

# COLLEGE OF NURSING



# DOCTOR OF NURSING PRACTICE & POST-GRADUATE APRN CERTIFICATE PROGRAMS

# STUDENT/PRECEPTOR/FACULTY MANUAL

# FOR

# PEDIATRIC ACUTE CARE NURSE PRACTITIONER

2023-2024

Updated July 2023

# Table of Contents

2021-2022	Error! Bookmark not defined.
Purpose of the Manual	
DNP Program Staff	
Student Responsibilities for Clinical Experiences	
Scheduling of Clinical Experiences	
Professional Dress and Behavior	
Preparation for Clinical Experiences	
Attendance in Assigned Clinical Experiences	
Use of ProjectConcert to Track Experiences	
Expectations of Preceptor and Volunteer Faculty	
Important Aspects of the Student and Preceptor Relationshi	ip8
Preceptors Can Expect Students To:	
Preceptors Can Expect Faculty To:	
Throughout the course, faculty will:	
Legal Agreement Requirements	
Site Approval	
Appendix	
College of Nursing Forms for PACNP Concentration	
Student Evaluation of Clinical Site and Preceptor	
Faculty Evaluation of Clinical Site and Preceptor	
Student-Preceptor-Faculty Agreement	
Confirmation of Student-Preceptor-Faculty Faculty Agreem	nent to Clinical Preceptorship17
PANP Student EvaluationTool	

#### **Goals of the PACNP Concentration**

Welcome to the Pediatric Acute Care Nurse Practitioner (PACNP) Concentration. This is one of eight different advanced practice concentrations preparing students for careers at the highest level of clinical practice. The College of Nursing admitted its first nurse practitioner students in the summer of 1973. The MSN PNP program began in the early 1980s. In 1999, the College started the clinical doctoral program and transitioned the advanced practice Master's programs to the DNP shortly thereafter. The PACNP dnp AND Post-Graduate APRN Certificate programs began in 2017.

The Pediatric Acute Care Nurse Practitioner is prepared to independently diagnose and treat newborns through late adolescence (0-21 years of age), provide comprehensive health assessment, developmentally appropriate health promotion activities, family counseling, and management of acute and chronic illness with particular emphasis on the seriously ill, hospitalized child.

Graduates are eligible to take national certification examinations for Pediatric Acute Care Nurse Practitioners. Graduates and certificate completers are expected to contribute to delivering quality health care through their implementation of evidence-based care and their ability to foster independence in an individual's health management.

#### **Purpose of the Manual**

The purpose of this manual is to acquaint students, preceptors, and faculty with some of the elements that are a part of the clinical education of PACNP students. The processes of selecting, approving, administering, and evaluating the wide variety of clinical learning experiences are discussed. This document is meant to provide guidance.

Education is a dynamic undertaking, and several changes occur over the school year. Please contact the faculty with any questions.

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#### **Expectations for DNP Students**

The general expectations for students in the College of Nursing are contained in the UTHSC Bulletin and *CenterScope* located at <u>http://catalog.uthsc.edu/</u>. This document focuses on specific issues for the clinical aspects of the DNP/PACNP Concentration.

PACNP students work with several faculty, staff, and preceptors as a part of their clinical education. Several official documents must be executed before beginning any clinic assignment. You will need to know which documents must be completed, by whom and when.

With the clinical coordinator's assistance, your faculty will identify and assign your clinical site and preceptor. All clinical sites and preceptors are required to be approved and proper documents executed between them and the university before you beginning to see patients at the site.

#### **Student Responsibilities for Clinical Experiences**

- 1. Review clinical course outcomes.
  - You are responsible for knowing what you are to be learning and how your learning progresses in the course.
- 2. Meet with the preceptor, if indicated.
  - Some preceptors prefer to interview you before agreeing to work with you. If you are asked to interview, you should use the interview to your advantage.
    - a. Provide the preceptor with an understanding of your level, ability, and personality.
    - b. Enable the preceptor to assess if you will be a "good fit" for the clinical site and the population it serves. You can put your best foot forward by being prepared with a curriculum vitae (CV) or résumé.

#### **Scheduling of Clinical Experiences**

- Clinical practicum experiences are scheduled at the convenience and availability of the preceptor.
  - Please don't expect preceptors to conform to a schedule that meets your employment needs.
  - You and the preceptor need to agree on the days and times you will be in the clinical agency before beginning.
  - Unless otherwise stated in the syllabus, you are expected to begin the clinical experience when the course starts and complete when the course ends.
- Enter the start and end dates, along with the days of the week for the entire time you will be at the clinical site, in ProjectConcert (the approved online program for tracking clinical experiences).
- Schedule a mid-term and final clinical evaluation with the preceptor.

#### Professional Dress and Behavior

- As a representative of UTHSC College of Nursing, you must present yourself professionally.
  - Be respectful of preceptors, faculty, staff, patients, and their families.
  - Dress professionally and wear your UTHSC Student ID.
    - A short lab coat with the UTHSC patch on the left upper arm is appropriate unless the preceptor requests otherwise.
    - You should follow the dress and OSHA standards for the clinical attire of your clinical site.
  - Express your appreciation to your preceptor(s) for their assistance. They are volunteers supporting your education goals.

#### **Preparation for Clinical Experiences**

- Verify appropriate attire, location, time, and necessary credentials before the first clinical day at the clinical agency.
- Discuss questions about computer access, the procedure for preceptor cosigning documents, eating, and parking arrangements, and communication with other disciplines.
- Please clarify the preceptor's preferred method of notification in the event of late arrival or absence.
- Learn something about the preceptor to acknowledge the preceptor's background and broaden your educational experience.

**CPR and PALS Certification**: Students are responsible for maintaining current CPR and PALS certification.

- Should the certification expire when the student is in the program, students have the professional responsibility to recertify to remain current.
- Clinical experiences are not permitted unless CPR certification is current.
- The dates of coverage for certification are to be entered into Verified Credentials and ProjectConcert.

**Criminal Background Check**: All students undergo a required criminal background check before beginning the program and annually. Any changes are required to be reported immediately by students as a condition of remaining in the program.

**Drug Screening**: Students undergo a required urine drug screen before beginning the program and annually. Also, drug screens may be required for cause, random screenings, or clinical agency requirements.

**Immunizations**: The University requires that students complete a list of immunizations as well as TB skin testing before engaging in any patient care. These data are maintained by University Health Services in Verified Credentials. You will receive communication about

immunizations and how to track them. Some clinical agencies may have additional requirements for immunizations, but students will be informed of requirements

#### Attendance in Assigned Clinical Experiences

- Attendance at the negotiated times and days with the preceptor is required.
- Unapproved absences for assigned clinical experiences are a violation of professional behavior and may result in disciplinary action.
  - Immediately notify the preceptor and faculty if you are not able to attend a scheduled day.
  - You will need to present a plan to make up missed experiences and have this approved by the faculty and preceptor.

Notify faculty immediately if you find you are running into problems attaining the required number of clinical hours.

#### Use of ProjectConcert to Track Experiences

The PACNP concentration uses the ProjectConcert system to record and maintain student and clinical data. Each student has a specific account assigned to them.

- Clinical encounters must be documented in ProjectConcert.
- Students upload and maintain current RN licensure, CPR, and PALS certifications.
- Students may also upload required clinical forms or complete other clinical assignments.
- Faculty review ProjectConcert to assure students are on track with various experiences and progress toward completing the clinical experience on time.
- Approved preceptors and clinical sites are maintained in ProjectConcert.
- You must input your clinical schedule into the scheduling module.

#### **Expectations of Preceptor and Volunteer Faculty**

- Mentor and serve as a role model for the student.
- Guide the student to meet the course outcomes.
- Identify appropriate clinical encounters for the student.
- Direct the use of accepted clinical guidelines and standards of care.
- Tailor guidelines/standards to unique clinical situations.
- Assist the student in the refinement of interpersonal skills with patients and colleagues.
- Alert students and faculty of problems early to provide an opportunity for improvement.
- Evaluate the achievement of the learning outcomes.
- Provide the student with feedback.
- Demonstrate high ethical standards.
- Demonstrate respect for the student's faculty, curriculum, and program.

#### Essential Aspects of the Student and Preceptor Relationship

• Immediately report to the faculty any student behaviors threatening the patient's safety or risk to the clinical site.

- Monitor and report student performance, including at risk of not meeting standards.
- Supervise students in the clinical setting.
- Communicate with the appropriate staff about the scheduling of patients, the availability of exam room space, and specific procedures to enhance learning with minimal disruption of the office routine.
- Provide student evaluations using the appropriate Clinical Performance Evaluation forms.
- Understand the legal liability of the preceptor role.

#### **Preceptors Can Expect Students To:**

- Meet with the preceptor to clarify course objectives and focus on clinical activities.
- Assist the student in completing required documents associated with the preceptor role.
- Create an acceptable schedule with the preceptor.
- Contact the preceptor in case of any absence before the absence.
- Negotiate with the preceptor to make up time missed, if needed.
- Dress appropriately for the site and always behave professionally.

#### **Preceptors Can Expect Faculty To:**

- Provide course description, clinical outcomes, and the amount of time required.
- Provide information about the PANP program.
- Provide methods to contact a faculty member.
- Act on any problems affecting student progression in clinical coursework
- Guide preceptor in the student evaluation process.
- Provide feedback to preceptors on their performance.

#### Preceptors who wish to be Appointed Volunteer Faculty

#### **Preceptor/Volunteer Faculty**

The College of Nursing appoints all preceptors as a preceptor or volunteer faculty before accepting any students. This appointment provides recognition of the responsibilities of the preceptor and offers legal protections as well. All approved preceptors are listed in ProjectConcert.

The University of Tennessee recognizes the valuable contributions of people who freely give their time and talents for the benefit of the University without compensation. In the enactment of the Tennessee Claims Commission Act of 1984, the Tennessee legislature recognized the need to protect volunteers from legal actions while performing their service on behalf of the University. Volunteers who are registered with the University enjoy civil immunity from liability under the Act. Volunteers are not covered for Worker's Compensation. We encourage preceptors to consider becoming a Volunteer Faculty in the College of Nursing.

The following information is required to be submitted and approved as Volunteer Faculty:

- Curriculum vitae or résumé
- Copy of current license

- Two letters of recommendation from individuals who can speak about your professional qualifications
- Permit a background check

Preceptors who wish to be recommended as volunteer faculty should notify a faculty member who will facilitate this process. Volunteer faculty are eligible for:

- Discounted Membership to the UTHSC Fitness Center
- Access to the UTHSC Library, including online journals, books, and databases (e.g., Up-to-Date)
- Free evening and weekend UTHSC campus parking; and

#### Expectations of Faculty

#### Before the beginning of a clinical assignment, faculty will:

- Verify the appropriateness of clinical site and contractual agreements.
- Orient new preceptors to the preceptor role and College of Nursing educational expectations.
- Review preceptor responsibilities with continuing preceptors related to course and level of the student.
- Prepare students for clinical experience, including faculty-specific communication requirements.
- Validate student qualifications for clinical practice.
- Understand the legal liability of the preceptor role.

#### Throughout the course, faculty will:

- Have first-hand knowledge of the clinical site through either an in-person or a virtual site visit.
- Work with the student and preceptor to ensure the learning outcomes are being met.
- Monitor the use of clinical guidelines and standards of care.
- Support students in the refinement of effective communication.
- Encourage the student to focus on problem areas early to provide an opportunity to refine skills by the time practicum is completed.
- Communicate with the preceptor regularly to monitor student's progress in the course.
- Evaluate students through direct observation and preceptor feedback using proper forms.

#### Legal Agreement Requirements

Several documents are required to be executed by the University of Tennessee before the beginning of any student clinical experience. Some of these are rather complex and can take from weeks to months to complete.

#### **Site Approval**

Each clinical site must have a current and valid contract between the clinical organization and the University of Tennessee. This agreement specifies the responsibilities of each organization and provides legal protections for both. All currently approved sites are listed in ProjectConcert, but some may be difficult to find as the organization's name may have changed since the initial approval. The Clinical Coordinator can assist in identifying approved sites.

#### Appendix

## **College of Nursing Forms for PACNP Concentration**

The College of Nursing uses several different forms as a part of the program.

- 1. Student Evaluation of the Clinical Site and Preceptor
- 2. Faculty Evaluation of the Clinical site and Preceptor
- 3. Student Preceptor Faculty Agreement
- 4. PANP Student Evaluation Tool



Pediatric Acute Care Nurse Practitioner

#### **Student Evaluation of Clinical Site and Preceptor**

5-always

Student:	Preceptor	
Name of Course	Date of Evaluation	_
Clinical Site	Year/Term	
<b>Directions:</b> Mark the rating that	best represents the evaluation of the site and preceptor	

**Directions:** Mark the rating that best represents the evaluation of the site and preceptor. 1 - never 2 - rarely 3 - sometimes 4 - usually

INVOLVEMENT/RECEPTIVITY/COMPETENCE	1	2	3	4	5
1. Respects student as an important individual in the	1	2	5		5
healthcare team.					
2. Assists students when problem arises					
3. Allows adequate time to accomplish a task					
4. Involves student in formulating plan and decision making					
<ol> <li>Remains calm, poised in clinical situations</li> </ol>					
6. Relates didactic knowledge to clinical practice					
TEACHING PRACTICES	1	2	3	4	5
7. Demonstrates flexibility to improve learning	-	_	5	-	C
8. Assists student in identifying problems					
9. Demonstrates new procedures					
10. Leads student through decision making rather than giving					
own impressions.					
11. Encourages questions and discussions regarding					
alternative management.					
12. Allows appropriate documentation.					
13. Considers student's limits according to level of					
experience.					
14. Encourages student to assume increasing responsibility					
during clinical rotation.					
15. Student evaluations are objective and shared with					
students in a positive, confidential manner			-		-
CLINICAL SITE	1	2	3	4	5
16. Clinical experiences correlate with course outcomes					
17. Students have adequate (census/acuity) learning					
experiences					
18. Students have adequate role models/preceptors					
19. Staff are receptive to students					

#### COMMENTS: \_\_\_\_\_

Recommend for continued use? YES

Student Signature

NO



# Pediatric Acute Care Nurse Practitioner Faculty Evaluation of Clinical Site and Preceptor

Student: P	receptor				
Name of Course D					
Clinical Site	Year/Term				
Directions: Mark the rating that best represents the	ne evaluation	of the site	e and pre	eceptor.	
1 - never $2 - rarely$ $3 - sometric$	imes 4	4 – usuall			
INVOLVEMENT/RECEPTIVITY/COMPETEN		1 2	3	4	5
1. Respects student as an important individual in the healthcare team.	;				
2. Assists students when problem arises					
3. Allows adequate time to accomplish a task					
4. Involves student in formulating plan and decision	making				
5. Remains calm, poised in clinical situations					
6. Relates didactic knowledge to clinical practice					
TEACHING PRACTICES	-	1 2	3	4	5
7. Demonstrates flexibility to improve learning					
8. Assists student in identifying problems					
9. Demonstrates new procedures					
10. Leads student through decision making rather tha own impressions.	n giving				
11. Encourages questions and discussions regarding alternative management.					
12. Allows appropriate documentation.					
13. Considers student's limits according to level of experience.					
14. Encourages student to assume increasing responsition during clinical rotation.	bility				
15. Student evaluations are objective and shared with students in a positive, confidential manner					
CLINICAL SITE		1 2	3	4	5
16. Clinical experiences correlate with course out	comes				
17. Students have adequate (census/acuity) learning					
experiences					
18. Students have adequate role models/preceptor	s				
19. Staff are receptive to students					

#### COMMENTS: \_\_\_\_\_

**Recommend for continued use? YES** 

NO

Faculty Signature



# UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER COLLEGE OF NURSING Student-Preceptor-Faculty Agreement

Student Preceptor Puctury rigreement

Course #

Semester/Year:

Conditions of this measure are as fallows.

The preceptor agreement permits nursing students of the College of Nursing, University of Tennessee Health Science Center (UTHSC) to participate in a student preceptorship in your facility,

(Clinical Site Name)	Conditions of this program are as for	10 w 5.
The Affiliation period will be	to	
The student,	, will be under the supervisio	n of
,	acting as preceptor.	

Professor\_\_\_\_\_, of the College of Nursing, serves as the liaison with your facility for the above course(s).

#### Preceptor Responsibilities:

(Preceptor Name)

- 1. Participate in a preceptor orientation.
- 2. Function as a role model in the clinical setting.
- 3. Facilitate learning activities for no more than two students per day.
- 4. Orient the student(s) to the clinical agency.
- 5. Collaborate with faculty to review the progress of the student toward meeting clinical learning objectives.
- 6. Provide feedback to the student regarding clinical performance.
- 7. Contact the faculty if assistance is needed or if any problem with student performance occurs.
- 8. Discuss with faculty/student arrangements for appropriate coverage for supervision of the student should the preceptor be absent.
- 9. Give feedback to the nursing program regarding clinical experience for student and suggestions for program development.

## Nursing Program/Faculty Responsibilities:

- 1. Ensure that preceptors meet qualifications.
- 2. Ensure that there are current written agreements which delineate the functions and

responsibilities of the clinical preceptor and associated agency and nursing program.

- 3. Ensure that clinical experiences using preceptors occur only after the student has received basic theory and clinical experiences necessary to safely provide care to clients (within course or curriculum).
- 4. Orient both the student and the preceptor to the clinical experience.
- 5. Provide the preceptor an orientation to the philosophy, curriculum, course, and clinical objectives of the nursing education program. Discuss student expectations, skills' performance, student guidelines for performance of procedures, and methods of evaluation.
- 6. Assume overall responsibility for teaching and evaluation of the student, including assignment of course grade.
- 7. Assure student compliance with standards on immunization, screening, HIPAA compliance, OSHA standards, CPR, criminal background check as needed and current liability insurance coverage.
- 8. Work cooperatively with the preceptor and the agency to determine student learning needs and appropriate assignments.
- 9. Make appropriate student assignments with the preceptor.
- 10. Communicate assignments and other essential information to the preceptors.
- 11. Meet regularly with the clinical preceptor and the student in order to monitor and evaluate the learning experience.
- 12. Monitor student's progress through rounds, student clinical seminars, student-facultypreceptor conferences and review of student clinical assignments.
- 13. Be readily available, e.g., telephone or e-mail for consultation when students are in the clinical area.
- 14. Receive feedback from the preceptor regarding student performance.
- 15. Provide recognition to the preceptor for participation as a preceptor.

#### Agency Responsibilities:

- 1. Retain ultimate responsibility for the care of clients.
- 2. Retain responsibility for preceptor's salary, benefits, and liability.

#### Student Responsibilities:

- 1. Verify clinician/administrator's eligibility to function as preceptor.
- 2. Maintain open communications with the preceptor and faculty.
- 3. Maintain accountability for own learning activities.
- 4. Prepare for each clinical experience.
- 5. Be accountable for own nursing actions while in the clinical setting.
- 6. Arrange for preceptor's supervision when performing procedures.
- 7. Contact faculty by telephone, pager or e-mail if faculty assistance is necessary.
- 8. Respect the confidential nature of all information obtained during clinical experience.
- 9. Wear appropriate professional attire and university name tags when in the clinical site.

# Signatures on following page confirm that the above conditions reflect correctly your understanding of an agreement to this affiliation.

## **Confirmation of Student-Preceptor-Faculty Faculty Agreement to Clinical Preceptorship**

University of **Tennessee Student** (Print) (Sign) (Date) **Preceptor/Clinical Agency** (Print) (Sign) (Date) University of Tennessee Health Science Center **College of Nursing Clinical Faculty** (Print) (Date) (Sign) Site Name: \_\_\_\_\_ Site Address: \_\_\_\_\_ City, State, Zip\_\_\_\_\_ Location Phone



# UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER

# **COLLEGE OF NURSING**

# PEDIATRIC ACUTE CARE NURSE PRACTITIONER PROGRAM

## PANP STUDENT EVALUATION TOOL

Student name:					_		
Course number/name:					_		
Clinical Site:					_		
Preceptor:							
DIRECTIONS: Please eval	uate the PANP stud	lent on each compete	ency acc	ording to	the fol	lowing k	tey:
1 - almost never	2 - rarely	3- sometimes	4 - 0	often	5 - a	lmost al	ways
Domain 1: Patient Car	e- Designs, deliver	s, manages, and eva	aluates	compreh	ensive	patient	
<b>care.</b> <sup>1</sup> 1. Initiates and performs	41	··· 1/- ··· 1.1- ··· £- ···	1 1 1	41. 1. :		··· . 1 1 .	
detailed review of sys	the comprehensive stems for a child wi	and/or problem locu	ised near	ith histor	y which	include	s a 1,3,4
(Circle condition le		in acute, complex, en	1	2	3	4	5
			n/	a, insuffi	0		-
evaluation				.,		P	
pharmacologic and nonpl dependence <sup>2,4</sup>		pies, exposures, gene	etics, nut	trition, ar	nd techn	ology	
(Circle risks evaluated)			1	2	3	4	5
			-	∠ /a, insuff	-	•	-
evaluation			11	a, moun		speriene	C 101
3. Uses advanced assessm	nent skills to perfor	m a complete system	ns-focus	ed exami	ination t	hat	
includes physical, bel distinguishing betwee	havioral, mental hea	alth, and developmer				nut	
			1	2	3	4	5
			r	n/a, insuf	ficient e	xperience	ce
for evaluation							
4. Include age and situati					tening		
conditions in patients	with acute, comple	ex, critical, and chror	nic cond				-
			1	2	3		5
evaluation			n	/a, insuff	icient ez	xperienc	e ior
5. Develops differential d	liagnosis based on e	evaluation of natient	data dia	aonostic	and		
laboratory/diagnostic		, and then of partont	autu, alt	~51103t1 <b>0</b> ,	4114		
ine erator j, anagriestite							

results with understanding of new or exacerbation of comple		to orition	1 and ab	ronio	
conditions <sup>2,3,4</sup>	ex acu	ie, critica	i, and chi	lonic	
conditions	1	2	3	4	5
	1	_	/a, insufi	•	0
experience for evaluation		1	<i>i</i> u, 1115u11		
6. Selects and interprets diagnostic tests and procedures <sup>2,3,4</sup>					
······································	1	2		3 4	5
		n/a, insu	ufficient	experie	nce for
evaluation				1	
7. Establishes appropriate priorities of care <sup>2,34</sup>					
	1	2		3 4	5
		n/a, ins	ufficient	experie	ence
for evaluation					
8. Develops and presents an individualized, comprehensive, mu history,	ıltidisc	iplinary c	latabase	includir	ng
diagnostic tests, and physical, behavioral, and developmental cultural and ethnic variation. <sup>2,3,4</sup>	assess	ments tha	at incorpo	orate	
Vallation.	1	2	3	4	5
	1	-	ufficient		-
for evaluation		11/a, 1115	unnenent	experit	
9. Plans, implements, and evaluates principles of pediatric pharmatherapies, taking into consideration pharmacodynamic, pharma factors <sup>2,3,4</sup>					
	1	2	3	4	5
		n/a, ins	ufficient	experie	ence
for evaluation					
10. Appropriately orders and performs interventions to monitor, r	nanage	e, and res	tore the r	nedical	ly
fragile, child who presents with complex acute, critical, and chi		$\frac{1}{2}$	i injury 3	4	5
	1	n/a insi	ufficient	•	-
evaluation		11/a, 11150		experie	
11. Provides ongoing monitoring of children with single or multi- recognizing indications for and complications related to interve	-systen	n organ d <sub>2,3,4</sub>	ysfunctio	on,	
	1	2	3	4	5
		n/a, ins	ufficient	experie	ence
for evaluation					
12. Evaluates outcomes of interventions using accepted outcome patient outcomes <sub>2,3,4</sub>	criteri	a and rev	rises plan	s accor	ding to
7+ 7	1	2	3	4	5
		n/a, insu	fficient e	experier	nce for
evaluation		-		•	
13. Establish a plan for ongoing care, seeking and integrating the team members in the development while revising as necessary <sup>2</sup>		ectives of	interprof	fessiona	al
	1	2	3	4	5
			-		-

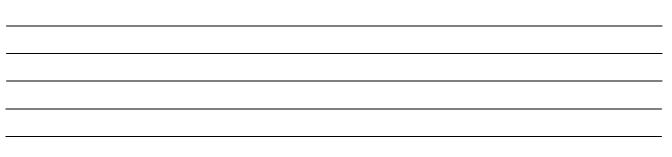
evaluation		n/a, insu	ıfficient	experie	nce for
14. Collaborate and consult with the interprofessional team to meet p	pati	ent care r	needs <sup>2,3,</sup>	4	
	1	2	3	4	5
		n/a, ins	ufficien	t experie	ence
for evaluation		-		-	
15. Refer to subspecialists, other healthcare disciplines, or different l	eve	ls of care	while c	coordina	ting
care for					
pediatric patients and their families <sup>2,3,4</sup>	1	2	3	4	5
	1	-	s a, insuf	4 Ficiant	3
experience for evaluation		11/	a, msui	ncient	
experience for evaluation 16. Facilitates transitions across the continuum of care within and ou	itai	do the har	lthaara	actting	and
across all levels of care including admission, transfer, and discharge			anneare	setting	and
across an revers of care meruting admission, transfer, and discharge	1	2	3	4	5
	1	n/a, insu	-		-
evaluation		11/a, 1115u	interent	experie	
17. Performs routine diagnostic and therapeutic procedures consider	ed e	essential	for PAN	IP pract	ice
according to	•••			i praec	
national, professional, and facility guidelines and protocols <sup>2,4</sup>					
	1	2	3	4	5
		n/a, insu	ifficient	experie	nce for
evaluation					
18. Provide accurate information when educating patient and family treatment options, and ongoing plan of care <sup>4</sup>	reg	arding sp	ecific di	iagnosis	,
		12	3	4	5
		n/a, insu	ifficient	experie	nce for
evaluation					
19. Educate the patient and family regarding benefits of and potential interventions and treatments <sup>2,4</sup>	l ad	verse rea	ctions to	0	
	1	2	3	4	5
	•	n/a, insu	-	experie	C
evaluation					
20. Counsel the patient and family regarding the benefits of adhering	g to	recomme	ended tr	eatment	s and
risks of					
non-adherence while discussing the threshold for seeking follo	w-ı	1p care <sup>2,4</sup>	ł		
		1	2	3	4
	5				
		n/a, insu	ifficient	experie	nce for
evaluation					
Domain 2: Knowledge of Practice- Synthesizes established and from diverse sources and contributes to the generation, transla care knowledge and practices. <sup>1</sup>		0			0

		4	~	2	
	5	1	2	3	
	-	n/a, insuf	ficient	exnerie	nce
evaluation		u, 1115UI		CAPUIC	
22. Applies current scientific knowledge to initiate change and	d improv	e care for	pediat	ric patie	ents
and their families <sup>2</sup>					
	_	1	2	3	4
	5				
evaluation		n/a, insuf	licient	experie	nce
and evaluate one's care of patients, to appraise and assimit and to continuously improve patient care based on constant learning. <sup>1</sup> 23.Demonstrates accountability for quality of health care and	nt self-ev	aluation	and li	fe-long	-
the systematic	-	-	-		ugn
review of patient records, protocols, treatment plans, and effectiveness in	outcomes	to deterr	nine th	eır	
meeting established standards of care <sup>2,3,4</sup>					
		1	2	3	
	5				
1		n/a, insuf	ficient	experie	nce
evaluation 24. Advocates for health care access and parity for children a	nd famili	3,4			
27. Astrocates for hearth care access and parity for children a		1	2	3	
	5		-	2	
		n/a, insu	fficient	experie	ence
for evaluation					
25. Participates in self- and peer-evaluation to improve the qu families <sup>4</sup>	ality of c	are provi	ded to	children	ano
	-	1	2	3	
	5	n/a, insuf	ficient	exnerie	nce
		, 1115UI	inciciit	CAPUIC	
evaluation					
		s interpe	rsonal	and	
Domain 4: Interpersonal and Communication Skills- Dem communication skills that result in the effective exchange with patients, the public, and health professionals; and pr	onstrate of inforn omote th	nation ar erapeuti	nd colla	aboratio	
evaluation <b>Domain 4: Interpersonal and Communication Skills- Dem</b> <b>communication skills that result in the effective exchange</b> <b>with patients, the public, and health professionals; and pr</b> <b>patients across a broad range of cultural and socioeconom</b> 26.Documents complete and concise communication with fan health care status and needs <sup>. 3,4</sup>	onstrate of inforn omote th nic backg	nation ar erapeuti rounds <sup>1</sup>	nd colla c relat	aboratio ionship	s wi

	n/a,	insuff	icient e	xperien	ce for
evaluation				-	
27.Recognizes and respects the effects of psychosocial, cultural, and affect health care <sup>2,3</sup>	spirit	ual var	iables 1	that may	/
5		1	2	3	4
		, insuf	ficient	experier	nce
for evaluation					
28.Assesses the educational needs of the family including coping skill an appropriate plan of care. <sup>3</sup>					ops
		1	2	3	4
5					
	n/a,	insuff	icient e	xperien	ce for
evaluation					
29. Provides anticipatory guidance to patients and families regarding physical and social needs, and strategies for health development and			$e.^{3}$	pment,	
1	L	2	3	4	5
evaluation	n/a,	insuff	icient e	xperien	ce for
Domain 5: Professionalism- Demonstrates a commitment to carry	ving (	out nr	ofessio	nal	
responsibilities and an adherence to ethical principles. <sup>1</sup>	,	outpr	51055101		
31. Incorporates professional and legal standards of care into practice evaluation of pediatric nurse practitioner protocols <sup>3,4</sup>	e inclu	uding c	reation	and	
		12	3	4	5
	n/a	, insuf	ficient e	experier	nce
for evaluation		-		1	
32. Participates in the ethical decision-making process in collaboratic care	on wit	th fami	lies and	d other l	nealth
professionals <sup>3,4</sup>					
		12	3	4	5
	n/a,	insuff	icient e	xperien	ce for
evaluation					
<b>Domain 6: Systems-Based Practice- Demonstrates organizational</b> improve healthcare outcomes. <sup>1</sup>	and	systen	ns lead	ership t	0
33. Participates in the systematic review of patient records, protocols, curve treatment plans, and outcomes to determine the effectiveness in mee standards of care <sup>3</sup>					
		2	3	4	5
			-	4 ::	-
for evolution	n/a	, insui	icient (	experier	ice
for evaluation		analit			4
34. Participates as a member of an interdisciplinary team in the contin process for the care of infants and families <sup>2,4</sup>	nuous				
	-	1	2	3	4
	)				

	n	/a, insu	fficient	experie	nce
for evaluation					
Domain 7: Interprofessional Collaboration- Demonstrate	es the ability	to eng	age in a	an	
interprofessional team in a manner that optimizes safe, e	effective pati	ent- an	d popu	lation-	
centered care. <sup>1</sup>					
35. Establishes a collaborative relationship with					
family and other health care colleagues <sup>3,4</sup>					
		1	2	3	4
	5				
	n/	a, insuf	ficient e	experier	nce for
evaluation					
Domain 8: Personal and Professional Development- Dem	nonstrates th	e quali	ities req	uired t	tO
sustain lifelong personal and professional growth <sup>1</sup>					
36. Operationalizes the role of the pediatric acute care nurse	practitioner	to the f	amily, c	other	
healthcare professionals, and the community <sup>3,4</sup>	1	2	2	4	-
			3		5
	n/	a, insuf	ficient e	experier	nce for
evaluation					
38.Participates in self-evaluation, professional organizations to improve care provided to infants and families. <sup>2,4</sup>	s, and/or cont	inuing	educatio	on activ	rities
	1	2	3	4	5
	n/	a, insuf	ficient e	xperier	nce for
evaluation				-	

**Comments:** 



Student Signature	Date				
Preceptor Signature	Date				
Faculty Signature	Date				

References:

MNRJune2021

<sup>1.</sup> Common Advanced Practice Registered Nurse Doctoral-Level Competencies. Published online October 2017. Accessed June 1, 2020. https://cdn.ymaws.com/www.nonpf.org/resource/resmgr/competencies/common-aprn-doctoral-compete.pdf

<sup>2.</sup> Population-Focused Competencies Task Force: Pediatric Acute Care Nurse Practitioner Competencies. Published 2013. Accessed June 1, 2021. populationfocusnpcomps2013.pdf (ymaws.com)

<sup>3.</sup> UTHSC CON Generic Eval for all Concentrations. Published October 2018.

<sup>4.</sup> Certified Pediatric Nurse Practitioner – Acute Care (CPNP-AC) Detailed Exam Content Outline. Published online June 2019. Accessed June 1, 2021. <u>CPNP-AC\_Exam\_Content\_Outline\_June\_2019.pdf (pncb.org)</u>