

# Graduate Student Clinical Handbook

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# Preparation

## Overview

Welcome to the clinical courses in the School of Nursing at California State University, Dominguez Hills (CSUDH). Our faculty instructors and preceptors join to facilitate the learning of our nursing students for advanced roles in nursing. We look forward to our graduates taking a leadership role in providing better nursing care and services for diverse populations in a variety of settings.

The practice-based role performance (clinical) courses will provide you with an opportunity to apply knowledge, practice skills, acquire competencies, and learn the full scope of the role for which you are preparing. The School maintains affiliations with a wide variety of healthcare agencies. The clinical sites vary according to the program requirements and students' personal goals. The <a href="School of Nursing Director">School of Nursing Director</a>, Graduate Director, and Program Coordinators administer the School of Nursing programs; they implement and interpret policies and procedures pertaining to the clinical learning component of the programs.

You will take an active part in choosing a clinical site that is located within your community or convenient for travel from work or home. Program faculty take responsibility for approvals of the clinical sites and specific preceptor(s).

Faculty members guide and facilitate the learning process and will evaluate you according to the course objectives and your performance of the learning activities for a particular role outcome. The faculty will communicate directly with you and the preceptor to collaboratively establish the learning contract and evaluate your performance. You and the preceptor will design learning activities to achieve the course objectives, based on opportunities available at the site, and identify methods to evaluate your learning outcomes.

# Eligibility

Planning is necessary to ensure a smooth entry into the clinical phase of your program. Prior to enrolling in the role performance courses, you must satisfy all prerequisites, submit important clinical documents, and identify an appropriate preceptor and clinical site by the established deadline. Refer to the posted plans of study for the expected course progression and the *University Catalog* for course prerequisites.

Verify your eligibility using the following steps:

- Official Role Option Check your MyCSUDH portal to ensure that the role option listed (the Plan) is correct. If not, submit a Graduate Role Option Change Request to the School of Nursing.
- My Advisement Report In your portal, click on Student Center > My Academics > View My
  Advisement Report. This section lists the requirements for your degree. Be sure that that GWAR
  has been satisfied and all courses on your Plan of Study have been completed or in progress
  prior to the semester you plan to begin the role performance courses. Check the report for any
  course substitutions requested to ensure those are posted. NOTE: post-master's certificate
  students don't have a My Advisement Report and need to use the Gap Analysis provided upon
  admission.



## **Deadlines**

All clinical documentation must be submitted during the semester before you begin the clinical course.

December 1st for Nurse Administrator students that begin clinical courses in Spring\*\*

May 1st for CNS, FNP, and Nurse Educator students that begin clinical courses in Fall\*\*

The documentation includes:

- Key information about your preceptor and clinical site (placement request via Exxat My Request, see p. 9). Faculty screen the preceptor using this process to approve preceptors. Confirmation of an affiliation agreement (contract) between CSUDH and the clinical site is required.
- Clinical compliance/health documents (see p. 11).

To accomplish the requirements, you must begin the process well *in advance* of the posted deadline.

\*\*NOTE: Documents uploaded after the deadline will be reviewed on a space available basis. Failure to submit documents by the posted deadlines may result in the student being administratively dropped from the role option courses.

## **Preceptor Selection**

Each clinical course has specific requirements for learning activities and preceptor qualifications. The selection of the preceptor is a collaborative effort by the School of Nursing, the health care agency, and the student. However, the School faculty gives the final approval for arrangements and the selection of the preceptor. Specific preceptor requirements for each role option are outlined in the Appendices. Please note that we **cannot** place students at the following agencies due to the inability to secure an affiliation agreement: Children's Hospital Los Angeles, San Francisco Public Health, Santa Clara Valley Medical Center, and Sharp Healthcare

In some geographical areas, preceptorships need to be arranged through an education consortium (e.g. **San Diego**). In some facilities, a coordinator in the agency (student liaison) needs to be contacted and in others, preceptors may be approached individually for the clinical instruction. **UCLA** does not permit any direct communication by students with potential preceptors, managers, or the education department.

Preceptorship requests for **Cedars Sinai, Stanford Health,** and **UCLA** must be made by the CSUDH Clinical Coordinator in accordance with specific deadlines. Contact the CSUDH Clinical Coordinator for more information about the deadlines.

Preceptors cannot be your direct supervisor, a friend, peer, or a relative. When a student and preceptor have a personal relationship, the preceptor cannot evaluate the student's performance objectively and fairly. Clinical experiences in the preceptorship cannot be done in your own unit of employment. Thus, a preceptor with responsibilities only for your unit would not be approved.

#### Preceptors are selected based on:

- Educational preparation appropriate for graduate-level clinical teaching
- Current and active unencumbered RN licensure in the state of practice
- Professional work experience and level of expertise in the role. In general, faculty expect the preceptor to have at least 2 years of experience in the role.
- APRN preceptors must possess active and unencumbered certification/licensure for their APRN role in their state of practice

Students should touch base with their Program Coordinator (advisor) to discuss their selection of preceptor well before the documents are due.

# Clinical Site Affiliation Agreement

An affiliation agreement is required between clinical sites and the University prior to beginning your clinical hours. Verify the status of the affiliation agreement in this order:

- 1. Use the clinical software (Exxat explained later in this handbook) to explore locations and refer to the Notes area where affiliation agreement information is made available
- 2. Consult with your Program Coordinator (advisor)
- 3. Contact the CSUDH Clinical Coordinator.

New agreements can take many months to complete. Refer to the "How to Request a Clinical Affiliation Agreement" in the **FORMS** section of the nursing website if you need to request an agreement. Requests are made via an online form.

# **Policies**

#### **RN** License

Throughout the entire MSN program, all students are required to have an unencumbered, unrestricted license as a registered nurse with no probation or disciplinary actions pending or imposed. It is the student's responsibility to immediately report in writing any change in licensure status to the director of the School of Nursing.

# Role Performance Course Sequence

The role option courses (both didactic and clinical) must be taken in sequence. Multiple semesters cannot be taken concurrently. Progression to the next semester requires successful completion of the previous courses. An incomplete grade needs to be resolved before continuing to the next semester.

# Transportation and Student Identification

Clinical sites are located throughout California; therefore, you need to plan to reach these locations. You need to plan how to best travel to these locations. A photo identification, provided by the agency or a CSUDH student ID card slipped into a badge holder, shall be worn while at the agency or engaging in clinical activities. If you do not have a student ID, complete your <a href="Student ID Request">Student ID Request</a> now (follow the directions carefully) so that your clinical start is not delayed.

# **Beginning Your Clinical Hours**

You are **prohibited** from starting role performance/clinical hours in advance of the semester. Clinical hours may be started each semester only when:

- You have received email confirmation from the faculty that all clinical requirements, including clinical site-specific requirements, have been documented and approved.
- If the preceptor's agency uses a clinical student liaison and that person communicates directly with students, then clearance from the liaison is also required prior to starting hours. This email clearance needs to be forwarded to your Program Coordinator and the Nursing Clinical Coordinator (if involved with your placement) to verify the agency clearance.
- Your learning contract for the course and preceptor documentation have been approved by the faculty.
- A current affiliation agreement with the clinical site has been verified.
- You are officially enrolled in the role performance course and the first day of the course has commenced.

## **Activities that Cannot Count for Clinical Hours**

The purpose of the role performance/clinical hours is to enable you to integrate new knowledge and demonstrate attainment of role-based competencies and the program outcomes. Each role option specialty track has additional requirements for the focus of the clinical hours to meet the role/specialty competencies. Orientation to the unit/agency, policies, and population(s) can be counted for clinical hours.

The following frequently encountered activities do not contribute to the stated purpose; therefore, these activities cannot be counted as clinical hours:

- Observation or "shadowing" of the preceptor
- Library or research time spent in preparation for the clinical experience
- Travel to and from the clinical site
- Breaks, time waiting for patients or the preceptor
- Attending an educational session such as an in-service, conference, or class. If you are
  presenting or leading such an event the time can be counted for clinical hours (except FNP
  students).
- Activity for which you receive monetary compensation. Exceptions may be requested of your Program Coordinator.
- Course related activities writing reports, papers, course assignments, or clinical logs; preparation time for class meetings or discussions; class readings or viewing media.

# **Professional Behavior and Appearance**

Refer to the <u>Nursing Student Handbook</u> for specific policies regarding Social and Electronic Media (including cell phone use), impaired behavior, confidentiality, ethics, and professional behavior.

In addition to patient-specific information, graduate students often work with confidential or proprietary agency information. Such information or data must be kept confidential. For example, you cannot publicly present quality improvement project data or agency information at a conference without the express permission of both the agency and the preceptor involved.

For the duration of all clinical role performance courses, students must recognize that they are ambassadors of the nursing profession, in general, and CSUDH in particular. Our aim is to meet the needs of the community, whether our patients or our clinical partners, through an adherence to time-honored standards of professionalism and conduct. Appearance, being above all else clean and safe, must serve to emphasize our professional role and not our individuality.

The specific agency policy for dress and appearance must be adhered to by students preparing for or engaging in clinical hours at the agency. Agency specifics shall be discussed with the facilitating preceptor or instructor prior to the beginning of the first clinical day.

No faculty or student may engage in solicitation at any clinical site. Solicitation shall include, but is not limited to, promoting, advertising, selling, or distributing any product or program.

# **Drug & Alcohol Advisory**

Admission and continued enrollment in the nursing programs are contingent on drug screening results that are consistent with the California Board of Registered Nursing guidelines for safe nursing practice. Drug screens will be evaluated when required. Please consult the University Catalog and <a href="Drug Free">Drug Free</a> <a href="Campus">Campus</a> webpage for additional information.

# Clinical Clearance



# **Initial Steps**

Exxat is an online platform that houses clinical placement information and clinical documents needed for clinical agencies. You will need to set up an account and pay two (2) fees.

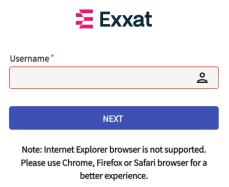
PRISM – A one-time fee covers the clinical placements, logs, and evaluations

APPROVE - Annual fee for the clinical compliance documents (immunizations, license, etc.)

**PRISM**: You will need to purchase a subscription to PRISM, which is a one-time subscription for use while you are enrolled in the MSN or post-master's Certificate program at CSUDH. PRISM is where you will be able to search for potential clinical locations and submit your preceptorship placement request. After the placement is approved in the system, you will access the logs and evaluation forms for your clinical courses.

**APPROVE**: Clinical compliance documents (immunizations, TB screening, license, learning contract etc.) will be uploaded and archived into Exxat. APPROVE is an annual subscription, so you can wait to purchase this when you are ready to submit your clinical documents.

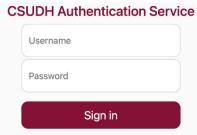
Go to: <a href="https://prism.exxat.com/">https://prism.exxat.com/</a> and you will see the first login page:



On this page, your username is your complete Toromail email

address. Enter it in the box: e.g. <a href="mailto:student1@toromail.csudh.edu">student1@toromail.csudh.edu</a>

Click Next and you will be redirected to the CSUDH login page.

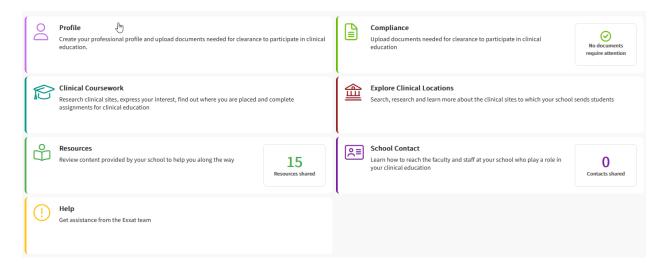


On this page, your username is just your CSUDH username: e.g.

"student1" (**not** your full email address). Enter your username for CSUDH and then Enter your CSUDH Single Sign On password (the one you use for MyCSUDH and Canvas). Authenticate and approve with a Duo push notification.

Once you approve the Duo Push - you will be able to proceed at the Exxat Dashboard. Watch a short <u>CSUDH Payment Steps video</u> or click on the Resources tile to pull up a PDF tutorial.

# Complete Your Profile



Start with the Profile (click). Under your name, click the Profile button (next to Academics). Complete your profile with special notes below:

- Preferred Name in this area list any previous names, especially names that may appear on your compliance documents such as immunization records.
- Date of Birth is used by many organizations as an identifier for EMR access.
- A Social Security Number is **not** needed for the profile we can contact you if the clinical agency requires this information.
- Complete the Emergency Contact information.
- It is NOT required to complete the sections of education, work experience, membership, licensure because your resume will be uploaded.
- In the Skills and Accomplishments section do include your language proficiency if you speak another language.
- Attest that your profile information and clinical documents will be shared with the approved clinical location.
- Upload a copy of your resume 2-page max

# **Explore Clinical Locations**

Navigate to your Student Dashboard by clicking the 3 small horizontal lines in the top left corner. From the Student Dashboard, click on Explore Clinical Locations to search for locations in the system based on recent student placements. NOTE: this does not mean that there is a current active Affiliation Agreement that will cover your full preceptorship timeframe, or that a preceptor is available. Many of the clinical locations have notes as to when the Affiliation Agreement ends.

# **Placement Request**

Navigate to Coursework from the left menu or the dashboard at sign-in. Select the specific course you want to submit a placement request for. FNP students please refer to Appendix D for additional instructions.

#### Click on the Course Activities tab

In the My Request area near the bottom of the screen:

- 1. Click on Add Request (button to the right)
- 2. Complete the form paying special attention to the required fields noted with a red asterisk (\*). You can **Save** your progress and resume later. No editing can be done once this form is submitted, so be sure the form is finalized before you submit. If needed, click Clear All to wipe the form clean. If you submit the placement request and made an error, please contact your Program Coordinator (advisor) to discuss the error. Once submitted, you won't be able to edit the My Request, but your Program Coordinator (advisor) can edit. Do NOT re-submit a duplicate request to fix an error.
- 3. Basic Information
  - Specialty role specific specialty or setting per the drop-down menu choices
  - Hours Requested the total number of hours you expect to complete at this clinical location with this preceptor. Some students arrange for multiple locations/preceptors in the same semester.
- 4. Location Information
  - Agency Location Name the name you should enter here is the actual place you will be with the preceptor. Do not include the specific department, just the agency. For example, if you are at Los Angeles General Medical Center in the ICU, you should enter the medical center name.
  - **Site (Parent Company)** this is the umbrella company that the affiliation agreement will reflect. For the Los Angeles General Medical Center example above, the Site (Parent Company) would be LA County Department of Health. If your preceptorship location is part of a broader health network or health system, but sure to complete this field.
  - **Agency Contact Name** this will be the name of the person that the CSUDH School of Nursing should be working with. Typically, this is not the preceptor, but an education liaison that works with students or an administrative person at the site.
  - Email, phone, and address of the Agency Contact person.
- 5. Preceptor Information
  - A small number of locations (UCLA, VA Long Beach, some Schools of Nursing) will identify the preceptor for the student. If this is the case, please complete the required fields of the preceptor section (marked with a red \*) with generic information so the My Request can be submitted. Later when the preceptor is known, the information can be edited. Type in "Unknown" for preceptor name, 999-999-9999 for phone, unknown@agency.com for email, license type as appropriate for the preceptor and 9999 for the number.

In most cases, the preceptor will be known, and the following information needs to be completed so the preceptor can be vetted by faculty:

- Preceptor first and last name
- Business phone (required) and mobile phone (optional)
- Fmai
- License type and number if the preceptor is an APRN, please select that license type/number rather than the preceptor's RN license
- Preceptor Information Form the form is in the Exxat Resources and the CSUDH School
  of Nursing webpage under the Clinical menu link. Preceptors need to fully complete this
  form (do not write refer to resume) and sign the form. A digital signature is acceptable
  but not a typed signature. Upload the document in the space provided.
- Preceptor Resume upload the document in the space provided.
- 6. Additional Information indicate your employment relationship with the clinical location.
- 7. Additional Details you may add comments here about your clinical placement request or the preceptor.
- 8. Double check your entries and when finalized use the purple **Submit** button at the top of the page.

**NOTE:** Return to the My Request periodically until the course begins to check for notes indicating action needed on your part. Additionally, the software will push notifications of status changes to your Toromail. On the right side of MyRequest, the **Overall Status** refers to the status of your placement request. Below that, the Comments area is for an ongoing conversation about the request.

## **Clinical Compliance Documents**

You will need to purchase the annual *Approve subscription* (\$35) to access the Compliance area from your Dashboard. Give yourself ample time to upload your documentation prior to the stated deadline. Since the *Approve* portion of Exxat is an annual fee, we recommend that you wait to purchase until you have your documents assembled based on the criteria explained in this handbook.

Some clinical agencies also use their own clinical software, and you will need to submit specific documents via their system. You may be required to pay a fee to use that system. Specific agencies that use MyClinical Exchange software include Cottage Health, Dignity Health (CommonSpirit), El Camino, Providence, and Sutter Health. Scripps Health uses Complio software. Eisenhower Health uses Castle Branch Bridges. Cedars Sinai uses ClinicalEdify.

Many agencies require that CSUDH validate your compliance documents. In general, the CSUDH Clinical Coordinator handles this activity - you will need to request the verification to be done. Agencies we know of that require Coordinator/Faculty validation of student compliance are:

- John Muir
- Kaiser Permanente
- Memorial Care

- Stanford Health
- Torrance Memorial
- UC Davis, UCI, UCLA, UCSD, UCSF
- CHOC

#### VARIABLE REQUIREMENTS

Determine if a background check and/or drug screen is needed by your clinical location. CSUDH does not require these, but your clinical location may. If you are employed at the agency, they may or may not waive drug/background screenings. You'll need to check the notes in Exxat (located in the Explore Clinical Locations area) for the agency and in the absence of notes, ask

- the CSUDH Clinical Coordinator. The background check requirement is very common for hospitals and health systems.
- Take note of the timing for required screenings. Some clinical locations require these to be done no more than 30 or 90 days prior to starting. You don't want to order these screenings too early if there is a time limit.
- Tutorial documents for how to order the background check and drug screening are in the Resources area of your Dashboard.
- For the background check if you lived in the state of New York in the last 7 years, you would need to also order the separate New York package for \$95. This means 2 background checks need to be completed.
- There are two (2) drug screen choices: Drug Screening Basic (10PANELURINE) and Drug Screening (10Panel OXY MEP FEN). The latter includes oxycodone, meperidine, and fentanyl. The basic will suffice for most locations that require drug screening. Kaiser Permanente and some other sites require more than the 10-panel. Please clarify the type of drug screen needed if the specifics are not located in the Notes section of Explore Clinical Locations.

#### **MANDATORY REQUIREMENTS**

Clinical compliance documents required by CSUDH and the explanations for what you must submit are listed below. The details matter. Be sure to follow the instructions for setting the appropriate expiration date for each item. A tutorial document How to Upload Compliance Documents in PRISM is in the Resources area of your Dashboard.

Review of documents will begin prior to the deadline. Required documents need to be submitted by the deadline but will not be fully reviewed/approved by the deadline. You will need to monitor the Compliance area for document status and notes indicating action is needed. Document statuses are NOT pushed as notifications. Focus particularly on the In Progress, Not Approved, and Expiring / Expired items. Also pay attention to Get Started items to be sure those are not required, otherwise you must submit that documentation.

#### **Submission Tips:**

- Carefully review the document criteria. Most rejections are due to incomplete documentation.
- Provide good clear scanned documents in PDF file format and do NOT submit a photo of the document. If needed, office supply stores can scan your document to a USB drive, or you can use a phone scanner app.
- Ensure your document file displays the document right side up (not sideways or upside down), so the reviewers can easily read the information without manipulation.
- When submitting documentation, please upload only the documentation for that specific item. In other words, do not put all documents into one long PDF file and submit that one file over and over.
- If an item is rejected, review the reason given. If that reason is not clear in what needs to be done review the item description again to determine what your document is missing (e.g. item is out of date). If you believe your documentation does meet the requirement, contact your Program Coordinator (advisor) to review the item. They have the authority to override the "reject" decision.

**NOTES:** (1) All documentation must clearly show the student's name (previous names should be listed in your profile) on each page; (2) Primary source documentation (actual lab report with reference ranges) is needed for titers; employee health records are not accepted for lab tests; (3) Documentation of

Vaccinations must be on an official document such as prescription pad, official vaccine record, or immunization card; (4) declination waivers for any reason are not acceptable for Kaiser Permanente.

- 1. **COVID-19 Vaccination & Booster** COVID-19 Vaccination series AND COVID-19 Booster dose. Documentation must include the name of the manufacturer and date of vaccination.
- 2. **Flu (Influenza)** Documented flu vaccination for current flu season. Receipts are accepted if administration of the vaccination is included. Completed and signed flu vaccine waiver/declination Waiver form is accepted ONLY for medical reasons. Please upload a waiver form along with documentation from the provider with the exemption.
- 3. **Hepatitis B** upload your document into the appropriate category (vaccination, titer, declination)
  - ➤ 3 dose series of Recombivax AB OR 2 doses of Engerix-B OR 2 Heplisav-B vaccinations (4 weeks apart) required OR
  - Positive Surface Antibody titer lab report is required. If the titer is negative/low/equivocal must receive one dose of vaccine and re-test the titer 1-2 months post-vaccination. OR
  - Upload signed declination waiver (for medical reasons only).
    - Note: Declination waivers for any reason are not acceptable for Kaiser and potentially other sites.
    - School template for Hepatitis B waiver available. Click on view documents under the template section to download and print the school form.
- 4. **Measles, Mumps, Rubella (MMR)** upload your document(s) into the appropriate category (vaccination, titer, revaccination/booster).
  - 2 dose series required OR
  - Positive Antibody titer (IgG) for all 3 components required (lab report required with reference ranges). If titer is negative, low, or equivocal:
    - o If you have received two doses of MMR, a booster vaccine is required (MMR or Rubella as needed).
    - If no documentation of two doses of MMR, you MUST receive two doses of MMR, 28 days apart.
    - o Repeat titer is not required
  - Documentation of Vaccinations must be on an official document such as a prescription pad, official vaccine record, or immunization card.
- 5. **Physical Exam Form** Use of the CSUDH form is mandatory (located in Exxat or School of Nursing website under the Clinical link). Must be completed by the health care provider, signed, and dated. Updated health clearance is required if returning from medical leave (disability).
- 6. **Tetanus, Diphtheria, and Pertussis (Tdap)** upload your document(s) into the appropriate category (vaccination, declination)
  - Tdap within the last 10 years OR
  - A one-time vaccination of Tdap (at any point) AND Tdap or Td booster within the last 10 years
- 7. **Tuberculosis (TB)** upload your document(s) into the appropriate category (skin test, Quaniferon test, chest x-ray). There must be documentation of ONE of the following:

- ➤ TB blood test (QuantiFERON-TB Gold Plus or T-Spot) which is preferred for hospital sites. Expiration date will created by the system for TB blood test. OR
- 2 step TB Skin Test (TST) (1-3 weeks apart) Enter expiration date for skin test as 1 year from the Step 2. OR
- ➤ If accepted by your clinical site, 2 annual TB skin tests (TSTs) within 365 days. Enter expiration date for skin test as 1 year from the last TST.
  - o **If positive:** A clear Chest X-Ray (with lab report) must be provided along with documentation from your provider that you are free of active TB disease. This documentation can be uploaded to the 'TB Symptom Screening' section.
  - If a history of a positive TST: A clear Chest X-Ray (with lab report), which can be from the time the positive test occurred in the past, along with documentation from your provider that you are free of active TB disease.
  - Enter date of the symptom free letter from the provider to the 'TB Symptom Screening' field, as the system will calculate expiration date.
- Upon renewal, one of the following is required:
  - o 1 step TB Skin test OR
  - o TB blood test OR
  - If past positive results, a repeated chest x-ray is not needed, unless required by the agency. Only documentation from a provider stating that you are screened and free of TB is to be submitted EVERY year.

**NOTE**: Kaiser requires a TB symptom questionnaire in addition to the negative TST. The form is located on the CSUDH webpage (Clinical) or in Exxat. This can be uploaded to the 'TB Symptom Screening' section every year along with the TB skin test.

- 8. **Varicella** upload your document(s) into the appropriate category (vaccination, titer, revaccination/booster)
  - 2 dose series required OR
  - Positive Antibody titer (IgG) lab report required with reference ranges
    - If titer is negative/low/equivocal must provide evidence of 2 vaccinations, 4-6 weeks apart.
    - Repeat titer is not required.
  - History of disease is NOT ACCEPTED.
- Blood Borne Pathogens/ Universal Precautions training Submit proof of completion of bloodborne pathogen or Universal precautions training from an employer (Include a table of contents from an employer if part of annual training) OR <a href="https://www.csudh.edu/son/info/hipaa-precautions/">https://www.csudh.edu/son/info/hipaa-precautions/</a>
- 10. CPR Upload copy of certificate for American Heart Association BLS course (not Heartsaver course). CPR that expires during the clinical rotation will need to be renewed prior to the start of the semester.
- 11. **Graduate Learning Contract** Download and the form in Exxat or the School of Nursing website under the Clinical link. Name the file: Preceptor's last name, Name of document (LC for learning contract), and the Term. Example: Jones LC Spring 2023. This will help us locate the document since

- a new learning contract is submitted for each semester. More information on how to complete the learning contract is outlined beginning on page 14.
- 12. **HIPAA** Submit proof of completion of HIPAA training from an employer (Include a table of contents from an employer if part of annual training) or <a href="https://www.csudh.edu/son/info/hipaa-precautions/">https://www.csudh.edu/son/info/hipaa-precautions/</a>
- 13. **Health Insurance** Students must have health insurance coverage. Upload a copy of the Front and back of the card. Student name should be on the card OR If a student is dependent and does not have their own health insurance card, they must show documentation from health insurance showing their dependency.
- 14. Preceptor License Upload your preceptor's current license\*^
  - Online verification for California preceptors can be completed through <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a> (Click on the license number to open the page depicting licensing details disciplinary actions and public record actions). Follow this tutorial to print the required page in PDF format: <a href="https://www.csudh.edu/Assets/csudh-sites/son/docs/SON-Clinical/How%20to%20pull%20RN%20license%20verification%20in%20PDF.pdf">https://www.csudh.edu/Assets/csudh-sites/son/docs/SON-Clinical/How%20to%20pull%20RN%20license%20verification%20in%20PDF.pdf</a>
  - Online verification for preceptor licensed out of state can be completed through https://www.nursys.com/
  - ➤ Enter the completion date of the license as the issuance date shown on the license. Enter expiration as date shown on the license. Should you have more than one preceptor for the semester, enter the license expiration date for the preceptor whose license expires first.
  - \*FNP students only: Upload preceptor NP license and RN license. If preceptor is a midwife, license will appear under the Registered Nursing Board. If preceptor is an MD or a DO, click on the appropriate board for that specialty when beginning the search.
  - <sup>^</sup>CNS students only: Upload the preceptor CNS license and RN license.
- 15. Your RN License Upload your current RN license. Online verification for California nurses can be completed through <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a> (Follow this tutorial to print the required page in PDF format: <a href="https://www.csudh.edu/Assets/csudh-sites/son/docs/SON-Clinical/How%20to%20pull%20RN%20license%20verification%20in%20PDF.pdf">https://www.csudh.edu/Assets/csudh-sites/son/docs/SON-Clinical/How%20to%20pull%20RN%20license%20verification%20in%20PDF.pdf</a>). Online verification for nurses licensed out of state can be completed through <a href="https://www.nursys.com/">https://www.nursys.com/</a> Enter expiration as date shown on the license.
- 16. **Your Resume** Upload a current resume, which may be shared with the clinical site and assist in the placement process. Be sure the clinical areas you've worked in are identified.
- 17. Additional documents (not shared with site) this is for submission of required documents that are not shared with the location but are archived within Exxat. Examples include required orientation modules, confidentiality agreements, fit testing.

CDC Sources Upon Which Requirements are based: <u>Interpretation of Hep B Serological Test Results</u>; Recommended Vaccines for Heathcare Workers; TB Screening and Testing of Healthcare Personnel

# **Subsequent Clinical Semesters**

You will need to submit a new My Request placement request for **each** semester even if precepting at the same location with the same preceptor. The reason is that the placements are set up in Exxat by course and each course must have a placement.

In the Compliance area you will need to submit updates for any expired documentation and a new Graduate Learning Contract for the course you are enrolled in. Background and drug screenings do not need to be repeated if you completed those for your previous semester clinical and have been continuously enrolled. Do NOT delete any previous documents – we need to retain documents for about 5 years per most affiliation agreements.

If you will be at a new clinical location or with a new preceptor, that information needs to be submitted to the Compliance area and also included in the My Request.

Deadlines for My Request and Compliance documents are:

May 1<sup>st</sup> for Fall semester

December 1<sup>st</sup> for Spring semester

CNS and FNP students entering their 3<sup>rd</sup> semester of clinical will need to purchase 1 more year of the APPROVE portion (\$35) of the Exxat software to access the Compliance documents.

# The Clinical Experience

# **Learning Contract**

The Learning Contract is a document that serves an agreement between you, your preceptor, and the clinical instructor for the clinical learning experience. The learning outcomes to achieve, how you will accomplish them, and how you will demonstrate they were achieved throughout the semester are specified. NOTE: You will need to meet with your preceptor (virtually or in person) prior to the due date to review your Learning Contract draft and to refine the learning activities to reflect opportunities at the site and to identify the specifics. For example, if you anticipate being involved with a project, what is the topic of that project and what will your portion of the project be?

**Outcomes/Objectives** are specific areas on which learning is focused for the current course. The required student learning outcomes for the course are used for this area of the Learning Contract. These outcomes are stated broadly to allow you to individualize the plan to meet the competencies of your advanced role. Refer to the Appendices for the course outcomes of your specific role option courses. Each learning outcome requires several specific learning activities; some activities may be used to meet more than one outcome.

Learning Activities are educational strategies (such as patient encounters, activities, tasks, projects, situations) designed to enable the student to meet each learning outcome. Some verbs that identify learning activities are interview, write, observe, role-play, participate, videorecord, attend, summarize, co-lead, and perform. Examples: (1) co-facilitate discharge planning patient rounds with the preceptor or (2) observe and analyze a FNP consultation about a patient care problem with the physician. Do not restate the learning outcome as an activity. Appropriate activities are based on the course content, role competencies, your goals, and the agency's clinical resources and opportunities. Role performance activities and clinical hours must be tailored to meet certification standards and requirements.

**Evaluation Measures** are evidence of the accomplishment of each outcome to complete by the end of the semester. Specify what data (behavior or end product) will be used to evaluate the student knowledge or skills or the measurable outcomes of a project or presentation. Outcome evaluation reflects the extent to which each objective has been met and student performance. **Note:** these measures should not be the course academic assignments because those will be evaluated by the faculty. Focus on your clinical learning activities achievable with your preceptor.

#### **Learning Contract Steps**

- □ Identify your own goals, learning needs, and your preferred learning style. The required course learning outcomes (objectives), role competencies, and your personal goals will be combined into an individualized educational experience. List the Learning Outcomes (objectives) in the left column of the Learning Contract. The course outcomes are in the Appendix of this handbook, listed by Role Option.
- □ Create some learning activities that will lead to achievement of your goals and the course learning outcomes/objectives to form a draft Learning Contract. Collaborate with the preceptor to select and design the learning activities available at that agency. **Be specific** and do not repeat the learning outcome/objective as an activity. List several learning activities to correlate with each learning outcome in the middle column of the Learning Contract. It is best to number each learning outcome/objective and the corresponding activities as 1a, 1b, 1c or 1.1, 1.2, 1.3

Collaborate with your preceptor to determine how each activity/outcome will be measured
upon completion.
Obtain the preceptor's signature on <b>each</b> page of the Learning Contract to signify the entire
document has been reviewed and approved by the preceptor.
Provide a copy of the Learning Contract and course syllabus (when the course opens) to the
preceptor.
Jpload the Learning Contract signed by you and the preceptor to Exxat.

### **Evaluations**

Preceptors, instructors, and students participate in the evaluation of the clinical experience. The preceptor will complete a formal evaluation of your performance for consideration by the faculty in determining the final grade. Preceptors will be sent a link from Exxat toward the end of the semester. The faculty will monitor your learning and preceptor effectiveness through periodic contact with the preceptor, reading your clinical/field logs, and review of informal and formal feedback.

You will evaluate the preceptor and your experience at the clinical site using standard electronic forms in Exxat. Additionally, the site may have you complete an evaluation of the clinical experience at the agency. Participation in this evaluation process is expected.

# Your Responsibilities

During the preceptorship you are responsible for:

- 1. Verifying with the clinical agency that you are cleared to begin your clinical hours (unless the agency only communicates with CSUDH directly).
- 2. Participating in orientation to the clinical facility, personnel, policies, procedures, and agency goals and philosophy.
- 3. Arriving on time and fully prepared for each clinical day. Inform the agency and preceptor **in advance** if you are unable to arrive at the agency as scheduled.
- 4. Dressing professionally for the role/setting. FNP students must wear a freshly pressed lab coat.
- 5. Functioning within the framework and policies of the assigned agency.
- 6. Behaving in an ethical and professional manner.
- 7. Maintaining a clinical activity log, field experience log, or other records as required by the instructor or preceptor. Data entry for such logs/records shall be timely. Logs in Exxat shall be completed and submitted for faculty review on a weekly basis. You may want to use the Exxat Student mobile app to complete your logs, evaluations, and attestations within Exxat.
- 8. Fulfilling the learning contract agreed upon by you, the preceptor, and the instructor.
- 9. Seeking direct and indirect supervision from the preceptor.
- 10. Participating in meetings with the preceptor for the purpose of seeking feedback about your progress.
- 11. Fulfilling the time requirements as stated in the syllabus for each role performance course.
- 12. Participating in group and individual conferences as scheduled by the instructor.
- 13. Seeking assistance from the preceptor/instructor if problems occur in fulfilling the learning contract, completing specific academic assignments within the clinical setting, or there is a need to modify the learning contract. If you are not able to complete the total number of clinical hours by the end of the semester, arrangements must be made with your Program Coordinator to complete the hours. You are **not** allowed to continue with hours after the semester unless special arrangements are made for clinical supervision and to extend the learning contract dates.

# Appendix A: Nurse Administrator

Graduates of the Nurse Administrator Role Option will be competent in the advanced theory and skills necessary to function in administration of organized nursing services at the institutional, staff, and patient/client care levels. To achieve this objective, student clinical experiences must be well planned and diverse. Students are encouraged to select a preceptor that is no more than one management level above the student's position in the organization. Each role performance class requires a minimum of 144 hours in the clinical setting per semester. This is a total of 288 hours for the program. Completion of additional hours and experiences to enhance skills and knowledge is advised.

#### **Preceptor Qualifications:**

The ideal preceptor is a Nurse Administrator with a Master of Science in Nursing or a related field, a history of demonstrated leadership within an organization and within the profession, experience as an administrator, and access to appropriate learning opportunities. Positions such as Charge Nurse or House Supervisor are **not** appropriate for this role option. If you have any questions about preceptor qualifications, make an appointment with your Nurse Administrator Program Coordinator.

#### MSN 560: Nurse Administrator I

#### **Course Description:**

Provides an opportunity to implement the nurse administrator role in a selected health care setting by focusing on forces shaping the role of a nurse departmental and institutional governance. Under the supervision of an instructor and a preceptor, the student will apply valid and reliable measures of performance evaluation to organizational and nurse administrator performance.

- 1. Analyze socioeconomic, technological and societal forces that shape the role of the nurse manager in the practice setting.
- 2. Engage with the assigned preceptor and others at the healthcare facility to establish project goals, implementation strategies/activities, measurable project outcomes and evaluation strategies.
- 3. Analyze forces including governance, and leadership styles on the role and outcomes of a nursing administrator at the unit and or departmental and organizational level.
- 4. Identify and describe theories and methodologies for assessing care in a healthcare setting.
- 5. Apply knowledge of the development of valid and reliable measures of a nursing organization's performance in selected activities agreed upon with your preceptor and instructor in the organizational setting.
- Systematically evaluates the healthcare organization outcomes against national and local outcomes using evidenced based practices and benchmarks to include; Nurse Sensitive Indicators Nurse Engagement, Patient Engagement, and healthcare outcomes
- 7. Develop, propose and/or implement QI Project(s) based on use of local data and national nurse and patient standards for selected challenges and opportunities, including ethical, to improve nursing practice, healthcare outcomes and work environment.

#### MSN 570: Nurse Administrator II

#### **Course Description:**

MSN 570 provides an opportunity to implement the nurse administrator role in a selected health care setting by focusing on professional and regulatory requirements. Under the supervision of an instructor and a preceptor, the student will formulate a nursing service plan for integrating quality measures with cost control and case management practice.

- Engage with the assigned preceptor and others at the healthcare facility to develop and implement QI projects by establishing project goals, implementation strategies/activities, measurable project outcomes and evaluation strategies. Projects must include baseline data and evidenced based intervention(s) pertinent to the student's preceptor site and key course content.
- 2. Identify and describe current professional and regulatory requirements which affect the deployment, utilization, advancement and retention of nursing staff.
- 3. Demonstrate knowledge of and the ability to develop system-wide and/or unit-based budgets for a typical nursing service department in an organized healthcare setting.
- 4. Integrate knowledge of staffing methodology(ies), nursing hours per patient day to evaluate staffing needs.
- 5. Formulate a plan for integrating nurse staffing, quality outcome measures, budget and cost controls for a nursing service department.
- 6. Identify and develop QI project related to personnel performance improvement versus conduct.
- 7. Apply theories of human resource management and Just Culture through development and implementation of a QI project(s) pertinent to the preceptor site
- 8. Engage in learning opportunities identified by student with preceptor.

# Appendix B: Nurse Educator

Graduates of the Nurse Educator Role Option will be competent to provide beginning level nursing education to college nursing students (LVN, ADN, and BSN) or professional staff development for nurses. To achieve this objective, student clinical/teaching experiences must be well planned and diverse. Each role performance class requires a minimum of 144 hours in the clinical setting per semester. This is a total of 288 hours for the program. Students are encouraged to select a preceptor in the type of setting they aspire to teach (academic or staff development) and to complete additional hours and experiences to enhance their skills and knowledge.

#### **Preceptor Qualifications:**

In addition to the general qualifications of a preceptor, the appropriate preceptor for these courses is a master's- or doctorally prepared nurse who is experienced in the role of educator, willing to serve as a master teacher. The same role setting, and preceptor are used for both nurse educator role performance courses. Preferably, the preceptor is a Nurse Educator with a Master of Science in Nursing degree and experienced in teaching methods and strategies; demonstrates expertise in an appropriate clinical area; and can facilitate the student's application of theoretical knowledge to teaching/learning situations.

#### MSN 559 Nurse Educator Role Performance I: Curriculum and Teaching

#### **Course Description:**

A previously selected nursing clinical focus provides the basis for implementing the nurse educator role in an educational institution or health care setting. Under the supervision of the instructor and a preceptor, the student will apply curriculum development and didactic and clinical teaching/learning concepts and strategies.

- 1. Design a research/evidence-based teaching unit for a given target learner population using appropriate teaching strategies and measures for evaluation.
- 2. Implement innovative teaching strategies based on educational theory and evidence-based practices related to nursing education.
- 3. Identify essential competencies to the roles and functions of a novice nurse educator.
- 4. Examine the legal, ethical, and professional issues that impact the nurse educator in selected role performance settings.
- 5. Demonstrate appropriate skills in collaborating with interdisciplinary teams to achieve positive outcomes in the educational settings.
- 6. Critically reflect on the knowledge and skills gained from clinical practicum to achieve nurse educator competencies.

#### MSN 569 Nurse Educator Role Performance II: Testing and Evaluation

#### **Course Description:**

A previously selected nursing clinical focus provides the basis for implementing the nurse educator role in an educational institution or health care setting. Under the supervision of the instructor and a preceptor, the student will apply testing and evaluation concepts in didactic and clinical situations.

#### **Student Learning Outcomes:**

- 1. Formulate a plan for lifelong learning that reflects current nurse educator role expectations as well as personal career aspirations.
- 2. Demonstrate nurse educator competencies through synthesis and integration of prior learning and knowledge from nursing and other fields.
- 3. Critically reflect on the knowledge and skills gained from clinical practicum to achieve nurse educator competencies.

#### **Direct Patient Care Clinical Experience:**

In addition to the educational practicum experience, students are expected to engage in direct patient care during this course. Students are expected to complete 50 hours of a direct care clinical experience that focuses on the application of advanced health assessment, pharmacology, and pathophysiology skills, and clinical elective knowledge in selected clinical setting. Direct care refers to nursing care provided to individuals or families that is intended to achieve specific health goals or achieve selected health outcomes. Direct care may be provided in a wide range of settings, including acute and critical care, long term care, and home health settings. Students are to identify and work with an MSN prepared preceptor that provides direct care in the clinical arena. The preceptor may include Clinical Nurse Specialist, Clinical Nurse Leader, Nurse Midwife, Nurse Practitioner or Nurse Educator who provides direct care to patients in the advanced nursing role.

Below are objectives of the clinical practicum for direct patient care.

- 1. Integrate advanced health assessment, pharmacology, and pathophysiology skills in the clinical practicum setting.
- 2. Incorporate research findings and evidence-based practices to improve health outcomes for patients and/or families.
- 3. Collaborate with interprofessional members to positively impact the health of individuals, groups, and communities.

# Appendix C: Clinical Nurse Specialist

The CNS role is an advanced practice nurse with clinical expertise for a specialty population. Graduates of this program will be prepared to provide nursing care directly to clients, develop evidence-based standards and programs delivered by nursing personnel, and influence systems that affect healthcare. Each state individually determines the legal scope of practice and criteria for entry- into CNS practice. The Adult-Gerontology CNS program meets the requirements of the California Board of Registered Nursing for state CNS certification. Eligibility to be certified as a CNS in other states, or as a Neonatal or Pediatric CNS in California, requires the successful completion of a national certification examination. The CNS student must complete a minimum of 500 hours in a clinical setting under the supervision of a qualified preceptor and the program faculty.

#### **Preceptor Qualifications:**

The ideal preceptor has an advanced degree in nursing (master's or doctorate degree) and is recognized by the state as a Clinical Nurse Specialist. The majority of clinical hours should be with a CNS. If available, preceptors with CNS national certification are preferred. Additionally, the preceptor's population (adult-gerontology, neonatal, or pediatric) should align with the student's.

Since the CNS role is one of a clinical expert, the preceptor should practice in a specialty related to the student's clinical expertise with the population of either gerontology/adults, neonatal, or pediatric. The preceptor should be currently practicing in a CNS role (as opposed to a managerial role).

When CNSs are not available or additional expertise is deemed essential for the student's education, other professionals (e.g., master's or doctorally prepared nurse practitioners, physicians, nurses, or other health professionals with advanced preparation and specialized expertise) may precept CNS students for circumscribed experiences. If an NP is used, DNP preparation is preferred so the preceptor will be familiar with system-level leadership which clearly differentiates the CNS and NP roles.

#### MSN 547 - Clinical Nurse Specialist Role Performance I (3 units)

#### **Course Description:**

144 clinical hour practicum to apply theories for execution of CNS role in clinical settings with a specialty/population focus. Under supervision, the student is provided opportunities for role socialization, exploration of CNS responsibilities, and development of novice competencies.

- 1. Identify scope of practice and regulatory issues for the CNS role in the intended state of practice.
- 2. Synthesize the forces and barriers that shape the actual and potential role of the Clinical Nurse Specialist.
- 3. Develop plans of care for patients and families in a clinical setting with a population focus including the physical, psychological, social, cultural, and economic parameters based upon advanced comprehensive assessments, health promotion, and differential diagnoses.
- 4. Investigate phenomena of concern within the area of specialization involving the patient/client sphere of influence.
- 5. Demonstrate emerging novice CNS competencies.

#### MSN 548 - Clinical Nurse Specialist Role Performance II (4 units)

#### **Course Description:**

This 212 hour practicum requires the application of evidence-based practice and education principles in the clinical setting. Students will focus on health problems commonly encountered in the population of focus.

#### **Student Learning Outcomes:**

- 1. Apply evidence-based practice principles and models to CNS practice problems within the specialty/population of focus.
- 2. Execute the implementation of an evidence-based protocol or innovation suitable for the selected specialty/population.
- 3. Evaluate and disseminate key aspects of the implementation of an evidence-based protocol.
- 4. Critique the interprofessional collaboration involved in the delivery of health care within the context of the area of specialization.
- 5. Implement a planned educational agenda for staff in the clinical setting.
- 6. Investigate phenomena of concern within the area of specialization involving the nurses/nursing practice sphere of influence.
- 7. Demonstrate novice CNS competencies.

#### MSN 549 - Clinical Nurse Specialist Role Performance III (3 units)

#### **Course Description:**

This 144 hour practicum focuses on the CNS role in managing clinical outcomes. Students will provide consultation and wellness services, explore clinical concerns at the organizational level, and prepare for professional practice as a CNS.

- 1. Select outcomes of interest and measurement instruments for evaluation of interventions in the practice setting.
- 2. Generate a specific cost savings initiative for the practice setting.
- 3. Evaluate and select technology, products, and devices to support nursing practice and contribute to improved outcomes.
- 4. Devise a plan for the evaluation of CNS practice outcomes appropriate for the area of specialization.
- 5. Build a professional portfolio exhibiting development in the CNS role
- 6. Provide direct care wellness services for clients.
- 7. Investigate phenomena of concern within the area of specialization involving the health care organization or system.
- 8. Demonstrate entry-level CNS competencies.

# Appendix D: Family Nurse Practitioner

The FNP role is an advanced practice nurse with clinical expertise in managing patients in outpatient and primary care settings. Graduates of this program will be prepared to collect a comprehensive history, perform comprehensive and focused physical examinations, make medical diagnoses, order appropriate lab and radiologic exams, and provide comprehensive treatment and follow-up plans to patients across the age span, from the prenatal period through senescence.

#### **CERTIFICATION**

The program meets the California Board of Registered Nursing requirements for state certification to practice as a nurse practitioner and to obtain a furnishing number. It also meets eligibility requirements for graduates to sit for the National Certification board exams for FNPs from both the American Academy of Nurse Practitioners (AANP) and the American Nurses Credentialing Center (ANCC).

#### **CURRICULUM**

The curriculum is composed of MSN core, APRN core (3P's), and role specific FNP courses that total 48 semester units and 576 precepted clinical hours. The courses are primarily delivered online via the Canvas Learning Management System. Clinical competencies are practiced during frequent virtual synchronous meetings as well as 1-3 on-campus meetings each semester. It is recommended that students adjust their work schedules during the FNP clinical courses to accommodate both coursework and clinical time of 26-36 hours per week.

#### **FNP STATEMENT OF PURPOSE**

The purpose of the CSUDH FNP Program is to prepare nurses in California as family nurse practitioners. Our graduates will have the knowledge, skills, and capabilities to provide competent and safe primary care to diverse populations of all ages. This primary care will include diagnostic abilities, psychosocial assessment, health promotion, disease prevention, and disease management.

Approved by FNP Faculty on 9-12-16

#### **FNP PHILOSOPHY STATEMENT**

The faculty believes that the California State University, Dominguez Hills, Family Nurse Practitioner (FNP) Program prepares graduates to provide excellent, compassionate, primary care, to diverse populations of all ages. Graduates will be competent in utilizing technology for diagnostic, documentation, and information seeking purposes. They will work collaboratively with other health care professionals to optimize care. Our graduates will promote health and wellness and provide evidence-based disease management to individuals and their families.

The faculty believes our educational program can be provided effectively in a distance-learning format. Our FNP program is designed to offer exceptional primary care education to nurses who are limited in their ability to access quality programs due to geography, time, life circumstances, or other obstacles.

Approved by the FNP Faculty and SON Academic Affairs Committee 7-11-2016 updated 4-6-2022

#### **FNP PROGRAM LEARNING OUTCOMES (OBJECTIVES)**

In addition to the MSN Program Learning Outcomes, graduates of the FNP program will:

- Utilize advanced practice nursing and primary care knowledge and skills, to assess, diagnose, and provide safe and effective care to diverse patients of all ages and their families in primary care settings.
- 2. Demonstrate readiness to take the national certification examinations for Family Nurse Practitioners.

Approved by FNP faculty 2/2/23

#### PRECEPTOR QUALIFICATIONS:

The FNP student must complete a minimum of 576 hours in a clinical setting under the supervision of a qualified preceptor who must be approved by the FNP Director or designee. The ideal preceptor is a Family Nurse Practitioner with a minimum of a *Master of Science in Nursing* degree and adequate (two to three years) experience in the role. Other acceptable preceptors include master's prepared, outpatient, primary care nurse practitioners other than FNP; nurse midwives who hold a *master's degree* for the obstetric hours; and physicians, Medical Doctors (MD), or Doctor of Osteopathy (DO). Acute Care Nurse Practitioners (who do not hold national certification in an outpatient role) and Physician Assistants are **not** accepted as preceptors.

Program representatives assign students to clinical sites and preceptors within 100 miles of the student's home. The program will consider requests for preceptors and sites from students. Such requests must be made the semester prior to beginning the clinical rotation. Students should plan on precepting with the same preceptor throughout the program and add in additional hours in specialty areas (e.g. pediatrics, OB/GYN). Most of the clinical hours should be completed with a Family Nurse Practitioner.

#### PROGRAM PROGRESSION INCLUDES STANDARDIZED WRITTEN EXAMS

- 1. New FNP Students must attend the mandatory Orientation & FNP Breakout Session
- Students must demonstrate sufficient knowledge and skills to advance into the FNP Clinical courses.
  - a. Students must pass a standardized, nationally normed, examination to verify a sufficient knowledge in advanced pathophysiology, advanced health assessment, and advanced pharmacology. The exam is administered late in the Spring semester, the year the student begins FNP Clinical Courses. Students who do not achieve the minimal passing score will have the opportunity to remediate over the summer and re-take the exam at the beginning of the Fall semester. If the minimum score is not achieved on the second attempt, the student will engage in further remediation and return the following year for one final attempt.
  - b. Students must demonstrate proficiency taking a complete history & performing a complete physical exam prior to beginning the first FNP clinical course. Proficiency can be demonstrated with successful completion of MSN 521/522 Advanced Health Assessment the semester prior to beginning the first FNP clinical course. Students who have not taken Advanced Health Assessment at CSUDH within one calendar year, must have their skills validated by performance evaluation with FNP faculty (by appointment, fee applies). Students who took the course at another university must take the one-unit lab course (MSN 522) the semester prior to beginning FNP clinical course.
- 3. Students returning from a leave of absence:
  - a. Prior to successful completion of the first clinical semester must revalidate their knowledge and skills as described in #2 above.

- b. After successful completion of the first clinical semester must demonstrate compliance with an individualized re-entry plan developed by the FNP Director.
- 4. The California Board of Registered Nurses (BRN) requires theory and clinical courses to be taken concurrently. In the event a student does not successfully complete either the theory or clinical course, both must be repeated.
  - a. If an FNP role course is failed, the student will meet with the clinical instructor and/or the FNP director, and an individualized remediation plan will be formulated.
- 5. During the last semester of FNP coursework, and prior to graduation, students are required to complete a standardized, nationally normed, examination. These exams cover the breadth of topics common to primary care across the lifespan.
  - a. A preliminary exam, given earlier in the semester, provides students with a breakdown of strengths and weaknesses, which can be used as a study guide.
  - b. Students who fail to successfully pass the exam develop a remediation plan in conjunction with FNP faculty and are scheduled for another date to retake the exam prior to graduation.

#### FNP PROGRAM CLINICAL EXPERIENCE REQUIREMENTS

The required 576 precepted clinical hours are met by completing 144 hours each semester in primary care in each of the four clinical role performance courses. Students must update their Clinical Logs within 48 hours following the patient encounter. Failure to keep logs up to date may result in the loss of clinical hours. In the absence of an approved, serious and compelling reason, all students continue to engage in clinical hours throughout the entire semester.

FNP role performance courses must be completed in the state of California. Students may not attend clinical sites during holidays, winter and spring break, summer, or University closure dates without specific approval from the FNP director.

# <u>Approximate Minimal Specialized Clinical Expectations for Total FNP Program and Program Population Clinical Requirements</u>

All hours may be completed throughout the entire FNP program. Some pediatric and OB GYN hours must be completed during the second semester when the didactic content is covered. Hours are tracked in the online FNP log program.

#### Pediatrics: Required - 100 hours across the age span throughout the entire FNP program

Recommended breakdown:

0-1 years: 10-15 spread across the age span

1-3 years: 10 pts 4-11 years: 15 pts 12-17 years: 15 pts.

#### **Obstetrics - Required - 40 prenatal hours**

Recommended breakdown:

5-10 initial

20 – 30 return patients

Lactation support – maximum 16 hours

#### Gynecology – Required 40 hours throughout the entire FNP program

Required: 20-40-pelvic exams

Includes: Family planning, Routine GYN, Vaginitis, STI

#### Geriatrics – 100 hours throughout the entire FNP program

Recommended breakdown:

65 - 84

85 and over: 5 -10 patients

**Assisted living cases** – (e.g. HTN, DM, and multiple medical conditions from their place of residence. SOB, UTI, routine PE, preventive care ordered, X-Ray, UTZ, PT, OT, etc.

#### **Telehealth**

It is acceptable to count face-to-face hours spent providing primary care via telehealth as long as the hours are appropriately supervised by the preceptor. Students may count a maximum of 30 hours of telehealth per semester, with a total of 120 hours throughout the entire program.

#### **Clinical Focus by Semester**

- First Semester: Primary care for general health problems.
- **Second Semester:** Women & gender health, obstetrics, and pediatrics.
- Third & Fourth Semesters: Primary care for acute and complex chronic health problems that may be found in family and internal medicine settings.

The FNP director or designee may allow specialized clinical experiences for short periods during the program on a case-by-case basis. Some examples of these include diabetes, orthopedics, dermatology (not Medi-spa), urgent care, assisted living communities, etc. Clinical experiences in acute care (inpatient hospital), and skilled nursing facilities are not permitted.

#### **Clinical Activities**

After the first day of orientation at the clinical site, students should aim to begin seeing patients alone while consulting with the preceptor as outlined below:

- Review the chart, medication lists, & lab results
- Interview the patient (History)
- Perform the appropriate physical exam according to the patient's individual needs
- Develop a differential diagnosis, diagnosis, and preliminary plan
- Present the patient to the preceptor
- Revise the plan according to preceptor input. The preceptor may wish to re-interview and/or re-examine any or all the patient's History & Physical. The preceptor may agree or disagree with the plan and the plan is adjusted according to the preceptor's instruction. The preceptor supervises all activities and approve the final plan, including all medications.
- Provide patient education to the patient

#### **Dress Code and Equipment for FNP Students**

A clean, pressed Lab Coat shall be worn over business casual street clothes. No scrubs, shorts, jeans, or t-shirts. Bring a cardiology rated stethoscope (example, Littman Cardiology III) and reflex hammer to the clinic.

# PROCESS FOR APPROVAL OF FNP STUDENT REQUESTS FOR NEW CLINICAL SITES

- 1. Students identify a site and preceptor they would like to request
- Student sends Legal Name of the site and preceptor to the FNP Director to approve both the site
  and the preceptor. Preceptor and License are documents are reviewed and any issues
  uncovered are investigated. Next, the site is reviewed and evaluated for appropriateness for the
  level of FNP student. If approved by the FNP director, student submits an online Request for
  Affiliation Agreement
- 3. Student completes **My Request** in EXXAT as instructed in the Clinical Clearance section of this document.
- 4. Clinical Coordinator sends the affiliation agreement out to the preceptor/point of contact
- 5. Preceptor/contact returns agreement to Clinical Coordinator who forwards it to Procurement for final processing.
- 6. While waiting for the agreement to finalize, students may begin to upload their **Clinical Compliance Documents** into EXXAT, following the instructions in this handbook.

## **DEFINITIONS OF TERMS – Calif. Board of Registered Nursing (BRN)**

"Nurse practitioner" means an advanced practice registered nurse who meets board education and certification requirements and possesses additional advanced practice educational preparation and skills in physical diagnosis, psycho-social assessment, and management of health-illness needs in primary care, and/or acute care.

"Primary care" means comprehensive and continuous care provided to patients, families, and the community. Primary care focuses on basic preventative care, health promotion, disease prevention, health maintenance, patient education and the diagnoses and treatment of acute and chronic illnesses "Clinically competent" means the individual possesses and exercises the degree of learning, skill, care and experience ordinarily possessed and exercised by a certified nurse practitioner providing healthcare in the same nurse practitioner category. The clinical experience must be such that the nurse received intensive experience in performing the diagnostic and treatment procedures essential to the provision of primary care.

"Clinical practice experience" means supervised direct patient care in the clinical setting that provides for the acquisition and application of advanced practice nursing knowledge, skills, and competencies. "Direct supervision of students" means a clinical preceptor or a faculty member is physically present at the practice site. The clinical preceptor or faculty member retains the responsibility for patient care while overseeing the student.

## **FNP Clinical Courses**

#### MSN 558 - Family Nurse Practitioner: Role Performance I (3 units)

#### **Course Description:**

Emphasizes comprehensive assessment and management of common acute health problems seen in the primary care of clients across the life span. Focuses on the primary care of the individual as a member of the family within a culturally diverse environment. Requires 144 hours of clinical practice under supervision by a faculty instructor and an individual preceptor. CR/NC grading.

#### **Student Learning Outcomes:**

- 1. Systematically perform complete health exams on clients across the life span.
- 2. Conduct comprehensive family assessments with a special emphasis on at risk, vulnerable and diverse clients.
- 3. Analyze historical data, physical exam findings, and laboratory data to determine differential diagnoses for common primary care problems across the life span.
- 4. Evaluate the impact of community, cultural, socioeconomic, and psychosocial factors on the health care needs of individuals and families across the life span.
- 5. Analyze the pathophysiological basis for selected primary care problems across the life span.
- 6. Create a comprehensive database for the diagnosis and management of selected primary care problems across the life span.
- 7. Develop and evaluate treatment plans and criteria for evaluation of treatment for selected primary care problems across the life span.
- 8. Integrate findings from community, cultural, and family assessments into treatment plans for individuals and families across the life span with a special emphasis on at risk, vulnerable and diverse clients.
- 9. Formulate health promotion plans with clients and families from at risk, vulnerable and diverse backgrounds across the life span.
- 10. Using leadership and systems thinking skills, begin to collaborate with the inter-professional team and refer patients for outside services.
- 11. Begin to analyze available technology systems for impact on decision making and quality of care.

#### MSN 568 - Family Nurse Practitioner: Role Performance II (3 units)

#### **Course Description:**

Emphasizes comprehensive assessment and management of common acute health problems seen in women and children. Focuses on the primary care of the individual as a member of the family within a culturally diverse environment. Includes reproduction, pregnancy, contraception, growth and development, as well as health promotion and health maintenance for women and children. Requires 144 hours of clinical practice under supervision by a faculty instructor and individual preceptor. CR/NC grading

#### **Student Learning Outcomes:**

1. Systematically perform and document complete history and obstetric and gynecologic health exams.

- 2. Systematically perform and document history and complete exam of the male genito-urinary system.
- 3. Perform, adapt and document a relevant health history and exam on pediatric clients.
- 4. Conduct comprehensive family assessments with a special emphasis on at risk, vulnerable and diverse clients in the context of women's health and pediatrics.
- 5. Analyze historical data, physical exam findings, and laboratory data to determine differential diagnoses for common primary care problems specific to women and children as well as to conditions related to the male genito-urinary system.
- 6. Provide anticipatory guidance to pregnant women and children.
- 7. Create a comprehensive database for the diagnosis and management of selected primary care problems in women and children.
- 8. Develop and evaluate treatment plans and criteria for evaluation of treatment for selected primary care problems in men, women and children.
- 9. Integrate findings from community, cultural, and family assessments into treatment plans for men, women, children and families across the life span with a special emphasis on at risk, vulnerable and diverse clients.
- 10. Using leadership and systems thinking skills, collaborate with the inter-professional team and refer patients for services extending beyond those available at the clinic site.
- 11. Analyze available technology systems for impact on decision making and quality of care.

#### MSN 578 - Family Nurse Practitioner: Role Performance III (3 units)

#### **Course Description:**

Emphasizes growth in independent practice in providing comprehensive assessment and management of common chronic health problems seen in the primary care of clients across the life span. Focuses on the primary care of the individual as a member of the family within a culturally diverse environment. Requires 144 hours of clinical practice under supervision by a faculty instructor and an individual preceptor. CR/NC grading.

- 1. Systematically perform complete health exams on clients across the life span.
- 2. Conduct comprehensive family assessments with a special emphasis on at risk, vulnerable and diverse clients.
- 3. Analyze historical data, physical exam findings, and laboratory data to determine differential diagnoses for common primary care problems across the life span.
- 4. Evaluate the impact of community, cultural, socioeconomic, and psychosocial factors on the health care needs of individuals and families across the life span.
- 5. Analyze the pathophysiological basis for selected primary care problems across the life span.
- 6. Create a comprehensive database for the diagnosis and management of selected primary care problems across the life span.
- 7. Develop and evaluate treatment plans and criteria for evaluation of treatment for selected primary care problems across the life span.
- 8. Integrate findings from community, cultural, and family assessments into treatment plans for individuals and families across the life span with a special emphasis on at risk, vulnerable and diverse clients.
- 9. Formulate health promotion plans with clients and families from at risk, vulnerable and diverse backgrounds across the life span.

- 10. Using leadership and systems thinking skills, collaborate with the inter-professional team and refer patients for services extending beyond those available at the clinic site.
- 11. Analyze available technology systems for impact on decision making and quality of care.

#### MSN 588 - Family Nurse Practitioner: Role Performance IV (3 units)

#### **Course Description:**

Provides an opportunity to integrate evidence-based research into clinical evaluation and implementation of primary health care of clients across the life span. Emphasizes evaluation of the impact of community, cultural, socioeconomic, and psychosocial factors on the health care needs of individuals and families within a culturally diverse environment. Requires 144 hours of clinical practice under supervision by a faculty instructor and individual preceptor. CR/NC grading

#### **Student Learning Objectives:**

- 1. Systematically perform complete health exams on clients across the life span.
- 2. Conduct comprehensive family assessments with a special emphasis on at risk, vulnerable and diverse clients.
- 3. Analyze historical data, physical exam findings, and laboratory data to determine differential diagnoses for common primary care problems across the life span.
- 4. Evaluate the impact of community, cultural, socioeconomic, and psychosocial factors on the health care needs of individuals and families across the life span.
- 5. Analyze the pathophysiological basis for selected primary care problems across the life span.
- 6. Create a comprehensive database for the diagnosis and management of selected primary care problems across the life span.
- 7. Develop and evaluate treatment plans and criteria for evaluation of treatment for selected primary care problems across the life span.
- 8. Integrate findings from community, cultural, and family assessments into treatment plans for individuals and families across the life span with a special emphasis on at risk, vulnerable and diverse clients.
- 9. Formulate health promotion plans with clients and families from at risk, vulnerable and diverse backgrounds across the life span