor Program at [>Link](#). Methods of contacting the course faculty including phone numbers are included online as well on the Preceptor Agreement form.

Preceptor Expectations: (More details are online)

- Orient the student to the agency and/or clinical area.
- Review the clinical goals and objectives the Nursing Student has identified as learning needs for each clinical assignment. These should be reviewed at the beginning of the clinical shift with the student. The Clinical Faculty will also review these when they make their rounds.
- Review and sign the Preceptor Agreement form located on the back of the Goal sheet. You may make a copy of this form if you are wanting to participate in the benefits of the Preceptor Program.
- Supervise no more than 2 students at one time to facilitating learning activities.
- Assure safe nursing practice by supervising the student's performance of clinical skills. The student will have their skills checklist with them, please check off the skills performed in accordance with their student level.
- Assist the student in identification and monitoring of available activities, which accomplish the clinical objectives.
- Communicate with the student and collaborate with the faculty regarding student performance.
- Contact the faculty if assistance is needed related to poor student performance when needed or if any problems occur.
- Participate in the evaluation of the preceptor program regarding clinical activities for students and suggestions for curriculum/program development.

Clinical Guidelines from the Course Syllabus:

Nursing students in the Preceptor Program are in the second, third and fourth levels of their nursing program as indicated by the number of stars on their uniform.

Unsafe Clinical Practice

1. Any act of omission or commission, which may result in harm to the patient, is considered unsafe clinical practice, and may result in removal from the clinical setting, disciplinary action according to the discretion of the course faculty, a negative clinical evaluation, a course failure, and/or dismissal from the program.
2. During the clinical practicum, unsafe clinical practice is defined as any one of the following. When the student:
 - a) commits repetitive and/or a single, serious medication error.
 - b) violates or threatens the physical, psychological, microbiological, chemical, or thermal safety of the patient.
 - c) violates previously mastered principles/learning objectives in carrying out nursing care skills and/or delegated medical functions.
 - d) assumes inappropriate independence in action or decisions.
 - e) does not adhere to current CDC guidelines for infection control.
 - f) fails to recognize own limitations, incompetence, and/or legal responsibilities.
 - g) fails to accept moral and legal responsibility for his/her own actions thereby violating professional integrity as expressed in the Code of Ethics for Nurses.
 - h) arrives at clinical settings in an impaired condition as determined by the clinical instructor.
3. Failure to comply with any of the above requirements may result in an unexcused clinical, negative clinical evaluation, and/or clinical failure.

Student Accountability

Students may **NOT**:

- Take verbal or telephone orders from physicians, midwives, nurse practitioners, or physician assistants
- Transcribe or note physician, midwife, nurse practitioner, or physician assistant orders
- Witness operative or procedural permits
- Perform any skill that violates the Nurse Practice Act, even if under a physician's supervision (i.e. intubation of a patient)
- Perform any delegated **medical** act (i.e. removal of chest tube, arterial line, pacer wires)
- Discontinue central IV lines, including PICC lines
- Access central venous access devices (i.e. porta-cath, medi-port)
- Administer chemotherapy
- Initiate or adjust IV Pitocin drips during the labor process
- Initiate IV therapy in the nursery
- Sign out narcotics, witness stocking or wasting of narcotics
- Initiate infusion of blood products

Students **MUST** be supervised by the preceptor/instructor when:

- Performing any peripheral or central IV related procedure (including IV initiation, hanging solutions, changing tubing, flushes, IVPB, IVP, site dressing change)
- Performing an unfamiliar skill; students should only be performing skills listed on the skills checklist
- Administering medications by any route

If present during a code, a student may:

- Perform CPR **except** on a newborn
- **NOT** Document code procedures
- **NOT** administer drugs or perform skills other than basic CPR

Student Learning Outcomes

BSN graduates will:

- **Professionalism:** Uphold standards of practice using moral, altruistic, ethical, and humanistic principles, while maintaining legal and regulatory standards.
- **Patient Centered Care:** Recognize individual's preferences, values, and needs: anticipate the uniqueness of all individuals, families, and populations: and incorporate the patient/family/population the plan and implementation of care.
- **Evidence-Based Practice:** Synthesize and apply evidence, along with clinical expertise and patient values, to improve patient outcomes.
- **Informatics & Technology:** Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making.
- **Quality Improvement:** Use a systematic, data-guided approach to continuously improve outcomes and processes for the patient and healthcare systems.
- **Teamwork and Collaboration:** Function effectively in nursing and Interprofessional teams and foster communication, mutual respect, and shared decision-making to achieve quality patient care.
- **Wellness and Prevention:** Assess health and wellness in individuals, families, groups, communities, and populations to promote health outcomes.
- **Leadership:** Promote the practice of professional nursing through leadership and advocacy.
- **Safety:** Implement measures to promote quality and a safe environment for patients, self, and others.
- **Strengths:** Evaluate how strengths (signature talent themes) influence the role of the student nurse and clinical decision-making.

Please do not hesitate to call us if there are concerns or issues regarding the student's experience. We hope that you enjoy this time and find that the experience is well worth the effort for you and your patients.

The following UT Tyler College of Nursing numbers are for day-time emergencies only.

Tyler Campus: 903-566-7320 Longview University Campus: 903-663-8100 Palestine Campus: 903-727-2300

Sincerely,

Belinda Deal, PhD., RN, CNE
BSN Program Director

Barbara K. Haas, PhD., R.N.
Associate Dean, College of Nursing & Health Sciences
Executive Director, School of Nursing

Approved COC 8/14/19