

# **Preceptor Manual**

2023-2024

JSCC NUR 221 Faculty Spring 2024



## JEFFERSON STATE COMMUNITY COLLEGE NURSING EDUCATION PROGRAM

Dear Preceptor,

The faculty of the Nursing Education Program of Jefferson State Community College wants to thank you for devoting your expertise, time, and patience to serve as a preceptor to our nursing students.

Preceptors are vital in assisting our students in making the transition from the student role to the staff nurse role with minimal difficulty. Preceptors provide supervision so that students may obtain experience in practice settings and foster professional development of students in the roles of a registered nurse. As a role model to students, a preceptor has a direct impact on the quality of patient care.

This handbook is prepared to provide you with information about our nursing program, including our mission and philosophy, preceptorship requirements, NUR 221 course objectives, and evaluation of student progress. Please contact the program faculty any time should further information be needed.

We value your participation in the role of preceptor and commend you for your contribution to associate degree nursing education. Please share with us any comments or suggestions that you think could enhance this experience.

Sincerely,

Jefferson State Community College Nursing Education Program Faculty

# Faculty Contact Information

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#### Alabama Community College System Nursing Program Mission/Philosophy

**Mission** - The mission of the nursing programs of the Alabama Community College System is to prepare graduates to practice safe, competent, patient-centered care in an increasingly complex and rapidly changing health care system. We seek to provide full and equal access to opportunities for educational success to meet the community needs.

**Philosophy -** We believe that nursing is a dynamic profession, blending science with the use of evidence-based practice and clinical reasoning and the art of caring and compassion to provide quality, patient-centered care.

We believe learning is an interactive process in which faculty and students share responsibility to meet program outcomes. We believe in using educational methods that are current and supportive of students in the teaching and learning environment, with the presentation of information from simple to complex.

Nursing is guided by standards of practice and standards of professional performance. Standards reflect the values and priorities of the nursing profession. Therefore, we have integrated competencies from the Quality and Safety Education for Nurses (QSEN) and National League of Nursing (NLN) into our philosophy as part of our core values.

#### END OF PROGRAM STUDENT LEARNING OUTCOMES

**Competencies** – NLN competencies for nursing are central to the conceptual framework. The related QSEN competencies for graduate nurses define the knowledge, skills, and attitudes that the graduate nurse should possess to continuously improve the quality and safety of the healthcare systems within which they work. (QSEN)

**Human Flourishing-** Advocate for patients and families in ways that promote their selfdetermination, integrity, and ongoing growth as human beings. (NLN def)

**Patient-Centered Care** – Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs. (QSEN def)

**Nursing Judgment-** Make judgments in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and that promote the health of patient within the family and community context. (NLN def)

**Safety** – Minimizes risk of harm to patients and providers through both system effectiveness and individual performance. (QSEN def)

**Informatics** – Use information and technology to communicate, manage knowledge, mitigate error, and support decision making. (QSEN def)

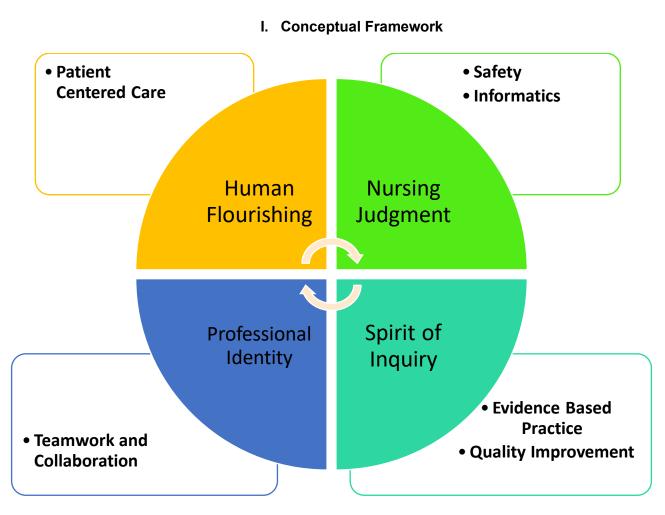
**Professional Identity-** Implement one's role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context. (NLN def)

**Teamwork and Collaboration** – Function effectively within nursing and interprofessional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care. (QSEN def)

**Spirit of Inquiry-** Examine the evidence that underlies clinical nursing practice to challenge the status quo, questions underlying assumptions, and offer new insights to improve the quality of care for patients, families, and communities. (NLN def)

**Evidence-based practice** – Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care. (QSEN def)

**Quality Improvement** – Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems. (QSEN def)



The conceptual framework derived from the philosophy forms a basis for the organization and structure of the nursing curriculum. This framework serves as a guide for nursing instruction in the attainment of student learning outcomes.

The framework consists of concepts that encompass the qualities of a successful graduate nurse. NLN competencies were chosen because they specifically define the competencies of the graduate Associate Degree Nurse. QSEN competencies reflect current contemporary practice. Concepts interlace NLN and QSEN competencies to achieve the goal of providing graduate nurses with the tools needed to provide holistic care in an ever-changing health care delivery system. Each competency includes knowledge, skills, and attitudes to serve as a basis for consistent performance expectations across academic and practice settings.

### ACCS NURSING CONCEPT CURRICULUM BASED ON NCLEX TEST PLAN (2016)

Health Promotion & Maintenance 9%	Psychosocial 9%	Physiological 50%
Health Promotion & Maintenance	Psychosocial 9%	Basic Care and Comfort 9%
Health Promotion & Waintenance         9%         Health Promotion         Health Assessment and Screening         Self-Care         Health Promotion and Disease         Prevention         Teaching/Learning         Lifestyle Choices         High Risk Behaviors         Growth & Development         Aging Process         Ante/Intra/Postpartum and Newborn         Care         Developmental Stages and         Transitions	Psychosocial Well-being Mental Health Concepts Abuse/Neglect Behavioral Interventions Chemical & Other Dependencies and Substance Use Disorder Coping Mechanisms Crisis Intervention Cultural Awareness and Cultural Influences End of Life Organ Donation Family Dynamics Grief & Loss Religious and Spiritual Influences Stress Management Support Systems Therapeutic Communication and Environment	Basic Care and Comfort 9%         Functional Ability         Assistive Devices         Elimination         Mobility and Immobility         Non-Pharmacological Comfort         Interventions         Nutrition and Oral Hydration         Personal Hygiene         Rest & Sleep         Sensory/Perceptual
	Maintenance 9% Health Promotion & Maintenance 9% Health Promotion Health Assessment and Screening Self-Care Health Promotion and Disease Prevention Teaching/Learning Lifestyle Choices High Risk Behaviors Growth & Development Aging Process Ante/Intra/Postpartum and Newborn Care Developmental Stages and	Maintenance9%Health Promotion & Maintenance9%Health Promotion9%Health PromotionPsychosocial 9%Health Assessment and Screening Self-CarePsychosocial Well-beingHealth Promotion and Disease PreventionMental Health ConceptsHealth Promotion and Disease PreventionBehavioral InterventionsTeaching/Learning Lifestyle Choices High Risk BehaviorsChemical & Other Dependencies and Substance Use DisorderGrowth & Development Care Developmental Stages and TransitionsCultural Awareness and Cultural Influences End of Life Organ Donation Family Dynamics Grief & Loss Religious and Spiritual Influences Stress Management Support Systems Therapeutic Communication and

Safety and Infection Control 12%	Pharmacological & Parenteral
Safety	Therapies 15%
Accident, Error, and Injury Prevention	Pharmacology
Ergonomics	Medication Administration
Handling Hazardous & Infectious Materials	Expected Actions and Outcomes
Home Safety	Adverse Effects, Contraindications, Side
Reporting of Incident, Event, Irregular	Effects, and Interactions
Occurrence, or Variance	Blood & Blood Products
Safe Use of Equipment	Central Venous Access
Use of Restraints and Safety Devices	Dosage Calculation
Emergency Response and Security Plan	Pharmacological Pain Management
Standard Precautions, Transmission-Based	Parenteral and Intravenous Therapies
Precautions, Surgical Asepsis	TPN
Immunity	
Inflammation	
Infection	
	Physiological Adaptation 14% &
	Reduction of Risk Potential 12%
	Gas Exchange
	Pathology/Alterations
	Hemodynamics
	Perfusion
	Pathology/Alterations
	Hemodynamics
	Cellular Regulation
	Pathology/Alterations
	Acid/Base
	Cancer/Tumors
	Fluid & Electrolyte
	Pathology/Alterations
	IV Therapy
	Medical Emergencies
	Pathology/Alterations
	r athology/Attendions

Meta-concepts are highlighted

#### Alabama Community College System Nursing Program Outcomes

1. Performance on Licensure Exam

At least 80% of all first-time test takers during the same time period will pass NCLEX-RN on 1<sup>st</sup> attempt.

2. Program Completion

Each program will determine the program completion rate based on characteristics of the program's student demographics. At least 35% of students will graduate from the nursing program within five semesters, 100% of plan of study beginning with the first required nursing course as delineated below:

AAS in Nursing – five semesters

3. Job Placement

At least 95% of graduates will be employed as an RN within 6-9 months of graduation.

#### Jefferson State Community College Nursing Education Program

#### STUDENT NURSE PRECEPTORSHIP POLICY and PROCEDURE

Approved by Curriculum Committee: 11/30/15 Effective: Spring 2016; Revised Summer 2023

#### POLICY:

Jefferson State Community College Nursing Education Program has as a requirement of the Associate of Science Degree in Nursing, a preceptorship experience in the 5<sup>th</sup> semester, NUR 221 Advanced Evidence-Based Clinical Reasoning. NUR 221 follows the course requirements set forth by The Alabama Community College System.

Preceptorship experiences are planned experiences in clinical agencies and require clearly defined objectives that match the student's needs. The 120-hour preceptorship provides the student with a faculty-planned and an RN preceptor supervised clinical experience with the goal of enabling the student to transition from the role of student to the role of professional nurse. Additionally, the preceptor experience allows students the opportunity to apply and synthesize knowledge in the clinical setting. The preceptor functions in a role that enhances the student's learning experiences and is not a substitute or replacement for nurse faculty. The preceptor functions to assist in meeting the defined student objectives. The role of the faculty advisor is that of facilitator of the total preceptorship by planning, monitoring, and evaluating the preceptorship experience throughout its entirety. The nurse 221 faculty advisor maintains the ultimate responsibility and accountability for the student's achievement of the course objectives and the evaluation of the student.

#### PROCEDURE:

The faculty, in collaboration with nurse educators and managers of the contracted clinical facilities, provide an educational experience designed to meet the NUR 221 course objectives. The preceptorship includes a minimum of 120 clinical hours under the direct supervision of an assigned RN preceptor, utilizing the clinical setting as a simulated entry level practice experience.

- 1. Hospitals are notified of preceptors requested by NUR 221 faculty. A preceptor is an employed RN of the facility with an unencumbered RN license, preferably with a BSN degree or at least three years of experience.
- Preceptor assignments are made by the hospitals' nurse educator coordinators with input from unit nurse managers. Qualifications of the preceptors are verified by the NUR 221 faculty and documented on the student-preceptor agreement form.

- 3. The preceptor assignments are sent to NUR 221 faculty for approval and dispersed to students.
- 4. The student receiving an assignment must have all medical record requirements and CPR certification current. The student must also pass the NUR 221 math validation test in order to receive an assignment.
- 5. Students receive an orientation to NUR 221 including specific student responsibilities of preceptorship.
- 6. Preceptors receive an orientation to NUR 221 including a copy of the Preceptor Manual and link to the Preceptor Manual and the Student Nursing Handbook.
- 7. Student-preceptor agreements are turned into NUR 221 faculty **prior** to the student beginning the preceptor experience.
- 8. Students and preceptors complete a clinical log for each clinical experience, and conference at midterm and at the conclusion of the preceptorship experience. NUR 221 faculty meets with students and consults preceptors periodically during the preceptorship experience, including midterm and final conferences. Communication between NUR 221 faculty and preceptors is achieved through visits, e-mail, and/or phone contact and is documented on the student's clinical evaluation form.
- 9. NUR 221 faculty, with input from the preceptor, evaluates student clinical performance and determines if the student has achieved course objectives.
- 10. Students have an opportunity to evaluate NUR 221 and the preceptor experience.
- 11. Final grade of the NUR 221 Preceptor Course experience is determined by the NUR 221 course coordinator.
- 12. The NUR 221 preceptor student is to meet with the NUR 221 course coordinator or designated faculty prior to graduation.

#### JEFFERSON STATE COMMUNITY COLLEGE NURSING 221 PRECEPTORSHIP RESPONSIBILITIES

- 1. Assist student in learning activities and contribute to the student's perception of a nurse role-model.
- 2. Become familiar with course/clinical objectives in order to guide student to meet the objectives for the learning experience.
- 3. Approve planned student activities prior to allowing the student to begin the clinical experience.
- 4. Sign the student's Clinical Log form at the end of each clinical experience to verify the hours spent in the clinical area.
- 5. Add comments regarding the student's level of performance at the end of each clinical experience.
- 6. If at any time during the preceptor experience you feel a student's behavior is unsafe or unsatisfactory, please notify the faculty contact person immediately. Faculty: Office Number:
- 7. Assume responsibility for guiding the student's clinical assignment based on assessment of the student's level of knowledge.
- 8. Assess and document the student's performance on the clinical evaluation tool each preceptor day. (Clinical Evaluation Form obtained from student)
- 9. Assess and document the student's performance of skills listed on the Skills Record (obtained from the student).
- 10. Complete a final evaluation at the completion of the 120-hours of preceptorship. If any of the daily evaluations are unsatisfactory, notify the student's faculty/classroom advisor immediately. Give the skills checklist and the preceptor evaluation to the student to return to the NEP faculty advisor.
- 11. Discuss the student's attainment of the course/clinical objectives with the faculty/classroom advisor.
- 12. Policy prohibits students from:
  - a. accepting verbal or phone orders from physicians or other hospital personnel.
  - b. signing as a witness for legal documents (informed consent).

c. obtaining blood components from the blood bank. (The student may only initiate administration of blood and blood products under the direct supervision of the preceptor and the preceptor must sign all approved forms.)

d. administering medications without verification by the preceptor.

- 13. Students may administer IVs and IV medications in accordance with the institution's Intravenous Therapy Policy.
- 14. All invasive procedures, including parenteral medication administration, must be done under the supervision of the preceptor.
- 15. Students have not had the opportunity to take off physicians' orders. If the preceptor allows students to participate in this responsibility, all orders must be co-signed by the preceptor.

#### NUR 221 Student Guidelines for Preceptorship

- Schedule an appointment with your assigned preceptor. Take the Student-Preceptor Agreement. You and your preceptor will complete at this meeting. The Preceptorship Manual should already have been given to the preceptor.
- Negotiate dates and times to complete your preceptorship. You must work the scheduled days and times as the preceptors. (For example, if the preceptor starts at 0645, so must you.)
- 3. Submit the original copy of the completed "Student-Preceptor Agreement" prior to your 1<sup>st</sup> clinical day. The agreement must have your signature and the signature of the preceptor and faculty advisor <u>before</u> <u>attending the 1<sup>st</sup> clinical experience</u>. Make 2 additional copies of the agreement. The original copy goes to the faculty advisor. E-mail or handdeliver a copy of the agreement to your preceptor. The 2<sup>nd</sup> copy is yours and is to be turned in with your completed work at the end of your preceptorship.
- 4. After each preceptor day, ask your preceptor to complete the clinical evaluation. Make an appointment with your faculty advisor and bring your folder with signed clinical logs for midterm evaluation.
- 5. Notify your NUR 221 faculty advisor of any changes in your preceptor schedule that has changed from your original preceptor agreement.
- 6. If there are problems or issues that arise during your preceptorship, please contact your faculty to discuss.
- 7. At the end of the semester, you must turn in the completed folder containing the following:
  - a. Evaluation of the Laboratory Experience- all pages, completed by the preceptor and containing both the preceptor and student signatures.
  - b. Student-Preceptor Agreement.
  - c. Summary Clinical Log indicating a total of 120-hours were completed.
  - d. Student Evaluation of Preceptor
- 8. If any issues arise during your preceptorship call your faculty advisor.

#### Remember:

Keep the preceptor informed of your needs and your strengths. Be assertive (not aggressive). Do not wait for your preceptor to tell you what to do. This preceptorship will only be as good as you make it.

#### JEFFERSON STATE COMMUNITY COLLEGE NURSING 221 STUDENT-PRECEPTOR AGREEMENT

	_ from	has agreed to supervise
(Name of Preceptor)	(Name of Institution	
	from Jefferson State Com	nmunity College on
(Name of Student)		(Clinical Unit)
It is agreed the preceptor wi a time.	Il not have supervisory respon	sibilities for more than one student at
It is agreed the clinical expe	rience will take place on the fo	ollowing dates:
The hours of the experience listed dates.	e will begin at and	l end at for each of the
(Student Signature)	(Date)	(Phone Number)
(Preceptor Signature)	(Date)	(Phone Number)
(Faculty Signature)	(Date)	(Phone Number)
Preceptor's # years' experi	ence as RN:	
Highest nursing degree: (ci	ircle one) ADN BSN MSN	DNP
Is preceptor currently pursu If so, what degree	uing higher nursing degree? (c -	vircle one) Yes No

#### JEFFERSON STATE COMMUNITY COLLEGE NUR 221 DAILY CLINICAL LOG

Student:				
Hospital:				

Date: \_\_\_\_\_ Unit: \_\_\_\_\_

Arrival Time:	Departure	Time:	

Total Hours: \_\_\_\_\_

S = Satisfactory

NI = Needs Improvement; Requires comment

#### Detailed list of skills performed

	S	NI	Comments
Complete, accurate, and comprehensive physical			
assessment			
Timely administration of medication following the			
5 rights			
Safe, appropriate care to <u>#</u> patients			

<u>Other</u>

#### Preceptor Evaluation of Student

	S	NI	Comments
Time management			
Organization			
Application of theory to patient care			
Professional interaction			
Family and patient interaction			
Medication administration			

Preceptor signature: \_\_\_\_\_

#### NUR 221 Clinical Summary Log

Student Name
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Total Hours: \_\_\_\_\_

Date	Time In	Time Out	Total Time	Preceptor Initials	Comments

I verify all the times listed and all materials submitted are complete and accurate.

Student signature

#### **Skills Checklist**

The following is a list of skills for which the student has received instruction and demonstration. In some instances, the student has practiced the skill in a school laboratory setting and may or may not have had the opportunity to perform all the skills in the clinical area.

The preceptor may use this list to assist in planning and evaluating the preceptor experience. The preceptor will write the date after each skill when it has been performed and any comments that might be helpful in the completion of the clinical evaluation form at the mid-term and final evaluations. The student will provide the preceptor with the Skills Checklist at the beginning of the experience. The student will include the Checklist with the Log at the completion of the preceptor experience.

Skill	Date	Comment
Restraints		
Hair Washing		
Bed pan		
Urinal		
Feeding Patient		
Denture Care		
Shaving male patient		
Range of motion		
Transfer of patient		
Wound Care Dressing change Staple removal Suture Removal Power spray		
Cast Care		
Foley Catheter Cath care Insertion Removal Making occupied bed		
Postmortem Care		
TED Hose		
PAS/SCD Hose		
Medications         Oral         Intramuscular         Subcutaneous         Topical         Eye         Ear         Rectal         Vaginal         Sublingual         Intravenous         IV Push         IV Piggyback         Intravenous Therapy         Continuous IV         Changing bag         Changing tubing         Site care         Hep/saline lock         Pump/controller		

Care of patient with epidural cath	
Blood Transfusion	
Initiating	
Maintaining	
Terminating Monitor TPN	
Care of patient with CVL	
I&O	
Decubitus care	
Gastrostomy Tube NG Tube	
Care	
Insertion	
Feedings	
Suction	
Oxygen Therapy	
Ostomy Care	
Enema	
Rectal Tube Insertion	
Remove Fecal Impaction	
Stool Specimen	
Urine Specimen	
Midstream	
24- hour Sterile for C&S	
Apply Condom Catheter	
Blood Sugar	
Traction	
Sterile Feld	
Preparing	
Maintaining	
Drains (JP, etc.) Care	
Removal	
Incentive Spirometer	
Tracheostomy	
Care	
Suctioning	
Oral Suctioning	
Chest Tubes	
Collect Sterile Sputum Specimen	
Isolation	
Ventilators	
ET Tube Suctioning	
EKG Monitoring	
Care of patient with arterial line	
Hemodynamic Monitoring	

#### Jefferson State Community College Nursing Education Program NUR 221 Advanced Evidence-Based Clinical Reasoning JSCC Nursing Student Evaluation of Preceptor

Semester Preceptor's Name:									
Clinical Agency/Unit:	Stud	ent:							
Highest Degree Obtained: Years Experience:									
Please select ratings according to the fo	ollowi	ng scale	ə:						
5 = Always 4 = Frequently 3 = Occasionally	2 =	Rarely	1 = N	lever					
The preceptor:	5	4	3	2	1				
<ol> <li>Demonstrated effective interpersonal communication skills</li> </ol>									
<ol><li>Demonstrated caring behaviors to clients, peers, and student.</li></ol>									
3. Demonstrated professional behaviors to clients, peers, and students.									
4. Provided adequate support and mentoring.									
5. Allowed me independence when appropriate.									
6. Assisted me in identifying goals and needs for experience.									
7. Provided immediate and adequate feedback.									
<ol> <li>Encouraged me to provide safe appropriate nursing care and complete procedures.</li> </ol>									
<ol> <li>Demonstrated support of JSCC Nursing Program, faculty, and students.</li> </ol>									
10. Should continue to be utilized for NUR 221.									

If you selected 3 or lower on any item, please notify the nursing faculty and describe rating below:

Student:		Semester/Year:		Final Grade:	Pass	Fail
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EVALUATION CRITERIA/PROCESS To successfully complete the clinical portion of this course, the student must

- a) Attend and complete all clinical assignments and required clinical hours
- b) Receive less than 3 "Unsatisfactory" (U) in the same professional behavior
- c) An "Unsatisfactory" (U) in a critical behavior may result in a clinical failure.

Three (3) "U's" in the same professional behavior objective on 3 separate clinical experiences will constitute failure of the course, due to inability to meet clinical/course objectives regardless of the theory grade. An 'F' in clinical will result in the student being unable to progress. The faculty will share the evaluation(s) with the student prior to the next scheduled clinical experience. The faculty and student will sign and date the evaluation(s) and make any pertinent comments.

Students are assigned a letter grade for each critical and professional behavior based on the following definitions:

S = Satisfactory	Clinical behavior and work demonstrates knowledge and preparation in performing all aspects of the behavior
NI = Needs improvement	Clinical behavior and/or work is safe but does not meet all aspects of the performance described in the behavior or performance is inconsistent. When NI is awarded, the student will be given specific criteria for improvement. This improvement is required to prevent a future unsatisfactory evaluation for the same behaviors or performances. A student cannot receive a "NI" 2 clinical days in a row; therefore, the student would receive a grade of "U" or "S" in that category for the following clinical day based on his or her performance.
U = Unsatisfactory	Clinical behavior and/or work is unsafe, inconsistent, or inadequate in meeting all aspects of the performance described in the behavior. When a <b>U</b> is given the student is given specific criteria required to improve to an <b>S</b> .
NO = Not Observed	May be given for a behavior that is not observed

Unsatisfactory performance of a critical behavior may result in the student being dismissed from the clinical session. The faculty has the right to withdraw a student from the clinical setting due to unsatisfactory behavior that jeopardizes the health and/or safety of the client, staff, faculty, and/or other students. Failure in a single critical behavior may also result in a clinical failure. Dismissal and permanent removal from the program may occur in cases of extreme circumstances that result in potential or actual harm to any individual, pending due process procedures. Behaviors required to demonstrate that the student's nursing practice meets legal, ethical, and safety standards are expected of an ADN student at Jefferson State Community College and in the Alabama College System.

Preceptor Signature	Date
Final Evaluation: Student Signature	Date
Final Evaluation: Course Coordinator Signature	Date

Upon completion of NUR 221, the student will be able to demonstrate the following behaviors with					
minimal assistance from the instructor					
Critical Behaviors					
1. Maintains the physical and psychological safety of the client					
2. Demonstrates safe performance of selected advanced nursing skills					
3. Seeks assistance when situation encountered is beyond one's knowledge and experience					
4 Accepts responsibility for one's nursing care					
5. Demonstrates through actions, attitudes, and appearance, respect for the dignity of self, client, peers, members of the health care team and the profession					
6. Maintains confidentiality of client and facility information					
7. Adheres to College and facility policies and procedures					
8. Maintains Essential Functions with or without accommodation					
Professional Behaviors					
Demonstrates ways that promote patient and families' self-determination, integrity, and ongoing growth as human beings.					
1.0 Human Flourishing (Patient Centered Care)					
1.1 Supports compassionate and coordinated care based on respect for patient's preferences, values, and needs (Bill of Rights).					
1.2 Formulates teaching and learning activities that support self-care, reduce risk, and result in the promotion of maintenance of health.					
Provides rationale for judgements in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care, and that promote the health of patients within a family and community context.					
2.0 Nursing Judgment (Safety/Informatics)					
2.1 Integrates best current evidence with clinical expertise (i.e. supports recognized policies and procedures in provision of care).					
2.2 Minimizes risk of harm to patients and providers through both system effectiveness and individual performance (i.e. two patient identifiers standard and transmission-based precautions, blood and body fluid precautions, and fall precautions).					
2.3 Appraises information and technology to communicate, manage knowledge, mitigate error, and support decision making (i.e. pathophysiology, care plan, concept map, and med sheets completed satisfactorily).					
2.4 Supports care of clients in an appropriately prioritized, organized and timely manner (i.e. report is prompt, care priorities are changed in response to client needs.					
2.5 Performs nursing actions and skills safely and correctly with no direction or minimal direction.					
2.6 Distinguishes important aspects of medication administration including chemistry, action, usage, and the responsible provision of drug therapy for achieving positive outcomes that improve the quality of life.					
Demonstrates awareness of good practice, boundaries of practice, and professional identity formation including knowledge and attitudes derived from self-understanding and empathy, ethical questions and choices that are gleaned from a situation, awareness of client needs, and other contextual knowing.					
3.0 Professional Identity (Teamwork and Collaboration)					
3.1 Supports working with inter-professional teams.					

	e within an ethical and legal framework (i.e. demonstrates HIPAA compliance, honesty, and g care and and personal behaviors.									
3.3 Values responsibility, accountability, and integrity (i.e. follows school and facility policies, is punctual, and accepts feedback.										
	sional image of the nurse by appropriate dress, behavior, and attitude.									
3.5 Selects effective co	mmunication, including verbal, nonverbal, and written forms.									
3.6 Supports a respect	ul and cooperative attitude in interactions with faculty, staff, clients, and fellow students.									
3.7 Demonstrated confi	dence in providing nursing care.									
3.8 Submits required pa	aperwork on time.									
client care situations	health care team members, utilize evidence, tradition, and patient preferences in to promote optimal health issues.									
	vidence-Based Practice/Quality Improvement)									
test changes to continu	zed to monitor the outcomes of care processes and improvement methods to design and ously improve the quality and safety of healthcare systems (i.e. recognizes reports and abnormalities/changes in patient condition).									
4.2 Collaborates with st	aff when questions arise regarding patient care.									
	ces to guide clinical decisions.									
4.4 Suggests an evider	ice-based approach to problem-solving.									
	Instructor Initials									
	Student initials									
	Date									
Date	Commen	ts								<u> </u>

Date	Comments