

Preceptor Manual

**UTHSC
College of Nursing
BSN Program**

**NSG 419
Leadership Internship**

Fall, 2018

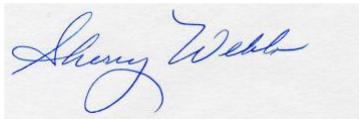
Dear Preceptor,

The faculty and students of UTHSC College of Nursing would like to thank you for serving as a leadership preceptor. The role that you play in mentoring leadership students is an important one for the future of nursing. We look forward to working with you in our leadership journey.

This manual is designed to assist you in your role. You will find included:

- An introduction to the NSG 419 Leadership Internship course.
- Descriptions of the role of preceptor, student, and faculty.
- Syllabus which describes the course outcomes and learning activities.
- Skills list from all courses
- Internship Schedule
- Clinical Hours Log
- Leadership Journal
- Clinical evaluation of the student
- Preceptor FAQs

Thank you,

A handwritten signature in blue ink that reads "Sherry Webb". The signature is written in a cursive style and is placed on a light-colored rectangular background.

Sherry Webb DNSc, RN, CNL, NEA-BC
Associate Professor and Chair
Course Coordinator
UTHSC
College of Nursing
swebb14@uthsc.edu

ABOUT THE UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER COLLEGE OF NURSING

Vision Statement: Nurses Leading Innovative Transformation of Healthcare

Mission Statement: To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation and beyond through:

- Cultivating creativity and passion to improve health care
- Leading scientific innovations and clinical practice
- Using innovative academic approaches
- Serving society

Our values represent who we are regardless of changes in our environment. We value:

- A culture that creates, supports, and promotes innovation while honoring our traditions;
- A sense of community and teamwork within the college, with our colleagues, and with our strategic partners;
- A community that enhances scholarship and promotes diversity;
- Professional and personal accountability;
- Respectful, open, and transparent communication and collaboration;
- Professional and intellectual integrity;
- Shared respect for faculty and staff contributions.

University of Tennessee Health Science Center

NSG 419

Leadership Internship

Introduction

Course Description

The clinical leadership internship provides baccalaureate nursing students the opportunity, within a select area of interest, to facilitate role transition and lifelong learning. Emphasis will be on integration and application of knowledge and skills in order to demonstrate the ability to design, provide, manage, and coordinate evidenced – based, culturally competent, and cost-effective nursing care for a group of patients. This is accomplished in partnership with the student, preceptor, and nursing faculty.

Course Outcomes

Upon completion of this course, the leadership student will be able to:

1. Integrate knowledge from nursing, the sciences, and humanities in delivering nursing care for a cohort of patients.
2. Coordinate care to a group of patients across the continuum based on desired outcomes consistent with evidence-based guidelines and quality care standards.
3. Demonstrate accountability for personal and professional behavior.
4. Assume leadership roles within the scope of nursing practice
5. Collaborate with interprofessional team in implementing, evaluating, and revising the plan of care for clients and their families
6. Demonstrate best practices in the delegation of care.
7. Use technology and information systems effectively for the management of resources and patient outcomes.
8. Formulate individual goals for lifelong learning.
9. Assume accountability for professional development.

BSN Program

The **Leadership Internship course** begins the week of **October 8** – and ends **December 1, 2018**.

Internship Preceptor Qualifications:

The preceptor is a leadership role model who guides, consults, and mentors the leadership student in achieving the clinical course outcomes. Preceptors will be selected by the clinical director and should have the following qualifications:

- Clinically competent
- Viewed by staff as a leader
- Completed the hospital preceptor course
- Enjoys working with nursing students

Students, preceptors, and faculty will partner to ensure attainment of the leadership internship clinical course outcomes. The specific roles that each have is described below:

Preceptor Role:

- Serves as a professional role model consistent with the scope of practice of the registered nurse.
- Assigns students to patients based on course content, patient/family needs and students' learning needs.
- Provides direct observation and supervision of the student consistent with student learning needs, course, program outcomes, and hospital policies.
- Seeks out learning opportunities consistent with student learner and course outcomes.
- Communicates effectively with ITP team, patients/families, students and clinical faculty.
- Supports the students' growth in the use of evidence-based practice.
- Provides ongoing and timely feedback to the student regarding learning needs and performance.
- Provides ongoing and timely feedback to the clinical faculty regarding students' learning needs and performance.
- Notifies the clinical faculty immediately with concerns about student or patient safety.
- Assists students in gaining an understanding of the microsystem's mission, goals, care delivery model, ITP team, patient population, and procedures.
- Contributes to the mid-term & final clinical evaluation.

Student Role:

- Demonstrates knowledge of clinical course outcomes.
- Applies leadership theory to clinical practice.
- Demonstrates professional values & leadership behaviors.
- Works schedule of preceptor on scheduled clinical days.
- Maintains contact numbers for preceptor & faculty in PDA/smart phone.
- Provides safe nursing care for a cohort of patients.
- Demonstrates ability to organize, prioritize, provide & manage nursing care for a cohort of patients.
- Identifies own learning needs & seeks out learning opportunities.
- Develops collaborative relationships with preceptor, unit manager/PCC/charge nurse, interprofessional team, and clinical faculty.
- Collaborates with preceptor and faculty to achieve professional and clinical competencies.
- Demonstrates professionalism through on-time attendance, appearance, communication, quality work, meeting pre-established deadlines, and timely notification of faculty, preceptor & nursing unit.
- Participates in mid-term & final evaluation conference.

UTHSC Faculty Role:

- Serves as professional role model for students, preceptors & staff.
- Communicates to the preceptors and clinical directors the expectations for the course.
- Communicates on supervisory rounds with student and preceptor to ensure attainment of course outcomes.
- Provides feedback to student related to demonstration of professional values and leadership behaviors.
- Guides students' analysis of nursing leadership structures and processes through weekly feedback on leadership internship journal.
- Ensures availability to student and preceptor by pager and/or e-mail if questions/problems arise.
- Collaborates with preceptors to ensure that the clinical experiences of the student provide sufficient practice to achieve clinical competencies.
- Collaborates with preceptors to complete mid-term & final evaluation.
- Assumes responsibility for the final grade for the course.

**UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER
COLLEGE OF NURSING**

COURSE NUMBER: NSG 419

COURSE TITLE: Internship

CREDIT HOURS: 4 (0-4)

INSTRUCTOR OF RECORD (IOR): Sherry Webb DNSc, RN, CNL, NEA-BC

PREREQUISITES: Term I, II and Summer or permission by the Associate Dean of Academic Affairs

PLACEMENT IN CURRICULUM: Term III

Faculty Contact Information/Availability:

Faculty	Office	Office Hours	Phone	Email Addresses
Dr. Sherry Webb	920 Madison Ave. Suite 952	By Appointment	Office 448-4148 Cell # 482-4774	swebb14@uthsc.edu
Dr. Jami Smith Brown	920 Madison Ave. Suite 1017	By Appointment	Office 448-1939 Cell # 601-454-9703	jsmit361@uthsc.edu
Alise Farrell MSN	920 Madison Ave. Suite 1009	By Appointment	Office 448-4145 Cell # 573-3348	agfarrell@uthsc.edu
Anita Seymour MSN	920 Madison Ave. Suite 1006	By Appointment	Office 448-2720 Cell # 482-5845	asettles@uthsc.edu
Terri Stewart MSN	920 Madison Ave Suite 932	By Appointment	Office 448-2053 Cell # 237-9672	tstewa27@uthsc.edu
Dr. Trina Barrett CCRN	920 Madison Ave. Suite 1015	By Appointment	Office 448-1886 Cell # 326-8892	tbarret6@uthsc.edu
Pat Jones-Purdy MSN	920 Madison Ave. Suite 1015	By Appointment	Office 448-2195 Cell # 481-9138	pjonespu@uthsc.edu

Additional information about the faculty teaching this course is located in the Bb course.

UTHSC COLLEGE OF NURSING TOLL FREE NUMBER: 800-733-2498. The toll-free number works within the continental United States and is answered from 8 am - 5 pm central time Monday through Friday.

COURSE DESCRIPTION:

The clinical internship provides the opportunity, within a selected area of interest, to facilitate role transition and lifelong learning. Emphasis will be on integration and application of knowledge and skills in order to demonstrate the ability to design, provide, manage, and coordinate evidence-based, culturally competent, and cost-effective nursing care.

COURSE OUTCOMES:

Upon completion of the course, the student will be able to:

10. Integrate knowledge from nursing, the sciences, and humanities in delivering nursing care for a cohort of patients.

11. Coordinate care to a group of patients based on desired outcomes consistent with evidence-based guidelines and quality care standards.
12. Demonstrate accountability for personal and professional behavior and development.
13. Assume leadership roles within the scope of nursing practice.
14. Collaborate with interprofessional team in implementing, evaluating, and revising the plan of care for clients and their families. *
15. Demonstrate best practices in the delegation of care.
16. Integrate technology and information systems for the management of resources and the promotion of optimal patient outcomes.

* *General Education Competency (Interprofessional)*

SPECIFIC TEXT FOR THIS COURSE:

Cherry, B. & Jacob, S. (2017). *Contemporary nursing: Issues, trends and management* (7th ed.). St. Louis, Mo.: Elsevier. ISBN: 978-0-10109-7

Huber, D. (2018). *Leadership and nursing care management* (6th ed.) St. Louis, MO.: Elsevier. ISBN: 978-0-323-38966-2

SUGGESTED TEXTS / Optional:

Ackley, G.& Ladwig, B. (2017). *Nursing diagnosis handbook: A guide to planning care* (11th ed.). St. Louis: Mosby.

American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.

Houghton, P. M. & Houghton, T. (2009). *APA: The easy way!* (2nd ed.). Flint, MI: Baker College.

OTHER REQUIRED SUPPLIES:

Assessment Technologies Institute (ATI) testing is not included with this course.

APPLICATIONS AND WEB-BASED TECHNOLOGY

Blackboard(Bb) is a web-based Learning Management System that we use at UTHSC to provide course content and course documents to students. Because it is web-based, it is available 24 hrs. a day and can be accessed over the internet from anywhere you can get on the internet. <http://courses.uthsc.edu/>

TEACHING STRATEGIES/COURSE STRUCTURE:

This is a web-enhanced clinical course that consists of clinical practice hours with an assigned preceptor. Content is applied weekly during clinical hours with preceptor, and through reflective journaling in a leadership journal.

EVALUATION METHODS OR GRADING PLAN: Course grades are not based on the curve. The University of Tennessee Health Science Center College of Nursing Grading Scale is as follows:

Percentage	Grade
92% – 100%	A
83% – 91%	B
75% – 82%	C
70% – 74%	D

Below 69%	F
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Assignments, assessments, in-class activities as well as out-of-class activities grading scale:

Assignments , Assessments, Activity	Total Points	% of Grade
Syllabus Test	5%	On or before 10/8/18
Internship Schedule	10%	On or before 10/8/18
Journal (due weekly)	25%	End of each week (Sunday) 11:59pm
Leadership Internship Hours Log (signed weekly by preceptor)	5%	Mid-term (week of 10/29/18)
Leadership Internship Hours Log (signed weekly by preceptor)	5%	Final (week of 11/26/18)
Mid-Term Clinical Evaluation	25%	Mid-term (week of 10/29/18)
Final Clinical Evaluation	25%	Final (week of 11/26/18)
TOTAL	100%	

GRADING SYSTEM

The faculty evaluates the academic achievement, acquisition of skills, and attitudes of nursing students and uses the marks of A, B, C, D, F, WP, WF, and I, in all official reports. In certain instances, some courses may be graded on a PASS/FAIL basis.

The letters “**WP**” or “**WF**” are recorded to indicate pass or failure in those instances in which a student withdraws from a course before completion, and is either passing or failing, respectively. The letter grade of “**W**” will be recorded when a student withdraws from a course before there has been evaluation of the student to determine whether he/she is passing or failing. If withdrawal occurs before the midpoint of a course, the grade for the dropped course is recorded as a ‘**W**’ on the official transcript. If withdrawal occurs after the midpoint, but before the course is 70% completed, the grade for the dropped course is recorded as either ‘**WP**’ (withdrawn passing) or ‘**WF**’ (withdrawn failing) depending on the student’s grade point average in the course at the time of withdrawal. Once a course is $\geq 70\%$ completed, a withdrawal is not permitted except under extenuating circumstances. Any student who fails to complete the course will receive zero(s) for any uncompleted assignments and tests, and the final course grade will incorporate those zero(s) into the grade calculation.

Drop Date with the grade of “**W**” is **11/9/18**

Drop Date with the grade of “**WF/WP**” is **11/21/18**

The designation of “**I**” (incomplete) will be used when a student is unable to complete the course at the regular time because of a reason acceptable to the course coordinator. In such cases, arrangements will be made by the coordinator for the student to complete the course requirements, and the grade of “**I**” will then be replaced by whatever grade the course coordinator considers the student to have earned. It is the responsibility of the student to work with the course coordinator in determining under what circumstances the “**I**” grade can be changed, however, the student must remove the “**I**” by the end of the following term. Failure to remove the “**I**” within the allowed time will result in a grade of “**F**” being recorded as the permanent grade.

The clinical and skills lab component of the course is graded as pass/fail. Students who fail the clinical component will receive an “F” in the course. To pass the course, satisfactory performance on all clinical competencies outlined in the course evaluation instrument is required at the final end-of-term clinical evaluation. Clinical attendance is required.

COURSE SCHEDULE

This schedule	Week	Topic(s)	Reading	Assignment/Assessment	course was
	1	Mission Statement	Cherry & Jacob: Chapter 27	Journal wk 1	
	2	Leadership & Power	Cherry & Jacob: Chapter 17	Journal wk 2	
	3	Risk Management, Facility Reporting Protocol, and Patient Safety	Cherry & Jacob: Chapter 4, 8, 22	Journal wk 3	
	4	Managing Change & Budget	Cherry & Jacob: Chapter 17 & 18	Journal wk 4	
	5	Staffing, Models of Care, Charge Nurse Role, and Patient Assignment	Cherry & Jacob: Chapter 21	Journal wk 5	
	6	Delegation & Ethics	Cherry & Jacob: Chapter 20	Journal wk 6	
	7	Conflict Resolution	Cherry & Jacob: Chapter 19	Journal wk 7	
	8	Team, Discharge Planning, and Disaster Planning	Cherry & Jacob: Chapter 9 & 17 Huber: Chapter 20 & 25	Journal wk 8	
	9				

composed in word and is not written in stone. Subsequently, it is subject to change with notice.

NAMING CONVENTION FOR SUBMISSION OF COURSE DOCUMENTS:

When you turn in documents for the course, whether using the digital drop box, the assignment feature, hard copy, or email, use the following naming conventions as you save your document:

1. The Course ID goes first, followed by a dash.
2. Use your first initial and last name, followed by a dash.
3. Put the title of the paper that will be noted clearly for you in the assignment instructions.

Here’s an example: **NSG 419-JStudent-Journal wk 1**

Papers not following this convention will be graded as late papers, thereby decreasing your grade.

EXAMS:

Students are not tested in NSG 419 because this is a clinical course.

Student Success Plan

If a student scores less than 75% on a course specific evaluation, the instructor of record (IOR) will contact the student to schedule an appointment. During the meeting with the student, the IOR will complete the IOR Student Success Plan (I-SSP) and provide guidance to the student on how to study and prepare for the next evaluation in the course. The IOR will encourage the student to make an appointment with the Learning Navigator (LN). Upon completion of this meeting, the IOR will email the BSN Program Director and the LN to inform them that the I-SSP has been developed.

If the student is identified by the BSN Program Director as not performing well in more than one course, he/she will contact the student to set up a meeting. The student will be referred to the LN for ongoing support. Additionally, if a student has a subsequent score of less than 75% in the same course, the IOR will meet with the student and refer the student to the LN for ongoing support.

If the student is unsuccessful or withdraws from a course, the student must schedule a meeting with the BSN Program Director to create and sign an individualized Revised Plan of Study and complete a Program Director Student Success Plan (PD-SSP). All students who complete a Revised Plan of Study will be referred to the LN for monitoring and follow-up.

Assessment Technologies Institute (ATI) Testing

ATI Testing is not a part of NSG 419 Internship.

FACULTY COMMUNICATION AND GRADING EXPECTATIONS (Must be included but can vary by faculty availability)

Responses to emails and discussion posts are typically made within 48 hours if received between 8:00 AM Monday and 5:00 PM Friday. Messages posted or emailed between 5:00 PM Friday and 8:00 AM Monday will be treated as though they were written Monday morning. Messages posted or emailed on a holiday will be treated as though they were received on the morning classes resume.

Every effort will be made to post grades within one week of the scheduled due date of the assignment.

EXPECTATIONS OF STUDENT BEHAVIOR:

Students have a professional responsibility to inform the faculty in a timely manner if they are unable to participate and complete course assignments as required.

Online Etiquette

In your online communication, you are expected to be respectful and tolerant of other people's ideas, opinions, and beliefs.

Please follow a few rules of thumb for online discussion (e.g. emails, discussion boards, blogs) when communicating with your instructor and peers in this class.

- Be respectful and treat everyone, as you would want to be treated yourself. Be forgiving.
- Wait to respond to a message that upsets you and be careful of what you say and how you say it. Think before you hit the post (enter/reply) button.
- Be considerate. Rude, offensive, or threatening language, inflammatory assertions, and personal attacks is not appropriate communication in an academic setting.
- Avoid messages that are in all capital letters -- it comes across to the reader as shouting!
- Be careful with boldface and italics; they can denote sarcasm.
- Use good grammar, punctuation, and composition. This shows that you have taken the time and that you respect your classmates' work.
- Use spell check!

E-MAIL MESSAGES FROM STUDENTS TO COURSE FACULTY:

When you send email messages to me, make sure that you do the following:

1. Use your UT email address (yourname@uthsc.edu email address) as I will only respond to emails sent from the UT email system.
2. Start the subject line of your email with the course ID, followed by a colon and then a few words about the substance of the email. Example: **NSG 419: Requesting a private meeting.**
3. Sign all your email messages with your first and last name. Your email address (your NetID) has only 8 characters and it is not always possible to tell who the sender is from by looking at your email address.

STUDENT SERVICES

Students Needing Accommodations

Any student who feels he/she may need an accommodation based on the impact of a disability should contact Student Academic Support Services and Inclusion (SASSI) to self-disclose and officially request accommodations. All requests for accommodations must be submitted with supporting documentation and the SASSI Self-Disclosure and Accommodation Request Forms. Although students may register for services at any time, please attempt to make arrangements within the first two weeks of the semester as it does take time to process the request and review documentation. For additional information, contact the Disability Coordinator in SASSI, Laurie Brooks, lbrook15@uthsc.edu or (901) 448-1452.

Student Academic Support Services and Inclusion (SASSI):

Student Academic Support Services and Inclusion (SASSI) provides a variety of services in person and online to facilitate learning and enhance student performance. Services provided include coordinating the Campus Wide Tutoring Program along with one-on-one coaching targeting areas such as test taking, board preparation, learning preferences applied to curricula, time management, reading rate and comprehension, note taking, stress and test anxiety management and critical thinking. Services and accommodations are also coordinated through the SASSI Office for students with disabilities. All meetings with SASSI staff are completely confidential, and all services provided by SASSI staff are free of charge to students. The SASSI office maintains a library available for student use and checkout. Access to materials, webinars, and information related to applying for accommodations is available at <http://www.uthsc.edu/sassi/about/index.php>. SASSI may be contacted and appointments scheduled online, by phone at 901-448-5056 or through e-mail at SASSI@uthsc.edu. Information about additional UTHSC student services such as Behavioral Health, the Student Assistance Program (SAP), financial aid, and the Office of Equity and Diversity can be found at www.uthsc.edu/students.

UTHSC Library

The Health Sciences Library supports the university's instructional, research, and clinical missions through a collection of print and online journals, books, online databases and multimedia resources. The library has approximately 25 staff members available to assist students with a variety of needs including accessing library resources and utilizing space within the library.

The library's website www.library.uthsc.edu provides access to online databases, electronic books and journals. When accessing these resources from off campus locations, you will be prompted to enter your NetID and password.

CONTACT FOR TECHNICAL AND ADMINISTRATIVE SUPPORT:

For non-Blackboard-related technical support for your computer hardware and software, NetID, and UT email account, contact the following:

Computing Center's **Help Desk**— 8am-5pm CT Monday through Friday:

1. 901-448-2222, option 1; continental US toll-free 800-413-7830
2. Help Desk website – for basic technical support information: <http://www.uthsc.edu/helpdesk>

For Blackboard-related support, contact the following:

1. For course access and content issues (examples: cannot access course, cannot find syllabus, locked out of test), contact your **course faculty**, Dr. Sherry Webb Office: 901-448-4148 or continental US toll-free 800-733-2498 (8am-5pm CT Monday through Friday); swebb14@uthsc.edu
2. For basic Blackboard technical issues (examples: how to change or reset your Bb password), consult the QuickSteps section of the **Blackboard help page** (<http://www.uthsc.edu/bb>)
3. For overall system access and Blackboard-related technical issues (examples: cannot log in to system, cannot access pages that you accessed in the past), contact **the Blackboard administrators**, 901-448-1927 (8am-5pm CT Monday through Friday). bb@uthsc.edu

DROPPING/ADDING A COURSE

Students who desire to add or drop a course should consult with their academic advisor and the course coordinator. When students drop a course, faculty record the withdrawal from the course and the last date of student attendance in Banner. Faculty notify the Program Director, Associate Dean for Academic Affairs, and the student's advisor regarding the course change. The advisor and student develop a new plan of study, sign the plan of study, and forward it to the BSN Program Coordinator for inclusion in the student's file. Courses in the College of Nursing are typically offered once per year. Individuals who withdraw from a course may not be able to progress to the next set of courses, resulting in a delay in progression of 6 to 12 months. Space is limited in clinical courses; space constraints may limit the ability of the student to re-enroll in a clinical course and affect progression in the program.

Leave of absences are granted in extenuating circumstances. The student should meet with the Associate Dean of Academic Affairs, his or her advisor, and the option coordinator to determine whether it is feasible for the student to return to the program. Students who request a leave of absence for 6 months or longer may need to audit or re-take courses to provide foundational knowledge.

COURSE EVALUATION: Course evaluations completed by students are extremely valuable to faculty. Review of student course evaluations offers faculty insight for consideration of changes in the course. Completion of course evaluations in a thoughtful and professional manner can facilitate faculty in continuing to offer students outstanding educational experiences in the program.

COURSE POLICIES:

Attendance and Class Participation:

Students are expected to be present, awake, and alert during class. Because of the accelerated pace of the BSN nursing program and the standard expectation of professional conduct, students are expected to attend each and every class meeting.

Submission of Coursework and Late Submission Policies:

1. Assignments are to be completed by the due date and time. All times reflect central time. You may want to access the Fixed World Clock at <http://www.timeanddate.com/worldclock/converter.html> to check on the specific time that the assignment would be due for you in your time zone.
2. Students will receive a grade of "0" for any late assignment.
3. Each assignment provides specific details on how it is to be submitted, whether via the Blackboard drop box, assignment feature, discussion board, or group area or whether it is to be submitted via email.

Cell Phone and Beepers

The University strives to provide a positive learning environment for all students. Cell phones and beepers disrupt classes and quiet places of study.

1. Cell phones and beepers should be turned off in the classroom.
2. Remove phone conversations from quiet places (e.g. library, nursing and computer labs).
3. Cell phones and beepers should be turned off while in the clinical area.

Policy on Children in the Classroom

It is not possible to provide an environment conducive to learning with children present in the classroom. Students are expected to make child care arrangements in advance.

CenterScope/Catalog

The CenterScope is the student handbook for the University of Tennessee Health Science Center. Please refer to this link <http://catalog.uthsc.edu/> for this handbook or for the Catalog which include sections on the Student Judicial System, Honor Code, and policies/procedures regarding formal student complaints and appeals. Students are expected to become familiar with these sections, as well as, with the syllabus specific to each course in which they are enrolled.

Plagiarism, falsification of records, "cheating," or other act which substantially impugns the integrity of the student is a violation of the Honor Code and can result in dismissal from the course and the University.

SafeAssign Policy

Selected papers and other written assignments in this class must be submitted to UTHSC Blackboard text-matching software (SafeAssign) for review and to analyze for originality and intellectual integrity. By submitting your paper online, you agree to have your paper included in the institutional repository of digital papers. If the results of the review indicate academic dishonesty, disciplinary action may be taken against the student as outlined in the UTHSC Student Handbook.

The faculty of this class reserves the right to submit papers to the UTHSC Blackboard text-matching software (SafeAssign) for review and analysis of originality and intellectual integrity. If the results of the review indicate academic dishonesty, disciplinary action may be taken against the student as outlined in the UTHSC Student Handbook.

Review the Course Syllabus

After reviewing the course syllabus and before progressing in the course, each student must take the Syllabus test. A link to that test is located in the **Quizzes & Exams** section of this course. The syllabus is an important source of information about your course. It is the contract between the student and the instructor about expectations for learning and performance. Students are responsible for reviewing the syllabus to insure that assignments are submitted in a timely manner and meet the specified requirements for this course as explained in the syllabus. After you have read and understand the syllabus, take the **Syllabus Test** located in the Quizzes and Exams section on the course blackboard to verify your understanding of the document. Students must earn 100% on the Syllabus test by designated date or access to the course will be removed. **Complete the Syllabus Test by October 8, 2018.**

CLINICAL INFORMATION:

GENERAL DOSAGE ROUNDING RULES

The UTHSC College of Nursing dosage rounding rules will need to be appropriately applied to all dosage calculation problems. Credit will not be given for answers with incorrect rounding or those failing to adhere to other rules as directed for calculation of dosages.

- 1. Tablets/Capsules** - round to the nearest whole tablet. Round up or down depending on the calculated dose i.e.: *1.1 - 1.4 tablets, give 1 tablet; 1.5- 1.9 tablets, give 2 tablets.*

Scored tablets may be broken in half. If scored, tablets should be rounded to the nearest half tablet. *Example: 1.4 scored tablets = 1 ½ tablets*

**Capsules are not scored.*

- 2. Liquid (Oral)** - round to the nearest tenth. i.e.: 10.3ml of cough syrup may be given. Pour 10 mL into medicine cup; draw up the 0.3 mL in a 3 mL syringe and add to the medicine cup.

- 3. Liquid (Injectables)** - round to the tenth or hundredth (depending on volume).

Milliliters

- Volumes less than 1-round to the nearest hundredth *i.e.: = 0.75mL*
- Volumes greater than 1-round to the nearest tenth *i.e.: 1.25mL -1.3mL*

Syringes

- Use a 3 mL syringe for any dose between 1 and 3 mL. *Round to the nearest tenth.*
- Use a 1mL (tuberculin) syringe for doses < 1 mL. *Round to the nearest hundredth.*

- 4. Intravenous (Basic Fluid/Piggyback Infusions)** - round to the nearest whole number. This applies to flow rates calculated in **drops/min or mL/hr** i.e.:
15.4 drops/min = 15 drops/min

- 5. Intravenous (Medicated/Dose-Based Flow Rates)** - round to the nearest tenth. i.e.: 0.45mg/min = 0.5mg/min, 0.69 milliUnits/min = 0.7 milliUnits/min

- 6. Pediatrics** - use the same rounding rules applied to adult medications depending on type.

Calculating Dosage

- Round to the nearest tenth. i.e.: 5.35mg = 5.4mg

Calculating Weight

- Kilograms - round to the nearest tenth.
- Body Surface Area - round to the nearest hundredth.

Other Rules

To prevent error, all calculations must have:

- **Leading zeros** - If the calculated dose is a decimal number that is not preceded by a whole number, a zero *must* precede the decimal point.

Example:

Answer = 0.75 mL (correct); Answer = .75 mL (incorrect)

- **No trailing zeros** - If the calculated dose is a decimal number that ends in *zero*, the zero holding no value *must* be omitted.

Example:

Answer = 1.5 mL (correct); Answer = 1.50 mL (incorrect)

- **Labels** - All calculated doses must be labeled with proper units of measure.

Example:

Answer = 7.5 mcg (correct); Answer = 7.5 (incorrect)

Clinical Preparation:

Students are expected to complete Tennessee Clinical Placement System (TCPS) orientations during week 1 of clinical. Failure to complete TCPS orientations by designated due date (listed in Blackboard) will result in an unsatisfactory and the student not being able to attend clinical.

Clinical Requirements:

Students are expected to be present, awake and alert during the clinical experience and any laboratory experiences. Students must attend all clinical experiences.

Students will complete course-specific assignment for each clinical experience. Instructions for these activities are available in the course syllabus, on Bb, and will be discussed in clinical orientation.

Clinical/Laboratory Absence:

Students who cannot be present must notify the **clinical or laboratory instructor no later than ONE hour prior** to the scheduled clinical or laboratory experience, unless emergency circumstances prevent this, then as soon as possible. If the clinical or laboratory faculty cannot be reached, the student should contact the IOR (Instructor of Record) for the course. In the event that neither the clinical faculty nor the course coordinator can be reached, an office phone message should be left for the student's assigned clinical or laboratory faculty. The student is responsible for keeping contact numbers of the faculty available (such as in a tablet device). Any no-call or no-show occurrences by the student are considered non-professional conduct and will result in referral to the IOR and possible failure of the course. A clinical and laboratory absence will result in reevaluation of a student's ability to meet course outcomes and may prevent the student from successfully meeting the accelerated course outcomes.

Clinical Uniform and Appearance:

Students are expected to follow the uniform/dress policy established by the BSN-MSN Program, College of Nursing (see BSN-MSN Program Guide for guidelines).

Clinical Competencies:

Students are expected to provide safe and appropriate care. Students are required to demonstrate competency in all applicable areas of the Clinical Evaluation Tool. The Clinical Evaluation Tool is located under the Clinical Info link in Blackboard.

CLINICAL -SPECIFIC POLICIES: STUDENTS WILL PARTICIPATE IN AN INTERPROFESSIONAL PHARMACY ACTIVITY (AS ASSIGNED) WHICH WILL COUNT AS CLINICAL HOURS:

EXPECTATIONS OF STUDENT BEHAVIOR:

The Leadership Internship course provides an opportunity for leadership students to work 1:1 under the direct supervision of a senior nurse preceptor and clinical faculty while applying leadership theory to clinical practice. Students are expected to provide safe nursing care for their preceptor's group of patients in the assigned clinical setting by organizing, prioritizing, providing, evaluating, and documenting care. Assignment may range from **2 to 5 patients by the end** of the term. Through weekly reflective journaling, students will examine nursing leadership structures and processes that facilitate/hinder nursing care outcomes in the clinical microsystem to meet the BSN Essentials.

Students are expected to demonstrate **professional behaviors** at all times both in the classroom and clinical setting.

Students, preceptors, and faculty will partner to ensure attainment of the leadership internship clinical course outcomes. The specific roles that each have is described below:

Student Role:

- Demonstrates knowledge of clinical course outcomes.
- Applies leadership theory to clinical practice.
- Demonstrates professional values & leadership behaviors.
- Works schedule of preceptor on scheduled clinical days.
- Maintains contact numbers for preceptor & faculty in PDA/smart phone.
- Provides safe nursing care for a cohort of patients.
- Demonstrates ability to organize, prioritize, provide & manage nursing care for a cohort of patients.
- Identifies own learning needs & seeks out learning opportunities.
- Develops collaborative relationships with preceptor, unit manager/PCC/charge nurse, interprofessional team, and clinical faculty.
- Collaborates with preceptor and faculty to achieve professional and clinical competencies.
- Demonstrates professionalism through on-time attendance, appearance, communication, quality work, meeting pre-established deadlines, and timely notification of faculty, preceptor & nursing unit.
- Participates in mid-term & final evaluation conference.

Preceptor Role:

- Serves as a professional role model consistent with the scope of practice of the registered nurse.
- Assigns students to patients based on course content, patient/family needs and students' learning needs.
- Provides direct observation and supervision of the student consistent with student learning needs, course, program outcomes, and hospital policies.
- Seeks out learning opportunities consistent with student learner and course outcomes.
- Communicates effectively with ITP team, patients/families, students and clinical faculty.
- Supports the students' growth in the use of evidence-based practice.
- Provides ongoing and timely feedback to the student regarding learning needs and performance.
- Provides ongoing and timely feedback to the clinical faculty regarding students' learning needs and performance.
- Notifies the clinical faculty immediately with concerns about student or patient safety.
- Assists students in gaining an understanding of the microsystem's mission, goals, care delivery model, ITP team, patient population, and procedures.
- Contributes to the mid-term & final clinical evaluation.

UTHSC Faculty Role:

- Serves as professional role model for students, preceptors & staff.
- Communicates to the preceptors and clinical directors the expectations for the course.
- Communicates on supervisory rounds with student and preceptor to ensure attainment of course outcomes.
- Provides feedback to student related to demonstration of professional values and leadership behaviors.
- Guides students' analysis of nursing leadership structures and processes through weekly feedback on leadership internship journal.
- Ensures availability to student and preceptor by pager and/or e-mail if questions/problems arise.
- Collaborates with preceptors to ensure that the clinical experiences of the student provide sufficient practice to achieve clinical competencies.
- Collaborates with preceptors to complete mid-term & final evaluation.

- Assumes responsibility for the final grade for the course.

Students who **do not meet** the leadership internship clinical course requirements are at risk of **not passing** the leadership clinical course. Students have a **professional responsibility** to:

- complete course assignments (i.e. preceptor schedule, hours log, clinical journal) when due
- notify faculty in timely manner (**prior** to assignment due date) if unable to complete the assignment when due
- be on time for clinical (15 min. prior to beginning of shift report; for example, if shift report begins at 6:45am, the student is expected to be at work at 6:30am to be prepared & ready to receive report on time); reporting to clinical late, leaving clinical early, leaving unit without permission or absence without faculty notification is unprofessional conduct; if late more than 10 minutes of the designated time for clinical to begin, the student will be sent home & the day counted as a clinical absence.
- prepare for clinical (i.e. stethoscope, pen light, computer ID/Password etc.)
- notify faculty & preceptor in a timely manner (no later than 1 hour prior to beginning of shift) if unable to be on time or will be absent from clinical. ***Note:** Students must contact faculty by cell phone.

Failure to meet the professional responsibilities listed above will result in an academic counseling, meeting with course Instructor of record (IOR), referral to the Director of the BSN Program, and possible failure of course.

Specifics about the LEADERSHIP INTERNSHIP are provided in the information listed below:

Scheduled days/shifts are dependent on the preceptor's schedule:

- **Students will work 12 hours/day 1-2 days a week (12-24 hours/week) over 8 weeks** for a total of **160 hours**.
- A student is paired with one preceptor working 12 hour shifts which are *dependent on the preceptor's schedule*. Students will work the schedule of the assigned preceptor & may schedule clinical hours on Tuesday, Wednesday, Thursday, Friday & possibly Saturday or Sunday in order to complete required clinical hours.
- Students are expected to know about their assigned patients (see below under heading labeled **Preparation**). Through direct observation, communication with students about patients, & feedback from preceptors, clinical faculty evaluate students' progress toward meeting the clinical course outcomes during supervisory visits.

Leadership Internship Clinical Schedule:

- Students are expected to meet with their preceptor to establish a relationship prior to the beginning of the course. It is recommended that students & preceptors exchange contact information (cell phone/e-mail addresses) to facilitate communication in the event of possible schedule changes.
- Working with an assigned preceptor, the **student** arranges his/her schedule & documents days & hours worked on the student leadership internship clinical schedule form (located in Bb – Internship course – Course Information Link – Clinical Documents)
- This schedule is submitted to clinical faculty on or before 10/8/18 per assignment dropbox. *** NOTE:** Once a schedule is submitted to clinical faculty, it cannot be changed without permission of faculty.
- Internships cannot begin until the schedule is submitted to faculty & faculty know when students will be in the clinical setting. *** NOTE:** Student will receive an unsatisfactory for the day, an academic counseling, and will have to meet with course IOR if clinical is started prior to faculty having a schedule.

Student Leadership Internship Log (located in Bb – Internship course – Course Information Link – Clinical Documents)

- This log is used to document:

1) leadership activity directed by the preceptor

2) hours spent at the internship site.

- The completed log should be kept with student at the clinical site while completing internship hours for review by clinical faculty.
- The completed log is submitted to faculty through assignment dropbox at Mid-Term & Final evaluation weeks.
- **Standard transmission-based precautions/basic safety form** located on the last page of the syllabus must be completed during the **1st week of clinical** & submitted to assignment dropbox.

Student Clinical Evaluation

- Students will receive a mid-term & final evaluation completed by the preceptor & clinical faculty (located in Bb – Internship course – Course Information Link – Clinical Documents).
- Students must receive a **satisfactory evaluation** to successfully pass the course.

Internship Clinical Day:

Clinical Attire: Students are expected to follow the uniform/dress policy established by the BSN Program, College of Nursing (see BSN Program Guide for guidelines). The UT ID is mandatory and must be worn on the collar and visible at all times.

****** Please Note: Some clinical sites may have stricter regulations which you must also adhere to as part of the professional dress code.** They may include but are not limited to:

- Hair must be neatly combed. Long hair must be styled away from the face and should not interfere with patient care. Beards and moustaches must be neatly trimmed.
- Fingernails must be well groomed, clean and trimmed with no polish, artificial fingernails, or any type of nail extenders. Natural nail tips should be no longer than ¼ inch
- Cosmetics should be used with moderation. No perfumes or body fragrances should be used.
- Jewelry should be kept to a minimum with no body piercing showing (e.g., nose, cheek, tongue, eyebrow, lip, etc.) other than a single small stud earring in the ear lobes.

Equipment: Students must be prepared to care for patients by having the following equipment with them **at all times:**

- PDA/smart phone
- Computer login & password
- Preceptor & clinical faculty contact information
- Stethoscope
- Pen light
- Scissors
- Pen
- Skills documentation

Attendance: Students must be present on the clinical unit and ready to listen to report with assigned preceptor no later than 15 min prior to shift report. If you arrive to the clinical area 10 min late, you will be dismissed from the clinical area incurring a clinical absence. If you know you are going to be absent **you are to notify (pager or cell phone) your clinical faculty and preceptor and the nursing unit 1 hour prior to the beginning of the assigned shift.**

Preparation: After listening to report, round with preceptor on assigned patients; read patient charts, perform assessments, administer medications, perform and document care, round with physicians and team members, and attend discharge planning conference. Be prepared to discuss with preceptor/clinical faculty patients' diagnoses, brief history, pertinent diagnostics, patient goals, plan of care, patient activities, medications and possible issues.

Medication administration: *Do not administer any medication whatsoever without consulting with your preceptor/clinical faculty first. * Note:* Preceptors must be present when student is administering medications and/or performing any invasive procedure such as IV, N/G tube, urinary catheter insertion.

Students are expected to know and present to preceptor the following for each drug administered to a patient: classification, rationale for why patient is on each particular medication, potential side effects, safe dose ranges, dosage calculations, and nursing care (blood pressure, apical heart rate, lab work, etc.) prior to time of administration. *If you are not prepared with this information, you will not be permitted to administer medications to your patient. You may refer to an appropriate resource for medication information (i.e. PDA, Micromedix).*

Procedures: Students are expected to have their **skills verification** with them in clinical every day so that preceptors know what students have completed in skills lab. Students may only perform those skills that have been checked off /signed in the skills lab/clinical unit. Preceptors must be present when procedures are performed.

Charting: In order to complete electronic charting, students must know the **computer login & password** assigned by the clinical facility. Charting may include, but not limited to, assessment, I & O, education, care provided, procedures, clinical notes, vital signs, medications, reporting off at end of shift, and patient safety documentation. This may vary by institution. (For example, **in the pediatric setting, charting the safety, I & O, is done every 2 hours**).

Lunch: Students are responsible for:

- notifying assigned preceptor if the unit is left for any reason
- providing a patient handoff so patient needs can be met during the student's absence
- lunch time is 30 minutes long and specific time (i.e. 11:00) to leave the unit will be determined by the assigned preceptor based on the needs of the patients
- *students are not permitted to leave the hospital campus for lunch.*

Leadership Journal: located in Bb – Internship course – Course Information Link – Clinical Documents)

The purpose of the leadership journal is to apply key leadership topics presented in class for that week in the clinical setting. This is accomplished through documentation of observations within the internship site, discussions with the leadership preceptor, charge nurse, patient care coordinator & clinical director/manager, and review of leadership literature. Students are expected to analyze & provide answers related to the assigned clinical setting to questions within each topic area by:

- defining the key concept in the literature (APA citation)
- providing specific examples in the clinical setting
- analyzing the gap between the leadership theory and practice
- supporting statements by providing rationale for statements (APA citation from Leadership textbook and/or Leadership ATI)

Grading: The Leadership Journal is a pass/fail cumulative assignment that is worth 100 points (12.5 points/week). Students must make a 75% or greater to pass this assignment. If journal entry is **not submitted** by the due date each week without approved extension by clinical faculty prior to due date, the student will have 2 points deducted for that week. Students are expected to read comments communicated by clinical faculty in the reviewed journal comments in assignment dropbox & incorporate recommendations into practice and/or the next week's journal.

The following list is what you should have with you AT ALL TIMES during the clinical day:

EQUIPMENT

Pen Light
iPad Mini
Scissors

Pen
Stethoscope

Clinical Attire for Pre-Lab... Students should wear their approved scrubs/shoes/lab coats for all community clinical experiences and all school related activities. Lab coat and visible UT ID are mandatory at all times. Your ID badge is to be worn on the collar.

The Clinical Day:

Shift report... Please find the night shift nurse (by looking at the assignment board) and make sure you are with him/her when report is given to the day shift oncoming nurse. Be ready and prepared to take notes on your patient during report which begins promptly at 0600.

Faculty Supervisory Rounds... Be prepared to discuss diagnoses, brief history, pertinent diagnostics, plan of care, patient activities, medications and possible issues. *If the clinical instructor deems that you are not prepared for clinical by not meeting any of the requirements in this paragraph, you will be dismissed from the clinical area, incurring a clinical absence.*

Medication administration...*Do not administer any medication whatsoever without consulting with your clinical instructor first. Prepare a list of medications using your medication data sheet and be able to discuss the following for each drug you are to administer: classification, rationale for why your patient is on each particular medication, potential side effects, safe dose ranges, dosage calculations, and nursing care (blood pressure, apical heart rate, lab work, etc.) prior to time of administration. If you are not prepared with this information, you will not be permitted to administer medications to your patient. You may refer to an appropriate resource for medication information.*

Charting... Charting may include, but not limited to, assessments, I & O, education, care given, procedures, clinical notes, vitals, medications, reporting off at end of shift, and patient safety documentation. **In the pediatric setting, charting the safety, I & O, is done every 2 hours.**

Lunch... You must notify your nurse if you leave the unit. Lunch times will be determined by your preceptor. *You will not be permitted to leave the hospital campus for lunch. Because this is an 12-hour clinical, there will be no other designated breaks outside of the lunch period.*

Procedures... *Consult with your clinical preceptor before doing ANY procedure.* On each day of clinical, make sure you record the skill you completed in Medatrax.

Unit: _____
Date: _____

**University of Tennessee Center for Health Science
College of Nursing
Standard/Transmission Based Precautions/ Basic Safety**

To provide protection to other associates, patient and visitors from contracting or transmitting Hepatitis B and HIV (AIDS) and to provide infectious patients the same level and quality of services to other patients, I verify the following:

1. I have read and understand how to use standard precautions.
2. I am aware of the Health Care Agency's Infection Control Policies, Procedures, and Guidelines as they relate to standard and transmission-based precaution.
3. These supplies are on the unit, and I know where they are located.

Blood Precautions Kit _____

Disposable Gloves _____

Disposable Gowns _____

Mouth to Mouth Resuscitators _____

Plastic Bags for Transporting Specimens _____

Soiled Needle Containers _____

I know the location of the following safety equipment located on the unit.

Fire Extinguishers _____

Fire Alarms _____

Evacuation Plan including exits _____

Disaster Plan _____

MSDS (Material safety data sheets) _____

Environment of Care manual _____

Flashlights _____ Emergency Outlets _____

I understand my accountability and responsibility for compliance and the consequences of non-compliance.

Student _____ Date _____

UTHSC College of Nursing
NSG 419 (BSN): Leadership Internship Schedule

Students—please contact your preceptor to develop your weekly schedule. **Depending on the preceptor’s schedule, you may work (12hours/day x 1- 2 days/week for 8 weeks for a total of 160 hours for the term).**

These clinical hours may be scheduled on **Tuesday, Wednesday, Thursday, Friday, Saturday or Sunday based on your preceptor’s schedule.**

Document the days and times you have agreed to practice at the internship site on this form. **Submit schedule on or before October 8, 2018** via assignment drop box in Bb. **** Please remember that **ALL CHANGES must be communicated and approved by your clinical faculty no later than 24 hours** from the time you are or were to practice at the internship site.

Student Name:			Clinical Instructor:			
Internship Site:			Preceptor:			
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10/7	10/8 Class (orientation to courses)	10/9 Clinical Internship Begins →	10/10	10/11	10/12	10/13
10/14	10/15 Class	10/16	10/17 Mid-South Emergency Planning Fall Surge Exercise -Mandatory 8 hour clinical (Times TBD)	10/18	10/19	10/20
10/21	10/22 Class	10/23	10/24	10/25	10/26	10/27
10/28	10/29 Class	10/30	10/31	11/1	11/2 Cash Dollar 8:30-12:00	11/3
1/4	11/5 Class	11/6	11/7	11/8	11/9	11/10
11/11	11/12 Class	11/13	11/14	11/15	11/16	11/17
11/18	11/19 Class	11/20	11/21	11/22 Thanksgiving Holiday <u>NO Clinical</u>	11/23 Thanksgiving Holiday <u>NO Clinical</u>	11/24
11/25	11/26 Class	11/27	11/28	11/29	11/30 Groups (as assigned) Interprofes sional Pharmacy TBL Activity	12/1 LAST day of Clinical (if needed)

UTHSC College of Nursing
NSG 419 Internship
Leadership Internship Fall 2018
JOURNAL

Purpose: The purpose of the leadership journal is to apply key leadership concepts presented in class for that week in the clinical setting. This is accomplished through documentation of observations within the internship site, discussions with the leadership preceptor, charge nurse, patient care coordinator, manager, and review of leadership theory in textbook.

Webb, S. (2016), Applying leadership theory to practice using a structured clinical journal. *Journal of Nursing Education* 55(10:599). doi:10.3928/01484834-20160914-12

Instructions: The weekly journal concepts correlate with content covered each week in class. Students are expected to:

1. Answer the questions within each topic area by:
 - defining the *key concept* in the leadership textbook (APA citation)
For example, wk 1 topic *Mission Statement*; define to concept *Mission Statement* “a mission statement is defined as...” (citation)
 - providing specific examples in the clinical setting (**do not use** names of hospital, unit or people in journal descriptions) use for example “In my hospital or on my unit...”
 - analyzing the gap between leadership theory and observed practice
 - supporting statements by providing rationale (APA citation from Leadership textbook)
 - using correct sentence structure, grammar, punctuation & spelling
2. Use the *Exemplar Internship Journal* provided in clinical documents as a guide when preparing your weekly journal.
3. Post weekly journal in assignment dropbox each week.
4. SafeAssign will be used by faculty.

Grading: The Leadership Journal is a pass/fail assignment that is worth 100 points (maximum 12.5 points/week). Students must make a 75% or greater to pass this assignment. If journal entry is **not submitted** by the due date each week **without approved extension by clinical faculty prior to due date**, 2 points will be deducted for that week. Students are expected to read feedback communicated by clinical faculty and incorporate comments into next week’s journal.

Week 1

Student Name:

Topic	Discussion	Student Activities	
1 a. Mission Statement	<ul style="list-style-type: none">▪ Define the concept <i>mission statement</i>.▪ What is the mission statement of the organization in which you are assigned?▪ Does care reflect/not reflect the mission statement (gap between leadership theory and practice)? Explain your answer.	<ul style="list-style-type: none">▪ Find/read missic values of organizat▪ Observe Patient	
Week 1		Points Possible	Student
Submitted by due date		2	
Followed assignment instructions		1	
Defined key concept in leadership text book with APA citation		2	
Provided specific examples from the clinical setting		2	
Analyzed the gap between leadership theory and practice		2	
Supported statements with statements from the leadership textbook with APA citation		2	
Used correct sentence structure, grammar, punctuation and spelling		1.5	
Total Points possible =		12.5	
Comments by Faculty:			

Week 2

Student name:

Topic	Discussion	Student Activities
2.a. Leadership	<ul style="list-style-type: none"> ▪ Define the concept <i>leadership</i>. ▪ Describe a situation on the microsystem (unit) in which leadership was practiced. ▪ What leadership style was practiced? ▪ What type of power was used in the interaction? ▪ Was the type of power & leadership style effective for the situation? Explain your answer. ▪ Did a <i>gap</i> exist between leadership theory and practice? Explain your answer. 	<ul style="list-style-type: none"> ▪ Observe interactions preceptor, staff with patients, families and interprofessionals.
b. Performance Appraisal	<ul style="list-style-type: none"> ▪ Define the concept <i>performance appraisal</i>. ▪ Describe the performance appraisal process in your institution. 	<ul style="list-style-type: none"> ▪ Discuss with preceptor/manager.

Week 2		Points Possible	Student
Submitted by due date		2	
Followed assignment instructions		1	
Defined key concept in leadership text book with APA citation		2	
Provided specific examples from the clinical setting		2	
Analyzed the gap between leadership theory and practice		2	
Supported statements with statements from the leadership textbook with APA citation		2	
Used correct sentence structure, grammar, punctuation and spelling		1.5	
Total Points possible =		12.5	
Comments by Faculty:			

Week 3

Student name:

Topic	Discussion	Student Activities
3a. Risk Management	<ul style="list-style-type: none"> ▪ Define the concept <i>risk management</i>. ▪ Describe the role of the risk manager? ▪ What types of errors are reported in your institution? ▪ Describe a situation in which an error occurred on your microsystem (unit). ▪ Did a <i>gap</i> exist between leadership theory and practice? Explain your answer. 	<ul style="list-style-type: none"> ▪ Discuss with pr charge nurse, PCC manager
b. Facility protocol reporting	<ul style="list-style-type: none"> ▪ Define the concept of <i>facility reporting</i>. ▪ Describe the process for reporting errors & near misses. ▪ What types of unexpected or unusual incidents are reported? ▪ Did a <i>gap</i> exist between leadership theory and practice? Explain your answer. ▪ What information should be included in an unusual occurrence report? 	<ul style="list-style-type: none"> ▪ Discuss with pr charge nurse, PCC, manager
c. Patient Safety	<ul style="list-style-type: none"> ▪ Define the concept <i>patient safety</i>. ▪ Describe a patient safety issue that occurred on the microsystem (unit). ▪ How was the issue resolved? ▪ Did a <i>gap</i> exist between leadership theory and practice? Explain your answer. ▪ Describe a quality improvement process (i.e. core measure, NDNQI indicator) being measured on the unit. ▪ Describe the results. 	<ul style="list-style-type: none"> ▪ Discuss with pr charge nurse, PCC manager ▪ Review QI plan scorecards for unit
Week 3		Points Possible St

Submitted by due date	2	
Followed assignment instructions	1	
Defined key concept in leadership text book with APA citation	2	
Provided specific examples from the clinical setting	2	
Analyzed the gap between leadership theory and practice	2	
Supported statements with statements from the leadership textbook with APA citation	2	
Used correct sentence structure, grammar, punctuation and spelling	1.5	
Total Points possible =	12.5	
Comments by Faculty:		

Week 4

Student name:

Topic	Discussion	Student Activities
4.a.	<ul style="list-style-type: none"> ▪ Define the concept <i>change</i>. ▪ Describe a recent change that occurred on the microsystem. ▪ What were two barriers that were encountered during implementation of the change? ▪ How were they resolved? ▪ Was the resolution effective/not effective? Explain your answer. ▪ Did a gap exist between leadership theory and practice? Explain your answer 	<ul style="list-style-type: none"> ▪ Discuss with prece nurse or PCC
b. Budgeting	<ul style="list-style-type: none"> ▪ Define the concept <i>budget</i>. ▪ Describe the type of budget used in the microsystem. ▪ Define the concept <i>variance analysis</i>. ▪ How does the manager use variance analysis to guide clinical decision-making? ▪ Did a gap exist between leadership theory and practice? Explain your answer 	<ul style="list-style-type: none"> ▪ Discuss with nurse

Week 4		Points Possible	Stu
Submitted by due date		2	
Followed assignment instructions		1	
Defined key concept in leadership text book with APA citation		2	
Provided specific examples from the clinical setting		2	
Analyzed the gap between leadership theory and practice		2	
Supported statements with statements from the leadership textbook with APA citation		2	
Used correct sentence structure, grammar, punctuation and spelling		1.5	
Total Points possible =		12.5	
Comments by Faculty:			

Week 5

Student name:

Topic	Discussion	Student Activi
5.a. Model of Care Delivery	<ul style="list-style-type: none"> ▪ Define the concept <i>model of care delivery</i>. ▪ Define the <i>care delivery model</i> practiced on the unit. ▪ Based on the model identified, answer each of the following: <ul style="list-style-type: none"> • Who has the authority to make decisions about patient care? • How are work/tasks assigned/delegated? • How is care coordinated? ▪ Did a <i>gap</i> exist between leadership theory and practice? Explain your answer. 	<ul style="list-style-type: none"> ▪ Observe assignment ▪ Discuss preceptor, I nurse mana
b. Charge Nurse Role	<ul style="list-style-type: none"> ▪ Define the concept <i>charge nurse</i>. ▪ Describe the role of the charge nurse/PCC in terms of: <ol style="list-style-type: none"> a. Delegation and supervision. b. Consultant for clinical and technical problems. c. Manager of staff, equipment, traffic during patient acute events. d. Managing patient flow ▪ Did a gap exist between leadership theory and practice? Explain your answer 	<ul style="list-style-type: none"> ▪ Observe cha role ▪ Discuss role charge nurse
c. Patient Assignments	<ul style="list-style-type: none"> ▪ Define the concept of <i>staffing</i>. ▪ Describe how each of the following are utilized when patient assignments are made: <ul style="list-style-type: none"> Role - Licensure - Experience – Acuity - Patient intensity - Safety needs - Caregiver continuity - Patient preference – ▪ Did a gap exist between leadership theory and practice? Explain your answer 	<ul style="list-style-type: none"> ▪ Observe assignment ▪ Discuss preceptor, c or PCC

Week 5		Points Possible	Stu
Submitted by due date		2	
Followed assignment instructions		1	
Defined key concept in leadership text book with APA citation		2	
Provided specific examples from the clinical setting		2	

Analyzed the gap between leadership theory and practice	2	
Supported statements with statements from the leadership textbook with APA citation	2	
Used correct sentence structure, grammar, punctuation and spelling	1.5	
Total Points possible =	12.5	
Comments by Faculty:		

Week 6

Student name:

Topic	Discussion	Student Activities
6.a. Ethics	<ul style="list-style-type: none"> ▪ Define the concept of <i>ethics</i>. ▪ Describe the function of your institution's <i>Ethics</i> committee. ▪ Describe an ethical issue that occurred on your unit. ▪ What ethical principle was violated (autonomy, beneficence, fidelity, justice, nonmaleficence, or veracity)? Explain answer. ▪ Did a gap exist between leadership theory and practice? Explain your answer. 	<ul style="list-style-type: none"> ▪ Discuss with preceptor nurse, PCC manager
b. Delegation	<ul style="list-style-type: none"> ▪ Define the concept of <i>delegation</i>. ▪ Describe a situation in which you delegated activities on your unit. ▪ How was supervision of delegated activities ensured? ▪ What were the barriers that were encountered? ▪ Did a gap exist between leadership theory and practice? Explain your answer. 	<ul style="list-style-type: none"> ▪ Discuss with preceptor PCC or nurse manager

Week 6	Points Possible	Student
Submitted by due date	2	
Followed assignment instructions	1	
Defined key concept in leadership text book with APA citation	2	
Provided specific examples from the clinical setting	2	
Analyzed the gap between leadership theory and practice	2	
Supported statements with statements from the leadership textbook with APA citation	2	
Used correct sentence structure, grammar, punctuation and spelling	1.5	
Total Points possible =	12.5	
Comments by Faculty:		

Week 7

Student name:

Topic	Discussion	Student Activities
7.a. Conflict Resolution	<ul style="list-style-type: none">▪ Define the concept <i>conflict</i>.▪ Describe a recent conflict situation on the microsystem.▪ What conflict resolution style was used (avoiding, compromise, competing, or accommodation)?▪ Was the style/strategy effective/not effective? Explain.▪ Did a gap exist between leadership theory and practice? Explain your answer	<ul style="list-style-type: none">▪ Observation of conflict.▪ Discuss with charge nurse or

Week 7		Points Possible	Stu
Submitted by due date		2	
Followed assignment instructions		1	
Defined key concept in leadership text book with APA citation		2	
Provided specific examples from the clinical setting		2	
Analyzed the gap between leadership theory and practice		2	
Supported statements with statements from the leadership textbook with APA citation		2	
Used correct sentence structure, grammar, punctuation and spelling		1.5	
Total Points possible =		12.5	
Comments by Faculty:			

Week 8

Student name:

Topic	Discussion	Student Activities
8.a. Disaster Planning	<ul style="list-style-type: none"> ▪ Define <i>disaster</i>. ▪ Describe your institution's color code designations for emergencies. ▪ Where is your institution's emergency plan located? ▪ What is the nurse's role in the institution's security plans? ▪ Did a gap exist between leadership theory and practice? Explain your answer 	<ul style="list-style-type: none"> ▪ Discuss with preceptor nurse, PCC, or nurse ▪ Review your institution's emergency codes and plans
b. Teams	<ul style="list-style-type: none"> ▪ Define the concept <i>teamwork</i>. ▪ How are patient goals/outcomes communicated among team members? ▪ Is the method effective/not effective? Explain. ▪ How is continuity of care ensured across: <ul style="list-style-type: none"> • Microsystems (units) • across healthcare settings? ▪ Did a gap exist between leadership theory and practice? Explain your answer 	<ul style="list-style-type: none"> ▪ Observe Patient ▪ Observe communication among interprofessionals ▪ Attend discharge conference ▪ Observe staff member's handoff of shift report
c. Discharge Planning	<ul style="list-style-type: none"> ▪ Define <i>discharge planning</i>. ▪ Describe the discharge planning process in your organization. ▪ What is the nurse's role in discharge planning? ▪ What disciplines are involved in the process? ▪ Discuss whether your patient/family was prepared to care for patient upon discharge: <ul style="list-style-type: none"> • Take/give medicines as prescribed • Follow-up with physician post hospitalization • Report symptoms to physician • Care for wound, dressings etc • If ordered, understand role of hospice/home health ▪ Did a gap exist between leadership theory and practice? Explain your answer 	<ul style="list-style-type: none"> ▪ Participate in the discharge process of patients with preceptor ▪ Participate in the discharge conference
d. Learning	<ul style="list-style-type: none"> ▪ Describe the most valuable experience that you had during the <i>leadership</i> 	<ul style="list-style-type: none"> ▪ Synthesis of course ▪ Reflection

	<p><i>internship</i> and what you learned about yourself through the process.</p> <ul style="list-style-type: none"> ▪ Describe your Lifelong Learning Plan in terms of how you will actively pursue new knowledge and skills as a professional nurse, including providing evidence-based interventions for the needs of the clients you serve as the health care system evolves. 	
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Week 8	Points Possible	Stud
Submitted by due date	2	
Followed assignment instructions	1	
Defined key concept in leadership text book with APA citation	2	
Provided specific examples from the clinical setting	2	
Analyzed the gap between leadership theory and practice	2	
Supported statements with statements from the leadership textbook with APA citation	2	
Used correct sentence structure, grammar, punctuation and spelling	1.5	
Total Points possible =	12.5	
Comments by Faculty:		

UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER
 COLLEGE OF NURSING
 BSN PROGRAM
 Clinical Performance Evaluation Tool

NURS 419 Internship

(Pre-licensure)

Self Evaluation _____
 Faculty Evaluation _____

Student Name _____

Faculty _____ Course: NURS 419 Semester: Fall

Fill in appropriate fields to the right & below:

Student must obtain a Satisfactory “S” grade in all competencies at the Final Evaluation to pass the Course.

Core Competencies	Midterm			Final	
Patient-Centered Care	S	N I	U	S	U
Assessment					
Assesses leadership qualities of clinical preceptor and/or interprofessional staff in clinical setting. (Week 2 Journal)					
Assesses patient and family needs for safe transition between and across healthcare settings. (Daily)					
Analysis					
Analyzes how organizational mission, vision, and values direct patient care. (week 1 Journal)					
Identifies cultural attributes of clinical setting and their influence on patient care. (Daily)					
Identifies methods to improve caring and advocacy in the delivery of patient care. (Daily)					
Analyzes nursing's role and responsibility in assuring ethical patient care delivery. (Daily & week 6 Journal)					
Analyzes adequacy of staffing in achieving optimal patient, nurse, and financial outcomes. (week 5 Journal)					

Analyzes effectiveness of leadership communication in reducing conflict and achieving specific outcomes. (week 7 Journal)					
Analyzes the assignment of patient care responsibilities based on role, licensure, patient intensity and safety needs, caregiver continuity, and staff preference. (week 5 Journal)					
Evidence –Based Practice					
Planning					
Involves patient, family and/or community in planning. (Daily)					
Collaborates with health care providers to establish realistic, short & long-term, measureable relevant patient-centered goals. (Daily)					
Integrates evidence-based practice in the formation of individualized plans of care for assigned groups of patients. (Daily)					
Organizes care, supplies, and time appropriately. (Daily)					
Facilitates patient discharge to community or other appropriate care setting. (Discharge Planning Conf., bed huddles & week 8 Journal)					
Teamwork and Collaboration					
Implementation					
Applies professional judgment and critical thinking in the provision and coordination of interprofessional patient-centered care. (Daily)					
Collaborates with interprofessional patient care team to provide safe, timely effective, efficient, equitable, patient-centered (STEEEP) care. (Daily & week 3 Journal)					
Provides safe and effective care for a group of patients based on patient needs and evidence-based knowledge. (Daily)					
Uses therapeutic and professional communication when interacting with individuals, families, and staff. (Daily)					
Communicates patient/family needs to ensure continuity of care across shifts and across care settings. (Handoff report to preceptor and discharge planning)					
Participates actively in interprofessional patient care team meeting. (Discharge planning conf. and week 8 Journal)					
Quality Improvement					

Evaluation					
Evaluates individual, family, and community progress toward interprofessional goals/outcomes. (Daily)					
Revises plan based upon ongoing assessment and progress toward goals/outcomes. (Daily)					
Evaluates quality improvement methods used in the clinical setting. (week 3 Journal)					
Safety (Daily)					
Incorporates national patient safety goals in delivery of care. (Daily)					
Provides safe care by eliminating safety hazards and errors to patients, families, and the health care team. (Daily)					
Demonstrates safety in communication “within” and “across” units and health care settings. (Daily)					
Informatics (Daily)					
Manages data, information, and knowledge of technology in an ethical manner.					
Uses technology and information systems for communication, data gathering, planning and evaluating care.					
Documents and/or communicates information accurately, clearly, and timely.					
Protects confidentiality of electronic health records.					
Professionalism (Daily)					
Complies with the Code of Ethics, Standards of Practice, and policies and procedures of the University of Tennessee Health Science Center, College of Nursing, and clinical agencies.					
Communicates with patients, families and staff in respectful manner.					
Maintains professional behavior and appearance.					
Arrives/leaves clinical experiences at assigned times.					
Accepts constructive feedback developing plan of action for improvement.					

Weekly Notes by Faculty

Week 1

Week 2

Week 3

Week 4

Week 5

Week 6

Week 7

Week 8

Midterm Comments (Address Strengths and weaknesses)

Faculty

Student

Student Signature _____ **Date** _____

Faculty Signature _____ **Date** _____

Final Comments (Address Strengths and weaknesses)

Faculty

Student

Student Signature _____ **Date** _____

Faculty Signature _____ **Date** _____

id-clinical Evaluation: faculty and student must complete documentation for remediation of satisfactory areas. CPR Tool must be initiated for any unsatisfactory areas.

Unsatisfactory Area	Remediation Strategy

Student Signature _____ **Date** _____

Faculty Signature _____ **Date** _____

UTHSC

Leadership Internship

Preceptor

Frequently Asked Questions (FAQs)

A list of commonly asked questions by preceptors and are provided as a guide for you when working with UTHSC nursing students. If you have any questions that are not answered with this document, please contact the course coordinator or clinical faculty.

1. Who do I contact if I have questions?

If you have any questions, the course coordinator and clinical faculty are available by beeper. This information is provided for you at the front of the syllabus under faculty contact information.

2. What can I expect the student to be able to do?

The students have successfully completed all of the required pre-licensure courses. In addition, they have performed all of the required skills for these courses in the simulation lab and under the direction of faculty in the clinical setting. A list of the required skills is provided (see table of contents).

3. What can the student **not do?**

The students are not licensed and may be restricted by your institution from accepting telephone/verbal orders, administering IV Chemotherapy, blood/blood products. Students are restricted from administering medications and performing any invasive procedure such as insertion of an IV, NGT, foley catheter without direct supervision of the preceptor.

4. What are my legal responsibilities?

Students carry their own malpractice insurance through UTHSC. As a preceptor, you are responsible for providing supervision of the students, but clinical faculty retain overall accountability for the student.

5. Am I responsible for the student's grade/evaluation?

As the preceptor, you are responsible for identifying student learning needs, providing daily feedback to ensure successful completion of the course outcomes, and contributing to the students' mid-term and final evaluation; however, the UTHSC clinical faculty are responsible for the final grade.

6. What can I expect when clinical faculty make site visits?

Clinical faculty will make supervisory visits once a week to spend time with you and the student to evaluate progress toward meeting clinical course outcomes. This is a time to discuss what you would like the student to do more of, less of, or keep doing. More frequent visits can be arranged if requested by the preceptor or student.

7. What do I do if the student does not report to clinical?

When establishing the student/preceptor relationship at the beginning of the course, student and preceptor contact information must be shared. Students must notify the clinical faculty, preceptor & nursing unit if they are unable to come to clinical. If you are not notified of the absence, immediately contact the clinical faculty by beeper.

8. What do I do if the student is late or leaves clinical early?

If the student shows up more than 15 min. late or misses more than half of shift report, you have the authority to send the student home, reschedule the clinical day at your convenience, and notify clinical faculty. The student may not leave clinical early without permission of clinical faculty.

9. What do I do if I have an unplanned absence such as illness on the day the student is scheduled to work with me?

If you are unable to work on the scheduled day with the student, please notify the student & clinical faculty, and reassign the student to another preceptor for the day.

10. What do I do if I have a planned absence on the day the student is scheduled to work with me?

Communicate the change in schedule to the student and clinical faculty and reschedule the clinical day.

11. What do I do if a medication/treatment error is made?

If a medication/treatment error is made, first ensure the patient's safety, then follow your institution's policy regarding reporting of error. Immediately notify the clinical faculty by beeper.

12. What do I do if the student has a needle stick injury?

If a needle stick injury occurs, first follow your institution's policy regarding needle stick injury & immediately notify the clinical faculty by beeper.

13. What do I do if the student is not meeting expectations?

If the student is not meeting expectations in terms of unsafe practice, unprofessional behaviors and /or communication, immediately discuss with student and notify clinical faculty (see UTHSC dress code & professional behavior documents).

SKILLS

Introduction to Professional Practice	Adult Health	Acute Care
Bathing/Bedmaking	IV Primary	Basic ECG Placement
Oral Hygiene	IV Secondary	Central Line Dressing Change
Perineal Care	IV Pumps	PICC/CL/Hickman
Catheter Care	PCA Pumps	Portacath Care Guidelines
Briefs	NGT Insertion/Irrigation	Flushing
Bedpans/Toileting	Enteral Tubes	Sampling
Back Safety	Enteral Feedings	Suctioning
Lifts	Enteral Pumps	Oral
Turns/Transfers	Residual	NP
Ambulation	Meds	ETT
Devices	Assistive Devices:	Trach
Fall Prevention	Canes	Suture Removal
Gait Belts	Crutches	Scenarios
Vital Signs	Walkers	Delegation
T	Cast Care	Prioritization
P	Traction Care	Airways
R	TEDs/SCDs/CMP	ETT - Insertion Assist Care
BP	Subcutaneous Injection	Trach - Types
Orthostatic VS	Intradermal Injection	Tracheostomy Care
Doppler	Ampule	Ventilator Care
Dinamapp	Reconstitution	IV Starts
Intramuscular - Vial	Glucose Monitoring	IV Push
Z track	Blood Administration	Convert IV/INT
NGT/Enteral Meds	Oral Airways	Peritoneal Dialysis
Introduction to Professional Practice	Adult Health	Pediatrics
Enemas	Incentive Spirometry	Assessment - systems
Fleets	T.C.D B	Vital signs
Tap Water	Colostomy Care	Pain assessment
Soap Suds	Appliances	Pediatric medication calculation
Oxygen Therapy	Irrigation	Meds-IM

Types O2	Specimen Collection	Meds- Subcutaneous
Safety	Stool	Meds-Ear
Pulse Oximeter	Sputum	Meds-Eye
ROM	Wound	IV Starts
Positioning	Foley Insertion	Feeding Tubes
Isolation Attire/Types	Specimen from Foley	MIC-KEY Tubes
General Equipment	Bladder Irrigation	G-Tubes
Cleaning	Condom Catheters	Urine
Handwashing	Chest tubes	Collection
Hot/Cold Therapy	Assessment	U-bags
K-pads	Maintenance	Catheters
Ice	Troubleshooting	NG Tubes
Sitz	Wound Care	NG Tube Insertion
Restraints	Sterile	
Medications	Wet to Dry	
Oral	Irrigation	
SL	Packing	
Topical	Drains:	
Rectal	Hemovac	
Vaginal	JP	
Eye	Penrose	
Ear		
Inhalers		

