California State University, Bakersfield

Department of Nursing

FNP Program Preceptor Handbook

2014-2016
June 2015
Dear Family Nurse Practitioner Preceptor:

Thank you for your support in helping our nursing students apply nursing practice concepts in your clinical area. Your willingness to be a preceptor is greatly appreciated by all the students and faculty of California State University, Bakersfield (CSUB). This Preceptor Handbook is designed to provide both the preceptor and the student with an understanding of the roles and responsibilities in this collaborative effort. It includes: information about the CSUB Nursing Program, The Preceptor Program expectations, and tips for you as a preceptor.

It is important for the Preceptor to know the required number of clinical hours, the responsibilities of the faculty member and preceptor during the clinical experience, and what to expect from the student. The FNP courses are separated into didactic (theory) and clinical courses. The FNP Graduate Program Preceptor Handbook includes the Guidelines and Responsibilities of Preceptor, Faculty and Student, a Summary of Minimum Clinical Requirements; and the BRN Required Content for Theory and Clinical Hours. The FNP Graduate Program Preceptor Handbook can be obtained on-line at www.csub.edu/nursing.

The Nurse Practitioner Preceptorship Agreement form needs to be completed by both the student and the preceptor. If this is the first time the preceptor has agreed to mentor a California State University, Bakersfield graduate student, the FNP Preceptor Biography/Curriculum Vitae form needs to be completed. The preceptor forms need to be returned to the faculty member prior to the first day of the clinical experience. The student is responsible for submitting the “Verification of Contract for FNP Placement” form to the nursing office so that agency contract verification can be confirmed. The verification form is then given to the clinical faculty. Students are not allowed to complete clinical hours in any agency where the Department of Nursing, CSU Bakersfield does not have a current contract.

The clinical rotation covers one academic quarter (10 weeks). Your support and guidance can prove beneficial for both the graduate student and clinical site and contributes to the next generation of advanced practice nurses and nurse leaders. The Nursing faculty is readily available to graduate students and their preceptors for consultation and assistance.

At the end of this rotation please complete and return the enclosed forms as indicated. Your evaluation feedback is greatly appreciated in that it will aid us in assessing our program’s performance improvement efforts. Again, thank you for your participation in the CSUB Nursing Department Preceptor Program.

If you require further information you can contact me at: (661) 654-3112; hhe@csub.edu.

Sincerely,
Heidi He MSN, FNPC
Coordinator, CSUB Family Nurse Practitioner Program
Table of Contents

Section I. Overview of the Department of Nursing ................................................................. 1
   A. Overview of the Department of Nursing ................................................................. 2
   B. California State University, Bakersfield Mission Statement .................................... 3
   C. Department of Nursing Mission, Vision, Values ...................................................... 3
   D. Graduate Program Description ................................................................................. 4
   E. Master’s Degree Program Objectives ........................................................................ 4

Section II. Overview of the Family Nurse Practitioner Program ......................................... 6
   A. Family Nurse Practitioner Program Objectives ......................................................... 8
   B. Curriculum Timetable ................................................................................................ 8
   C. List of Courses and Units for FNP Option .................................................................. 10
   D. FNP Course Descriptions ......................................................................................... 11
   E. Quarterly Guidelines for Student Progress ............................................................... 15
   F. Standards Used in Developing the Family Nurse Practitioner Content ..................... 18
   G. Summary of Minimum Clinical Requirements for FNP Students ............................. 19
   H. Required BRN Curriculum Content ......................................................................... 23

Section III. MSN/FNP Preceptor Program ........................................................................... 25
   I. Preceptor Policies and Procedures (based on California BRN Regulations for Preceptorships) ........................................................................................................... 26
   J. Tips for the Preceptor ................................................................................................. 27
   K. Roles and Responsibilities ......................................................................................... 28

Section IV. Forms .................................................................................................................. 30
   Preceptor Profile Form: Biography/Curriculum Vitae .................................................. 31
   Confirmation of Agreement to Precept ......................................................................... 32
   Clinical Attendance Record ........................................................................................... 33
   Midterm and Final Evaluation Forms ............................................................................ 34
   Preceptor Evaluation of Clinical Preceptor Experience .............................................. 39
   Student Evaluation of Preceptor ................................................................................... 40
   Evaluation of Clinical Agency ....................................................................................... 43
Section I. Overview of the Department of Nursing Graduate Program
A. Overview of the Department of Nursing

California State Colleges were brought together as a system by the Donahoe Higher Education Act of 1960. In 1972, the system became The California State University and Colleges, and in 1982 the system became The California State University (CSU).

California State University, Bakersfield (CSUB) is located at the southern end of the San Joaquin Valley approximately 110 miles north of Los Angeles. It is the only four year institution within a 100 mile radius, is located in the city of Bakersfield, a commercial, medical and educational center for the region with a regional population of 750,000, including the city and the unincorporated areas. Thirty buildings provide classroom, laboratory, administrative and technical support facilities. Enrollment is approximately 7,800 undergraduate and graduate students served by a faculty of nearly 300.

The University is organized into four schools: Natural Sciences, Mathematics & Engineering (NSM&E); Social Sciences & Education (SSE), Business and Public Administration (BPA), and Arts & Humanities (AH). The Department of Nursing is one of seven departments in the School of NSM&E.

The Department of Nursing offers a Bachelor of Science in Nursing degree, an RN to BSN Program, and an MSN (FNP) Program.

CSUB received a 10-year accreditation from the Western Association of Schools and Colleges (WASC) following a site visit in October 1999. The undergraduate program received an eight year continuing approval by the California State Board of Registered Nursing in 2003 and again earned continuing approval in Fall 2011. The graduate program is currently in the process of being reviewed for approval. The undergraduate program is accredited by the Commission on Collegiate Nursing Education (CCNE). Courses designed to assist Registered Nurses to complete the requirements of the baccalaureate degree are taught at the Bakersfield campus and online to accommodate our other distant community colleges: College of the Sequoias in Visalia (85 miles north of Bakersfield) and Antelope Valley College in Lancaster (90 miles east of Bakersfield).

Nursing Faculty

The Department’s nursing faculty is highly qualified nurse scholars and educators prepared in research and practice of their respective nursing disciplines. Faculty meets the California Board of Registered Nursing expectations for clinical competence, the University and the Commission on Collegiate Nursing Education’s expectations for scholarship, teaching, practice and leadership.

Resources

The Department maintains three technical areas for nursing students in the Nursing Romberg Building on the CSUB campus. These are a nursing skills laboratory, a computer laboratory and a simulation center with an attached smart classroom to support multiple forms of technology-assisted classroom instruction. The nursing arts laboratory has 13 patient care learning stations, and the computer lab contain videotapes, PCs and Macintosh computers, instructional software, multimedia software and diagnostic equipment for teaching learning and practice exercises.
Community Partners

Undergraduate students practice their nursing skills at many locations in Bakersfield and in the surrounding Kern Country area. These facilities include hospitals, health clinics, schools, public health agencies, homeless shelters, hospices, and specialty care centers.

CSUB Non-Discrimination and Nonharassment Policy

The Department of Nursing follows the CSUB policy on non-discrimination and non harassment and does not discriminate on the basis of race, religion, sex, age, handicap, color, marital status, sexual or national origin. [http://www.csub.edu/compliance/_files/nonediscriminationnotice.pdf](http://www.csub.edu/compliance/_files/nonediscriminationnotice.pdf)

Approved by Faculty Organization May 13, 2010

B. California State University, Bakersfield Mission Statement

California State University, Bakersfield is a comprehensive public university committed to offering excellent undergraduate and graduate programs that advance the intellectual and personal development of its students. An emphasis on student learning is enhanced by a commitment to scholarship, diversity, service, global awareness and life-long learning. The University collaborates with partners in the community to increase the region's overall educational attainment, enhance its quality of life, and support its economic development.

C. Department of Nursing Mission, Vision, Values

**Mission**
The Department of Nursing provides nursing education to undergraduate and graduate students seeking entry into professional nursing or advanced education. The faculty provides a collaborative, inclusive, and interactive learning environment committed to excellence in teaching, scholarship, service, and practice. The Department of Nursing accomplishes the mission through collaboration with the communities of interest.

The Department of Nursing fosters an environment that encourages lifelong learning and advancement within the profession. Graduates will have the acquired knowledge, skills, attitudes, and values essential to the practice of professional nursing. As professional nurses, our graduates will engage in evidence-based practice in an interprofessional healthcare environment. In recognition of the health needs of a multicultural society, professional nurses who are graduates of CSUB will address healthcare issues and needs of their community.

**Vision**
The CSUB Department of Nursing pursues innovative ways to advance nursing practice and address the growing complexities associated with creating a healthier population in California’s Central Valley.

**Values**
The Department’s values align with those of the university, including academic excellence, freedom of inquiry and statement, global awareness and cultural sensitivity, diversity, honesty and fairness, democratic governance, community engagement, and personal responsibility. The DON embraces
professionalism and a respect for the inherent ethical values of altruism, autonomy, human dignity, integrity, and social justice as fundamental to the discipline of nursing.

D. Graduate Program Description

The goal of this master’s program is to prepare nurses with advanced nursing theory and clinical experiences in the advanced practice nursing role of Family Nurse Practitioner (FNP). Students are prepared to assess the health needs and health risks of all family members, apply family theories, and analyze legal, ethical, economic, leadership, and professional issues pertinent to nurse practitioners. Graduates from this program will be qualified to practice in mid-level primary care practice settings within the changing patterns of health care; assume leadership roles in multidisciplinary health groups; and practice family nursing in primary and secondary health care settings. Graduates will be prepared to apply for doctoral programs in nursing.

The content of this program includes advanced health assessment, advanced pathophysiology, and advanced pharmacology; analysis, utilization, and evaluation of theories of nursing; research methodology; role development; care of vulnerable populations; health care policy and delivery systems; leadership; and application of advanced knowledge in providing nursing care for clients representing a variety of cultural and ethnic backgrounds in both urban and rural community settings. Students complete a culminating experience (comprehensive examination) which demonstrates their competence in the conduct of scientific inquiry related to clinical problem solving. Students must complete the requirements for the Master’s degree before they can pursue FNP certification from the California State Board of Registered Nursing.

The MSN/FNP Option has been approved by the CSU Chancellor’s office and has been accredited by the Western Association of Schools and Colleges (WASC). The program will be seeking accreditation from the Commission of Collegiate Nursing Education (CCNE) according to their routine procedures. The Bachelor of Science in Nursing (BSN) already holds CCNE accreditation. For further information about the accreditation status of the FNP program, please contact the Department of Nursing office or the Commission of Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington, DC 20036-1120, phone (202) 887-6791.

E. Master’s Degree Program Objectives

The program objectives are to prepare students for graduation who can:

1. Expand knowledge and evaluate nursing theories and theories from related disciplines as a basis for advanced roles and nursing practice.
2. Utilize nursing concepts, theories, and knowledge to support advanced practice roles and evidence-based nursing practice.
3. Demonstrate expertise in advanced roles in nursing.
4. Apply evidence based research findings to advanced roles and nursing practice.
5. Utilize the steps of scientific inquiry to evaluate and integrate research, theory, and practice.
6. Advance practice through the development and implementation of strategies for improving nursing care and initiating changes in the health care system.
7. Actively engage in collaborative relationships with other members of the health care team to improve health care and influence health care policies.
8. Assume responsibility for contributing to the advancement of the nursing profession.
9. Utilize technology to enhance the effectiveness of managing client and clinical information.
10. Acquire a foundation for doctoral study in nursing.

Revised Graduate Program Committee (D. Wilson, H. He, S. Pollock) 2014
H. Sands (8/98); Revised - P. Leapley, J. Robinson, B. Meyer (10/02)
Section II. Overview of the Family Nurse Practitioner Program
The Family Nurse Practitioner program at CSUB is a 2-year full-time program, which leads to a Master of Science degree in Nursing with a Family Nurse Practitioner (FNP) specialization. There are four advanced practice registered nurse (APRN) roles: certified registered nurse anesthetist (CRNA), certified nurse midwife (CNM), clinical nurse specialist (CNS), and nurse practitioner (NP). The FNP Program at CSUB prepares APRNs in the role of nurse practitioners (NP). Family nurse practitioners provide care for individuals and families across the lifespan. The FNP role includes preventative healthcare as well as assessment, diagnosis and treatment of acute and chronic illness for individuals and families (NONPF, 2013). Emphasis is placed on health promotion, disease prevention, and management of common health conditions. Graduates are prepared to provide high-quality, evidence-based, and family centered care to infants, children and adults across the lifespan and from diverse backgrounds.

Graduates of the FNP Program are:

- Qualified to be certified as NPs by the State of California
- Qualified to earn their furnishing number from the State of California
- Prepared to take national FNP certification exams
- Prepared to enter a doctoral program in nursing or related field

The FNP Program curriculum is a 2-year, full-time schedule of courses. Clinical hours are completed through preceptorships with local primary care providers in a variety of healthcare settings. The first quarter of the program includes Pharmacotherapeutics for Advanced Practice Nursing, Pathophysiology for advanced practice nurses, and an Advanced Health Assessment course, which prepares students to conduct comprehensive history and physical exams. The first of five clinical nurse practitioner courses begins in the second quarter. Students continue to take didactic courses at CSUB during the time they are completing their clinical requirements. An outline of the required courses is included.

Clinical experience, defined as direct client care to individuals/families and/or communities, is a required component of the nurse practitioner curriculum. Clinical experience gives students the opportunity to apply theory in the clinical situation, develop an understanding of the nurse practitioner's role, function as a member of an interdisciplinary team, and demonstrate the ability to mobilize and coordinate available community resources in the management of client health and illness states. Students develop their clinical reasoning skills and test their philosophy of practice throughout clinical experience. This opportunity to apply in practice, the theory, research, and technical skills they are learning must be sufficient to enable the student to develop the competencies necessary for practice.

The FNP Faculty members are accountable for the final evaluation of students; however, preceptors are vital members of the teaching team and are clinically expert individuals with whom students have the opportunity to work.
A. Family Nurse Practitioner Program Objectives

Upon graduation or entry to advanced practice, the Family Nurse Practitioner should demonstrate competence in the following:

1. Synthesize theoretical, scientific, and contemporary clinical knowledge for the assessment and management of both health and illness states for the purposes of health promotion, health protection, disease prevention, and treatment of the individual, the family, aggregate groups, and the community.
2. Demonstrate a personal, collegial, and collaborative approach which enhances the Family Nurse Practitioner’s effectiveness in patient care.
3. Function as a licensed independent practitioner by using best available evidence to continuously improve quality of clinical practice.
4. Demonstrate a commitment to the implementation, preservation, and evolution of the Family Nurse Practitioner role.
5. Implement clinical reasoning and build collaborative, interdisciplinary relationships to provide optimal health care to the patient.
6. Oversee and direct the delivery of clinical services within an integrated system of health care to achieve improved health outcomes for patients, communities, and systems.
7. Ensure quality of health care through consultation, collaboration, continuing education, certification, and evaluation (eligible for state and national certification upon completion of the program.
8. Provide culturally competent care, deliver patient care with respect to cultural and spiritual beliefs, and make health care resources available to patients from diverse cultures.

(Adapted from the Nurse Practitioner Core Competencies, The National Organization of Nurse Practitioner Faculties (NONPF, 2012)

Revised Graduate Program Committee (D. Wilson, H. He, S. Pollock) 2014
H. Sands (8/98); Revised - P. Leapley, J. Robinson, B. Meyer (10/02)

B. Curriculum Timetable

<table>
<thead>
<tr>
<th>Quarter 1</th>
<th>Quarter 2</th>
<th>Quarter 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>September - December</td>
<td>January - March</td>
<td>April - June</td>
</tr>
<tr>
<td>Students attend classes at CSUB, including 6 hours of clinical laboratory time.</td>
<td>Students attend classes at CSUB and spend approximately 9 hours per week with preceptor.</td>
<td>Students attend classes at CSUB and spend approximately 12 hours per week with preceptor.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quarter 4</th>
<th>Quarter 5</th>
<th>Quarter 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>September - December</td>
<td>January - March</td>
<td>April - June</td>
</tr>
<tr>
<td>Students attend classes at CSUB and spend approximately 12 hours per</td>
<td>Students attend classes at CSUB and spend approximately 12 hours per</td>
<td>Students attend classes at CSUB and spend approximately 12 hours per</td>
</tr>
<tr>
<td>week with preceptor.</td>
<td>week with preceptor.</td>
<td>week with preceptor.</td>
</tr>
</tbody>
</table>
C. List of Courses and Units for FNP Option

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Course #</th>
<th>Course Title</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>FALL:</td>
<td>N586</td>
<td><em>Adv. Health Assessment</em> <em>(theory and clinical)</em></td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>N686</td>
<td><em>Pharmacotherapeutics for Adv. Practice Nursing</em> <em>(theory)</em></td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>N603</td>
<td><em>Pathophysiology for Advanced Practice Nurses</em> <em>(theory)</em></td>
<td>3</td>
</tr>
<tr>
<td>WINTER:</td>
<td>N515</td>
<td><em>Roles In Advanced Practice</em> <em>(theory)</em></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>N590</td>
<td><em>Theoretical Foundations</em> <em>(theory)</em></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>N606</td>
<td><em>Family Theory and Health Promotion</em></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>N607</td>
<td><em>Assessment and Management of Family Health Care Laboratory/Clinical</em></td>
<td>3</td>
</tr>
<tr>
<td>SPRING:</td>
<td>N625</td>
<td><em>Advanced Nursing Research</em> <em>(theory)</em></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>N616</td>
<td><em>Assessment &amp; Management of Chronic Family Health Care Theory</em></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>N617</td>
<td><em>Assessment &amp; Management of Chronic Family Health Care Laboratory/Clinical</em></td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year 2</th>
<th>Course #</th>
<th>Course Title</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>FALL:</td>
<td>N595</td>
<td><em>Education Principles</em> <em>(elective)</em></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>N518</td>
<td><em>Vulnerable Populations</em> <em>(theory)</em></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>N636</td>
<td><em>Assessment &amp; Management of Acute Family Health Care Theory</em></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>N637</td>
<td><em>Assessment &amp; Management of Acute Family Health Care Laboratory/Clinical</em></td>
<td>4</td>
</tr>
<tr>
<td>WINTER:</td>
<td>N527</td>
<td><em>Transformational Leadership, Health Care Policy and Delivery Systems</em> <em>(theory)</em></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>N646</td>
<td><em>Assessment &amp; Management of Complex Family Health Care Theory</em></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>N647</td>
<td><em>Assessment &amp; Management of Complex Family Health Care Laboratory/Clinical</em></td>
<td>4</td>
</tr>
<tr>
<td>SPRING:</td>
<td>N692</td>
<td><em>Culminating Experience: Comprehensive Examination</em></td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>N653</td>
<td><em>Advanced Practice Practicum in Family Health Care</em> <em>(1 unit theory and 4 units clinical)</em></td>
<td>5</td>
</tr>
</tbody>
</table>

Total: 67 units
D.  FNP Course Descriptions

NURS 515 Roles in Advanced Practice (2)
Role development in advanced practice nursing from historical, economical, political, legal, and ethical perspectives. Discussion of role definition, transition, ambiguity, and development. Concepts of collegial practice, inter-professional, and intra-professional relationships in addition to legal issues will be emphasized. Lecture 2 units. Prerequisite: Conditionally Classified or Classified status, or senior nursing student with permission of the instructor.

NURS 518 Care of Vulnerable Populations (2)
Examine the social determinants of health that cause (or contribute to) health disparities in vulnerable populations. Consideration of culture, ecology, and epidemiology using evidence-based care that will be applied to populations at risk of poor physical, psychological, or social health. The nursing process is applied in order to develop health promotion and disease prevention strategies to meet the needs of vulnerable populations. Lecture 2 units. Prerequisite: Conditionally Classified or Classified status, or senior nursing student with permission of the instructor.

NURS 527 Transformational Leadership and Health Care Policy (3)
Examination of the nurse leader role from behavioral, relational, interactional, and structural perspectives. Topics include patterns of communication, conflict management, organizational policy and behavior, quality improvement management, patient safety, research review, change theory, and integration of informational sciences, and working with interdisciplinary teams. In addition, exploration of healthcare reform, health care policy, organization, and financing of healthcare systems will provide the basis for leadership in the planning and provision of quality cost effective healthcare. Includes as an essential foundation for the delivery of health care services: examination of legislation, regulation, and distributive justice; comparison of various care delivery systems; exploration of various modes of emerging healthcare systems. Nursing leadership is viewed through a transcultural lens to facilitate work with diverse groups. Lecture 3 units. Prerequisite: Conditionally Classified or Classified status, or senior nursing student with permission of the instructor.

NURS 586 Advanced Health Assessment (Theory/Clinical) (5)
Compile a complete and comprehensive database to establish the health status of the client/patient. Emphasis is placed upon physiology, pathophysiology, psychopathology as well as physical and psychosocial needs of the adult (including the pregnant female), child, adolescent, and geriatric clients. Upon this foundation, an individualized protocol for client care management will be established. Lecture 3 units; Laboratory Practice 2 units. Prerequisite: Conditionally Classified or Classified status, or senior nursing student with permission of the instructor.

NURS 590 Theoretical Foundations of Nursing (3)
A seminar dealing with the relationships between philosophy, theory, research, and practice in nursing. An historical analysis of nursing's professional progress to its present theoretical state provides the background for analysis, discussion, and evaluation of different nursing theories. Included will be analysis of relevant mid-range theories from a wide range of disciplines. Lecture 3 units. Prerequisite: Conditionally Classified or Classified status, or senior nursing student with permission of the instructor.
NURS 595 Educational Principles and Methodology Applied to Nursing (3)
The focus of the course is on the use of a variety of teaching skills and strategies to help nursing staff, students, and other health care workers establish policies and standards. These skills enable the advanced practice nurse to influence attitudes and understanding about nursing health care. Students in this course develop and present programs or classes for nursing staff development, education of nursing students, or programs of health education for consumers and other health care providers. Lecture 3 units. Prerequisite: Conditionally Classified or Classified status, or senior nursing student with permission of the instructor.

NURS 603 Pathophysiology for Advanced Practice Nurses (3)
Physiology-based course focusing on the pathogenesis of human disease as a consequence of abnormalities and alterations of normal physiologic function based on a cellular and system oriented framework. Regulatory and compensatory mechanisms that aim at maintaining and restoring homeostasis in response to changes in the internal and external environment are explored. Synthesis of current research regarding pathophysiological patterns and its application to primary care are emphasized. Prerequisite: Conditionally Classified or Classified status.

NURS 606 Family Theory and Health Promotion (Theory) (3)
Advanced concepts in family assessment. Emphasis on disease prevention, and health and wellness care in rural, urban, multi-ethnic, and culturally diverse populations. Theoretical models of family, aggregate, and community systems as they relate to health promotion, risk reduction, and health restoration are explored. Lecture 3 units. Prerequisites: Classified status. NURS 586 (within the previous two years), NURS 603, NURS 686.

NURS 607 Assessment and Management of Family Health Care (Clinical) (3)
Application of beginning nurse practitioner skills in individual and family assessment, intervention, and management in primary care and community-based settings. Clinical focus is on data gathering, conducting routine health histories and physicals, and health promotion/risk reduction activities in rural, urban, and multi-ethnic and culturally diverse populations. Models of individual, family aggregate, and community systems are used to analyze health promotion, risk reduction, and health restoration. Students will develop and use disease protocols for intervention and management. Laboratory Practice 3 units. Prerequisites: NURS 586 (within the previous two years), NURS 603, NURS 686. Classified status.

NURS 616 Assessment and Management of Chronic Family Health Care (Theory) (4)

NURS 617 Assessment and Management of Chronic Family Health Care (Clinical) (4)
primary care setting with emphasis on chronic care of clients/patients of all ages. Laboratory Practice 4 units. Prerequisites: NURS 606, NURS 607, NURS 686. Classified status.

NURS 625 Advanced Nursing Research (4)
In-depth study of selected research strategies commonly used in nursing, such as clinical case-study, experimental, quasi-experimental, historical, ethnographic, ex-post-facto, and survey methods. Identification and clarification of nursing problem statements and related hypotheses founded on evidence based practice. Lecture 4 units. Prerequisites: NURS 590. Classified status.

NURS 636 Assessment and Management of Acute Family Health Care (Theory) (4)

NURS 637 Assessment and Management of Acute Family Health Care (Clinical) (4)

NURS 646 Assessment and Management of Complex Family Health Care (Theory) (4)
Family Nurse Practitioner concepts in family assessment, intervention, and management in primary care and community-based settings. Health promotion, disease prevention, and management of complex, chronic multisystem illnesses across the life-span. An emphasis will be placed on the theoretical base for provision of care to older adults. Prerequisites: NURS 636, NURS 637. Candidacy status.

NURS 647 Assessment and Management of Complex Family Health Care (Clinical) (4)
Family Nurse Practitioner skills and care in family assessment, intervention, and management in primary care and community-based settings. Health promotion, disease prevention, and management of complex, chronic multisystem illness across the life-span. An emphasis will be placed on the provision of care to older adults. Application to clinical practice of pathophysiological, pharmacological and other treatment interventions. Supervised clinical practice in a primary care setting in the care of clients/patients of all ages with chronic multisystem illness. Prerequisites: NURS 636, NURS 637. Candidacy status.

NURS 653 Advanced Practice Nursing Role Practicum in Family Health (Theory/Clinical) (5)
Residency with a preceptor and faculty guidance in nurse practitioner role development in a primary care and community-based setting. Problem solving strategies as they apply to multi-ethnic and culturally diverse client/systems are implemented through the utilization of theoretical models and research across practice settings. Student will demonstrate selected advanced skills and procedures. Lecture 1 unit; Laboratory Practice 4 units. Prerequisites: NURS 646, NURS 647. Candidacy status.
NURS 686 Pharmacotherapeutics for Advanced Practice Nurses (5)
Designed to meet the Board of Registered Nursing requirement for nurse practitioners to furnish drugs and/or devices pursuant to the Business and Professions Code including utilizing standardized procedures. Content of focused discussion and testing will include, but not limited to: pharmacokinetics, pharmacodynamics, medication dosing; recognizing and managing side effects; interactions with medications, foods, and dietary supplements; ethical and legal issues related to the furnishing process. Emphasis is on achieving optimal drug therapy outcomes as well as preparation for application for a furnishing license. Lecture 5 units. Prerequisite: Conditionally Classified or Classified status.

NURS 692 Culminating Experience: Comprehensive Examination (5)
The comprehensive examination will allow the student to demonstrate mastery of the subject matter, including: client assessment, diagnostic reasoning, and clinical reasoning in developing a treatment and management plan. The comprehensive examination will include a multiple choice examination preparing the student for the national certification examination for the Family Nurse Practitioner. The comprehensive examination will include a written component that will incorporate nursing theory, nursing leadership, nursing research, educational principles, and patient care management. Examination 5 units. Prerequisites: NURS 646, NURS 647. Candidacy status.
E. Quarterly Guidelines for Student Progress

End of First Quarter (N586)
In addition to the successful completion of theory requirements, the student will:
1. Complete an adequate screening physical exam.
2. Use their instruments properly.
3. Demonstrate necessary interviewing and communication skills for patient encounters.
4. Consider the patients’ growth and development as part of assessing, planning and intervening.

End of Second Quarter (N607 - First Clinical Rotation)
The emphasis in this quarter will be on data gathering, conducting routine H & P's, and health promotion/risk reduction activities. The student will:
1. Perform a thorough and complete screening history and physical, including developmental health history, psycho-social assessment.
2. Perform a focused history and physical on the common "walk-in" patient problems and report the findings to the preceptor. In doing focused histories and physicals, it is expected that the student will cover at least what is needed, but probably make the error of gathering too much data.
3. Demonstrate basic communications skills including active listening, acknowledging concerns of the patients, responding and using appropriate language, and avoiding medical jargon.
4. Recall and elicit through interviewing a review of systems for major organ systems. For example, if a patient comes in complaining of a respiratory complaint, the student will be able to state what the basic respiratory ROS he or she would obtain.
5. Develop and use diverse protocols as a basis for intervention and management of common health problems.
6. Plan appropriate health promotion/discuss prevention interventions. For example, if a patient has a history of smoking, the student will be able to encourage smoke cessation.
7. Assess family structure and support mechanisms as well as identify community resources.
8. Demonstrate a beginning level in interpretational laboratory findings.
9. Evaluate the assessment data to provide a preliminary diagnosis of health and developmental problems.
10. Be aware of their limitations. They have to be able to acknowledge areas of limited knowledge and say: "I don't know." The corollary of this is that they request appropriate preceptor help depending on the clinical problem at hand.
End of Third Quarter (N617)
Emphasis during this quarter will be consolidation of prior skills, the management and follow up of patients with chronic diseases across the life span. The student will be expected to apply pathophysiological concepts to clinical practice and have knowledge of common differential diagnoses and develop sound assessments. The student will continue to emphasize risk reduction and health promotion activities. The student will:

1. Collect a focused data base on common chronic diseases, including: hypertension, diabetes, COPD, congestive heart failure, rheumatoid arthritis, coronary artery disease, and cerebral vascular disease.

2. Make accurate assessments and differential diagnoses for common chronic health problems.

3. Make consistent and accurate problem lists for all patients they see.

4. Order and interpret appropriate diagnostic tests, including radiology tests, and initiate and evaluate treatments, including pharmacotherapy, for health problems that have been covered in class or by standardized procedures.

5. Incorporate nutritional assessment and intervention into their assessment and management of chronic health problems.

6. Perform, when required, special physical exam techniques, for example, checking for jugular venous distension, testing for ascites, etc.

End of Fourth Quarter (N637)
Emphasis this quarter will be on health promotion, disease prevention and management of patients with acute self-limiting illnesses across the life span. The student will start incorporating referrals to other health care professionals in their plan of care and understand the implications of this dimension in terms of coordinating primary care. The student will:

1. Collect a focused data base on common self-limiting and acute health problems including: bronchitis, otitis media, conjunctivitis, pharyngitis, chest pain, etc.

2. Make accurate assessments and differential diagnoses for common acute problems seen in the primary care setting.

3. Evaluate patients with common chronic diseases and, with preceptor consultation recommend appropriate pharmacological and non-pharmacological interventions. Provide appropriate follow up care.

4. Demonstrate basic counseling skills and improved communication skills with patients and their families.

5. Elicit and record developmental health history, psycho-social assessment and nutritional assessment.
6. Develop greater depth in determining the need to order laboratory tests and in interpreting those tests.

7. Provide an oral presentation to the preceptor or faculty member, in which the student gives pertinent positives and negatives for patient problems encountered.

8. Initiate and provide emergency treatments. For example, if a patient comes in with an allergic reaction, the student will provide initial treatment. Students will use EKG results in determining appropriate plans and interventions.

**End of Fifth Quarter (N647)**

Emphasis this quarter will be on the management of complex health problems. The student should be able to collect a focused database on patients with chronic multi-system disease, for example, COPD with underlying coronary artery disease, poorly controlled hypertension with underlying diabetes mellitus, etc. The student will:

1. Compose condensed H & P notes and appropriate, but brief, SOAP notes.

2. Assess, diagnose, and treat common problems with some level of preceptor consultation.

3. Complete focused history and physicals, limited to the problem.

4. Demonstrate basic problem solving skills and be able to triage or think through problems that are either uncommon or atypical.

5. Evaluate patients with common chronic disease and acute self-limiting illness across the life span.

6. Develop greater depth in laboratory interpretation, Pharmacotherapeutics, and nutrition.

7. Refer and consult with other health professionals and specialists.

**During the Sixth Quarter (N653)**

Emphasis this quarter is on the refinement of clinical skills. Any deficiency in depth or breadth of clinical experiences will be corrected by the end of the quarter. Demonstrate skill in the performance of selected advanced skills, for example, cryotherapy, biopsy, etc. Demonstrate the ability to appraise, identify, and recognize signs and symptoms of acute self-limiting illnesses as well as those with chronic, multi-system disease. The student will:

1. Complete any outstanding requirements for graduation.

2. Demonstrate efficiency in office practice.

3. Demonstrate patient follow up skills, especially regarding patients with chronic multi-system disease.

4. Focus on the professional aspects of the nurse practitioners role, including legal and ethical implications of advanced practice.
**Note to Preceptors:** A copy of the student's minimum clinical requirements is provided to you for informational purposes. The student is responsible for working with you and your office staff in choosing appropriate patients to meet these requirements. The number of patients seen will depend upon the complexity of the patients' problems and the students' familiarity with the condition. Students are expected to be thorough and complete. Student productivity is expected to increase as the student progresses in the program. Typically students see an average of 2-3 patients per day during their first quarter (N607), 4-5 patients per day during the second quarter (N617), and 5-6 patients per day in subsequent quarters (N637, N647, N653).

**F. Standards Used in Developing the Family Nurse Practitioner Content**

1) *California Code of Regulations, Title 16, Section 1484: Nurse Practitioner Programs* (Board of Registered Nursing [BRN], updated 2011). BRN approval is required in order for the FNP program to operate in the State of California.

2) *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs* (Commission on Collegiate Nursing Education [CCNE], 2013). CCNE accreditation is required in order for FNP graduates to become licensed, certified, and eligible for reimbursement.

3) *Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force [NTF] on Quality Nurse Practitioner Education, 2012). CCNE accreditation requires demonstration that the *NTF Criteria* have been met.

4) *The Essentials of Master’s Education in Nursing* (American Association of Colleges of Nursing [AACN], 2011). CCNE accreditation requires demonstration that the *Essentials* have been met.


The NONPF (2013) guidelines address the nine domains of curricular content:

1. Scientific Foundation Competencies
2. Leadership Competencies
3. Quality Competencies
4. Practice Inquiry Competencies
5. Technology and Information Literacy Competencies
6. Policy Competencies
7. Health Delivery System Competencies
8. Ethics Competencies
9. Independent Practice Competencies


H. Sands (8/98); Revised - P. Leapley, J. Robinson, B. Meyer (10/02)

Revised Graduate Program Committee 2014
Summary of Minimum Clinical Requirements for FNP Students

Introduction
The following information is intended to serve as a guide for the student's selection of clinical experiences required of the FNP courses: N607, N617, N637, N647, and N653. It is recognized that patient problems encountered in the clinical setting do not always coincide with the order of gaining didactic knowledge through the scheduled classes and assignments. However, the student is expected to gather complete subjective and objective data, even though the student may not currently be able to fully assess the problem or to develop a complete treatment plan. At any given time, the student will be responsible for the diagnoses and treatment of only those conditions covered didactically in the FNP courses. Since the evaluation of minimum clinical requirements includes cross-references to clinical logs, general instructions regarding this record keeping is also included.

Instructions
Patient Log Records
Each patient seen will be recorded on the Patient Log Record. Level of responsibility (LOR) is to be recorded along with other pertinent information. Patients designated with a LOR of 1 (observed care) will count as clinical time, but not as a Minimal Clinical Requirement. Only the problems addressed by the student should be recorded even though the patient may have additional problems on their problem list. All problems addressed by the student should be recorded each time the patient is seen. Patient Log Records are reviewed on a weekly basis by faculty. Students must tally their clinical hours information on a bi-weekly basis on the Clinical Hours Log and provide a copy to faculty and preceptor. This will assure faculty and preceptor alike that the student is making timely progress.

Minimum Clinical Requirements Record (MCR)
The student is expected to maintain a current list of encounters (Patient Log Records) which lists in chronological order patients seen at the clinical practice site. For efficient record keeping of the minimum clinical requirements (MCR), the same patient encounter number is used for cross-referencing which clinical requirement was met. The impetus for using the MCR is twofold:

1. Provide necessary record keeping of depth and breadth of nurse practitioner student experiences as mandated by the Board of Registered Nursing.

2. Assure a broad foundation of clinical experience that is oriented to primary health care of families.

In many cases students have more than one problem cared for at a single visit. Accordingly, patients' problems may be recorded under more than one category of the MCRs if the student is thoroughly addressing each. Although the patient may have multiple problems, only those problems addressed by the student may be entered on the MCR and Patient Log Record lists. Only patients seen in categories 2-4 (level of responsibility) may be entered on the MCR list. Students must have a complete chart note on all patients listed on MCRs. These chart notes may be audited during the clinical site visit.

Of the following minimum clinical requirements, the student is responsible for at least one written comprehensive history and physical each month of a patient who has at least one clinical problem.
The student may have additional written assignments assigned by the faculty depending on which quarter the student is registered in.

*Pediatrics*
- 15-20 encounters (5-7 less than 1-year-old, and 5-7 greater than 1-year-old). These count for other disease categories as well.
- 2 complete work-ups (1 less than 1-year-old, and 1 greater than 1-year-old).
- 5-7 Well baby/child visits/sports physicals.

*Respiratory - ENT*
- 20-25 encounters, including at least 2 COPD (2 pts. over 65-yrs.), 2 asthma, 2 allergy problems, 5 bronchitis/pneumonia, 5 Otitis Media, 2 Otitis Externa, 2 sinusitis.

*OB/GYN*
- 10-12 Pelvics (3 pts. over 65-yrs.), including: 5 Pap Smears, 2 patients presenting for contraception and 2 OB's (1 initial Dx of pregnancy and 1 postpartum exam).
- Students should work-up one patient for STDs.

*Musculo-Skeletal*
- 7-10 encounters (3 pts. over 65-yrs.), including shoulder, knee, or ankle injury, 1 or 2 arthritis, 3 low back pain.

*Neurology*
- 6-8 encounters (2 pts. over 65-yrs.) including 3 headache, 2 vertigo, 1 CVA/TIA.

*Dermatology*
- 6-8 encounters (2 pts. over 65-yrs.) including 1 acne, 2 eczema/atopic dermatitis, 1 contact dermatitis, 2 actinic keratosis.

*Endocrine*
- 10-12 encounters (2 pts. over 65-yrs.) including 6 diabetes (1 pt. over 65-yrs.), 2 thyroid disorders, 2 ammenorrhrea.

*GI*
- 12-15 encounters (2 pts. over 65-yrs.) including 5 abdominal pain, 1 hepatitis, 2 duodenal ulcer, 2 GERD, 1 appendicitis or other acute abdomen.

*GU*
- 8-10 encounters including 3 prostate exams (2 men over 65-yrs.) and 5 urinary tract infection evaluations (2 pts. over 65-yrs.).
**Cardiovascular**

a. 12-15 encounters including 3 congestive heart failure (at least 1 pt. over 65-yrs.), 3 chest pain (1 pt. over 65-yrs.).

b. 3-5 murmurs.

c. 5-8 hypertension (2 pts. over 65-yrs.).

**Eye**

a. 3-5 encounters including 2 requiring fundoscopic examination (2 pts. over 65-yrs.) and 1 red eye.

**Psychiatry**

a. 2-3 Situational crises, individual

b. 1-2 Family crises

c. 2-3 Depression (1 pt. over 65-yrs.)

d. 1 Drug/alcohol dependency or abuse

**Student Responsibilities:**

The student is responsible for indicating the level of responsibility for each patient encounter:

1. Student practitioner observes care given by preceptor.

2. Extensive preceptor consultation on any/all aspects of the case. Less than shared responsibility.

3. Equal responsibility between student nurse practitioner and preceptor with some review of history and/or physical examination.

4. Primary responsibility for patient encounter (>50%).

Patient encounters in category 1 will not be counted in these clinical requirements. Only patient contacts in categories 2 through 4 will be accepted as meeting the requirement.

It is expected that approximately 1/5 of these requirements will be completed each quarter, from Winter of the first year to Spring of the 2nd year (second through sixth quarters).

It is anticipated, however, that overlap will occur and that students may see fewer patients in the second and third quarters but considerably more in the remaining quarters as their efficiency and ability to manage more complex patients improves.

**LEVEL OF RESPONSIBILITY (LOR)**

**LEVEL 1**  Observation Only: Student observes provider or "assists" peripherally in procedure. Utilized when student observes surgery or other procedures without scrubbing. Can be recorded on Patient Log Records but not MCRs.

**LEVEL 2**  Major Consultation: Preceptor rechecks almost all of history and or exam and
provides most of the assessment and plan. Utilized for students very early in the Program or for a patient with very complex or potentially life-threatening problems.

LEVEL 3  **Dual Responsibility:** Approximately half FNP student responsibility; utilized for beginning students or complex patient problems.

LEVEL 4  **Complete Encounter:** The student sees a patient without preceptor consultation during the patient visit. However, the student must briefly present the patient's case to the preceptor prior to the patient leaving.

**OR**

**Brief Consultation:** The student utilizes the preceptor for less than 5 minutes, usually for presentation or to confirm positive exam findings. The student is responsible for assessment and plan with preceptor approval.

**IMPORTANT:**
Students are expected to write the progress note on the chart for Levels 2-4, although preceptor may write an additional note for patients who require consultation for potentially life-threatening problems. This is a legal requirement.

**HOW TO DETERMINE IF A PATIENT ENCOUNTER WOULD BE ACCEPTABLE TO COUNT AS A NON-PROCEDURAL MCR**

1. Patient cannot just be observed. LOR must be 2-4 (if you are watching your preceptor handle the encounter, you may not count it).

2. The encounter must be diagnosis specific for the MCR counted e.g., if the MCR is contact dermatitis, the diagnosis must state contact dermatitis not rule out contact dermatitis or contact dermatitis vs. psoriasis.

3. The SOAP must contain questions (i.e., Review of Systems, HPI) about the MCR, a physical exam of the part, an assessment with the diagnosis (which is the same as the MCR) and a treatment plan for the diagnosis.

4. Each Patient Log Record may not have more than 3 recordings on the MCRs. For example, if you see a patient who is pediatric, is being seen for asthma, and has a sinus infection as well, all three of these diagnostic categories can be used as MCRs. But if the same patient was also seen at the same visit for otitis media, only three of the four diagnoses could be used as MCRs.

MCRs may be audited at all site visits so keep track of your patient contact/care records so that the appropriate charts can be retrieved for the faculty to review. An alternative would be to make a copy of the chart recordings which you are using as MCRs.
### H. Required BRN Curriculum Content

Indicate where in the curriculum each of the following subject areas are addressed. [Title 16, CCR Section 1484(d) (12)]

<table>
<thead>
<tr>
<th>Subject Area</th>
<th>Course Number(s)</th>
<th>Theory Hours</th>
<th>Clinical Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Normal growth and development</td>
<td>N586, N606</td>
<td>4</td>
<td>20*</td>
</tr>
<tr>
<td>B. Pathophysiology</td>
<td>N603</td>
<td>30</td>
<td>20*</td>
</tr>
<tr>
<td>C. Interviewing &amp; communication skills</td>
<td>N586</td>
<td>3</td>
<td>18*</td>
</tr>
<tr>
<td>D. Eliciting, recording &amp; maintaining a developmental health history</td>
<td>N586, N616, N636, N646</td>
<td>5, 8, 4, 4</td>
<td>10, 15*</td>
</tr>
<tr>
<td>E. Comprehensive physical examination</td>
<td>N586</td>
<td>15</td>
<td>24, 85*</td>
</tr>
<tr>
<td>F. Psycho-social assessment</td>
<td>N586, N606, N616, N636, N646</td>
<td>2, 7, 4, 4, 4</td>
<td>2, 7, 10, 15*</td>
</tr>
<tr>
<td>G. Interpretation of laboratory findings</td>
<td>N586, N606, N616, N636, N646</td>
<td>2, 7, 4, 4, 4</td>
<td>2, 7, 10, 15*</td>
</tr>
<tr>
<td>H. Evaluation of assessment data to define health &amp; developmental problems</td>
<td>N586, N606, N616, N636, N646</td>
<td>2, 8, 10, 9, 12</td>
<td>2, 8, 10, 9, 12</td>
</tr>
<tr>
<td>I. Pharmacology</td>
<td>N686, N606, N616, N636, N646</td>
<td>50, 10, 10, 10, 10</td>
<td>50, 10, 10, 10</td>
</tr>
<tr>
<td>J. Nutrition</td>
<td>N586, N606, N616, N636, N646</td>
<td>2, 2, 2, 2, 2</td>
<td>2, 2, 2, 2, 2</td>
</tr>
<tr>
<td>K. Disease management</td>
<td>N606, N616, N636, N646, N653</td>
<td>3, 20, 20, 20, 6</td>
<td>3, 20, 20, 20, 6</td>
</tr>
</tbody>
</table>

23
| L. Principles of health maintenance | N586  | 2 | 20* |
| L. Principles of health maintenance | N606  | 6 |
| L. Principles of health maintenance | N616  | 2 |
| L. Principles of health maintenance | N636  | 2 |
| L. Principles of health maintenance | N646  | 2 |
| M. Assessment of community resources | N515  | 2 | 15* |
| M. Assessment of community resources | N518  | 2 |
| M. Assessment of community resources | N606  | 3 |
| N. Initiating & providing emergency treatments | N636  | 4 |
| N. Initiating & providing emergency treatments | N637  | 20 |
| O. Nurse practitioner role development | N515  | 12 |
| O. Nurse practitioner role development | N527  | 4 |
| O. Nurse practitioner role development | N653  | 6 |
| P. Legal implications of advanced practice | N515  | 2 | 12* |
| P. Legal implications of advanced practice | N527  | 2 |
| P. Legal implications of advanced practice | N586  | 2 |
| P. Legal implications of advanced practice | N607  | 2 |
| P. Legal implications of advanced practice | N647  | 2 |
| P. Legal implications of advanced practice | N653  | 2 |
| Q. Health care delivery system | N515  | 4 | 10* |
| Q. Health care delivery system | N527  | 2 |

*Lab experience in N607, N617, N637, N647, N653

**N686 is a new requirement to meet BRN regulations.
Section III. MSN/FNP Preceptor Program
I. Preceptor Policies and Procedures (based on California BRN Regulations for Preceptorships)

1) Definition: The Graduate Preceptor Program at California State University, Bakersfield (CSUB) is a component of the Nursing Program that includes a teaching strategy designed to provide students with learning experiences that are guided by a Primary Health Care Provider who may also be an expert in his or her area of specialty.

2) Preceptors shall be licensed as a Family Nurse Practitioner or Physician in the state of California and be employed by a CSUB affiliated healthcare facility for at least two years. The Preceptor Program shall ensure that a relief preceptor, who meets the qualifications specified by CSUB Nursing Department, shall be available on the designated preceptor’s days off to:
   i. Ensure continuity of the student’s precepted learning experience.
   ii. Ensure that a preceptor is present and available on the patient care unit at all times while the student is providing care/nursing services.

3) Students shall be enrolled in the designated CSUB course in which he/she is assigned to a preceptor and will not be compensated by the clinical facility where the clinical rotation occurs.

4) The Preceptor Program files shall be kept in the CSUB Nursing Department office and includes the following information for the designated quarter/year assigned:
   a. Dates of preceptorship
   b. Preceptor names
   c. Preceptor responsibilities (as designated by the assigned course)

5) Preceptorship Orientation
   a. The Preceptor Handbook orients preceptors and serves as the written guidelines regarding the program, courses, role, and responsibilities of Nursing Faculty (Course Team Leader, Clinical Instructor), Preceptor, and Student and the required forms.
   b. The Preceptor Handbook and syllabus are kept on file in the Nursing Department for all graduate clinical courses.
   c. Selection of Preceptors
      i. A preceptor must have:
      ii. A current license to practice in the state of California
      iii. at least one year of clinical experience Faculty/Graduate Student ratio shall not exceed 1:6.
   d. Clinical faculty orient the preceptor to ensure adequate identification of performance expectations and goals/objectives for the students’ learning experience.
J. **Tips for the Preceptor**

As the preceptor, you are the main source of experienced information for the student. It is not uncommon for you to want to explain everything there is to know about the patients, procedures, medications, patient care systems, etc. In addition to role modeling advanced nursing practice for the student, the following tips may help you to maximize the learning experience.

1) Be patient, patient, patient. What seems like logical sense for the experienced practitioner can be quite a challenge for beginning FNP students.
2) Keep your hands behind your back and lips sealed. Allow the student to make the decisions as you watch, unless he/she is proceeding in an unsafe manner.
3) Use guided questioning with the student, allowing the student to give the rationale for an action. Talk the student through decisions and procedures, but ask them, “what do you think you should do?” After they answer, ask them for their rationale. This helps them with their critical thinking ability.
4) Do not be too quick to give the students answers to their questions (unless it is a life-threatening situation); instead, help them to develop their clinical reasoning skills.
5) Review the course objectives for each course and help the student seek appropriate clinical skills/experiences. Not all students have had the opportunity to perform every advanced nursing procedure.
6) Encourage the student to communicate patient status and needs with you.
7) Have the student document in the patient record.
8) Provide plenty of verbal feedback, both positive and negative. Most students want to be told if they have done something wrong in order to learn the correct process.
9) Complete the student evaluation; the evaluation is a written report of student performance. It will be used in conjunction with the Clinical Instructor’s evaluation and other assignments to determine the student’s final grade (see forms).
10) Have fun and relax, you have a nurse who is eager to learn and help you during this quarter!
K. **Roles and Responsibilities**

1. **Graduate Nursing Student**
   
   The Students are responsible for being self-directed in identifying initial and ongoing learning needs, for seeking learning opportunities to meet identified needs, and for being accountable for their performance in advanced practice nursing. The Student responsibilities include:

   a. Provide the preceptor with the preceptor handbook
   b. Present the preceptor with a copy of the student’s resume and clinical objectives
   c. Review the clinical objectives and negotiate clinical schedule with the preceptor prior to actual clinical experience
   d. Maintain a clinical log online through Typhon Group Software For NP clinical
   e. Track clinical hours in Typhon and have all clinical hours verified by the preceptor using the Clinical Hour Verification form. Clinical hours should be initialed by the preceptor at the end of each clinical day.
   f. Demonstrate progressive independence and competency in the advanced practice role in accordance with one’s academic progression
   g. Arrive at clinical sites on time and prepared to perform in accordance with the assigned learning activities in accordance with the course
   h. Perform the advanced practice role under the supervision of the preceptor recognizing the limitations of educational preparation and complying with professional standards, clinical site policies, and advanced practice protocols
   i. Demonstrate Professional behavior of the advanced practice nurse
   j. Demonstrate Accountability for thoroughness and timeliness in completing assigned role responsibilities
   k. Actively seek input into the evaluation process and participate in self-evaluation of strengths and identified areas for professional growth with preceptor and clinical faculty
   l. Contact clinical faculty if faculty assistance is necessary
   m. Respect Patient confidentiality at all times during the clinical experience
   n. Complete Preceptor and clinical site evaluations at the end of the clinical rotation
   o. Ensure patient safety
   p. Seek guidance from preceptor and clinical faculty advisor

   (Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013)

2. **Clinical Faculty**

   a. Collaborates with the Graduate Nursing Student and the Preceptor to ensure adequate identification of performance expectations and goals/objectives for the student’s learning experience. This includes assisting with the assessment, planning, implementation, and evaluation of the student’s individualized learning experience.
   
   a. Provides guidance and learning materials or tools to assist in identifying and meeting the student’s learning needs.
   b. Serves as a resource to the Graduate Nursing Student and to the Preceptor; assisting as needed with the implementation of an action plan to address identified areas for improvement of the student’s performance.
   c. Provides reliable contact information to preceptors and students. Maintains availability by phone with prompt message return.
d. Performs site visits to evaluate both clinical placement sites and student performance.
e. Provides feedback and assigns grades for all required written assignments and on-campus conference participation/performance.
f. Completes student’s evaluation with input from the Preceptor and the graduate nursing student.

3. Preceptor
   a. The preceptor serves as a mentor to the students. The preceptor will support students by:
   b. Assist the student by arranging opportunities and resources to obtain learning experiences appropriate to the course and individual learning objectives.
   c. Assign patients as appropriate to the daily or course objectives.
   d. Assign patients consistent with the education and experience level of the student.
   e. Enable The student to perform comprehensive and focused history and physical exams, rechecking any history or physical assessment as necessary.
   f. Guide the student in developing appropriate patient management plans including pharmacologic and non-pharmacologic management.
   g. Guide the student to develop differential diagnosis for patients.
   h. Encourage the student to investigate and participate in clinical inquiry or research.
   i. Contact the clinical faculty advisor if any problems arise.
   j. Complete the student evaluation at mid-term and upon completion of the quarter, verify Clinical hours at the end of each clinical day by signing the Clinical Hour Verification form.
   k. Complete Preceptor Evaluation of Preceptor Experience at the end of the term.

(Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013)
Section IV. Forms
CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
Department of Nursing
Family Nurse Practitioner Program

Preceptor Profile Form: Biography/Curriculum Vitae

Name: _______________________________________ Credential(s): __________________________

License # ___________________________________ Expiration Date: _____________________________

Area of Specialization: ___________________________ Years of Experience: _______________________

Facility: ______________________ Business Address: _________________________________________

Work Phone: _______________________________ Work Fax: ________________________________

Email Address: _______________________________________________ _________________________

**Education:** List your basic medical/nursing education/advanced education as a physician or in nursing or other fields

<table>
<thead>
<tr>
<th>Name of College</th>
<th>Location</th>
<th>Degree Earned</th>
<th>Dates of Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Certifications:** List any certifications that you hold.

<table>
<thead>
<tr>
<th>Name of Certification</th>
<th>Organization Providing Certification</th>
<th>Dates of Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Clinical Experience:** List your most recent clinical experience other than your present employment.

<table>
<thead>
<tr>
<th>Name of Employer</th>
<th>Job Title/Responsibilities</th>
<th>Dates of Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Professional Honors and Awards:** List any special professional honors/awards you have received (e.g., Sigma Theta Tau and other professional organizations; conference presentations; scholarships; publications; recognition).


**Preceptor Experience:** List prior preceptor experience with CSUB, other colleges, hospitals, & health care organizations

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Type of Student</th>
<th>Dates/Length of Preceptorship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*In lieu of completing this section, attach your curriculum vitae documenting this information.

**PLEASE RETURN TO:**
California State University, Bakersfield
Attn: Linda Lara, Administrative Support
Department of Nursing
29 RNC
9001 Stockdale Highway
Bakersfield, CA 93311-1022
Confirmation of Agreement to Precept

I, ____________________________ (Printed name of Preceptor) have met with the graduate student regarding a preceptorship at this agency. I have reviewed the preceptorship agreement, and we have discussed the course objectives, clinical requirements, and the FNP Student Evaluation document for ____________________ (course number) and agree to act as Clinical Preceptor to ___________________________RN (Printed name of Graduate Student) as part of his/her enrollment in the CSUB Graduate Nursing Program clinical course. I am aware that I will need to confer with the Clinical Instructor during and at the end of the quarter to provide any information I believe is necessary regarding the student’s progress in the clinical practicum. A written evaluation of the student, on the provided form should be submitted at the end of the quarter.

I meet the following minimum qualifications to precept this student:

- Possession of a current California license to practice as a physician or nurse practitioner.
- A copy of my California License to Practice is available at my facility.
- At least one year of clinical experience either as a physician or nurse practitioner providing primary care.
- In a group practice, any other provider participating in supervision of the student must also meet the same qualifications with regard to education and clinical experience.

I am willing to serve and be available as a preceptor for this student enrolled in the above named course during the period of __________ (quarter), in __________ (year).

I am also aware that I must complete the FNP Student Evaluation document prior to the end of the quarter in which this student is enrolled.

Preceptor (Print): _______________________________________________________________

Telephone: _____________________________ FAX: ________________________________

Most convenient time to call: ____________________________________________________

Email: _____________________________________________________________

Agency: _____________________________________________________________________
Address: ___________________________________________________________________
City/State: __________________________ Zip: ________________________________

Preceptor’s Signature ___________________________ Date ____________________________
Clinical Attendance Record

Course Number/Title: _____________________________________  Quarter: ______

<table>
<thead>
<tr>
<th>Student Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency Name</td>
<td></td>
</tr>
<tr>
<td>Agency Address</td>
<td></td>
</tr>
<tr>
<td>Agency Phone Number</td>
<td></td>
</tr>
<tr>
<td>Preceptor Name</td>
<td></td>
</tr>
<tr>
<td>Preceptor Phone Number</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student Schedule</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>Time</td>
</tr>
<tr>
<td>-------</td>
<td>-------</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Preceptor Name: _____________________________________

Preceptor Signature: ___________________________________ Date: __________________
CALIFORNIA STATE UNIVERSITY, BAKERSFIELD  
Department of Nursing  
Family Nurse Practitioner Program  

Midterm and Final Evaluation Forms  

<table>
<thead>
<tr>
<th>Student Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Name &amp; Number</td>
<td></td>
</tr>
<tr>
<td>Preceptor Name</td>
<td></td>
</tr>
<tr>
<td>Preceptor Phone Number</td>
<td></td>
</tr>
<tr>
<td>Agency Name</td>
<td></td>
</tr>
<tr>
<td>Agency Phone Number</td>
<td></td>
</tr>
</tbody>
</table>

**Midterm Evaluation**  

Please review the descriptions of the student’s clinical rotation listed above. Based on the stated objectives, please answer the following questions for the student you are precepting:

<table>
<thead>
<tr>
<th></th>
<th>Below Expectations</th>
<th>Meets Expectations</th>
<th>Exceeds Expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>The student is progressing towards meeting clinical objectives this term.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student is progressing towards safe, clinical practice.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student exhibits an appropriate level of professionalism.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Given the student’s level in the program, does she/he have skills that are satisfactory given the level in the program?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have any concerns about the student meeting the clinical objectives for this term? Please provide details if you answered “Yes”</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Would you like to speak with the student’s Clinical Faculty Advisor regarding the student?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have any further concerns or feedback that you would like to provide at this time?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Midterm Evaluation**  

Student Signature: ___________________________ Date: ____________

Preceptor Signature: ___________________________ Date: ____________
### Final Evaluation

Preceptor: Using the scale below, please indicate the student’s capacity to meet the following Family Nurse Practitioner (FNP) competencies:

**Scale:**
- (1) Does not meet expectations
- (2) Inconsistently meets expectations
- (3) Meets expectations
- (4) Sometimes exceeds expectations
- (5) Always exceeds expectations
- (NA) Not applicable/Not Assessed

<table>
<thead>
<tr>
<th>Criteria</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>The student critically analyzes data and evidence to improve advance practice nursing, patient care, and promotion of evidenced based practice.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student integrates the FNP role into their multi-disciplinary team, maximizing the attributes of a FNP.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student seeks opportunities to assume increasing levels of independence in the clinical setting.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student maintains professional demeanor and performance.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student utilizes evidenced based resources to facilitate the identification of the best plan of care for the patient.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student considers the patient’s access to care, cost, quality and safety in their provision of care.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student is able to translate new knowledge into practice to improve patient outcomes across the lifespan.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student utilizes appropriate technologies for clinical learning, patient management and improving health care outcomes.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student is able to assess the health literacy of the patient and their family when discussing diagnoses and treatment options related to the plan of care.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student is able to work within the culture of the health care delivery system when making referrals to specialists and ordering diagnostics tests related to acute and chronic conditions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The student is able to understand the role of the health care delivery system and utilize all of the available resources within the system related to patient care across the lifespan.

The student assesses access to care, equity, quality, and cost effective health care.

The student utilizes effective verbal and non-verbal communication skills during patient encounters and communicates with the interdisciplinary team.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>The student collects relevant and appropriate subjective data related to the chief complaint.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student integrates advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student develops appropriate differential diagnosis and assessment of problems/needs based on history, physical exam and the interpretation of diagnostic data. <em>(For N607 students please select N/A).</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student integrates health promotion and disease prevention into patient care management that is mutually agreed upon by the patient and the practitioner.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student creates plans of care that utilize appropriate diagnostic testing, pharmacological interventions, and non-pharmacological therapies. <em>(For N607 students please select N/A)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student maintains a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust and respect.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student incorporates the patient’s cultural and spiritual preferences, values, and beliefs into the plan of care.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student records data in a complete, concise and well-organized format.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The time the student spends with the patient is consistent with level of experience.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student utilizes his/her time effectively when not seeing patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Statement</td>
<td>Grade 1</td>
<td>Grade 2</td>
<td>Grade 3</td>
<td>Grade 4</td>
<td>Grade 5</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td></td>
</tr>
<tr>
<td>The student’s verbal patient presentation to the preceptor is organized and inclusive of appropriate data.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student requests the preceptor’s assistance when encountering new, unfamiliar, and complicated situations.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student accepts constructive criticism.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student evaluates and revises objectives with preceptor.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student takes initiative to schedule mid-term and final evaluation review with preceptor, and secure a written evaluation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student arrives on time and is present for the entire scheduled clinical day.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The student notifies the preceptor/agency and Clinical Faculty within an appropriate time frame with anticipated tardiness or absence from the clinical site.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Your overall satisfaction with this student’s ability to meet FNP competencies. (See Preceptor Handbook- Population Focused Nurse Practitioner Competencies).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Overall Evaluation

If you answered (1) Does not meet expectations or (2) Inconsistently meets expectations, for any of the above items, please explain in the space provided below.

The student maintains a safe practice environment.

If you answered no, please explain in the space provided below and contact the Clinical Faculty.

(Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013)

Final Evaluation

Student Signature: __________________________ Date: __________
Preceptor Signature: __________________________ Date: __________
Preceptor Evaluation of Clinical Preceptor Experience

Preceptor Name: ___________________________      Agency/Unit: _____________________

Course: ___________________________________      Quarter: __________________

Instructions: Please rate each item below on a 5-point scale; note your additional comments or suggestions in the area provided. Place your completed Evaluation Form in the envelope provided and return it to the graduate student for delivery to the CSUB Department of Nursing.

Rate the following items by circling the appropriate number
($1 = \text{Strongly Disagree}, 3 = \text{Neutral}, 5 = \text{Strongly Agree}$).

<table>
<thead>
<tr>
<th>Item</th>
<th>Rating (Circle One)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Review of the Graduate Preceptor Handbook helped me understand my role.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>2. The course objectives were relevant for use in my clinical area and level of practice.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>3. The course objectives increased my understanding of FNP student performance expectations.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>4. Ongoing communication with the CSUB nursing faculty increased my ability to identify appropriate learning experiences for FNP students.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>5. The course expectations seemed appropriate for preparing the student to function in an advanced practice nursing role.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>6. I am able to contact the CSUB nursing faculty when necessary to fulfill my role as a preceptor.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>7. Overall, I have had a positive experience as a preceptor:</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

8. In order to improve the effectiveness of the clinical experience, I suggest the following:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
## Graduate Program
### Student Evaluation of Preceptor

**Course Name and Number:** ____________________________  **Quarter/Year:** ________

**Name of Site:** ________________  **Preceptor** ____________

**Location:** ____________________________

**Completed by:** ____________________________  **Date:** ____________

**Instructions:**

*All graduate students and clinical faculty are required to evaluate the preceptor at the end of each quarter.*

1. Please mark an X in the most appropriate pace after each statement regarding the preceptor.
2. Space is provided after each statement if you choose to add any written comments.

<table>
<thead>
<tr>
<th></th>
<th>Seldom</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>N/A</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Seldom</td>
<td>Sometimes</td>
<td>Frequently</td>
<td>N/A</td>
<td>Comments</td>
</tr>
<tr>
<td>---</td>
<td>--------</td>
<td>-----------</td>
<td>------------</td>
<td>-----</td>
<td>----------</td>
</tr>
<tr>
<td>7.</td>
<td>Considers student’s limits according to level of training.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Provides immediate and adequate feedback with questions and patient presentations.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Leads students through decision making rather than giving own impressions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Reviews and signs each documentation (clinic note or charting) if appropriate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Offers constructive comments about documentation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>Encourages questions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>Thoughtfully reviews differential diagnosis with student (FNP).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>Allows student opportunities to suggest drug of choice, calculate dosages, suggest lab and/or x-rays to be ordered (FNP).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td>Communicates clinical knowledge well.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Seldom</td>
<td>Sometimes</td>
<td>Frequently</td>
<td>N/A</td>
<td>Comments</td>
</tr>
<tr>
<td>---</td>
<td>--------</td>
<td>-----------</td>
<td>------------</td>
<td>-----</td>
<td>----------</td>
</tr>
<tr>
<td>17.</td>
<td>Suggests and provides additional learning experiences, i.e., hospital/nursing home rounds.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.</td>
<td>Provides alternative experiences when there are no clients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19.</td>
<td>Reviews evaluations with student and provides immediate and constructive feedback.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20.</td>
<td>Utilizes other members of the care team.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Revised by PEC 5/02
CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
Department of Nursing

Evaluation of Clinical Agency

PURPOSE: To evaluate appropriateness and effectiveness of the clinical agency for student learning.

DIRECTIONS: Check appropriate column and provide comments and/or examples.

AGENCY NAME: ____________________________________________________________

UNIT/SPECIFIC LOCATION: __________________________________________________

<table>
<thead>
<tr>
<th></th>
<th>Always</th>
<th>Usually</th>
<th>Seldom</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nursing staff were open and helpful.</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>2. Paraprofessional staff were open and helpful.</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>3. The environment of clinical setting was conducive to learning.</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>4. The clinical setting provides for application of theory,</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>knowledge, and skills to meet course and individual objectives.</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>5. The agency practices the principles of safe patient care.</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>6. Current nursing practices are reflected in agency policies</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>and procedures.</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>7. Nursing staff welcomed the opportunity to work with students.</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
</tbody>
</table>

Other comments and/or examples:

Suggestions to Improve Agency Experience:

Course Number: ___________________________  Qtr/Year: _________________________

Name (Print): ____________________________  Date: _____________________________

Name (Signature): _________________________  Position:  

Student  ☐  Faculty  ☐

Revised 4/01, 6/11; 3/14