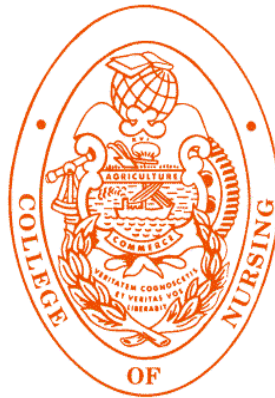


THE UNIVERSITY of
TENNESSEE 
HEALTH SCIENCE CENTER
COLLEGE OF NURSING



DOCTOR OF NURSING PRACTICE PROGRAM STUDENT, PRECEPTOR, &
FACULTY MANUAL FOR

NEONATAL NURSE PRACTITIONER (NNP)

Academic Year 2020-2021

Table of Contents

<i>The NNP Concentration of the DNP Program</i>	3
Purpose of the Manual	3
Legal Agreement Requirements	3
Site Approval	3
<i>Current DNP NNP Faculty</i>	4
<i>DNP Program Administration</i>	4
<i>DNP Program Staff</i>	4
<i>Expectations for DNP NNP Students</i>	5
Student Responsibilities for Clinical Experiences.....	5
Scheduling of Clinical Experiences.....	5
Professional Dress and Behavior.....	6
Preparation for Clinical Experiences	6
<i>Expectations of Preceptor and Volunteer Faculty</i>	7
Important Aspects of the Student and Preceptor Relationship	7
Preceptors Can Expect Students To:	7
Preceptors Can Expect Faculty To:.....	7
<i>Preceptors who wish to be Appointed Volunteer Faculty</i>	8
<i>Expectations of UTHSC DNP NNP Faculty</i>	8
<i>Appendix</i>	9
College of Nursing Forms for NNP Concentration	9
<i>Student-Preceptor-Faculty Agreement</i>	10
<i>Clinical Grading Rubric – Observational / Minimal Hand-On Experiences</i>	13
<i>NNP Student Evaluation Tool</i>	14
<i>Student Evaluation of Clinical Site and Preceptor</i>	18
<i>Faculty Evaluation of Clinical Site and Preceptor</i>	19

The NNP Concentration of the DNP Program

Welcome to the Neonatal Nurse Practitioner (NNP) Concentration of the Doctor of Nursing Practice (DNP) Program. This is one of seven different advanced practice concentrations preparing students for careers as the highest level of clinical practice. The College of Nursing admitted its first nurse practitioner students in the summer of 1973. The NNP Concentration began in the 1980's. In 1999, the College began the clinical doctoral program and transitioned the advanced practice Master's programs to the DNP shortly thereafter.

This program prepares NNP graduates with specialized knowledge and skills to provide care for premature and critically ill newborns through the first two years of life. Coursework and supervised clinical experiences assist students in developing expertise in assessment, diagnosis, and management of acute and chronic illnesses in these children across healthcare settings.

Health promotion and development, family support, interprofessional collaborations, and evidence-based practice are emphasized throughout the program. Graduates are eligible to take the national certification examinations for Neonatal Nurse Practitioners. Graduates are expected to contribute to the development of policies and practice models that promote evidence-based care for neonates and their families.

Purpose of the Manual

The purpose of this manual is to acquaint students, preceptors, and faculty to some of the elements composing the clinical education of DNP NNP students. Occasionally, there are program changes that take place over the school year. Faculty will keep you apprised of any changes via email, the official method of communication for UTHSC. Please contact faculty if you have any questions not answered by this guide.

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 Medatrax, but some may be difficult to find as the name of the organization may have changed since the initial approval. The Clinical Coordinator can assist in identifying approved site.

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Expectations for DNP NNP Students

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

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

Your faculty with the assistance of the Clinical Coordinator 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 prior to you beginning to observe or to see patients at the site.

Student Responsibilities for Clinical Experiences

- Review clinical course outcomes.
- You are responsible for knowing what you are to be learning and how your learning progresses in the course.
- 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.
- Provide the preceptor with an understanding of your level, ability, and personality.
- 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 do not 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 Medatrax (the approved online program for tracking clinical experiences).
- Schedule a mid-term and final clinical evaluation with the preceptor and your faculty.

Professional Dress and Behavior

- As a representative of UTHSC College of Nursing, you must present yourself professionally.
 - In an observational clinic, dress professionally. 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.
 - When in the NICU, wear the green UT scrubs, clean, unwrinkled, and in good repair
- ALWAYS wear your UTHSC Student ID.
- Be respectful of preceptors, faculty, staff, patients, and their families.
- Express your appreciation to your preceptor(s) for their assistance. They are volunteers supporting your education goals.

Preparation for Clinical Experiences

- Learn something about the preceptor to acknowledge the preceptor's background and broaden your educational experience.
- Verify appropriate attire, location, and time, and any 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.
- **CPR Certification:** Students are responsible for maintaining current CPR certification, including NRP and PALS.
- Should the certification expire during the time the student is in the program, students have the professional responsibility to recertify to remain current.
- Clinical experiences are not permitted unless CPR (including NRP and PALS) certification is current.
- The dates of coverage for certification are to be entered into Verified Credentials.
- **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 extensive communication about immunizations and how to track them. Some clinical agencies may have additional requirements for immunization, but students will be informed of these requirements.

Expectations of Preceptor and Volunteer Faculty

1. Mentor and serve as a role model for the student.
2. Guide the student to meet the course outcomes.
3. Identify appropriate clinical encounters for the student.
4. Direct the use of accepted clinical guidelines and standards of care.
5. Tailor guidelines/standards to unique clinical situations.
6. Assist the student in the refinement of interpersonal skills with patients and colleagues.
7. Alert students and faculty of problem areas early for improvement.
8. Evaluate the achievement of the learning outcomes.
9. Provide the student with feedback.
10. Demonstrate high ethical standards.
11. Demonstrate respect for the student's faculty, curriculum, and program.
12. Demonstrate the ability to manage multiple variables while dealing with patient/family and colleague interactions

Important Aspects of the Student and Preceptor Relationship

- Supervise student in the clinical setting.
- Communicate with students and faculty if there is a problem in the clinical site.
 - Immediately report to the faculty any student behaviors threatening the safety of the patient or risk to the clinical site.
- Monitor and report student performance including at risk of not meeting standards.
- 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 preceptor 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 for making up time missed, if needed.
- Dress appropriately for the site and behave professionally at all times.

Preceptors Can Expect Faculty To:

- Provide course description, clinical outcomes, and the amount of time required.
- Provide information about the NNP program.
- Provide contact information for the 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 perform

Preceptors who wish to be Appointed Volunteer Faculty

All preceptors are to be appointed by the College of Nursing as a preceptor or volunteer faculty prior to accepting any students. This appointment provides recognition of the responsibilities of the preceptor and provides legal protections as well. All approved preceptors are listed in Medatrax.

The University of Tennessee recognizes the valuable contributions of people who give freely of their time and talents for the benefit of the University without compensation. The Tennessee legislature in the enactment of the Tennessee Claims Commission Act of 1984 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.

Preceptors who wish to be recommended as volunteer faculty should notify a faculty member who will facilitate this process.

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

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
- Discounted fees at the UTHSC Dental ClinExpectations of Faculty

Expectations of UTHSC DNP NNP Faculty

1. Verify appropriateness of clinical site and contractual agreements through first-hand knowledge of the clinical site through either an in-person or a virtual site visit.
2. Orient new preceptors to the preceptor role and College of Nursing educational expectations.
3. Review preceptor responsibilities with continuing preceptors related to course and level of the student.
4. Prepare students for clinical experience, including faculty-specific communication requirements.
Support students in the refinement of effective communication
5. Validate student qualifications for clinical practice.
6. Understand the legal liability of the preceptor role.
 - a. Monitor the use of clinical guidelines and standards of care
7. Work with the student and preceptor to ensure the learning outcomes are being met.
8. Encourage the student to focus on problem areas early to provide an opportunity to refine skills by the time practicum is completed.
9. Communicate with the preceptor regularly to monitor student's progress in the course.
10. Evaluate students through direct observation and preceptor feedback using proper forms.

Appendix

College of Nursing Forms for NNP Concentration

The College of Nursing uses several different forms as a part of the program. Copies of these forms used in the NNP Concentration are shown. Many of these forms are to be uploaded into Medatrax so that they are associated with the student.

Student-Preceptor-Faculty Agreement

Faculty Agreement to Clinical Preceptorship

NNP Student Evaluation Tool

Student Evaluation of Clinical Site and Preceptor

Faculty Evaluation of Clinical Site and Preceptor



UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER COLLEGE OF NURSING

Student-Preceptor-Faculty Agreement

Course # _____

Semester/Year: _____

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 follows:

The Affiliation period will be from _____ to _____. The student, _____, will be under the supervision of _____, acting as preceptor.
(Preceptor Name)

Professor Dr. Amy Koehn, of the College of Nursing, serves as the liaison with your facility for the above course(s).

Preceptor Responsibilities:

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.
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-faculty-preceptor conferences and review of student clinical assignments.
13. Be readily available, e.g., telephone, pager 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 as needed.
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
Agreement to Clinical Preceptorship

University of Tennessee Health Science Center Student

_____ (Print Name) _____ (Signature) _____ (Date)

Preceptor/Clinical Agency

_____ (Print Name) _____ (Signature) _____ (Date)

University of Tennessee Health Science Center College of Nursing Clinical Faculty

_____ (Print Name) _____ (Signature) _____ (Date)

Site Name: _____

Site Address: _____

City, State, Zip _____

Location Phone # _____

Clinical Grading Rubric – Observational / Minimal Hand-On Experiences

Please indicate the level of the student's performance within the dimensions listed during the clinical experience.

Dimension	Beginning (1)	Developing (2)	Accomplished (3)	Exemplary (4)
Focused Observation	Confused by the clinical situation and the amount/ type of data; observation is not organized, and important data are missed.	Attempts to monitor a variety of subjective and objective data but is overwhelmed; focuses on the most obvious data, missing some important information	Regularly observes/ monitors both subjective and objective; most useful information is noticed, may miss the subtlest signs	Focuses observation appropriately; regularly observes and monitors objective and subjective data to uncover useful information
Information Seeking	Is ineffective in seeking information; has difficulty interacting with the client and family; fails to collect important subjective data	Makes limited efforts to seek additional information from the client/family; often seems to pursue unrelated information	Actively seeks subjective information about the client's situation from the client and family to support planning interventions.	Assertively seeks information thru careful collection useful subjective data from observing the client and from interacting with the client and family
Prioritizing data	Has difficulty focusing and appears not to know which data are most important to the diagnosis.	Makes an effort to prioritize data and focus on the most important, but also attends to less relevant/useful data	In general focuses on the most important data and seeks further relevant information, but also may try to attend to less pertinent data	Focuses on the most relevant and important data useful for explaining the client's condition
Making Senses of Data	Has difficulty making sense of data even in simple of familiar or common situations; requiring assistance both in diagnosing the problem and in developing an intervention	Can compare the client's data patterns with those known and to develop intervention plans in simple or common situations; however, has difficulty with moderately difficult situations; appropriately requires advice or assistance.	In most situations, interprets the client's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; appropriately seeks the guidance of a more experienced nurse	When facing Complex or confusing data, can (1) note and make sense of patterns in the client's data, (2) compare these with known patterns, and (3) develop plans for interventions that can be justified in terms of their likelihood of success
Clear Communication with Interdisciplinary team (IDT)	Has difficulty communicating w/ IDT members; directions are unclear or contradictory	Shows some communication ability communication with IDT only partly successful; displays caring but not competence	Communicates well with IDT members in most situation; explains and gives clear directions to; could be more effective in establishing rapport	Communicates effectively with IDT members; directs and involves team members, explaining and giving directions; checks for understanding
Self-Analysis and Commitment to Improvement	Even prompted evaluations are brief, cursory, and not used to improve performance; Appears uninterested in improving performance or unable to do so; rarely reflective	Even when prompted, briefly verbalizes the most obvious evaluations; has difficulty imagining alternative choices; Demonstrates awareness of the need for ongoing improvement and makes some effort	Evaluates personal clinical performance; Demonstrates a desire to improve: reflects on and evaluates experiences; identifies strengths and weaknesses;	Independently analyzes personal performance; Demonstrates commitment to ongoing improvement: reflects on and critically evaluates nursing experiences

Additional Comments:

Student Signature:

Date:

Preceptor Signature:

Date:

Please return to Dr. Amy Koehn @ akoehn3@uthsc.edu
Or by Fax to 901-448-1762

NNP Student Evaluation Tool

Student name: _____
 Preceptor name: _____
 Site: _____
 Course name _____
 Date/Term: _____ Fall Spring Summer
 Faculty completing evaluation: _____

DIRECTIONS: Please evaluate the Student NNP on each competency according to the following key:

KEY TO SCORING EVALUATION

U	Unsatisfactory
N	NOVICE - demonstrates a basic understanding of normal and abnormal; identifies risks/benefits and potential implications of clinical situations; requires direct supervision of procedures and needs assistance with problem solving.
AB	ADVANCED BEGINNER – demonstrates sound knowledge base and able to identify patterns and relationships; able to incorporate data and begin to develop appropriate plans for patients; shows beginning technical competence although success with procedures may be inconsistent.
C	COMPETENT – demonstrates an expanding knowledge base with the ability to apply theoretical content; formulates reasonable plans which can be defended with scientific rationale; able to independently differentiate, prioritize, assess, and plan for common situations; seeks appropriate consultation and assistance for atypical situations; demonstrates mastery of technical skills with sound technique and consistent success.
P	PROFICIENT - demonstrates extensive knowledge base with analytical skills to process and integrate new knowledge; applies scientific principles to specific clinical situations and integrates multi-system implications; provides anticipatory surveillance and management of predictable events; demonstrates technical procedures proficiently under stress and/or in unusual circumstances; functions as a member of the team who is organized, focused on salient issues, and aware of personal limitations.
E	EXPERT - demonstrates an outstanding knowledge base with extensive knowledge of current research trends; able to constructively critique scientific knowledge and apply as appropriate to his/her own clinical practice; demonstrates technical expertise and performance; able to balance multiple demands and complex situations in a professional manner which facilitates communication and problem resolution
NO	Not observed

STUDENT NNP EVALUATION TOOL

PROFESSIONAL ROLE COMPETENCIES

Date__ Semester_____

COMPETENCY	SATISFACTORY						
	U	N	AB	C	P	E	NO
1. Applies current scientific knowledge to initiate change and improve care for newborn/infants and their families.							
2. Identifies potential areas for nursing research in clinical practice.							
3. Demonstrates understanding of the research process.							
4. Articulates knowledge of public policies that affect advanced practice nursing.							
5. Participates in professional activities related to advanced practice nursing.							
6. Incorporates professional and legal standards of care into practice							
7. Participates in the ethical decision-making process in collaboration with families and other health care professionals							
8. Identifies and clarifies the role of neonatal nurse practitioner to the infant's family, other health care professionals and the community							
9. Establishes and maintains a collaborative relationship with health care colleagues.							
10. Demonstrates knowledge regarding legislative and health care policies that affect the care of newborns/infants and their families.							
11. Participates in the continuous quality improvement process for the care of infants and families							
12. Expands knowledge base & maintains clinical competency through continuing education activities and clinical practice.							
13. Participates in self- and peer-evaluation to improve the quality of care provided to infants and families							
14. Advocates for infants and families							

STUDENT NNP EVALUATION TOOL

PROFESSIONAL PRACTICE COMPETENCIES

COMPETENCY	SATISFACTORY						
	U	N	AB	C	P	E	NO
15. Applies appropriate theories from nursing and related disciplines to provide quality care to infants and families.							
16. Develops a comprehensive database that includes pertinent history; diagnostic tests; and physical, behavioral, and developmental assessments							
17. Assesses family adaptation, coping skills, and resources and develops an appropriate plan of care							
18. Selects and interprets diagnostic tests and procedures							
19. Relates assessment findings to underlying pathology or physiologic changes							
20. Establishes differential diagnoses based on the assessment data							
21. Implements a comprehensive, multidisciplinary plan of care that incorporates cultural, ethnic, and developmental variations							
22. Establishes appropriate priorities of care							
23. Plans, implements and evaluates pharmacological therapies							
24. Performs routine diagnostic and therapeutic procedures according to established protocol and current standards for neonatal nurse practitioner practice							
25. Initiates and performs measures necessary to resuscitate and stabilize a compromised infant							
26. Evaluates results of interventions using accepted outcome criteria and revises plan accordingly							
27. Communicates with family members regarding the infant's health care status and needs							
28. Consults with other health care providers and agencies in providing care to infants and families							
29. Initiates referrals based on needs of infants and families							
30. Assesses educational needs of the family and implements a culturally sensitive teaching plan							

COMPETENCY	SATISFACTORY						
	U	N	AB	C	P	E	NO
31. Presents and documents the database, impression and plan of care							
32. Participates in the systematic review of patient records, protocols, treatment plans, and outcomes to determine their effectiveness in meeting established standards of care							
33. Provides anticipatory guidance to families regarding infant growth and development, physical and social needs and strategies for health development							
34. Participates in the development, review, and evaluation of neonatal nurse practitioner protocols							
35. Collaborates with the family and multidisciplinary health care team in discharge planning and ongoing management of infants in the primary care setting							

CLINICAL HOURS _____

Semester _____

COMMENTS:

Signature of NNP Preceptor/Date

Signature of UTHSC CON Faculty/Date

Signature of NNP Student/

Student Evaluation of Clinical Site and Preceptor Neonatal Nurse Practitioner

Student: _____ Preceptor _____

Name of Course _____ Date of Evaluation _____

Clinical Site _____ Year/Term _____

Directions: Mark the rating that best represents the evaluation of the site and preceptor.

1 – never 2 – rarely 3 – sometimes 4 – usually 5 – always

INVOLVEMENT/RECEPTIVITY/COMPETENCE	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 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** **NO**

Student Signature



**Faculty Evaluation of Clinical Site and Preceptor
Neonatal Nurse Practitioner**

Student: _____ Preceptor _____
 Name of Course _____ Date of Evaluation _____
 Clinical Site _____ Year/Term _____

Directions: Mark the rating that best represents the evaluation of the site and preceptor.
 1 – never 2 – rarely 3 – sometimes 4 – usually 5 – always

INVOLVEMENT/RECEPTIVITY/COMPETENCE	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					
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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 NO

Signature of Faculty