

# Dwight Schar College of Nursing and Health Sciences

Doctorate of Nursing Practice Clinical and Residency Handbook 2020-2021

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#### **Introduction to clinical education:**

Clinical experiences for the DNP student support and enhance didactic course work. Each student completes 1000 hours of clinical experience by graduation. The 1000 hours, include 600 hours of clinical hours for the FNP or HLS track and 400 hours of residency. The FNP or HSL track will have specific guidelines for the clinical experiences. The residency hours introduce the advanced practice role, add specialty experiences and scholarly project work.

# Additional Health Requirements for Practicum/Clinical Engagement Experiences

DNP nursing students enrolled in a course requiring engagement in a health care setting (with or with-out client contact) are responsible for investigating and complying with the health/clinical requirements of the respective health care agency.

# **Drug Screening and Background Check Requirements**

DNP Students will complete the initial drug screening prior to the clinical coursework. All drug screenings will be performed by the agency approved by the Nursing Department. Refusal to meet the drug screen requirement will cause the student to be dismissed from the Nursing Program. A student who has been denied clinical placement by the Nursing Department based on the results of a drug screen may appeal the decision to the CONHS dean.

Criminal background inquiries will take place prior to clinical experiences. All background checks will be performed by the agency approved by the Nursing Department. The Nursing Department reserves the right to dismiss any student based on the results of the inquiry, regardless of felony or misdemeanor convictions. A student who has been denied clinical placement by the Nursing Department based on the results of a criminal background check may discuss the decision with the Dean of the College of Nursing and Health Sciences. If an affiliate agency in which a student is seeking assignment requires a more extensive check than completed, the student must meet that agency's requirement for placement in that agency at the student's expense.

# Communicable & Non-communicable Illnesses

The College of Nursing and Health Sciences will maintain an environment that ensures the provision of safe, quality patient care and is also supportive of the well-being of students. Faculty and students will adhere to the Center for Disease Control (CDC) and Prevention Guidelines for work restrictions when exhibiting signs and/or symptoms or for post exposure follow-up of certain communicable diseases.

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6153a1.htm?s\_cid=mm6153a1\_w

The Nursing Department will maintain the confidentiality of all information related to student health. No specific information concerning diagnosis shall be provided to any persons including college administrators, faculty, and professional staff other than the Dean of the College of Nursing and Health Sciences without the expressed written consent of the student. No information can be released to another person, agency, insurer or institution without the prior written consent of the student involved.

# **CPR** Certification

All students enrolled in clinical coursework must be certified in American Heart Association (AHA) cardiopulmonary resuscitation (CPR). The required course is the AHA Basic Life Support for Healthcare Providers and is renewed every two years according to the expiration date found on the card issued to students. It is the student's responsibility to provide a current certification copy that is submitted through Typhon by the date due. Failure to maintain current certification will result in prohibition of clinical experiences which could lead to failure/dismissal from the Nursing Program.

# **HIPAA Compliance**

In compliance with Federal law on the Health Insurance Portability and Accountability Act of 1996 (HIPAA), all students enrolled in a course requiring engagement in a health care setting are required to complete HIPAA training prior to the start of the course and *every year* following initial training. This Act was instituted to provide health insurance portability for individuals, to protect the privacy and security of patient health information, and to eradicate fraud and abuse and applies to all healthcare providers.

Breach of patient confidentiality will constitute grounds for dismissal from the Nursing Program and re-admittance will not be considered. Students are required to adhere to the Health Insurance Portability and Accountability Act (HIPAA) in all situations including, but not limited to: case discussion, consultation, examination and treatment. Confidentiality may be overridden when the life or safety of the patient, an innocent third party, or the public as a whole is endangered.

A HIPAA training module is available online *in the online learning platform*.

Students who have completed HIPAA training elsewhere within the past year may submit evidence of this training in lieu of completing the Nursing Department HIPAA program. Students must submit evidence of HIPAA training to the Program Coordinator prior to enrollment of a course requiring engagement in a health care setting and upon retraining.

# **Professional Liability Insurance**

All nursing students enrolled in a course requiring clinical learning activities\* as part of their educational requirements with Ashland University Dwight Schar College of Nursing and Health Sciences are provided professional liability insurance in the amount of \$1,000,000/\$5,000,000.

\*Clinical learning/field experience is defined as a planned activity occurring in a health care agency when the student is identified as an Ashland University CONHS student. The clinical learning/field experience may or may not include contact with patients.

# **Attire in Clinical Settings**

Students are to follow the dress code specific for the site at which they are completing clinical hours. ID badges are purchased through the bookstore. These will include the students name, program track, and Ashland University logo. The student ID badge is to be worn at all times at the clinical site.-

Students are expected to be well groomed and in neat, clean attire at all times. Body piercing

jewelry is to be worn in the earlobes only and is limited to one stud earring per ear lobe; visible tattoos are to be covered. Clothes should fit properly so as to be professional and appropriate. Only closed toe shoes may be worn.

# **Record of Clinical Experiences**

Students will maintain records of clinical experiences through the Typhon Group Health Care Solutions<sup>TM</sup> tracking system within the Clinical Encounter Tracking system. Students will record clinical hours, their reflective review journal, and individual patient direct care experiences. Specific details on the Typhon Group Health Care Solutions<sup>TM</sup> tracking system will be provided within each clinical course.

# **Student Required Health Forms / Immunizations:**

During Orientation Week, students are to provide a record of immunizations verified and signed by the student's healthcare provider. Students are fully responsible for tracking immunization due dates and obtaining and submitting immunization records when due. Acceptable health records for immunizations include copies of a medical record from a healthcare provider/agency with the student name, immunization given and the date administered. Contact information for the healthcare provider/agency should be evident. Immunizations are not provided by the Nursing Department. Students should contact the health care provider of their choice to meet this requirement. The student assumes full financial responsibility for the cost of required immunizations or testing.

Proof of health insurance is a requirement for all nursing students. Documentation must be submitted through- the electronic tracking system (Typhon).

# **Required Immunizations:**

Chicken Pox (Varicella) - Immunity either by a positive Varicella antibody titer or two doses of the vaccine to demonstrate immunity.

MMR (Measles, Mumps and Rubella) - If born before 1957, provide documentation of a history of measles, mumps, rubella or rubeola, a titer or vaccination. Those born during or after 1957 must also meet this requirement, either by having been vaccinated with two doses against the three diseases (either as the combined vaccine MMR or individual vaccination against the three diseases) or show laboratory evidence of immunity to all three diseases.

Tetanus / Diphtheria/Pertussis (Tdap) - Completion of the primary childhood series of doses as well as a booster within the last ten years. A booster received more than ten years ago is considered expired and will need to be repeated.

Hepatitis B Vaccine - Completion of the series of three vaccinations for Hepatitis B by the beginning of clinical coursework or at the time designated by the Nursing Program. Students

without verification of vaccine status are required to have an antibody titer to demonstrate immunity- or receive the vaccination series.

*Influenza Vaccine* - Annual vaccination, at time designated (October – April)

Meningitis is recommended, not required.

Other – Any agency specific immunizations, as designated by clinical agency(s)

# TUBERCULIN SKIN TEST or Interferon Gamma Release Assay (IGRA)

Initially a Two-step tuberculin skin test (TST) using purified protein derivative (PPD) or Interferon Gamma Release Assay (IGRA) is required at the designated time. *Note: If the student is a healthcare worker with documentation of negative yearly TST for the last two consecutive years, then only a one step is required.* 

Types of Tuberculosis (TB) Testing:

1. Tuberculin Skin Testing (TST)- Mantoux method

a. Initial testing is to be two-step TST

Two-step TB-how it works:

General process Source: <a href="http://www.pacificu.edu/sites/default/files/documents/2-step%20TB%20Testing%20Info2.pdf">http://www.pacificu.edu/sites/default/files/documents/2-step%20TB%20Testing%20Info2.pdf</a>

Visit 1, Day 1: PPD antigen is applied under the skin

**Visit 2, Day 3:** PPD test is read (within 48-72 hrs of placement) or the process will be restarted.

If positive, it indicates past or present exposure to tuberculosis. A chest x-ray (CXR) and/or IGRA testing will be needed through their provider.

**Visit 3, Day 7-21:** a second PPD skin test is applied (if the first result was negative)

**Visit 4**, 48-72 hours after placement: the second test is read or the process will be restarted.

A positive 2nd test indicates TB infection in the distant past.

Further evaluation by CXR and/or IGRA testing will be needed through their provider.

- b. If results are negative, a one-step TB to be done annually thereafter. See Visit 1 and Visit 2 under 1.a. for process.
- c.Pregnancy is not a reason to defer TST.

Verification of TST result is to include date placed, date read, and result indicated in actual millimeter of induration with positive/negative notation

All documentation for TST or from the healthcare provider's evaluation must be turned in to the Program Coordinator's Office by uploading to the electronic tracking system. This must include release or clearance to participate in clinicals if further evaluation was required.

Interferon Gamma Release Assays will be required annually thereafter for those individuals with a positive test skin test result.

- 2. Interferon Gamma Release Assay (IGRA, blood test) is recommended for: bacille Calmette-Guerin (BCG) Vaccine recipients or persons with a history of positive TST that should not have further TSTs placed.
  - a. Students with an equivocal or indeterminate result for IGRA testing will have repeat testing done.
    - i. The time between the first test and repeat testing will be determined by the healthcare provider.
    - ii. If the repeat test result is equivocal or indeterminate, the individual will be required to seek treatment from their provider and submit all documentation from the healthcare provider's recommendations/treatment decision to the Program Coordinator's Office by uploading to the electronic tracking system.
    - iii. This must include release or clearance to participate in clinicals
  - b. IGRA testing should not be ordered for 4 to 6 weeks after administration of live-virus vaccines if it is not drawn the same day as the live vaccine.
  - c.IGRA testing will be required annually.
  - d. All results and recommendations of the healthcare provider must be submitted to the Program Coordinator's office by uploading to the electronic tracking system.

# **Doctor of Nursing Practice Preceptor Guidelines**

The following guidelines apply to all students and settings. Specific exceptions may be granted at the discretion of course faculty on a case-by-case basis, as appropriate.

# **DNP Preceptor criteria-FNP**

According to the Report of the National Task Force on Quality Nurse Practitioner Education, a preceptor

- a. Has authorization by the appropriate state licensing entity to practice in his/her population-focused and/or specialty area.
- b. Can be an interdisciplinary mix which may provide the student with the best clinical experiences to meet program objectives and prepare the student for the NP role, population and full scope of practice.
- c. Is credentialed and licensed to practice in his/her area of practice
- d. Has educational preparation appropriate to his/her area of supervisory responsibility and at least one year of clinical experience.
- e. Is oriented to program/track requirements and expectations for oversight and evaluation of NP students.

# **DNP Preceptor criteria-HSL**

A quality preceptor

- a. Has authorization by the appropriate state licensing entity to practice in his/her population-focused and/or specialty area.
- b. Can be an interdisciplinary mix which may provide the student with the best clinical experiences to meet program objectives and prepare the student for the leadership role
- c. Is credentialed and/or licensed to practice in his/her area of leadership
- d. Has educational preparation appropriate to his/her area of supervisory responsibility and at least one year of clinical experience.
- e. Is oriented to program/track requirements and expectations for oversight and evaluation of HSL students.

# **DNP Student Responsibilities**

- 1. Maintaining registered nurse licensure in state of practice and practicum.
- 2. Initiating contact with the potential preceptor.
- 3. Begin registering your information in Typhon
- 4. Create start and end events in your Typhon Schedule as soon as you get approval from your faculty.
- 5. Providing the preceptor with the course syllabus and other pertinent information.
- 6. Completing the student preceptor agreement and having it approved by the preceptor and faculty.
- 7. Completing all onboarding processes and adhering to all policies required at the designated facilities.
- 8. Logging the time spent with each preceptor under *My Time Logs* and each patient you see under *New Case Log*.
- 9. As necessary, assisting the faculty with arranging evaluation/feedback sessions with preceptors.
- 10. Communicating their needs to the preceptor, and actively participating in the goal attainment and competencies development process.
- 11. Completing the Evaluation of Preceptor form.
- 12. Meeting the requirements for clinical experiences as outlined in the course syllabus, catalog, and student handbook.

# **DNP Faculty Responsibilities**

- 1. Approving potential preceptors and clinical sites based on the outcomes of the practicum course.
- 2. Visiting the clinical site at least once per semester. This meeting may occur via virtual meeting after for one of the two visits.
- 3. Clarifying student, preceptor, faculty, and agency roles in the student learning process.
- 4. Monitoring the student's progress through portfolio entries on a weekly basis and providing feedback to the student.
- 5. Being available to both the preceptor and student should questions or problems arise.

# **Practicum Setting Policy**

- 1. Practicum settings must be located in an appropriated accredited health care agency.
- 2. Students may not do their practicum in the same physical setting in which they are currently employed. However, MS/MSN to DNP students may complete Residency Hours in their place of employment as long as it is outside of their scheduled work hours.
- 3. Students may do their practicum in separate physical/clinical setting if they are employed by a large health care system composed of multiple settings.
- 4. Students may not be paid for clinical hours as part of their regular working hours.

The student and preceptor should discuss the objectives for the Practicum course. This activity often clarifies the expectations of both parties and provides the opportunity for the student and preceptor to discuss, negotiate, and outline explicit learning outcomes. These outcomes will be based on the particular focus of the course as well as the student's individual place in the learning process and career interests.

# **Preceptor Selection and Arrangements for Clinical Experiences**

Students should be aware that approval of the practicum site and preceptor much occur in the semester prior to the scheduled clinical experience. This will provide the Program Director and/or the Course Faculty time to approve the practicum site, make arrangements for the clinical affiliation agreement, and approve the preceptor prior to the beginning of the semester where the clinical hours are required. Once approval of the Practicum Site and Preceptor are provided to the student, the faculty, student, and preceptor responsibilities listed below will be followed.

# CLINICAL/RESIDENCY CHECKLIST

Completed	Items Required for Clinical and Resid	lency			
	Prior to the start of the semester/clinical hours:				
Initial approval completed by track coordinator (Julie Lehrer or Val Burn					
	Affiliation agreement requested from Clinical coordinator				
	Clinical coordinator completion of affiliation agreement				
	Preceptor paperwork submitted to DNP director, course assistant	faculty, administrative			
	Personal Typhon information updated (Health/Immuniza HIPAA)	ations, license, BLS,			
	Annual handbook acknowledgment signed				
	Preceptor loaded in Typhon				
	Clinical/Residency schedule submitted to clinical faculty	and clinical instructor			
	During clinical semester:				
	Updates to clinical hours as needed				
	Typhon time logs completed within ONE WEEK of clin	ical experience			
	Mid-term evaluation from preceptor	<u> </u>			
	Mid-term evaluation from clinical instructor				
	Mid-term evaluation from student				
	Any SOAP notes, reflective reviews as required by cours	se			
	For successful completion of the clinical hours:				
	Final evaluation from preceptor				
	Final evaluation from clinical instructor				
	Final evaluation from student				
	Evaluation of clinical site				
	Any SOAP notes, reflective reviews as required by course				
	Correct number of clinical hours for the semester				
	Student Signature	Date			
	Clinical Instructor Signature	Date			
	Course Faculty Signature	Date			
Course Num	ber, Name, and Semester/YR:				
	Clinical Hours:				

In order to be satisfactory in the clinical portion of a course or residency, you must complete each of these items. The check-list is to be filled in, and signed by the students and clinical instructor prior to grade submission.

# **Initial Preceptor Approval Sheet**

Student name:	
Sequence of events for preceptor approval  One semester prior to the clinical experience, students will submit to the proinitial preceptor request. This will be forwarded to the faculty for the cours and be signed off by the course faculty and DNP track director and DNP proapproval has been received, the student may notify the clinical coordinator tagreements.	e that is requested ogram director. After
NUR Course:       9310       9321       9330       9341       9576       9576       9582       9581       9830       9840       9831	9578
Semester / Year:	
Scholarly project title: (If taking a residency course):	
Preceptor Name/Credentials/Title:	
Employer and Address of preceptor employment:	
Number of hours scheduled to be completed:	
Brief description of requested preceptor and location of clinical site related taking.	to the course you are
Student Signature	Date
Course Faculty Signature	Date

# **Doctor of Nursing Practice Program Preceptor Credential Information**

Course Number						
Name	Position					
Employer Name	yer Name Email					
Employer Address						
Home Address						
Work Phone H	Home/Cell Phone					
Professional Education						
Educational Institution	Degree/Certificate	Date Granted				
Professional Credentials						
State License #						
State COA #						
State CTP or CTPE #						
National Certifying Association						
(Please attach a copy of your current certification.)						
National Certification #						
Years and months of practice in the specialty						
Years and months of practice with current employer						
Please circle one: Part time position	Full time position					
	,					
Preceptor signature	//	Date				

# **Doctor of Nursing Practice Student Evaluation of Preceptor and Clinical Site**

Student F	ent Preceptor					
Setting	Dates (from-to)					
Please respond to the following statements concerning y	our prec	eptor(s):				
	Not at all	Rarely	Some- times	Mostly	Always	Does not Apply
Demonstrated a commitment to my education						710019
Fostered my own decision making skills						
Made me feel welcome at the clinical site						
Was available to me						
Interacted with me professionally						
Gave me feedback in a positive manner						
Gave me the opportunity to see patients						
A positive example of the advanced practice role						
Collaborated well with the health care team						
Demonstrated effective rapport with clients						
Encouraged input concerning drug choices, dosages,						
and relevant lab work						
Explored alternative mgmt. of client problems						
Explored differential diagnoses						
Reviewed my charting and documentation						
Facilitated increasing responsibility as semester						
progressed						
Suggested alternative experiences						
The clinical site was appropriate for my learning needs						
The clinical site should be used for future graduate						
nursing students						
Mid-semester End of Semester Hours	s Complet	ted Cou	rse Numb	oer		
Student Signature				D	ate	_
I give permission for this evaluation to be shared with I do not wish to share this evaluation with my precept		ceptor				
Course Faculty Signature			_	D	ate	_

# **Doctor of Nursing Practice Preceptor Evaluation of Student Clinical Performance**

Student	Preceptor			
Setting				
Rating Scale	4 = Meets outcome in a manner which surpasses the level of development. 3 = Consistently meets outcomes in a comprehensive accurat 2 = Meets outcomes safely and adequately, is usually thorough 1 = Does not meet outcome adequately at this time N/A = None	student at this level of		
Student C	Clinical Outcomes	Rating	Comments	
	Utilizes relevant theories from nursing and other disciplines			
	interventions to individuals.			
	Delivers behavioral health care to individuals who are			
	culturally and ethnically diverse.			
	Promotes decision-making options for clients			
	Demonstrates principles of accountability and responsibility			
	through the application of professional standards and ethical			
	principles.			
	Integrates concepts of health promotion and disease			
	prevention in holistic assessments.			
6.	Demonstrates knowledge of pathophysiology, diagnostics,			
	and medical treatments.			
7.	Collaborates effectively with patient/client and other			
	healthcare professionals.			
8.	Identifies and describes problems, etiologies, conditions, and			
	context in which problems occur through research-based			
	tools and techniques.			
9.	Differentiates between normal and abnormal symptoms,			
	functional problems, or risk behavior			
10.	Identifies patient/client problems that would benefit from			
	increased research.			
11.	Develops nursing interventions designed to meet unmet			
	needs and are uniquely suited to the client.			
12.	Evaluates therapeutic and preventive interventions			
13.	Applies theoretical, managerial, and leadership skills in clinical			
	practice.			
	Demonstrates professional accountability			
15.	Demonstrates professionalism in communication.			
☐ Mid	-semester	mpleted	Course Num	ber
	Preceptor Signature		-	Date
	Student Signature		-	Date
	Faculty Signature		-	 Date

<sup>\*</sup>Please use back or an attachment for additional comments.

# **Course Descriptions**

#### FNP TRACK CLINICAL COURSES

# **NUR 9310-Primary Care I**

This course is the first primary care course for the family nurse practitioner track. It is recommended that a family physician or family nurse practitioner is obtained for the 120 hours that are required in this course. Forty hours of clinical hours will be obtained at the local federally qualified health center.

# **NUR 9321\_Primary Care II**

This course will focus on Woman's health and Pediatrics. There are 120 hours. You will need to have 60 hours of Woman's Health and 60 hours of Pediatrics at the completion of the program. It is best if you can locate 2 preceptors this semester to complete these. You will complete 40 hours at the local federally qualified health center.

# **NUR 9330-Primary Care III**

This course will focus on the geriatric patient. While working in a family practice setting is fine. You can also consider a long term care facility. There will be 180 clinical hours this semester and 40 of these will be completed at the local federally qualified health center.

# **NUR 9341-Primary Care IV**

This is acute care. The hospital or an urgent care are areas frequently used to complete clinical hours for this course, however, same day visits in a physician's office is also appropriate. You will complete 180 hours this semester with 40 hours at the local federally qualified health center.

# HSL TRACK CLINICAL COURSES

# **NUR 9576-The Healthcare Organization**

This course focuses on a comprehensive overview of the American health care system the student will develop a global understanding of health care management and leadership. Preceptors should be CEO, CNO, director, unit manager, or public health leaders/managers.

# NUR 9578-Managing the Healthcare Organization-The Financial Perspective

This course provides strategies from managerial finance and economics which are applied to financial and operational problems in the health care industry. Preceptors can include CEO, CNO, CFO, director, unit manager or public health leaders/managers.

# NUR 9581-Healthcare Organization: Leadership, Management, and Communication

This course examines leadership styles, creation of healthy work environment, human capital management, communication and innovative idea development. Preceptors can include CNO, director, unit manager, or Human Resources managers.

# **NUR9582-Improving the Healthcare Organization**

This course focuses on the application of business analytics, informatics, performance and quality improvement in health care. Preceptors can include CEO, CNO, Quality Improvement directors, Care Coordination managers or public health leaders/managers.

# **Course Descriptions**

# **RESIDENCY COURSES**

# NUR 9810, 9820 and 9831

Residency hours will vary between the tracks. Residency hours are an opportunity to work on your project, but it must be the enactment of the project and not the research for the project. Some specifics will be included here. If you have questions, please contact the director of your track.

A couple specifics for the FNP track is for the first 2 residency courses. NUR 9810 occurring with NUR 9220 and 9221 (Pharmacology) can include 8-12 hours with a pharmacist. These would be indirect hours. The rest of the time is to introduce you to the role of the NP. It is predominantly observation hours. NUR 9810 that occurs with NUR 9230 and 9231 (Advanced Health Assessment) is 100 hours that is to focus on beginning to complete history and physicals for patients. Looking at family practice offices would be best.

# Completion of Clinical Hours

When all clinical hours have been completed the final clinical hours form is to be submitted by the student. This can be completed each semester and kept, but all hours are also recorded in Typhon.

# **DNP Clinical Final Completion Form** Student Name (printed) Date BSN-DNP hours completed \_\_\_\_\_ MSN-DNP hours completed \_\_\_\_\_ Course Number Hours required Hours completed Running total **FNP** track NUR 9310 120 NUR 9321 120 NUR 9330 180 NUR 9341 180 **HSL** track NUR 9576 180 NUR 9578 120 180 NUR 9582 NUR 9581 120 **Residency hours** NUR 9830 200 NUR 9840 200 NUR 9831 50-400 Total 1000 Student Signature Date **DNP Track Director Signature** Date

**DNP Program Director Signature** 

Date