Mesa Community College

RN REFRESHER
PRECEPTORSHIP PACKET
2017-2018

Nursing Department Contact Information

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OVERVIEW OF RN REFRESHER PROGRAM

The RN Refresher Program at Mesa Community College is approved by the Arizona State Board of Nursing (ASBN).   The program may be taken by any Registered Nurse for review and update of nursing theory and practice. In addition, successful program completion satisfies the ASBN RN license renewal requirement for applicants who do not meet the practice mandate as stated in The Nurse Practice Act, R4-19-312 (B), "An applicant for licensure by endorsement or renewal shall either have completed a post-licensure nursing program or practice nursing at the applicable level of licensure for a minimum of 960 hours in the five years before the date on which the application is received."

The RN Refresher Program consists of a ten-credit lecture/lab course titled Registered Nurse Refresher (NUR295).   The didactic portion is six credits and is delivered online. The course work includes general nursing concepts, pharmacology and care of the adult with selected medical surgical conditions. The clinical portion of the course is four credits. It is delivered in a hybrid format and includes online, interactive assignments, three mandatory campus lab days for skills review and competency testing and a 132-hour preceptorship with a registered nurse.   To complete a preceptorship in either pediatrics, obstetrics, or mental health, the refresher must have prior RN experience in the selected specialty. Evidence of specialty work history is required. The program aligns with the philosophy of the Maricopa**Nursing** program and the Massachusetts Nurse of the Future (NOF) ten core competencies.

An RN license, active or temporary, is required for a Refresher student to participate in the clinical experience. An RN Refresher, as assigned by the RN preceptor, may function in accordance with the definition and scope of practice specified in A.R.S. § 32-16001 (20) and R4-19-402 for a registered nurse. The performance of any nursing activity/skill not included in a basic registered nursing program, for example, removal of a femoral sheath and infusion of antineoplastic agents, requires additional nursing education, as determined by the Board.

During the precepted clinical, should the need arise, Refreshers may be asked to spend additional time in a clinical area to give faculty further opportunity to evaluate the Refresher's progress. If a health care agency requests that a refresher be removed from their facility, the Refresher will not meet the completion requirements of the program and will be given a grade of Z, no credit, for the 4-credit lab component of the course.

DEFINITION OF RN REFRESHER PRECEPTORSHIP

The preceptorship is a 132-hour clinical practicum. Practice settings vary. The preceptor must be employed in a position that requires an RN license to provide direct or indirect client care. Under the supervision of a Registered Nurse preceptor, the RN Refresher can integrate nursing knowledge and skills.

MISSION OF RN REFRESHER PRECEPTORSHIP

It is the mission of the RN Refresher preceptorship to provide individualized teaching and learning experiences to update the clinical skills of registered nurses and to provide support and encouragement for the Refresher's return to active nursing. To support achievement of the mission, necessary resources and qualified faculty are provided.

GOALS OF RN REFRESHER PRECEPTORSHIP

For RN refreshers, the preceptorship will:

❖ Provide a concentrated learning experience in a practice environment with a registered nurse
❖ Refine and update nursing skills
❖ Build confidence and competence
❖ Increase the level of independent functioning
❖ Increase a sense of accountability

GUIDELINES FOR THE PRECEPTORSHIP EXPERIENCE

Mesa Community College Faculty Agree to:
1. Be responsible for planning, with the preceptor, experiences that will facilitate meeting the learning needs of the students.
2. Validate that students are current on health and safety requirements including all immunizations, fingerprint clearance card, and CPR card.
3. Require that students write their personal learning objectives for the preceptorship experience.
4. Provide an orientation to a preceptorship that includes, but is not limited to:
   - Curricular outline of the program
   - Role of the preceptor and faculty
   - Validation of nursing skills
   - Evaluation responsibilities and standards for the student, course, and preceptor
   - Avenues of communication between the program, faculty, preceptor, facility, and student.
   - Expected initial level of knowledge, skills, and abilities of the student.
5. Meet with/communicate with the Refresher and preceptor at the beginning, mid-point, end, and as needed, during the preceptorship to clarify roles, learning goals, and the evaluation of student learning and progress.
6. Adhere to faculty-to-student ratios of 1 faculty member for every 10 precepted students during the times students are involved in the care of patients, (A.A.C. R4-19-204(C).
7. Maintain accountability for student education and evaluation.
8. Provide the preceptor with an opportunity to evaluate relevant portions of the preceptorship experience.

The Preceptee (Refresher Student) Agrees To:
1. Follow the policies as outlined in the Maricopa**Nursing** Student Handbook.
2. Provide faculty with work schedule prior to clinical days.
   *The faculty member must be aware of / approve of all scheduled preceptorship hours. Hours worked that have not been pre-approved may not count towards the 132-hour clinical requirement. This is at the supervising faculty's discretion.
3. In the event of illness or absence from any clinical, arrange to make-up those hours with preceptor. *Notify faculty in advance of change in assignment.
4. Demonstrate consistent progress toward and attainment of the clinical performance objectives.
5. Complete all required paperwork / assignments / discussion board activities.
6. Follow the preceptor if reassigned to another unit.
7. Contact the nursing faculty, along with the preceptee, if any error, unusual occurrence or incident occurs. Examples of when to call faculty (but not limited to) include: absence/illness, problem with preceptor or unit, incident in which you were involved, and need for support

GUIDELINES FOR THE PRECEPTORSHIP EXPERIENCE

The Agency Agrees to:

1. Permit students the opportunity for a learning experience within the confines of the practice setting and the student's level of preparation.
2. Permit students to collaboratively apply the skills of assessing, diagnosing, planning, implementing and evaluating.
3. Collaborate with the faculty in selecting the student's preceptor. Selection of preceptors will meet the following criteria:
   A preceptor will:
   - Hold a current RN license to practice nursing in Arizona or a multi-state compact license that is active and in good standing.
   - Possess clinical expertise appropriate to accomplish the goals of the preceptorship and has at least one year of work experience at or above the level of licensure of the student's program.
   - Hold an academic degree at the level or higher than the student's program whenever possible.

The Preceptor Agrees to:

1. Participate in faculty/student/preceptor conferences and communicate with faculty to clarify roles and the nature of the learning experience.
2. Provide an orientation to the practice area and expectations of nursing care standards.
3. Provide ongoing constructive feedback that relates to the Refresher's performance standards.
4. Precept no more that one Preceptee per shift.
5. Participate with the faculty and Refresher in the evaluation of the Refresher's clinical competence.
6. Provide opportunities to meet individual learning objectives within the parameters of the agency and in accord with the nursing role assumed by the preceptor.
7. Allow the Refresher to independently and/or collaboratively apply the skills of assessment, planning, implementation, and evaluation for own nursing practice.
8. Provide opportunities for the Refresher to assume a leadership role within the confines of the practice setting.
9. Serve as a resource person, consultant, and supervisor during the clinical nursing experience.
10. Review written learning goals prior to beginning each week of the preceptorship.
11. Provide clinical supervision appropriate to the Refresher's skill level. .
12. Adhere to the practice limitations for procedures as specified in the Guidelines for Clinical Supervision (p. 7).
13. Contact the nursing faculty, along with the preceptee, if any error, unusual occurrence or incident occurs.

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GUIDELINES FOR PERFORMANCE PROGRESSION

Expectations for Progression are Determined / Evaluated Based on Individual Practice Settings

Beginning of Rotation ~ 25% *or* ~ 33 total hrs	1. Orientation for students and preceptors 2. Locate agency policies, procedures, and standards of care 3. Observe other team and ancillary members in their roles (first shift) 4. Under the supervision of the R.N., progressively increase responsibility and level of independent functioning as it relates to the demands of the practice setting 5. Seek assistance, as needed ***Initial Visit/Communication: first day of preceptorship to be arranged by the student. See NUR295 course syllabus for additional clarification.**
Ongoing	1. Complete goals/summary sheets and obtain preceptor feedback 2. Read and respond to discussion board questions, as assigned (beginning, midpoint, final) 3. Alert instructor of any practice problems at time of occurrence
Middle Part of Rotation ~ 50% *or* ~ 66 total hrs	1. Goals/summary sheets incorporate evidence of performance progression 2. Assume 50% responsibility for work assignment, to the degree possible 3. Continue to seek out new learning experiences ***Midpoint Visit/Communication (~ 66 hours): to be completed on ONE document. Self-evaluation is first completed by the student. Preceptor will then complete his/her evaluation of the Refresher. Refer to NUR295 course syllabus for any needed clarification.**
Final Part of Rotation ~ 100% *or* ~ 132 total hrs	1. Continue activities as outlined above, demonstrating increased responsibility and level of independent functioning towards the end goal of full assumption of work assignment 2. Performance ability should be equitable to the level of peers, to a degree that is reasonably possible, given the demands of the practice setting and the practice limitations of a student vs an employee 3. Complete work in an organized and timely manner 4. Use preceptor as a resource person, only, to the degree reasonably possible ***Final Visit/Communication (end of rotation): to be completed on same evaluation document used at midpoint. Refer to NUR295 course syllabus for additional clarification.**

STUDENT EVALUATION OF PRECEPTORSHIP

My Preceptor is: _____   Agency: _____   Date: _____

Key	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
The PRECEPTOR is:					
1. Knowledgeable					
2. Able to communicate effectively with me and my coworkers.					
3. Able to provide consistent, constructive feedback.					
CLIENT ASSIGNMENT					
4. Included acuity level appropriate to meet my learning experience.					
5. Assigned to me with consideration for my learning needs.					
ASSUMPTION OF RESPONSIBILITY: During the preceptorship, I was:					
6. Offered assistance and guidance when I needed it.					
7. Given independence appropriately based on my knowledge and experience.					
8. Given increasing responsibility at a rate appropriate for my learning needs.					
COMMUNICATION: During the Preceptor Experience, I					
9. Had the opportunity to discuss my learning needs/experiences with my preceptor.					
10. Received consistent and constructive feedback regarding my performance.					
OVERALL LEARNING EXPERIENCE					
11. A variety of learning experiences were available to me, i.e., nursing procedures, specialty classes, meetings.					
12. Consistent support was available from nursing staff.					
13. Felt under-supervised.					
14. Felt over supervised					
15. The experience will help me in my future professional role					
NURSING FACULTY					
16. Readily available when needed					
17. Supportive of my learning experience					

Experiences most beneficial for professional growth:

Experiences least beneficial for professional growth:

PRECEPTOR EVALUATION OF PRECEPTORSHIP

Qualifiers for Evaluation:

S	=	**Satisfactory**
U	=	**Unsatisfactory**
NI	=	**Needs Improvement**

Preceptorship is:			
1. Conducive to the student's learning	Agree		Disagree
2. Helpful to my own professional growth	Agree		Disagree
Working relationship with the nursing faculty:			
3. Helpful to the student and me	S	U	NI
4. Readily available when needed	S	U	NI
5. Provided adequate number of meeting times with student and me	S	U	NI
6. Provided adequate support for the student and me	S	U	NI
Preceptorship Information:			
7. Orientation time spent with nursing faculty	S	U	NI
8. Preceptor materials provided were adequate	S	U	NI
9. Do you recommend the preceptor program for the students?	Yes		No
10. Would you be willing to be a preceptor again?	Yes		No

Comments/Suggestions:

FORMATIVE / SUMMATIVE EVALUATION TOOL

Evaluation of performance objectives and competencies will be determined according to the following scale:

Key to Evaluation Tool

E = Exemplary	Efficient and demonstrates ability to assume the role of the professional nurse. Demonstrates critical thinking, safe nursing care, and anticipates client needs at a level above peers.
S = Satisfactory	Usually independent or needs occasional supportive cues. Demonstrates critical thinking, safe nursing care, and anticipates client needs at the level of peers.
P = Progressing	Skillful in parts of behavior, procedure, or interventions. Needs directive cues in addition to supportive ones, requests supervision appropriately and safe. Performance is inconsistent.
U = Unsatisfactory	Unable to demonstrate behaviors, procedures, or interventions related to consistent safe nursing practice. Performance is at a level below peers and does not demonstrate ability to assume the role of professional nurse. Failure to progress in learning and in seeking learning opportunities.
NA= Not Applicable	Not applicable as determined by preceptor or instructor, or not observed.

Grading Criteria: To achieve credit for the Preceptor experience, the student must achieve a minimum of a "Satisfactory" mark in each of the performance objectives on the final evaluation of the preceptor experience. Evaluations including "Progressing" or "Unsatisfactory" rating on the clinical objectives will receive a "Z" grade and no credit for the course.

*S = Student Self-Evaluation; *P=Preceptor Evaluation of Student [Complete *prior* to meeting w/instructor]

Performance Objectives:	S-Mid	P-Mid	S-Final	P-Final	Areas of strong performance / areas for development
Date:					

Patient-Centered Care
 1. Provide priority-based nursing care to individuals, families and/or groups through independent and collaborative application of the nursing process.
    a. Demonstrate cognitive, affective, and psychomotor nursing skills when delivering patient care.
    b. Seek information from appropriate sources on behalf of the patient when necessary.
 2. Provide patient-centered care with sensitivity and respect for the diversity of human experience.
    a. Assess patient values, preferences, decisional capacity, and expressed needs as part of ongoing assessment, clinical interview, implementation of care plan, and evaluation of care.
    b. Communicate patient values, preferences and expressed needs to other members of the health care team.					

Professionalism 3. Identify the interrelationship between professional nursing standards of practice, evaluation of practice and the responsibility and accountability for the outcomes of practice a. Implement plan of care within legal, ethical and regulator framework of nursing practice.					

					Areas of strong performance / areas for development
b. Incorporate professional nursing standards and accountability into practice. c. Demonstrate accountability for own nursing practice. d. Demonstrate awareness of limits to one's scope of practice and adhere to licensure laws and regulations. e. Serve as a patient advocate.					

Leadership
 4. Assign, direct and supervise ancillary personnel and support staff in carrying out roles/functions aimed at achieving patient care goals.
   a. Use systematic approach in problem solving.
   b. Anticipate consequences, plan ahead, and change approaches to achieve best results.
   c. Based on skill level and experience of ancillary personnel, appropriately make patient care assignments.
   d. Model effective communication and promote cooperative behaviors.					

Informatics and Technology
 5. Use a health information system to access, enter and retrieve data used for patient care.
   a. Achieve basic skill level with available technology and information systems in the practice setting.
   b. Apply technology and information management tools to support safe processes of care and evaluate impact on patient outcomes.
   c. Maintain privacy and confidentiality of patient information.					

Communication
 6. Use clear, concise and effective written, electronic and other verbal/nonverbal communications.
   a. Communicate effectively with colleagues.
   b. Actively listen to comments, concerns, and questions.
   c. Contribute to conflict resolution.
 7. Use standardized communication approach to transfer care responsibilities to other professionals when patients experience transitions in care and across settings.					

Systems-Based Practice
 8. Describe the interrelationships among nursing, the nursing work unit and organizational goals.
   a. Incorporate resources available on the work unit contributing to the plan of care for a patient or group of patients.
   b. Incorporate the influences of the macrosystem, work unit
     and patient/family when making patient care decisions.					

Teamwork and Collaboration
 9. Demonstrate the ability to effectively participate in multidisciplinary teams.
   a. Act with integrity, consistency, and respect for differing views.
 	
   b. Integrate the contributions of others in assisting patients					

and/or family to achieve health goals.
    c. Initiate requests for assistance when situation warrants.
10. Model effective communication with interdisciplinary team members to promote cooperative behaviors.
    a. Solicits input from other team members to improve individual and team performance.
    b. Adapts own communication style to meet the needs of the team and situation.				

Quality Improvement 11. Identify quality initiatives in the practice setting.				

Evidence-Based Practice
12. Explain the role of evidence in determining best clinical practice.
    a. Locate evidence reports related to clinical practice topics and guidelines.
    b. Base individualized care on best current evidence, patient
      values and clinical expertise.
				Areas of strong performance / areas for development

Safety
13. Document interventions and nursing outcomes according to professional standards and work unit policy.
14. Adhere to established safety practices to assure safe practice.
    a. Accurately calculate medication dosages and safety administer medications.
    b. Perform selected clinical skills / procedures safely.
15. Demonstrate effective use of strategies to reduce risk of harm to self and others.
    a. Anticipate and protect patients from hazards related to environment and treatments / procedures.
    b. Adhere to all standard and transmission-based precautions to decrease risk of infection to self and others.
16. Use the nursing process to plan/provide holistic, safe and competent nursing care to meet the psychosocial and physiological needs of adult patients with selected medical surgical conditions and/or population specific health care needs.
    a. Apply health promotion, disease / illness prevention and health restoration strategies when delivering care to patients across the lifespan.
    b. Integrate physical, biologic, psychosocial, cultural and spiritual aspects into the plan of care.
    c. Apply pathophysiologic concepts to care for patients with selected alterations in health.
    d. Provide relevant and sensitive health education and guidance to patients and families.				

Student Signature Midpoint (MP) / Final (F) MP: / F:				
Preceptor Signature MP: / F:				
Instructor Signature MP: / F:				

Instructor Summary Notes:

Midpoint:

Final:

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DOCUMENTATION OF PRECEPTORSHIP HOURS

Refresher Student Name: _____

Preceptor's Name: _____ Agency / Unit: _____

Preceptee's Hours with Preceptor (must add up to ≥ 132 hours)

Date	Hours (lunch not included)	Preceptor's Signature
TOTAL HOURS		

I verify that _____ has completed the above clinical preceptorship hours under my supervision.

Preceptor Signature_____ Student's Signature_____

Preceptorship Agreement Form

I have received and reviewed the contents of the Maricopa**Nursing** RN Refresher Course Preceptorship Packet. I understand my roles, responsibilities, and limitations to participate in the preceptor experience.

Preceptor Signature_____   Date _____

Preceptee Signature_____   Date _____
(Refresher)

Nursing Faculty Signature_____   Date _____

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RN Refresher Data Sheet

Student ID: _____

Name _____Date_____

Address_____

City _____State_____Zip_____

Telephone Number and/or Cell Phone _____

Email Address_____

AZ RN/TRN License Number_____ Date of Expiration_____

Is your license unrestricted & in good standing with the AZ State Board of Nursing? ___Yes or ___No

How many years did you practice Nursing? _____

How long has it been since you worked as an RN? _____

Nursing Education: _____

Person to notify in case of emergency: _____
                                              Name

                                              _____
                                              Address

                                              _____
                                              City   State   Zip

                                              Telephone: _____

                                              Relationship: _____

Preceptorship Assignments:

Faculty: _____

Telephone: _____

Email: _____

Preceptor: _____

Agency: _____

Clinical Setting: _____

Telephone: _____

Email: _____