



TEXAS TECH UNIVERSITY  
HEALTH SCIENCES CENTER™

*School of Nursing*

# **2018 Clinical Coach Handbook**

Accelerated BSN Program:  
Second Degree BSN &  
Veteran to BSN Tracks

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# **Role of the Coach**

**Position Description**  
**Second Degree BSN/Veteran to BSN Clinical Coach**

**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER**  
**SCHOOL OF NURSING**

**Position Description**

**TITLE**

**Second Degree BSN/Veteran to BSN Clinical Coach**

**FUNCTION**

Serves as a preceptor to a Second Degree/VBSN student for the Foundations, Chronic Care, and Acute Care course clinical components.

**TYPICAL RESPONSIBILITIES**

Works with the Second Degree/VBSN student in the clinical setting for 12 to 24 hours per week, depending upon course requirements.  
Assists the Second Degree/VBSN Student in meeting clinical objectives set by the course facilitator.  
Completes student evaluations with the student present at mid-term and at the end of the semester, and submits to appropriate clinical faculty.  
Notifies appropriate clinical faculty of student problems in a timely manner to facilitate the remediation of inappropriate student behaviors.  
Offers objective, fair critique of student performance and assists in remediation as necessary.  
Reviews student progress of coursework through regular review of course information provided through course syllabi and coach newsletters

**QUALIFICATIONS**

**Education**

Bachelor of Science in Nursing, preferred

**Experience**

Minimum of two years of experience as a Registered Nurse on a Medical-Surgical or Acute Care unit.

**Knowledge, Skills and Abilities**

Minimum of two years experience as a Registered  
Recommendation of direct supervisor (Nurse Manager, Director, etc.)  
Nurse on a Medical-Surgical or Acute Care unit  
Effective verbal/written communication skills

**Licensure**

Licensure as a registered nurse in the State of Texas

**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER SCHOOL OF NURSING**  
**Accelerated BSN Program**

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**SIGNATURE PAGE: Clinical Coach/Preceptor Responsibilities**

Collaboration between the Clinical Site Coordinator (SON faculty), the Clinical Coach/Preceptor, and the student is formally established at the beginning of the experience. It is important that each individual obtain a clear and mutual understanding of the purpose of the arrangement and the related responsibilities of each role. Lines of communication must be established at the outset with frequent and open communication throughout the experience. The primary responsibilities for the Clinical Coach/Preceptor are described below:

- Retain ultimate responsibility for patients' care
- Contact Clinical Site Coordinator (SON faculty) if assistance is needed or if any problem with student performance occurs
- Provide faculty with primary and secondary contact information
- Collaborate with the student to develop a clinical schedule
- Function as a role model in the clinical setting
- Facilitate learning activities for no more than 2 students at a time
- Orient the student to the clinical agency
- Supervise the student in the performance of nursing care with the goal of moving the student toward more independent functioning of specific nursing tasks while assuring safe practice
- Follow all hospital and school policies, i.e. medication administration
- Participate in conferences (direct, email, and/or via phone) with the Clinical Site Coordinator (SON faculty) to discuss the student's clinical performance
- Evaluate the student's level of proficiency in clinical performance honestly and accurately using course-specific guidelines
- Provide feedback to the student regarding clinical performance on a regular and frequent basis
- Communicate to student and Clinical Site Coordinator (SON faculty) any absences from the clinical setting (illness, vacation, cancellation) – NOTE: If the Clinical Coach/Preceptor is consistently absent, the student will be assigned to a different Clinical Coach/Preceptor.
- Provide feedback to the nursing program regarding the clinical experience

The Texas Board of Nursing (BON) Education Guidelines for precepted clinical learning experiences are outlined on the BON website ([www.bon.state.tx.us](http://www.bon.state.tx.us)) in Guideline 3.8.3.a. and the definition of a preceptor is found in BON Education Rule 215.2 and 215.10 ([http://bon.state.tx.us/laws\\_and\\_rules\\_rules\\_and\\_regulations.asp](http://bon.state.tx.us/laws_and_rules_rules_and_regulations.asp)).

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Signature of Clinical Coach/Preceptor

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Date

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Printed Name of Clinical Coach/Preceptor

**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER SCHOOL OF NURSING**  
**Accelerated BSN Program**

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Signature of Clinical Coach/Preceptor

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Date

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Printed Name of Clinical Coach/Preceptor

Texas Tech University Health Sciences Center  
Equal Employment Opportunity, Prevention of Sexual Harassment  
and Title IX Mandatory Training  
Receipt and Acceptance Form

**For use by Recurrent Faculty and Staff, Standardized Patients and Job Coaches only**

I hereby acknowledge receipt of the Texas Tech University Health Sciences Center Equal Employment Opportunity, Prevention of Sexual Harassment and Title IX Mandatory Training and policies. I have read and understand the contents of the packet (seven pdf files including signature page) outlining the EEO and Title IX Laws; prohibiting employment discrimination, including sexual harassment, pursuant to the current General Appropriations Act, Article IX, Section 123.5 and the rights and responsibilities pertaining to you regarding Title IX of the Education Amendments of 1972. I have read, understand and agree to all of the above.

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Employee's Name

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Texas Tech HSC R#

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Employee's Title

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Employee's Department

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Employee's Signature

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Date

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Workforce Education Manager Signature

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Date





TEXAS TECH UNIVERSITY  
HEALTH SCIENCES CENTER  
School of Nursing™

**Second Degree BSN/Veteran  
to BSN Program  
Coach Manual  
2018**

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***Adapted from the Austin Area Health Industries Steering Committee Preceptor Module -  
Precepting Nursing Students: The Essential Elements***

Welcome to the Texas Tech University Health Sciences Center School of Nursing (TTUHSC - SON) Second Degree BSN/Veteran to BSN Program. You have been selected as a clinical coach because you are recognized by your facility as a proficient provider of care with clinical expertise and an exemplary role model for future nurses. Thank you for your willingness to serve as a BSN coach to a well-qualified nursing student for the 12 month program.

TTUHSC - SON has been providing professional nursing education for more than 25 years. The Second Degree Program was designed to meet the distinctive educational needs of students with previous baccalaureate education. The VBSN program was designed to allow for an accelerated pathway for veterans to capitalize on their medical experience in order to enter into the workforce with a BSN. Unlike a traditional undergraduate program in which a group of students is under the supervision of a single faculty member, the Second Degree/VBSN Program pairs one student with a BSN coach for the entire program. The accelerated, coaching format has proven successful and is truly a hallmark of the Second Degree/VBSN Program.

As a practicing nurse, you have the skills and knowledge to assist in the clinical education process. You will be directly involved in role modeling, socializing, and educating in the clinical setting. You will be in a unique position to contribute to and monitor the student's progress each step of the way through the program.

The purpose of this orientation manual is to give you the tools you need to be a successful coach and to prepare you for the joys and challenges of serving as a preceptor for nursing students. The manual provides you with the essential information you need to understand your responsibilities as a preceptor, the responsibilities of the student, as well as the faculty's role and responsibilities. In addition, you will find helpful teaching strategies, information about the legal and ethical aspects of your role, and several helpful resources.

Thank you again for agreeing to participate in this worthwhile program and for giving back to the profession in such a direct way! Please let us know how we can continue to assist you during the year.

**Orientation Manual Objectives:**

1. Identify the TTUHSC and School of Nursing mission and vision statements.
2. Describe the Second Degree BSN and Veteran to BSN curriculum.
3. Outline the definitions of the term *preceptor* located in the Texas Board of Nursing Rules and Regulations and in current literature.
4. Explain the responsibilities of the clinical coach, the student, and the faculty.
5. List the incentives and rewards offered to nurses who agree to serve as clinical coaches.
6. Discuss the responsibilities of the clinical facility and the nursing programs related to coaching/precepting.
7. Explain legal liability and ethics related to the role of the clinical coach.
8. Demonstrate clinical teaching strategies useful in assessing learning needs of the students, in coaching students to think like nurses, and in evaluating the students' clinical activities in the clinical setting.
9. Describe the characteristics of a successful and well qualified clinical coach.

# **TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER**

## **MISSION**

The mission of the Texas Tech University Health Sciences Center is to improve the health of people by providing high quality educational opportunities to students and health care professionals, advancing knowledge through scholarship and research, and providing patient care and service. The Texas Tech University Health Sciences Center fulfills its higher education mission by achieving the following institutional goals:

1. Foster the development of competent healthcare professionals and biomedical researchers.
2. Recruit, develop, and retain outstanding employees.
3. Advance knowledge and healthcare practice through innovative research and scholarship.
4. Promote improved community health through the provision of patient care services and healthcare education.
5. Operate effectively and efficiently through maximization of available resources.

## **VISION**

Texas Tech University Health Sciences Center will become a nationally recognized health sciences university.

## **SCHOOL OF NURSING**

### **MISSION**

The School of Nursing's mission is to educate students for practice in evolving healthcare systems and to advance knowledge and practice through research, service, and community engagement

### **VISION**

The School of Nursing's vision is to shape healthcare of the future by advancing the profession, improving the health of others, and inspiring exceptional care

### **VALUES**

The School of Nursing commits to:

- Seek transparency through open communication, respect, and clarity;
- Advance a work ethic of excellence, accountability, and integrity; and
- Promote a spirit of teamwork, trust, and compassion.

## **STRATEGIC GOALS**

1. **STUDENTS** – The School of Nursing will foster the development of competent nursing professionals through academic programs that address critical needs in the profession.
2. **FACULTY AND STAFF** – The School of Nursing will foster a rich and supportive environment for team members who are committed to the successful achievement of its mission.
3. **RESEARCH AND SCHOLARSHIP** – The School of Nursing will advance knowledge, practice, and pedagogy through innovative research and scholarship.
4. **OUTREACH/ENGAGEMENT** – The School of Nursing will promote improved community health through the provision of patient care services and healthcare education.
5. **OPERATIONS** – The School of Nursing will maintain effective and efficient operations in the accomplishment of its mission.

## **BRIEF HISTORY**

***Texas Tech University and Texas Tech University Health Sciences Center (adapted from Student Catalog, [www.ttuhschool.edu/son/catalog.aspx](http://www.ttuhschool.edu/son/catalog.aspx))***

Texas Tech University (TTU), which was founded in 1923 and enrolled its first students in the fall of 1925, is a state-supported, coeducational institution comprising the instructional colleges of Agricultural Sciences and Natural Resources, Architecture, Arts and Sciences, Business Administration, Education, Engineering and Human Sciences; the School of Law; the Graduate School and a number of special departments and divisions. Graduate work has been offered at TTU since 1927. The 61st Legislature of the State of Texas authorized the creation of the Texas Tech University School of Medicine as a separate educational institution. The Texas Tech University Health Sciences Center (TTUHSC) was officially designated by the 66th Texas State Legislature. Together with TTU, the Schools of Allied Health, Graduate Biomedical Sciences, Medicine, Nursing, and Pharmacy are classified as a Research institution.

Lubbock, the home of TTU & TTUHSC, has over 200,000 people residing here. It is situated on the South Plains of West Texas at an altitude of 3,250 feet. Dry, crisp air and sunny days throughout practically the entire year provide a healthy and invigorating climate. The university campus, a contiguous tract of 1,839 acres, lies at the western edge of the business section of the city. University buildings number 245, including the Lubbock campus, Junction campus, Pantex campus, agricultural field laboratories at New Deal, and campuses in Abilene, Amarillo, Dallas, El Paso, Odessa and Fredericksburg/Marble Falls. The present plant value is approximately \$230 million.

***Texas Tech University Health Science Center School of Nursing (adapted from Student Catalog, [www.ttuhschool.edu/son/catalog.aspx](http://www.ttuhschool.edu/son/catalog.aspx))***

The TTUHSC School of Nursing (SON) is the only nursing school on the South Plains that provides baccalaureate, masters, and doctoral education. Since its inception in 1979, the SON has offered innovative educational programs to meet the needs of Texas residents. With an

expanded selection of program options offered throughout Texas and beyond, the SON continues to help bolster the state's nursing workforce by educating more than 1,400 students each year.

The first students were admitted to the Traditional Bachelor of Science in Nursing four-year degree on the Lubbock campus in August, 1981. Four years later, RN to BSN students were admitted in the Permian Basin. The first students were admitted to the Master of Science in Nursing track in 1988, and the Accelerated Second Degree track was launched in Austin and Lubbock in 2005, and is now offered in Abilene, the Permian Basin, Amarillo, and Dallas-Fort-Worth area. In 2008, the inaugural cohort of doctoral students was admitted into the Doctor of Nursing Practice degree program in 2009, the Traditional BSN program was expanded to include Abilene and the Permian Basin.

***Texas Tech University Health Sciences Center Accreditation (adapted from Student Catalog, [www.ttuhschool.edu/son/catalog.aspx](http://www.ttuhschool.edu/son/catalog.aspx))***

Texas Tech University Health Sciences Center is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools to award bachelor's, master's, doctoral, and professional degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia, 30033-4097, or call 404.679.4500 for questions about accreditation of Texas Tech University Health Sciences Center. The Commission should be contacted only if there is evidence that appears to support the institution's significant non-compliance with a requirement of standard.

***School of Nursing Program Accreditation (adapted from Student Catalog, [www.ttuhschool.edu/son/catalog.aspx](http://www.ttuhschool.edu/son/catalog.aspx))***

In November 1982, the undergraduate program received full accreditation from the Board of Nursing for the State of Texas and in December 1983, the National League for Nursing granted initial accreditation, which was retroactive prior to the first graduation in June 1983. The graduate program received initial accreditation in March 1992. The School of Nursing programs are currently accredited by the Commission on Collegiate Nursing Education (CCNE) and the Board of Nursing for the State of Texas. The CCNE can be contacted at One DuPont Circle, NW Suite 530, Washington, DC, 20036; by phone at 202.463.6930; or by visiting the CCNE website at [www.aacn.nche.edu](http://www.aacn.nche.edu). The Board of Nursing for the State of Texas can be contacted at 333 Guadalupe #3-460, Austin, Texas, 78701, or by telephone at 512.305.7400.

In July 1980, the TTUHSC School of Nursing Continuing Education Program was first accredited by the Western Regional Accrediting Committee of the American Nurses' Association as a provider of continuing education in nursing. That accreditation, now offered through the American Nurses Credentialing Center, remains in effect. The official accreditation statement is: Texas Tech University Health Sciences Center ATP School of Nursing Continuing Nursing Education Program is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

## **IMPORTANT CONTACT INFORMATION**

The Clinical Site Coordinator (CSC) who arranged the clinical experience with the coach should be able to address any questions about the coach-student experience. The CSC may communicate in person, via e-mail, through text, or by telephone. The CSC is available for consultation at any time; however, they will conduct hospital visits to assess student performance and learning at least once every other week. Coaches can also contact the Department Chair or Program Director:

**Melinda Mitchell Jones, MSN, JD, RN**

Associate Dean/Department Chair of Non-Traditional Undergraduate Studies

3601 4th Street, MS 6264, Lubbock, TX

79430 (806) 743-9229 or (800) 493-3954

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Second Degree BSN Director

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**Deborah Sikes, DNP, RN, CNE**

Veteran to BSN Director

3601 4th Street, MS 6264, Lubbock, TX 79430

(915) 494-1558 **deborah.sikes@ttuhsc.edu**

## **UNDERGRADUATE PROGRAM PURPOSE AND OUTCOMES**

Under the guidance of an admissions committee all qualified applicants are carefully evaluated individually and holistically. Admission to the nursing program is highly competitive and only the most qualified applicants are selected.

### ***Purpose***

The purpose of the Undergraduate Program is to prepare generalist nurses who will develop into leaders for the future as they provide competent, compassionate patient care in the rapidly changing health care environment.

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

Upon program completion, graduates will be able to:

- Provide patient-centered care for individuals, families, and communities.
- Work as an effective member of interdisciplinary teams to ensure continuous and safe patient care.
- Employ evidence-based practice (EBP) by integrating current research with clinical expertise and patient values to provide optimal patient care.
- Apply quality improvement measures to continually improve health outcomes consistent with current professional knowledge.
- Utilize informatics to enhance patient safety, manage knowledge and information, make decisions, and communicate more effectively.
- Provide safe care to individuals, families and communities through individual performance and system effectiveness.

### Accelerated BSN Program: Second Degree BSN and Veteran to BSN Tracks

The Accelerated BSN Program consists of two tracks: Second Degree BSN and Veteran to BSN. The Second Degree BSN Track is designed for baccalaureate prepared graduates who are changing careers. Students are required to complete a certified nursing assistant program prior to admission to the Second Degree BSN Program. The Veteran to BSN Track is designed for veterans with prior military medical training and experience and builds on the education and experience of the veteran with a system of assessment that will allow for advanced placement in the curriculum based upon demonstration of knowledge and skill.

The three semester degree plan (one calendar year) is outlined below, followed by the course descriptions for all the courses. The **highlighted** courses are the ones in which the BSN coach and student work together:

<b>SEMESTER ONE</b>	<b>Course Name</b>
NURS 3107*	Pharmacology I
NURS 3215	Basic Skills of Nursing Practice
NURS 3307*	Health Assessment (Didactic and Clinical Course)
NURS 3325	Essentials for Professional Nursing Practice
NURS 3380*	Foundational Concepts of Nursing Practice (Didactic Course)
<b>NURS 3510</b>	<b>Clinical Foundations of Nursing Practice, CL</b>
NURS 4207*	Pharmacology II
<b>Total Credit Hours</b>	<b>19</b>
<b>SEMESTER TWO</b>	<b>Course Name</b>
NURS 3326	Evidence Based Practice
NURS 3385	Concepts of Chronic Care Nursing
NURS 3407	Perinatal Nursing, CL
<b>NURS 3520</b>	<b>Chronic Care Nursing, CL</b>
NURS 4411	Mental Health Nursing, CL
<b>Total Credit Hours</b>	<b>19</b>
<b>SEMESTER THREE</b>	<b>Course Name</b>
NURS 4104	Pharmacology III, CL
NURS 4317	Community and Population Health Nursing, CL
NURS 4391	Synthesis of Nursing Practice
NURS 4398	Concepts of Acute Care Nursing
NURS 4401	Child Health Nursing, CL
NURS 4409*	Management and Leadership in Nursing, CL
<b>NURS 4510</b>	<b>Acute Care Nursing Clinical, CL</b>
<b>Total Credit Hours</b>	<b>23</b>
<b>TOTAL PROGRAM Credit Hours 61</b>	

\*Veteran to BSN students can attempt Competency Assessment Battery exams for these courses



## COURSE DESCRIPTIONS

**3107 Pharmacology I** This course introduces principles of pharmacology, drug therapy, classifications of pharmacology, drug therapy, classifications of drugs, and nursing implications of pharmacotherapeutics. Legal, ethical, genetic, cultural and life span implications of drug therapy are also explored. Emphasis is on the principles of pharmacokinetics, pharmacodynamics, and pharmacogenetics in the treatment of selected illnesses. The focus is on utilization of the nursing process concepts in the safe administration of pharmacotherapeutics.

**3215 Basic Skills for Nursing Practice (CL)** This laboratory/clinical experience is an introduction to foundational skills for practice and an overview of the standards for nursing practice. This course focuses on client safety and comfort, nutrition, selected nursing interventions, and beginning assessment skills.

**3307 Health Assessment (CL)** An introduction to health assessment as a systematic process with emphasis on developing skill in the techniques of assessment and communication across the life span and therapeutic communication across the life span. Includes introductory concepts of data collection, health history, physical examination, use of technology to access and document holistic health assessment and clinical decision making. Performance assessment of skills is required in a laboratory experience.

**3325 Essential Concepts for Professional Nursing Practice** This course emphasizes concepts essential for professional nursing practice in the various roles of the professional registered nurse. The role of the professional nurse is introduced as well as discovering the nurse's position in patient care and advocacy, health promotion, and education. The nurse's legal and ethical responsibilities and role within the interdisciplinary team are explored through case studies of historical events. The focus is on developing an identity as the professional nurse.

**3326 Evidence Based Practice** This course will introduce students to evidence-based practice and research methods utilized in nursing practice. The purpose of the course is to allow students to develop skills in using the cyclical process of carefully identifying clinical problems, critically appraising available evidence, and successfully integrating evidenced based practice for enhancing patient outcomes.

**3380 Foundational Concepts of Nursing Practice** This course is an introduction to nursing as a systematic process with emphasis on the knowledge, skills and values core to evidence based professional nursing utilizing a framework of clinical judgment and decision-making coupled with a management systems approach of macro/micro systems. Emphasis is on human functioning, human diversity and responses to health and illness.

**3385 Concepts of Chronic Care Nursing** This course emphasizes chronic care nursing concepts essential for professional nursing practice in a variety of settings. Special focus is on the concepts of aging, health promotion, and disease prevention as well as illness management. Clinical judgment and reasoning and the integration of therapeutic nursing skills will be demonstrated through case study analysis and weekly critical thinking activities.

**3407 Developing Family Nursing (CL)** Encompasses concepts related to the safe delivery of evidence-based nursing care to childbearing families throughout the antepartum, intrapartum, postpartum, and newborn experience. Special emphasis is placed upon clinical experiences providing opportunity to exercise clinical judgement in case studies, simulation, community and acute care settings.

**3510 Clinical Foundations of Nursing Practice (CL)** This course provides students with the opportunity to demonstrate foundational professional nursing skills through clinical and simulated nursing activities for patients experiencing common health problems in a variety of health care settings.

**3520 Chronic Care Nursing Clinical (CL)** This course provides opportunities for students to integrate knowledge and theory essential to the care of patients experiencing chronic health alterations with special focus on the needs of the aging population. Clinical judgment and reasoning, therapeutic nursing skills, genetics and pharmacology concepts necessary for chronic care delivery are demonstrated in the application of evidence based nursing care through case studies and weekly clinical experiences.

**4104 Pharmacology III** The purpose of this course is to promote safety in medication administration, improve clinical judgment and critical thinking in the clinical environment using pharmacology simulation. The student will utilize knowledge from previous pharmacology courses.

**4207 Pharmacology II** The purpose of this course is to examine pharmacotherapeutic agents used in the treatment of illness and the promotion, maintenance and restoration of wellness. Emphasis is on understanding drug classification, actions, therapeutic use, adverse effect of medications and management of toxicity. The focus is on concepts of safe administration, drug calculation, client education and monitoring the response to pharmacotherapeutic agents. The student will synthesize information learned in previous pharmacology course.

**4317 Community and Population Health Nursing (CL)** This course emphasizes population-focused nursing and community-oriented approaches essential for understanding and addressing public health concerns. Focus is on the concepts of community and population health nursing practice, epidemiology and disease transmission, comprehensive assessment of risk factors and health problems, program planning and intervention, environmental health, collaboration with the interprofessional team, health promotion and disease prevention.

**4391 Synthesis of Nursing Knowledge (CL)** Provides students with an opportunity to assess and analyze own ability to synthesize concepts of nursing care and apply those concepts in simulation and standardized examinations.

**4398 Concepts of Acute Care Nursing (CL)** This course emphasizes acute care nursing concepts essential for professional nursing practice in complex adult medical/surgical environments. Advanced clinical judgment, reasoning and therapeutic nursing skills are demonstrated in the application of evidence-based nursing care through the use of case study

analysis with increasing complexities and critical thinking activities. The focus is on complex disease management including environmental factors, genetic risks, and preventive care using a collaborative approach.

**4401 Child Health Nursing (CL)** The course emphasizes child health and illness nursing concepts essential for professional nursing practice in pediatric acute care and outpatient settings. Growth and development, health promotion and safety are emphasized. Application of evidence based nursing care of pediatric patients and their families will be provided through clinical opportunities in pediatric settings. Application of clinical judgment and critical thinking will be demonstrated by students in the clinical laboratory environment, as well as acute, chronic and outpatient settings.

**4409 Management and Leadership in Nursing (CL)** This course surveys the role of the nurse as a leader, a manager and a member of an interprofessional team. Key concepts discussed in this course include change theories, quality improvement processes, and strategies for managing the costs and budgets in the patient care setting. This course will provide the entry level nurse with a foundation from which to engage in effective decision making regarding conflict management and personnel problems. Students will participate in clinical experiences involving integration of the roles of provider, manager, and interprofessional team member.

**4411 Mental Health Nursing** This course emphasizes the concepts of human mental health in altered states from adaptation through dysfunction to pathological processes. The focus is on approaches to promote mental health/optimal function in the care of patients, groups, and families experiencing altered states of mental health using evidence based standards of care.

**4510 Acute Care Nursing Clinical (CL)** This course provides opportunities for students to synthesize generalist nursing roles of provider and manager and nursing care, in clinical and simulated acute care settings. Clinical judgment and reasoning and therapeutic nursing skills necessary in the acute care delivery are demonstrated in the application of evidence-based nursing care through simulated case studies and weekly clinical experiences.

## **DEFINITION OF A CLINICAL COACH/PRECEPTOR**

Clinical coaches function in the role of a preceptor. According to the Board of Nursing for the State of Texas Rules and Regulations, Chapter 215 Professional Nursing Education, Rule 215.2 (10) Definitions, a preceptor is:

“A registered nurse or other licensed health professional who meets the minimum requirements in 215.10(j)(6) of this chapter (relating to Clinical Learning Experiences), not employed as a faculty member by the controlling agency/governing institution, and who directly supervises a student’s clinical learning experience. A clinical preceptor facilitates student learning in a manner prescribed by a signed written agreement between the educational institution, preceptor, and affiliating agency (as applicable).”

Rule 215.10(h) indicates: (h) Clinical preceptors may be used to enhance clinical learning experiences after a student has received clinical and didactic instruction in all basic areas of nursing or within a course after a student has received clinical and didactic instruction in the basic areas of nursing for that course or specific learning experience. (1) In courses which use clinical preceptors for a portion of clinical learning experiences, faculty shall have no more than twelve (12) students in a clinical group; (2) In a course which uses clinical preceptors as the sole method of student instruction and supervision in clinical settings, faculty shall coordinate the preceptorship for no more than twenty-four (24) students. (3) The preceptor may supervise student clinical learning experiences without the physical presence of the faculty member in the affiliating agency or clinical practice setting; (4) The preceptor shall be responsible for the clinical learning experiences of no more than two (2) students at a time per clinical group.

Rule 215.10(j)(6) indicates “Clinical preceptors will shall have the following qualifications: competence in designated area of practice, philosophy of health care compatible with the nursing program, current licensure or privilege to practice as a registered nurse in the State of Texas, or, if not a registered nurse, a current license in Texas as a health care professional with a minimum of a bachelor’s degree in that field

In congruence with these BON rules, TTUHSC-SON prefers that clinical coaches be prepared with BSN or higher degrees. Education Guideline 3.8.3.a *Precepted Clinical Learning Experiences* may be accessed on the BON web page for additional information.

## **REWARDS AND CHALLENGES OF COACHING**

Rewards and benefits of serving as a preceptor can be both personally and professionally satisfying.

### Personal Rewards:

As a preceptor, you have a unique opportunity to serve as a role model for nursing students by setting an example of excellence in nursing practice. As you answer students' questions and continually clarify and present the role of the nurse, you potentially will discover that you are affirming your own knowledge and reenergizing yourself in your nursing practice. Another potential outcome of these experiences with students is that you will revisit your own professional career goals as you begin to recognize your strengths as an educator and the rewards that come from this experience.

Because the Accelerated BSN Program is primarily web-based, you will have access to clinical nursing software containing clinical references that can be loaded on a smartphone or iPod Touch. Your student will also have the same technology and should be encouraged to use its references when providing nursing care.

### Professional Benefits:

Serving as a preceptor you obtain valuable practice experience to add to your resume` that strengthens your potential for promotion or other career opportunities.

As a preceptor, you may be entitled to invitations to school and scholarly events, such as conferences or workshops.

As a preceptor, you may receive points or credit for career ladder advancement depending upon what your facility offers.

As a preceptor, you and/or your eligible children may qualify for exemption of up to \$500 of tuition per term or semester.

[http://info.sos.state.tx.us/pls/pub/readtac\\$ext.ViewTAC?tac\\_view=5&ti=19&pt=1&ch=22&sch=P&rl=Y](http://info.sos.state.tx.us/pls/pub/readtac$ext.ViewTAC?tac_view=5&ti=19&pt=1&ch=22&sch=P&rl=Y)

### Challenges:

Coaching can be very rewarding personally and professionally. However, working with students at any educational level can be stressful. Burns et al (2006) discuss some of the challenges that coaches face as they balance job pressures with coaching responsibilities. The following table looks specifically at role expectations.

Student	Faculty	Preceptor
<b>Role expectations</b>		
Arrange schedule	Identify and secure appropriate sites for students	Orient student to site, policies, procedures
Develop personal learning objectives	Prepare student with necessary clinical skills	Facilitate informal, collaborative, respectful learning environment
Address course objectives	Provide preceptor with course objectives	Be a positive and effective role model
Observe policies and procedures of agency	Visit site during student experience	Provide learning experiences with appropriate patients
Confer with preceptor and faculty about progress and problems	Support and help preceptor develop teaching skills	Provide on-going feedback
Prepare for each clinical day	Monitor and evaluate student progress	Pace learning experiences to meet student needs
Review and read about past day's work	Provide evaluation feedback to preceptor	Direct student to resources, readings
Evaluate faculty, course, and preceptor	Solve student and/or preceptor problems with the rotation	Notify faculty of concerns about student's behavior, work, or progression
	Guide student clinical learning through class, chart reviews, case studies, assignments	Provide evaluation data to preceptor
	Provide feedback to student	
	Teach clinical reasoning and skills from own knowledge and experience	
<b>Role pressures: potential areas of difficulty</b>		
Make connections between didactic and clinical work	Identify preceptors and appropriate settings that meet student learning needs in a time of preceptor shortage	Teach from experience base
Work according to prescribed trajectory for clinical progress	Evaluate student progress indirectly through written documentation and short visits to the site	Maintain patient care service expectations
Balance adult life with student expectations	Keep learning expectations from impacting too greatly on preceptor service demands	Fit clinical teaching into the program's curriculum
Achieve learning needs within a service environment	Orient and develop preceptors within their time and interest constraints	Maintain rapport with patients and families while involving student in a meaningful way
	Reward preceptors for their work	Persuade colleagues to assist with student education
		Convince administration to permit students at site

(Burns et al., 2006, p. 174)

The authors also discuss “strategies for teaching while practicing on busy days.” Developing an optimal climate for learning on your unit will pay off for everyone:

- ☐ Maintain ongoing student assessment and feedback
- ☐ Focus on close communication
- ☐ Respond quickly to student’s stress
- ☐ Establish trusting relationships with your student
- ☐ Show mutual respect
- ☐ Treat the student as part of team

The Clinical Site Coordinator is a valuable resource for coaches to identify effective strategies for working with students. Additionally, each site has a Retention Counselor to assist with skills, content review, tutoring, etc.

## **FACULTY, COACH, AND STUDENT RESPONSIBILITIES**

Collaboration between the Clinical Site Coordinator (SON faculty), the Clinical Coach/Preceptor, and the student is formally established at the beginning of the experience. It is important that each individual obtain a clear and mutual understanding of the purpose of the arrangement and the related responsibilities of each role. Lines of communication must be established at the outset with frequent and open communication throughout the experience. The primary responsibilities for each role are described below:

### **Clinical Site Coordinator (SON Faculty) Responsibilities:**

- Orient both the student and the Clinical Coach to the clinical experience and course policies indicated in the SON policies and course syllabi
- Assure that all required Clinical Coach paper work is returned to the TTUHSC-SON Second Degree Student Affairs Program Coordinator (1-800-493-3954)
- Provide the Clinical Coach with the semester newsletter, containing information about the course syllabus and expectations for the specific course
- Establish communications such as, conferences, emails, texts, and phone calls with the Clinical Coach to discuss the progress of and to evaluate the student's performance
- Support the Clinical Coach in guiding the student's clinical experiences and making assignments
- Be readily available for problem-solving and consultation through telephone, text, and/or email communication and periodically visit the clinical setting (a minimum of once every other week)
- Provide student feedback to support student's efforts to refine performance
- Assume overall responsibility for assigning the student's clinical performance grade
- Obtain feedback from the Clinical Coach regarding the coach-student dyad
- Document all visits with the student and Clinical Coach (this is done in the SON electronic database)

### **Preceptor/Coach Responsibilities:**

- Retain ultimate responsibility for patients' care
- Contact Clinical Site Coordinator (SON faculty) if assistance is needed or if any problem with student performance occurs
- Provide faculty with primary and secondary contact information
- Collaborate with the student to develop a clinical schedule
- Function as a role model in the clinical setting
- Facilitate learning activities for no more than 2 students at a time
- Orient the student to the clinical agency
- Supervise the student in the performance of nursing care with the goal of moving the student toward more independent functioning of specific nursing tasks while assuring safe practice
- Follow all hospital and school policies, i.e. medication administration
- Participate in conferences (direct, email, and/or via phone) with the Clinical Site Coordinator (SON faculty) to discuss the student's clinical performance

Evaluate the student's level of proficiency in clinical performance honestly and accurately using course-specific guidelines  
Provide feedback to the student regarding clinical performance on a regular and frequent basis  
Communicate to student and Clinical Site Coordinator (SON faculty) any absences from the clinical setting (illness, vacation, cancellation) NOTE: If the Clinical Coach/Preceptor is consistently absent, the student will be assigned to a different Clinical Coach/Preceptor.

#### Student Responsibilities:

Collaborate with the Clinical Coach to schedule clinical experiences  
Submit the clinical schedule to the Clinical Site Coordinator prior to the start of the experience (preferably 2 weeks in advance whenever possible)  
Maintain open communication with the Clinical Coach, Clinical Site Coordinator, and staff  
Adhere to safety principles and legal and ethical standards in the performance of nursing care, including but not limited to those identified in the Second Degree Program Detailed Clinical Standards  
Be accountable for learning activities and nursing actions in the clinical area  
Provide nursing care, including medication administration, under the supervision of the Clinical Coach and/or Clinical Site Coordinator, in compliance with institutional and course policies  
Contact Clinical Site Coordinator by telephone, text, or email, if faculty assistance is necessary  
Notify Clinical Site Coordinator immediately of any medication error or clinical incident; complete the medication/clinical incident form for the school and comply with the clinical agency policy and procedures, in collaboration with the Clinical Coach  
Develop greater competency in organizing self, managing patient care, and delivering complex nursing care  
Complete course evaluation as indicated by faculty instruction and the school policy  
Complete all required paper work to complete course requirements and submit to faculty according to faculty instruction and the course syllabus

### **CLINICAL FACILITY AND NURSING PROGRAM RESPONSIBILITIES**

The clinical facility and nursing program enter into a formal collaborative agreement before preceptorships are arranged for the clinical experiences of nursing students. These written agreements detail the responsibilities of both entities.

#### Nursing Program Responsibilities:

Assure that preceptor(s) meet the requirements as stipulated by the Board of Nursing for the State of Texas  
Maintain a written affiliation agreement with the facility for the provision of student clinical experiences  
Assume overall responsibility for orientation of preceptors, or confirm training previously attained by the preceptors



Assume student compliance with standards on immunizations, CPR certification, criminal background screening, liability insurance coverage, clinical agency environment of care orientation, and training for OSHA standards

Work cooperatively with the preceptor(s) and agency to determine appropriate placements and assignments

Communicate instructor and student assignments and other essential information to the facilities.

#### Clinical Agency Responsibilities:

Retain ultimate responsibility for the care of clients

Retain responsibility for preceptor's salary, benefits, and liability

Interpret the preceptor program and expectations of students to other agency personnel who are not directly involved with the preceptorship

Assist with the school's evaluation of the preceptor experiences

### **LEGAL AND ETHICAL ASPECTS OF BEING A PRECEPTOR**

LEGAL – BON Rules and Regulations, Texas Nursing Practice Act, Student Handbook and Catalog, Delegation

ETHICAL – ANA Code of Ethics, Student Code of Conduct, Honest and Accurate Feedback/Evaluation

A Coach website (<http://nursing.ttuhsu.edu/coaches>) has been developed to provide 24/7 access to clinical objectives and skills, clinical evaluation tools, orientation modules, coach newsletters, and the Coach Manual. There is also a link to submit questions directly to the program director.

### **SUCCESSFUL COACH CHARACTERISTICS**

We already know that you are highly respected for your clinical expertise and leadership abilities. Take a minute to review the list of the characteristics of a successful coach (Baltimore, 2004; Croxon & Maginnis, 2009). How many of these characteristics can be applied to you?

- Knowledgeable ○ Skilled clinician ○ Competent
- Patient
- Enthusiastic
- Advocate
- Teacher
- Confidant
- Sense of humor
- Respectful
- Lifelong learner
- Self-aware
- Self-controlled
- Motivated
- Motivational
- Passionate about nursing
- Empathetic

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- |                     |                            |
|---------------------|----------------------------|
| ○ Knowledgeable     | ○ Respectful               |
| ○ Skilled clinician | ○ Lifelong learner         |
| ○ Competent         | ○ Self-aware               |
| ○ Patient           | ○ Self-controlled          |
| ○ Enthusiastic      | ○ Motivated                |
| ○ Advocate          | ○ Motivational             |
| ○ Teacher           | ○ Passionate about nursing |
| ○ Confidant         | ○ Empathetic               |
| ○ Sense of humor    | ○ Strong social skill      |

## GETTING TO KNOW YOUR STUDENT

During your initial meetings with your student, it would be good to share information and get to know each other, such as, “personal and professional backgrounds, teaching–learning and communication styles, and common reactions to stress” and “circumstances that could potentially affect learning” (Baltimore, 2004, p. 134).

When the student first comes to the unit, be sure to introduce him/her to the staff, provide an orientation to the physical environment, and review how to locate policies and procedures related to patient care. Help the student feel like a member of the health care team rather than a guest. The student will slowly, but surely become a contributing member of the team.

It will be helpful to understand your student’s learning style. Ask how the student learns best. If he/she doesn’t know, suggest that he/she complete a learning style inventory, such as the ones found on the following websites: [www.vark-learn.com](http://www.vark-learn.com) or [www.kiersey.com](http://www.kiersey.com).

## CLINICAL TEACHING STRATEGIES

You are probably already very good at teaching. After all, you are a nurse! Teaching is what we do. This portion of the orientation is designed to give you some tips for using your teaching skills in your new role as coach-educator.

Let’s start with four basic principles about clinical teaching and learning (Burns, Beauchesne, Ryan-Krause, & Sawin, 2006, p. 175):

1. Learning is evolutionary.
2. Participation, repetition, and reinforcement strengthen and enhance learning.
3. Variety in learning activities increases interest and readiness to learn enhances retention.
4. Immediate use of information and skills enhances retention

Even though your student already has a bachelor’s degree, he or she is completely new to nursing – a blank slate, if you will. The student’s knowledge base will “evolve” over time. You will see it happening before your very eyes. Be patient; it is a beautiful (and sometimes slow) process.

The most important teaching strategies to employ with nursing students in the clinical setting include: questioning and feedback, assessing learning needs to determine what they already know about their patient(s) and the patient care required, and evaluating the progress and competencies required for high quality and safe clinical practice.

Let us examine some key teaching strategies:

Questioning students to determine what they know and exactly what they plan to do and why is a most important tool

Modeling clinical practice, including thinking out loud, to demonstrate how you formulate clinical judgments will be critically important to the students’ learning

Providing feedback (both positive and negative) is another helpful and essential strategy to employ

And finally, evaluating the progress of students is an ongoing continuous process that will culminate in a final review and conclusion about students' work

The faculty will maintain the responsibility of awarding the final clinical grades but will rely on your invaluable input. Assisting students to improve throughout the course will hopefully lead to a successful completion of all clinical objectives and ultimately course objectives and eventually, successful practice as a registered nurse.

### ***The Fine Art of Questioning***

One of your primary goals is to help the student apply theory (what he is learning in the online course) to practice (what he sees in the clinical setting) in order to think critically and make sound clinical decisions. To find out what the student is learning in the online course ask the student and review the semester newsletter. Let's assume that you have accessed the course information and are ready to reinforce some concept or learning objective. How should you proceed? Ask questions!

Learning goal	Script	Rationale
1. The student is to make a decision regarding the case at hand	"What do you think?"	This question is helpful throughout the decision-making analysis—from making a diagnosis to working out a plan; the student is not simply providing information to the preceptor to make decisions
2. Probe for supportive findings and evaluate the critical thinking that led to the decision	"Why do you think that?" "What led you to that conclusion?" or "What else did you consider and rule out?"	Diagnose the learner's understanding—gaps and misunderstandings, poor reasoning or attitudes; do not ask for textbook knowledge
3. Tell student what was right in the conclusions and critical thinking	"Specifically, you did a good job of _____ . . . and this is why it is important. . . ."	State specifically what was done well and why it was important to reinforce excellent performance
4. Correct student errors	"You did well based on your knowledge of older children but didn't factor in the infant's development"; "I disagree with . . ."; "A more efficient way. . ."	Specific correction will reinforce correct ideas and extinguish incorrect ones
5. Teach a general principle/ clarify the take-home lesson	"The key point I want you to remember is . . . ."	Point out key ideas, prioritize essential points among many details
6. Your own one-minute reflection	"What did I learn about my teaching?"; "What did we learn from this?"	Place exercise into larger context of patient care and refocus for teaching episodes

*Adapted from Neher, Gordon, Meyer, & Stevens, 1991.*

(From Burns et al., 2006, p. 174)

Guide the student to think about theory as it applies to the current situation. Help them connect the pathophysiology of underlying diseases with assessment findings and interventions. Shift report is a perfect time to stimulate critical thinking as your student learns to quickly summarize key patient care issues, events, goals, and outcomes (Baltimore, 2004).

Forneris & Peden-McAlpine (2005) found that “coaching is integral to a process of thinking critically.” One resource gave specific examples of questions that help the student focus on important details while setting aside irrelevant data during decision making. You may find these questions, shown in the table below, helpful during your work with your student.

- <sup>35</sup><sub>17</sub> Ask Why
  - Why did you do that?
  - Why would you do that?
- <sup>35</sup><sub>17</sub> Ask about the patient
  - What's happening with the patient?
  - How do you know?
- <sup>35</sup><sub>17</sub> Use imagination to explore possible options for change in action
  - If you could do anything to change the situation, what would that be?
- <sup>35</sup><sub>17</sub> Evaluate the timing of questions
  - Is the question being asked at the appropriate time and level?
- <sup>35</sup><sub>17</sub> Use divergent questions
  - What do you think is happening?
  - What do you predict will happen if you do this?
  - Tell me if what happened was appropriate? Why or why not?
  - Tell me how you think the actions accomplished the goals or met the patient's needs
- <sup>35</sup><sub>17</sub> Avoid memory questions
  - Don't ask for fact questions or questions phrased to give either a right answer or wrong answer; INSTEAD guide questions so that multiple answers can be given
- <sup>35</sup><sub>17</sub> Focus on problem solving questions
  - What are you paying attention to that is bringing your care to a stop?
  - What data will need to be collected?
  - To what information should you pay attention?
  - What information is not helpful?
  - Are there any patterns that you should pay attention to?
- <sup>35</sup><sub>17</sub> Focus on cues
  - Which cues are leading you to draw a conclusion?
  - What prior learning experiences do you have?
  - What aspects of the situation were significant?
- <sup>35</sup><sub>17</sub> Help novice nurse to draw conclusion
  - What are the data saying?
  - What are the necessary nursing interventions to support this medical approach?
  - What was your rationale for the action you chose?
  - Is this experience similar to other care situations?

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*Note:* Adapted from Ironside, 2003b; Myrick & Yonge, 2002 (as cited in Forneris & Peden-McAlpine, 2005)

Besides the Socratic Method (questioning described above), you can help your student by “thinking aloud.” As your student observes you throughout the shift, tell her what you are thinking as you go. This may take some practice on your part, because your thoughts are automatic now and many may feel like intuition. If you take the time to explain your actions, you will teach your student so much more than if she simply observes you in action without commentary.

### ***Modeling Clinical Practice***

Students will learn from your role modeling whether or not you purposefully present yourself as a role model. Two of the most significant aspects of learning accomplished through role modeling are critical thinking and professional role behavior in interaction with patients, interdisciplinary colleagues, and others.

Your thinking is invisible – just as the student’s thinking process is invisible unless you ask for responses that call for the student to describe his or her thinking. Make your thinking visible to teach clinical judgment. Think-out-loud whenever appropriate. Since thinking-out-loud is not a

very natural behavior, practice. As you go about patient management without a student present, challenge yourself to formulate a description of your thought process.

You will find some times inappropriate for thinking-out-loud (because of concerns about the effect on a patient who is present or because of concerns about the effect on interdisciplinary or political relationships). In those situations, alert the student in advance to attend to particular critical features of your behavior. Afterward, ask the student questions about his or her observations and ask the student to interpret your rationale. This approach is a version of a “pop-quiz” on thinking-out-loud.

When you are thinking-out-loud, call attention to the essential features of your actions. In some situations there may be a crucial sequence of actions or other features which are more important than others.

Let the student see the consequences of your actions. Seeing your favorable outcomes and tying them to specific actions focuses the student’s attention and motivates.

Brookfield (1990), an adult education authority, refers to our mistakes as our “instructional friends.” Our instructional friends teach us how to improve, what to watch out for and many other valuable lessons. You will find students extremely attentive to your war stories of valuable lessons learned from mistakes.

Experienced professionals know that everyone makes mistakes occasionally or at least can see a better course of action with 20/20 hindsight. Use an occasional, “I remember the time...” or “I learned this the hard way when...” This approach is a variety of role modeling that draws upon reflection on practice. With this approach you can sometimes prevent student errors.

Students may also have greater willingness to approach you with their uncertainties if they perceive that you have a reasonable tolerance for error. This certainly is not meant to suggest lowering performance standards or quality of care. Rather, the intent is that when mistakes occur, as they inevitably will, find the learning opportunity as well as apply whatever corrective action is indicated.

It is extremely important for the student to understand the connection between nursing practice and the rules and regulations that govern that practice. Please refer to and discuss the Nursing Practice Act and Rules and Regulations ([http://www.bon.state.tx.us/laws\\_and\\_rules\\_nursing\\_practice\\_act.asp](http://www.bon.state.tx.us/laws_and_rules_nursing_practice_act.asp)) with your student.

### ***Providing Feedback***

Providing both positive and negative feedback to students is a critically important role of the preceptor. Feedback answers the question, “How am I doing?” Providing positive feedback frequently and directly will help students know when they are making good decisions and increasing their critical thinking and psychomotor skills. Negative feedback offered from a positive perspective also provides them with an immediate alert that they have misunderstood, acted on or omitted something that may not be in the best interest of the patient.

Because this teaching strategy is so essential to your role, an in-depth discussion of the principles of effective feedback will be provided.

Feedback should be helpful to the person who receives it. Feedback will be most helpful when the student:

- Understands the information.
- Receives the information close to the time of the activity in question.
- Is able to accept the information.
- Is able to do something about the information.

Important Points about Feedback:

- Everyone deserves feedback.
- Saying the right words is not nearly as important as knowing why you are saying them.
- Negative feedback (or criticism) will most often be uncomfortable for both parties.
- Positive feedback can be equally uncomfortable but no less needed.

*Guidelines for Providing Constructive Criticism:*

Focus on CHANGEABLE THINGS.

- Feedback can lead to improvements only when it is about things which can be changed.
- Share ideas and information and explore alternatives rather than expecting answers or solutions.

Make DESCRIPTIVE NOT INTERPRETIVE statements.

Act as a video camera. Playback a report of your observations rather than your interpretation about why things happened or what was meant by them. If you observe a practice that the student needs to improve, state your observation and then ask questions such as, “How could you do that more efficiently?” or “How could you do that procedure more safely?” or “What was a risk or potential problem with that approach?”

Make SPECIFIC statements.

- Look for the details.
- Give concrete and objective “playback.”
- Focus on the student’s actions (or sequence of actions, or omitted actions).
- Offer specific positive, as well as corrective, statements. “Good job,” is too general; state what exactly was “good” and why.
- Give specific suggestions about how to improve.

Provide IMMEDIATE feedback.

- The sooner feedback is given, the more effective it will be.
- When you must delay, identify the specific time or incident to which you are referring.
- Many occasions will arise when you must defer feedback. You may defer feedback to avoid delays in care, to avoid embarrassing the student, or for other reasons. Because

such delays are appropriate in the practice environment, it is important to make a habit of giving feedback at the end of the day.

#### Choose APPROPRIATE TIMES.

- Give feedback when the receiver is ready to become aware of it. Of course, issues of safety, ethics or legal requirements take precedence over the student's readiness to receive feedback.
- Critical feedback in front of others may be more damaging than helpful.
- Feedback provided should serve the needs of the recipient rather than the needs (for "release") of the giver.

#### Choose ONE ISSUE at a time

- Focus on the most critical behavior needing feedback at the time.

#### Do NOT DEMAND A CHANGE

Providing feedback and helping the student explore alternatives is not the same as requesting or demanding that the student change. There will be occasions when you request or demand changes in student practice. However, keep in mind the video playback analogy. Share your observations and perceptions with the student, reflect on your observations with the student and encourage the student to develop the habit of reflecting on practice.

### ***Evaluating Student Progress***

You are responsible for ongoing evaluation of your student's progress toward course objectives and professional role expectations. As you monitor your student's clinical performance and skill development, ask "check-point questions" to identify issues related to "overconfidence" or "underconfidence" and additional learning needs (Baltimore, 2004).

- ☐ What do you like about what you did today?
- ☐ If you could do it over, what would you do differently?
- ☐ What would you like to work on next shift?

Providing constructive feedback can be challenging for coaches. You must be able to tell your student both good news and not so good news. He needs both your positive and negative feedback. You are the expert. You can help him identify strengths and areas for improvement.

Informal and ongoing evaluations and feedback should take place each shift. Clinical site coordinators will gather feedback during site visits, as well as during formal midterm and final clinical evaluations.

The box below shows student behaviors that may be clues about student progress in the clinical setting (Burns et al., 2006, p. 177):



Formal evaluation and feedback will take place in the middle and at the end of each semester on the evaluation tool designed for each medical-surgical course. The tool can be found on the Coaches Website (<http://nursing.ttuhsu.edu/coaches>). The evaluation tool is divided into two sections: Clinical Standards and Clinical Performance. The SON Student Handbook (<http://www.ttuhsu.edu/son/handbook.aspx>), the TTUHSC Student Affairs Handbook (<http://ttuhsc.edu/student-services/>), and the course syllabi contain information regarding clinical standards and associated behaviors. Clinical Site Coordinators will also enter Coach feedback and evaluation information collected during site visits in the Clinical Database.

## **COACHES' FREQUENTLY ASKED QUESTIONS**

*How can I help the student feel a part of the unit where I work?*

- Introduce the student to the staff
- Include the student in nurse reports
- Participate in a student tour of the unit
- Dialogue with the student while making decisions
- Communicate with the student consistently
- Utilize the student's goals/clinical checklists in the learning process
- Provide constructive feedback routinely

*How and when do I communicate with the Clinical Site Coordinator?*

- Notify the Site Coordinator immediately if you observe the student in unsafe or unprofessional conduct.
- Information shared with faculty is held in strict confidence.
- The faculty liaison is available to assist the coach at any time via phone or email; site visits will also be made every other week.

*Is the student working under my license?*

- The student does not work under your license.
- The Board of Nurse Examiners for Texas states (Rule 215.10) that the nursing program and faculty liaison assumes overall responsibility for the precepted student's teaching and evaluation.
- Clarity about the student's level of competence will serve as a basis for appropriate patient assignments and adequate supervision.
- Agency nursing staff maintains primary responsibility for patient care.

*What if I just cannot work with the student?*

- Personality differences can create challenges in communication on occasion. This nursing program's goal for a student's clinical experience is that the experience be mutually positive for both the student and coach. Therefore, the Site Coordinator is committed to assisting you to resolve problems. Contact the faculty as soon as you notice a problem.

*How closely do I have to monitor the student?*

The Board of Nurse Examiners for the State of Texas states that preceptors are responsible to guide, facilitate, supervise, and monitor the student in achieving the clinical objectives.

Each nursing program requires that students be observed closely for any behaviors that do not meet the three criteria of the Critical Safety Elements: Safety, Knowledge, Communication.

Each student is expected to function in the role of a pre-licensure student nurse during the clinical experience. Each of them will need close supervision, at least initially. As increasing competence is demonstrated through the observed delivery of safe and comprehensive care, less direct supervision should be needed.

*How can I be sure I have the knowledge and skill to teach students?*

You have been recognized by your facility as possessing the clinical expertise to serve as a role model for the student in the clinical setting.

These students are motivated to learn and will benefit from your ability to function as an expert in your area of specialization.

The clinical course objectives will serve as guides in planning and teaching this orientation. Review syllabus and clinical checklists.

*What if the student is critical of the way I do things?*

The student is responsible and accountable for his or her own learning needs.

Effective professional communication with the preceptor and other members of the health care team is a valuable part of this clinical experience. It can provide an opportunity for the preceptor to role model appropriate, professional communication.

There are usually many different ways to view a situation or accomplish a goal without compromising patient care. Discussing alternative approaches provides the student with critical thinking skills required to provide safe care.

*What if the student is not successful in this rotation?*

Concerns about the student's performance should be communicated to the faculty early so that any possibility for remediation can be collaboratively planned between the coach and the faculty.

Should the student still fail the course, after early intervention, the fault is not yours, but lack of readiness on the part of the student to fulfill all the course requirements.

*What if the student is about to make a mistake or makes a mistake while I am working with him/her?*

Stop and question the student about what he/she is about to do and why.

Help them to see the correct answers to your questions and suggest, "Next time this happens, try this."

If an error occurs after initiating corrective action, involve the student in completing an incident report (as per hospital policy) and call the faculty. Show the student how to take responsibility for the error.

## SKILLS COMPETENCE

Now is probably a good time to talk about the skills your student can perform when they arrive on the unit. Your student completed a certified nurse aid (CNA) course before being admitted to the Second Degree BSN Track. Veteran to BSN students have gained training in their military expertise fulfilling the requirement for a certified nursing aid. The student may or may not have CNA experience in a clinical setting. They also completed Clinical Competency I (an intensive skills course) and were checked off in the clinical laboratory by TTUHSC-SON faculty on the following psychomotor skills:

- ☐ Hygiene
- ☐ Vital Signs
- ☐ Health History
- ☐ Skin Assessment
- ☐ Standard Precautions & Hand Washing
- ☐ Isolation Procedures
- ☐ Wound Care (sterile and non-sterile dressings)
- ☐ All Routes of Medication Administration
- ☐ GI/GU Assessment
- ☐ Bowel Management Techniques (toileting, enemas, etc.)
- ☐ GI Techniques (NG tube insertion and feeding)
- ☐ Urinary Management Techniques (toileting, catheterization, etc.)
- ☐ Cardiopulmonary Assessment
- ☐ Respiratory Therapies
- ☐ Suctioning (oral-pharyngeal, naso-pharyngeal, naso-tracheal, tracheal)
- ☐ Tracheostomy Care
- ☐ IV Insertion

Your student may perform any of these skills under your direct supervision in the clinical setting. Once you have determined that your student consistently performs safely and competently, they may perform the skills with indirect supervision and random spot checks. Institutional policy must be followed with regard to delegation of skills, with particular attention paid to skills students are not allowed to perform, i.e. IV push for high risk medications.

Your student will be co-enrolled in other courses, like health assessment and pharmacology, during your student's time with you on your unit. As your student's skill level increases, you will expect more evidence-based rationale from your student. Use the curriculum timeline [found on the Coaches Website (<http://nursing.ttuhsu.edu/coaches>) or get a copy from the Clinical Site Coordinator] to help you keep up with your student's academic progress and establish appropriate clinical expectations. Each course also has clinical objectives the students should meet and clinical checklists to guide learning. The course objectives and specific clinical skills the student should be able to perform with appropriate guidance and supervision can also be found in the Coach Newsletter, which can also be accessed on the Coaches Website.

You will be instrumental in helping your student learn to effectively organize and prioritize patient care and delegate appropriately to unlicensed personnel. The following suggestions are adapted from the work with hospital preceptors by Baltimore (2004):

Instruct your student to formulate a shift routine and plan. Show your student your organizational tools and encourage him to observe other coworkers' methods of organization and then formulate their own. Good organizational skills will help your student handle unexpected events and competing responsibilities inherent in daily clinical practice.

To help your student prioritize patient care responsibilities, have them categorize tasks based on their urgency, the level of skill required to complete tasks, and the consequences of delay or inaction.

Once your student has demonstrated competence in skills that are usually carried out by other staff, they may delegate some tasks to unlicensed assistive personnel. Help your student understand the delegation rules and how to recognize when delegation would be inappropriate. Effective delegation will ensure that your student will be more equipped to meet the multiple demands of patient care assignments during school and after graduation.

(Delegation rules and resources can be found at Texas Board of Nursing web site at [www.bon.texas.gov/pdfs/delegation\\_pdfs/Delegation-Rule225.pdf](http://www.bon.texas.gov/pdfs/delegation_pdfs/Delegation-Rule225.pdf)).

## STUDENT POLICIES

Policies can be found in the *Student Handbook of the School of Nursing* (<http://www.ttuhschool.edu/son/handbook.aspx>). Here are a few excerpts that are pertinent to the clinical setting (TTUHSC-SON, 2017):

### ***Code of Ethics***

Students are expected to function within the framework of the Code for Nurses (ANA). Students may purchase the Code for Nurses by contacting the American Nurses Association Publishing Company or it can be downloaded at <http://www.nursingworld.org/codeofethics>.

### ***Confidentiality/Health Insurance Portability and Accountability Act of 1996 (HIPAA)***

The School of Nursing is dedicated to ensuring each student is current in issues as they relate to nursing practice and research. One such regulation includes the Health Insurance Portability and Accountability Act (HIPAA). Annually, each student is required to provide proof of education in HIPAA training. The training requirements vary by the curriculum; the student will receive information regarding HIPAA training and will be asked to sign a Confidentiality Agreement during New Student Orientation (both face to face and virtual). All proof of training will be placed in the student's advising file located in the appropriate Department Chair's Office. Those who cannot show proof will not be allowed to attend clinical. In addition, release of confidential information (including verbal communications, written communications, or electronic communications with or about patients or involving patient health information to anyone who does not need the information for treatment, payment, or health care operation) is a cause of dismissal from the School.

## ***Personal Appearance/Uniform***

The SON expects nursing students to maintain a professional image at all times while in the clinical setting. It is the expectation that the professional uniform of the School of Nursing shall be worn only for clinically related activities. Second Degree BSN and Veteran to BSN students must follow the standards listed below:

### **Hospital Clinical Settings**

<b>Equipment:</b>	Stethoscope, watch, penlight, Skyscape software/device, scissors, pen, and pad
<b>Uniform:</b>	The uniform shall be the official TTUHSC uniform (red scrub top and black scrub pants) with patch permanently affixed to left chest. The uniform shall be clean and without needed repair.
<b>Shoes:</b>	The shoes shall fit securely and be primarily white or black impenetrable material.
<b>Socks/Hose:</b>	White and clean (Women may wear socks with pants. White or natural color hose must be worn with skirts or dresses.)
<b>Lab Jacket:</b>	The lab coat shall be the official TTUHSC jacket (white) with patch permanently affixed to left chest and should be clean.
<b>Name Tag &amp; ID Badge:</b>	These items must be worn with the uniform or lab jacket in all clinical settings.
<b>Hair:</b>	The student's hair must be clean, neat, and managed in such a way as to not require the student to touch hair during clinical. A student with long hair must secure hair behind his or her head; hair must be off the shoulders. Long hair is defined as any hair length that obstructs peripheral vision when the student bends over at waist level or that may dangle onto a patient or treatment surface.
<b>Makeup:</b>	Wear in moderation. No bright lipsticks, blush, or eye shadow.
<b>Nails:</b>	Nails must be clean and well groomed. Artificial nails are not acceptable. Nails need to be short. Polish, if worn, must be a natural/neutral color.
<b>Perfume/Aftershave:</b>	Avoid wearing perfume, cologne, or aftershave.
<b>Piercing/Tattoo:</b>	Students may have one stud earring in each ear lobe. All other piercing must be removed for the clinical setting. Tattoos must be covered or not visible during clinical.
<b>Additional:</b>	Additional requirements based on clinical agency policy will be communicated by Clinical Site Coordinators.

## ***Cell Phones***

Cell phones should be placed in the silent mode or turned off when students are in attendance at any learning activity at the SON or any clinical activity. Students are permitted to use their mobile devices or the Skyscape application which includes databases for drug guides, IV medication, lab values, etc. Phone conversation on cell phones, texting, or use of any other non-approved applications must occur outside of direct patient care areas.

## ***Unsafe Student Practices***

A student who demonstrates any unsafe practices as outlined below may be subject to disciplinary actions dependent upon the severity of the unsafe practice, including but not limited to, the following: verbal warning, written warning, formal reprimand, failure and/or dismissal. Every effort will be made to use progressive discipline; however, at the discretion of the faculty member, a student can be failed at any time during the semester for an unsafe practice as defined above.

Violates or threatens the physical, psychological, microbiological, chemical, pharmacological or thermal safety of the patient.

Violates previously mastered principles/learning objectives in carrying out nursing care skills or delegated medical functions.

Accepts assignments beyond knowledge, education, experience or competence.

Fails to recognize or accept legal/ethical responsibility for actions as defined in the Nursing Practice Act for the State of Texas or the Code for Nurses of the American Nurses Association.

Fails to carry out CDC Standard Precautions.

## References

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TTUHSC-SON. (2017). *School of nursing student handbook*.  
Retrieved from  
<http://www.ttuhschool.edu/nursing/sao/handbook.aspx>



**Coaches Should:**

1. Provide the student with an appropriate patient assignment according to his/her shift assignment and the expectations of the course/semester in which the student is enrolled. It is expected students will start with one patient in the first semester and build up to a full load by the end of the final semester.
2. Assist the student with performing nursing skills and provide verbal guidance in the proper procedure for skills. Consult policy and procedure for correct performance of skills and allow the student to become familiar with any unit-specific protocol. Skills should be performed under direct supervision of the coach at least two to three times before a student performs the skill independently. Coaches should consistently supervise medication administration.
3. Take advantage of teaching opportunities to assist the student to understand concepts of pathophysiology and disease process and to apply these concepts to the nursing process.
4. Review ALL student documentation for thoroughness and accuracy. At the beginning of the program, the students will need assistance and direction for proper documentation. As the student progresses and documents independently, the coach must
5. Provide timely, constructive feedback to the student regarding performance, decision-making skills, and patient interactions. The students truly value their coach's opinion and desire to know where they can improve in their patient care.
6. Communicate his/her schedule and plans to the student. Let his/her student know if the schedule changes or if a shift is cancelled. Students are asked to let coaches know when their schedule changes, and they greatly appreciate when the coach does the same.
7. Communicate compliments or concerns by contacting the site coordinator at any time. Coach input is appreciated as the coach is intimately involved with the student experience.
8. Complete the mid-term and final clinical evaluations per the course requirements. Please take time to thoroughly and accurately evaluate the student's performance. Students require genuine and timely feedback in order to identify areas of strength or improvement opportunities.
9. Supervise the care the student provides to assigned patients. Take special care to ensure the delivery of safe patient care and the provision of accurate and thorough documentation.

10. Recognize the impact you have on the student as a coach, professional, and role model. The time the student spends with you and your unit lays the foundation for their nursing career. Students spend a minimum of 225 clinical hours each semester with their assigned coach; each moment they spend with you is valuable to their learning.

**Coaches Should NOT:**

1. Overload the students at the beginning of the program with heavy patient assignments. Remember that these are fresh, new nursing students, many of whom have never worked in a clinical environment before this program. Anticipate their learning needs and allow for appropriate growth as they progress in the program. They will need more direction in the beginning but will be more independent by the end of the program.
2. Be absent or unavailable/unapproachable during the shift. Students need coaches to be readily available to assist them and educate them as opportunities arise.
3. Allow a student to be in the automated medication dispenser without RN supervision. The students do not have access to the medication dispenser and require for a nurse to sign them in. DO NOT leave them signed into the medication dispenser without observation.

# Coaching Tools

## The Second Degree BSN/Veteran to BSN “Coach’s Portal”

The “Coach Portal” is a website housing many important resources for successful coaching the 2<sup>nd</sup> Degree BSN/VBSN student. It is updated annually with more frequent updates as needed. The website may be found at: [nursing.ttuhsc.edu/coaches](http://nursing.ttuhsc.edu/coaches). You can also find a link to this website on [www.ttuhsc.edu/son](http://www.ttuhsc.edu/son). On the right-hand side of the screen under “Info for ...”, you’ll find a link to Preceptors and Coaches. In the fly out menu is a link to the Second Degree/VBSN Webpage.

### Resources

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#### Clinical Objectives and Skills

- [NURS3510 Foundations Clinical Information and Checklists](#)
- [NURS3520 Chronic Care Clinical Information and Checklists](#)
- [NURS4510 Acute Care Clinical Information and Checklists](#)



#### Clinical Evaluation Tools

- [Foundations Clinical Evaluation Tool](#)
- [Chronic Care Evaluation Tool](#)
- [Acute Care Clinical Evaluation Tool](#)
- [Detailed Clinical Standards](#)



#### Coach Newsletters

- [Fall 2014 - Cohort 19 \(Austin sites\)](#)
- [Fall 2014 - Cohort 19 \(Dallas sites\)](#)
- [Spring 2015 - Cohort 20](#)



#### 2nd Degree Coaches Orientation

- [Module 1](#)
- [Quiz 1](#)
- [Module 2](#)
- [Quiz 2](#)
- [Module 3](#)
- [Quiz 3](#)



#### Curriculum Timelines

- [Cohort 18 Curriculum Timeline](#)
- [Cohort 19 Curriculum Timeline](#)
- [Cohort 20 Curriculum Timeline](#)



#### Coach Manual (2015)



#### Contact Us / Ask a Question



#### IT Resources

- [Clinical Coach Responsibilities](#)
- [SON IT Dept.](#)
- [eRaider Request Form](#)
- [iPod Touch / Skyscape Serial Number Registration](#)
- [iPod Touch / Skyscape Introduction Video](#)




#### [How to look-up medications correctly in Skyscape \(PowerPoint\)](#)

## Library Resources

Library resources can be located at <http://www.ttuhschool.edu/libraries/>

Information can be accessed by highlighting the section (ex. Databases) and clicking on the link



# TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER™

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**RESOURCES...**


- About the Libraries ▶
- Site Map
- Contact the Libraries ▶
- Ask A Librarian
- Guides & Tutorials
- Distance Students
- EBM OSCE Instruction ▶
- Library Courses ▶
- Business Continuity

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- Welcome to the HSC ▶
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- Schools ▶
- HSC Info For ▶
- Centers & Institutes
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- Administration ▶
- Human Resources
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- Accreditation ▶
- The Daily Dose
- Emergency Preparedness
- Compliance Hotline

## Libraries

### FACTS AT A GLANCE




What's New:

- Preston Smith Library open Sunday mornings
- ClinicalKey Platform Update
- New Subscription: PemSoft

The mission of the Library of the Health Sciences in the Permian Basin is to meet the needs of the TTUHSC students, faculty and staff, as well as members of the public.

We provide public computers, study rooms, a computer lab, and also Wi-Fi accessibility. Patrons have access to hundreds of online databases and journal subscriptions, in addition to in-house and circulating medical resources.

PubMed
Journals
Catalog
Databases
eBooks
Proxy



Search:

☒ Keywords
 ☐ MeSH
 ☐ PubMedID (PMID)

**Popular resources by school**

**Allied Health**

**Biomedical**

**Medicine**

**Nursing**

**Pharmacy**

**Public Health**

**We're social!**

**FaceBook**

**Twitter**

**News**

**Events**

**Outages**

**RESEARCH TOOLS...**

- Library Catalog
- Textbooks
- Maximum Simultaneous Use
- Subject Guides
- < Databases
- < eBooks, Theses, & Dissertations
- < eJournals
- < Online Multimedia
- < Public (non-TTUHSC) Access
- < Other Resources

**LIBRARY SERVICES...**

- < Bibliographic Tools
- < Downloads and Printing
- < Interlibrary Loan (ILL)
- < Reference Services
- Purchase Suggestions
- Librarians @ Your Service

**NEWS & ANNOUNCEMENTS...**

- Ask A Librarian
- Off-campus Login
- Mobile Resources
- Medline Plus
- TeamViewerQS 10 - Win
- TeamViewerQS 10 - Mac
- NIH Clinical Alerts
- Library Cards
- Pay Online

[illegible]

Or by hovering over the section (ex. databases) and clicking on the link to a specific resource (ex. Ovid)

**RESEARCH TOOLS...**

- Library Catalog
- Textbooks
- Maximum Simultaneous Use
- Subject Guides
- Databases**
- eBooks, Theses, & Dissertations
- eJournals
- Online Multimedia
- Public (non-TUHSUC) Access
- Other Resources

**LIBRARY SERVICES...**

- Bibliographic Tools
- Downloads and Printing
- Interlibrary Loan (ILL)
- Reference Services
- Purchase Suggestions
- Librarians @ Your Service

**Evidence Based >>**

- PubMed
- CINAHL Plus with Full Text
- Clinical Key [MD Consult]
- EMBASE
- Entrez
- MICROMEDEX
- OT Search
- Ovid
- Scopus

## Another way to access and search Library resources

The screenshot shows the Ovid search interface. At the top, the Ovid logo is on the left, and navigation links like 'Home', 'About Us', 'Contact Us', 'Help', 'Privacy Policy', and 'Terms of Use' are on the right. Below the header, there are tabs for 'Database', 'Query', 'Results', 'History', 'My Ovid', and 'Help'. The 'Database' tab is selected. The main content area is titled 'Select Resources(s) to search:' and lists 10 search results. Each result is a checkbox followed by the resource name and a brief description. The results are: 1. OVID MEDLINE, 2. OVID MEDLINE, 3. OVID MEDLINE, 4. OVID MEDLINE, 5. OVID MEDLINE, 6. OVID MEDLINE, 7. OVID MEDLINE, 8. OVID MEDLINE, 9. OVID MEDLINE, and 10. OVID MEDLINE. At the bottom right, there are buttons for 'OK' and 'Cancel'.

Ovid

Home About Us Contact Us Help Privacy Policy Terms of Use

Database Query Results History My Ovid Help

Select Resources(s) to search:

1. ☐ OVID MEDLINE

2. ☐ OVID MEDLINE

3. ☐ OVID MEDLINE

4. ☐ OVID MEDLINE

5. ☐ OVID MEDLINE

6. ☐ OVID MEDLINE

7. ☐ OVID MEDLINE

8. ☐ OVID MEDLINE

9. ☐ OVID MEDLINE

10. ☐ OVID MEDLINE

OK Cancel

# Mobile Resources

Mobile resources can be accessed through the library website at  
<http://www.ttuhschool.edu/libraries/>

Click on the Mobile resources link, a list of mobile resources available for download will appear

There are many resources, some may require an Eraider username and password. The Librarians can be contacted for assistance using the "Ask a Librarian" link

Click on the resource link, and download the resource (ex. CDC FastStats)

# School of Nursing Help Desk



TEXAS TECH UNIVERSITY  
HEALTH SCIENCES CENTER™  
School of Nursing

## SCHOOL OF NURSING IT

[SON IT Home](#)


[Frequently Asked Questions](#)

[Software Downloads](#)

[SON Links](#)

## SCHOOL OF NURSING RESOURCES

[Tips, Tutorials & Resources](#)

[Computer Assessments](#) 

[Resources for iPhone & iPod Touch Users](#)

[Resources for Mac Users](#)

## School of Nursing IT

To contact the SON IT dept:

Email: [sonitstaff@ttuhsc.edu](mailto:sonitstaff@ttuhsc.edu)

Phone: 806-743-4248 or 866-669-4248 (Toll Free)

[Click here for After Hours Tech Support](#)

[Is Online Learning For You?](#)



## Skyscape Mobile Application

Skyscape is a required mobile resource for all students in the 2<sup>nd</sup> Degree BSN/VBSN Program. This resource serves as their point of reference for medications, lab values, and other clinical related topics. The following components are included in the Skyscape license and are required for students to reference.

### \*Davis' Drug Guide

- Drug reference that includes information on administration, safe dosage, and other nursing considerations.

### \*Intravenous Medications

- Lists dosage, indication, side effects, compatibilities, incompatibilities for IV medications. *Should always be used when administering IV medications.*

### \*Skyscape Labs

- Clinically oriented lab guide that identifies what a lab test is, its clinical significance, and how the test can aide in patient diagnosis and treatment.

### \*RNotes

- Medical-surgical reference that presents practical, clinically-oriented content across a wide range of topics in a succinct format with NCLEX tips.

Full-time coaches are given a complimentary license to the Skyscape resources that is renewable yearly throughout the duration of coaching.

### Student expectations for Skyscape:

Students are required to review the following when giving medications:

1. Davis' Drug Guide:
  - a. Indication
  - b. Action
  - c. Contraindications/Precautions
  - d. Adverse Reactions/Side Effects
  - e. Route/Dosage
  - f. Implementation
2. Intravenous Medications
  - a. For IV medications ONLY, use the "IV Drugs" application to review the components listed above AND
  - b. Dilution
  - c. Rate of Administration
  - d. Compatibility



# **Second Degree BSN/Veteran to BSN Curriculum**



### Accelerated BSN Program (Second Degree BSN and Veteran to BSN) 2018 Curriculum Timeline

Spring 2018-20 credits 1/9-4/27	Week of 1/8	Week of 1/15	Week of 1/22	Week of 1/29	Week of 2/5	Week of 2/12	Week of 2/19	Week of 2/26	Week of 3/5	Week of 3/12	Week of 3/19	Week of 3/26	Week of 4/2	Week of 4/9	Week of 4/16	Week of 4/23	
3215* (1/9-1/22) Basic Nursing Skills										S P R I N G  B R E A K							
3307** (1/22-2/23) Health Assessment																	
3325 (2/26-4/6) Essential Concepts																	
3510 (1/22-4/27) Foundations Clinical																	
3380** (2/12-4/27) Foundations																	ATI Exam
3107** (1/22-2/2) Pharmacology I																	
4207** (2/5-4/27) Pharmacology II																ATI Exam	
Holidays: MLK - 1/15, Spring Break - 3/12-3/16; Semester ends & last class day - 4/27/2018; Grades due 04/30/2018																	
* Basic Nursing Skills - Dates: 1/9, 1/10, 1/11, 1/12 (practice), 1/16, 1/17, 1/18 (practicum practice), 1/19 (practicum), 1/22 (final exam)																	
** CAP Testing Dates for Veteran to BSN Students Only - Health Assessment, Foundations, Leadership & Management, and Pharmacology I & II: 1/3-1/5																	
Summer 2018-18 credits 5/14-8/17	Week of 5/14	Week of 5/21	Week of 5/28	Week of 6/4	Week of 6/11	Week of 6/18	Week of 6/25	Week of 7/2	Week of 7/9	Week of 7/16	Week of 7/23	Week of 7/30	Week of 8/6	Week of 8/13			
3385 (5/14-8/17) Chronic Care																	
3520 (5/14-8/17) Chronic Care Clinical																	
4411 (5/28-7/6) Mental Health								ATI Exam									
3326 (5/14-6/15) Evidence Based Practice																	
3407 (7/9-8/17) Perinatal Nursing														ATI Exam			
Holiday: Independence Day - 7/4; Semester ends & last class day - 8/17/2018; Grades due 8/20/2018																	
Fall 2018-23 credits 9/5-12/12	Week of 9/3	Week of 9/10	Week of 9/17	Week of 9/24	Week of 10/1	Week of 10/8	Week of 10/15	Week of 10/22	Week of 10/29	Week of 11/5	Week of 11/12	Week of 11/19	Week of 11/26	Week of 12/3	Week of 12/10		
4398 (9/5-12/12) Acute Care																ATI Exam	
4510 (9/5-11/30) Acute Care Clinical																	
4401 (9/5-10/26) Child Health Nursing								ATI Exam									
4317 (9/17-10/19) Community-Pop Health							ATI Exam										
4104 (10/22-11/16) Pharmacology III																	
4409** (10/15-11/16) Mgmt & Leadership											ATI Exam						
4391 (10/29-12/12) Synthesis									ATI CP1							ATI CP2	
Holidays: Labor Day - 9/3, Thanksgiving - 11/22-11/23; 1 <sup>st</sup> Day of Classes 9/5 Semester ends & last class - 12/12/2018; Grades due 12/13/2018																	
Graduation - TBD (anticipated 12/15/2017)																	

## **Clinical Courses – Student Expectations by Semester**

### **1<sup>st</sup> Semester – NURS 3510 Foundations Clinical**

The foundation semester aims to lay the groundwork for the student's safe nursing practice in the clinical setting. The student's focus primarily on understanding the application of basic nursing skills, health assessment, and safe medication administration. Towards the end of the semester, the students will begin to apply their knowledge of the nursing process and they expand their practice to taking on total patient care. The following objectives should help guide your student's experiences in your unit:

1. Demonstrate techniques of therapeutic communication in nursing situations.
2. Incorporate knowledge of safety and comfort, illness and disease management, nutrition and nontraditional and complementary care.
3. Understand and apply the concepts of health assessment and safe medication administration.
4. Identify strategies for injury prevention and safety maintenance in a variety of health care settings.
5. Collaborate with members of the healthcare team to provide care for diverse patients with commonly occurring health care needs.
6. Demonstrate accurate documentation of nursing and nursing care for clients with commonly occurring health care problems. Incorporate knowledge of health care technology and information systems.
7. Begin to develop efficient time management skills.

By the end of the semester, the students in a medical-surgical unit should be caring for 2-3 patients. In an intensive care unit, the students should have 1 patient.

### **2<sup>nd</sup> Semester – NURS 3520 Chronic Care Nursing Clinical**

Chronic care begins to build on the foundation to direct students to utilize clinical judgment and reasoning and therapeutic nursing skills. The students will begin to learn and apply the use of nursing diagnoses to focus their care. Towards the end of the semester, the student will be able to provide patient care more independently of their coach. The coach will be in the role of advisor and mentor; however, they will not need to provide as much prompting regarding total care of the patients.

1. Incorporate knowledge of comfort, illness and disease management, nutrition and nontraditional and complementary modalities in the delivery of evidence based nursing care for patients and families experiencing chronic health alterations.
2. Identify strategies for injury prevention and safety maintenance in a variety of health care settings.
3. Collaborate with members of the interprofessional healthcare team to provide patient centered care for patients and families.
4. Incorporate knowledge of health care and information management systems to organize the delivery of safe and optimal care for patients and families.
5. Demonstrate accurate documentation of nursing care for patients and families.

6. Incorporate knowledge of assessment, pharmacologic therapies, genetics, and diagnostic procedures when providing safe care to patients and families.
7. Continue to develop efficient time management for accurate and time-sensitive patient care.

By the end of the semester, the students should be taking 3-4 patients in the medical-surgical unit. In the intensive unit, the student should be providing independent total care for a minimum of 1 patient with additional care being given to a 2<sup>nd</sup> patient.

### **3<sup>rd</sup> Semester – NURS 4510 Acute Care Nursing Clinical**

The Acute Care semester brings together all the concepts of patient care and clinical reasoning that the student has acquired throughout the year. The student synthesizes the generalist nursing roles of provider and manager of nursing care in the clinical setting. Clinical judgment and reasoning and therapeutic nursing skills necessary in the acute care delivery are demonstrated in the application of evidence based nursing care through their clinical experiences. **By the end of the semester, the students should be providing total patient care for a full load of patients self-sufficiently with supervision of their coach.**

1. Incorporate knowledge of disease management, human diversity, nutrition and nontraditional and complementary care to collaborate with the interprofessional healthcare team in the delivery of holistic and evidence based nursing care for patients in the acute care setting.
2. Apply a legal/ethical framework and evidence based nursing knowledge in the delivery of safe patient-centered care in acute care settings.
3. Identify strategies for injury prevention and safety maintenance in acute care settings.
4. Collaborate with members of the interprofessional healthcare team to provide care for diverse patients with commonly occurring health care alterations.
5. Incorporate knowledge of health care technology, information systems and leadership/management skills to plan safe patient-centered care in an acute care setting.
6. Demonstrate accurate documentation of patient-centered nursing care for a patient experiencing acute health care alterations.
7. Mastery of time management skills in order to provide safe and efficient patient care.

## **Guidelines for Student Activities in Clinical**

### **Assignment and Delegation of Care:**

1. Patient care assignments should be negotiated with the coach to provide the best possible learning experiences for the student and to enable the student to meet personal and course objectives.
2. Under the guidance of the coach/preceptor, in accordance with the Texas Nursing Practice Act and Board of Nursing Rules and Regulations, students should practice delegating duties to other team members as appropriate.

### **Medications:**

1. ***Students must be knowledgeable about every medication administered*** (See BNE Rule 217.11 (3) and (4).
2. **ALL medications MUST be checked before administration by an RN coach/preceptor or the clinical site coordinator.**
3. The RN coach/preceptor must consult their institution's policy regarding student administration of medications. Supervision of the administration of oral and topical medications should follow the specific policy of the institution in which the student is attending clinical. **ANY MEDICATION ERROR MUST BE REPORTED IMMEDIATELY TO THE CLINICAL SITE COORDINATOR. APPROPRIATE INCIDENT REPORTING MUST BE COMPLETED IN ACCORDANCE WITH HOSPITAL POLICY.**

### **Intravenous (I.V.) Therapy:**

1. All I.V. catheters insertions and administration of I.V. therapies must be initiated and administered in accordance with the specific institution's policy. Supervision of these skills should follow hospital policy. I.V. therapies include the additional of I.V. additives, I.V. bags or bottles, and I.V. push or piggyback.
2. I.V. chemotherapeutic agents or experimental drugs **may not** be administered by students at any time under any circumstances.
3. Students may observe an RN coach/preceptor in the process of administration of blood or blood products, BUT students **may not** administer blood products at any time under any circumstances.

### **Documentation:**

1. All students are expected to document their assessments, nursing interventions, etc., for their assigned group of patients following agency or institutional policy in a timely fashion.
2. Students should discuss intended documentation with the coach/preceptor before entry into the medical record or chart.

### **Physician Orders:**



1. Students may **NOT** receive telephone or verbal orders from physicians, residents, interns, or medical students.
2. Students may **NOT** use routine or standing physician orders until an RN coach/preceptor has transferred them to the chart and cosigned them.
3. Students should be involved in the transcription of physician orders under the supervision of their coach/preceptor.

Consents/Permits/Lab Reports:

1. Students may **NOT** witness permits for diagnostic, therapeutic, or surgical interventions.
2. Students may **NOT** receive lab reports over the telephone.

Patient Incidents:

1. Any patient incident should be reported immediately to the clinical site coordinator and documented according to hospital policy.
2. The clinical site coordinator will assist the student with the necessary documentation of the incident and to fill out the required incident report form for the hospital and school.

Report:

1. Students should receive report from the off-going staff member(s) with their assigned coach/preceptor.

Break and Meal Times:

1. Smoking, eating, or drinking beverages is not permitted in patient care areas.
2. One twenty (20) minute break is allowed during the morning of the clinical day, and one-half (1/2) hour (30 minutes) is allotted for meal time during the day. An additional twenty (20) minute break in the afternoon is allotted on 12 hour clinical days. Students are not allowed to leave the facility. Adjustments to break scheduling may be made per hospital policy.
3. Break and Meal times should be negotiated with the coach/preceptor at the start of the shift.
4. Students should always report to their assigned coach/preceptor upon leaving the unit and upon returning to the unit.
5. Work should be organized during the clinical day to allow time for the break and meal times. The continuity of patient care should not be disrupted by break and meal times.

Personal Possessions:

1. Students should bring only the absolute necessities to the clinical area.
2. Personal books and notebooks may be brought to the clinical area, as needed, but all personal books and notebooks should be clearly labeled.
3. Large amounts of money or other valuables should not be brought to the clinical area.

Personal Telephone Calls or Visiting Other Areas:

1. Students should not use the business telephones in the clinical areas for personal use.
2. Students are not allowed to visit in other clinical areas while on duty in the clinical facility.

Student Injury or Illness:

1. Any student injury while on duty in the clinical facility must be reported immediately to the clinical site coordinator. The clinical site coordinator will assist the student to secure medical treatment, if necessary, and complete the required incident report for the SON and hospital.
2. Students who become ill while on duty in the clinical facility should notify the clinical site coordinator for guidance.

Clinical Warnings:

1. Verbal and/or written clinical warnings are used to communicate to students that they are not meeting the clinical objectives for the course or have violated one of the Detailed Clinical Standards or TTUHSC SON Student Handbook standards:
  - a. A student who demonstrates any unsafe practices as outlined below may be subject to disciplinary actions dependent upon the severity of the unsafe practice, including but not limited to, the following: verbal warning, written warning, formal reprimand, failure, and/or dismissal. Every effort will be made to use progressive discipline; however, at the discretion of the faculty member, a student can be failed at any time during the semester for an unsafe practice as defined below:
    - i. Violates or threatens the physical, psychological, microbiological, chemical, pharmacological or thermal safety of the patient.
    - ii. Violates previously mastered principles/learning objectives in carrying out nursing care skills or delegated medical functions.
    - iii. Accepts assignments beyond knowledge, education, experience or competence.
    - iv. Fails to recognize or accept legal/ethical responsibility for actions as defined in the Nursing Practice Act for the State of Texas or the Code for Nurses of the American Nurses Association.
    - v. Fails to carry out CDC Standard Precautions.
2. Some examples of situations that might result in a student being issued a clinical warning include (but are not limited to) the following:
  - a. arriving late for clinical
  - b. not following the student dress code
  - c. making a medication error
  - d. providing substandard care
  - e. performing a procedure incorrectly
  - f. not completing patient care on time
  - g. communicating or interaction (verbal or nonverbal) to patients, faculty, staff, or other students
  - h. not turning in written work on time

**Texas Tech University Health Sciences Center**  
**School of Nursing**  
**Second Degree BSN and Veteran to BSN Programs**  
**Detailed Description of Clinical Standards**

The following guidelines are established for students enrolled in the Second Degree and Veterans to BSN program representing Texas Tech University Health Sciences Center and the School of Nursing in any clinical setting. The Student Handbook and the clinical course syllabi contain information regarding the clinical standards and associated behaviors.

**Standard 1**

**Clinical Scheduling and Attendance Standards**

**1 Establishing schedule**

- a Works the coach's schedule
- b Posts schedule to database by Sunday for the following week and as directed by Site Coordinator c
- Student must attend clinical with assigned coach only
- d No more than 2 schedule changes are permitted for personal reasons per semester

**2 Commitment**

- a Honors schedule that is negotiated with the coach
- b Contacts clinical faculty, coach, and unit 2 hours prior to scheduled clinical if unable to attend c
- Must work entire shift as the hospital defines a shift (No partial shifts)

**3 Accountability**

- a Student schedules clinical time each week to allow opportunities to meet weekly clinical objectives (see course syllabi for course standards)
- b Clinical schedule must not conflict with other course expectations, i.e., must not leave clinical to take exams
- c With the approval of the Site Coordinator, students may elect to not schedule clinical with coach during the weeks they have a full load (generally 24 hours) in specialty clinical courses (OB, Pedi, Mental Health, Community/Population Health).
- d Student will enter database reflections within 3 days of completed clinical day

**Standard 2**

**Professional Behaviors**

- 1** Adheres to Board of Nursing *Standards of Practice*
- 2** Maintains confidentiality in accordance to HIPAA and institutional guidelines, i.e., do not photo copy items in client chart
- 3** Arrives prepared prior to start of scheduled shift, at least 15 minutes
- 4** Dresses in accordance with dress code in laboratory and clinical settings (in accordance with requirements of assigned institution)
- 5** Demonstrates positive attitude with public, faculty, and peers
  - a Communicates respectfully with public, faculty, and peers
  - b Behavior contributes to the teaching learning process
  - c Behaves in a collegial, respectful manner
  - d Maintains collaborative attitude
- 6** Accepts responsibility for own learning
  - a Sets appropriate priorities for learning and practice
  - b Is accountable
    - 1 Manages time wisely
    - 2 Continuously reflects on and evaluates own performance in the clinical setting
    - 3 Seeks guidance from appropriate sources

<b>Standard 3</b> <b>Professional Integrity</b> <b>1 At all times maintains and adheres to</b> a Honesty b Honor code <b>2 Documentation is accurate, timely, and correct</b> <b>3 Reports errors in a timely manner (according to institutional guidelines)</b> <b>4 Maintains respectful interactions with others</b> <b>5 Adheres to ANA Code of Ethics</b>		
Students are evaluated for adherence to Clinical Standards each clinical day, and points are deducted for failure to adhere to Clinical Standards. Refer to Second Degree Program Clinical Evaluation Tool for grading criteria. Points deducted are cumulative and will be deducted from the final clinical evaluation grade each semester.		
<b>Clinical Standard 1</b>	<b>Clinical Standard 2</b>	<b>Clinical Standard 3</b>
<b>Clinical Scheduling and Attendance Standards</b>	<b>Professional Behaviors</b>	<b>Professional Integrity</b>
<b>Fails to develop or adhere to schedule</b> <i>Students will receive clinical warning during the first semester of enrollment only for the first occurrence. Points will be deducted for each subsequent occurrence:</i> 1 points first occurrence 3 points second occurrence 5 points each subsequent occurrence  <b>Fails to enter reflections in a timely manner</b> <i>Students will receive clinical warning during the first semester of enrollment only for the first late occurrence. Points will be deducted for each subsequent occurrence:</i> 1 points first occurrence 2 points each subsequent occurrence  <b>Fails to notify Coach and Faculty of clinical absence</b> 5 points per occurrence	<b>Fails to adhere to Board of Nursing Standards of Practice (Texas Administrative Code Title 22, part 11, Chapter 217, Rule 217.11)**</b> 5 points first occurrence 10 points second occurrence and each subsequent occurrence  <b>Fails to adhere to HIPAA requirements**</b> 5 points first occurrence 10 points second occurrence and each subsequent occurrence  <b>Lateness</b> <i>Students will receive clinical warning during the first semester of enrollment only for the first late occurrence. Points will be deducted for each subsequent occurrence:</i> 5-14 minutes – 1 points 15-29 minutes – 3 points 30 or > minutes – 5 points  <b>Fails to meet dress code</b> 1 points for each variance  <b>Unprofessional attitude</b> 5 points per occurrence  <b>Lack of accountability**</b> 5 points per occurrence  <b>**May be referred for academic action</b>	<b>Professional Integrity</b> Violation of Standard 3 will result in an immediate referral for academic action and a deduction of 5 points per occurrence.

2/25/2012 CW:cjw

Revised 11/21/2014 Lollo, 11/09/2015 RH/LO:rh, 1/5/2016 RH:llo

## **ACADEMIC and PROFESSIONAL INTEGRITY**

All students entering the School of Nursing must subscribe to the standards and codes of the profession. Patients and society as a whole expect School of Nursing students, as nursing professionals to adhere to the:

- TTUHSC Code of Academic Conduct (See coach portal)
- American Nurses Association (ANA) Code of Ethics for Nurses (see coach portal)
- Texas Board of Nursing Unprofessional Conduct Rules:
  - Standards of Practice (Texas Administrative Code §[217.11](#))
  - Unprofessional Conduct (Texas Administrative Code §[217.12](#))

Students who fail to uphold and/or comply with the above codes and standards for safe and professional nursing practice will be considered in violation of the law and/ or professional nursing standards. Students holding a license to practice nursing will be subject to the reporting laws on unprofessional conduct.

For more information about student expectations and policies related to academic and professional integrity, refer to the *TTUHSC Student Handbook Code of Professional Conduct* (see coach portal)Part II, E, Other Professional and Ethical School Standards, (2) School of Nursing.

## **Clinical Dress Code**

### Dress Code: Simulation Lab/Clinical Settings

- *Equipment:* Stethoscope, Watch, Skyscape software/Device, Pen
- *Uniform:* The uniform shall be the official Texas Tech University Health Sciences Center School of Nursing. The uniform shall be clean and without needed repair.
- *Shoes:* The shoes shall be white or black leather. Solid white leather tennis shoes are acceptable. Students may not wear clogs.
- *Lab Jacket:* The Lab Jacket shall be the official Texas Tech University Health Sciences Center School of Nursing jacket and should be clean.
- *Name Badge:* Both the engraved name badge and the picture identification must be worn with the uniform or the lab jacket in all clinical settings at all times.
- *Hair:* The student's hair must be clean and neat. A student with long hair must pull their hair behind their head. Long hair is defined as any hair length that obstructs peripheral vision when the student bends over at waist level.
- *Makeup:* Wear in moderation. No bright lipsticks, blush, or eye shadow.
- *Nails:* Nails must be clean and well groomed. Artificial nails are not acceptable. Nails need to be short.
- *Perfume/Aftershave:* Do not wear perfume, cologne or after shave.
- *Piercing/Tattoos:* Students may have one stud earring in each ear lobe. All other piercings must be removed for the clinical setting. Tattoos must be covered or not visible during clinical experiences.

***Cell phones may not be visible or audible at any time during the clinical day with the exception of utilizing the Skyscape app. Failure to adhere to this policy will result in the student being sent home.***

## Clinical Preceptor Scholarship

**Clinical Preceptors and their children qualify for a \$500 scholarship. Please visit the following website for further information: [http://www.fiscal.ttuhsc.edu/busserv/bursar/financial\\_info.2014-2015.aspx](http://www.fiscal.ttuhsc.edu/busserv/bursar/financial_info.2014-2015.aspx)**

### Application for an Exemption through the Exemption Program for Clinical Preceptors and their Children

Name: \_\_\_\_\_ Student ID # R \_\_\_\_\_ (Last, First, Middle initial)

1. Term in which you wish to use the exemption: \_\_\_\_\_ / \_\_\_\_\_ fall, spring, or summer / year

2. Which condition applies to you? ☐ person currently employed as clinical preceptor ☐ child of clinical preceptor

If you are the child of a preceptor, provide the following information:

a. preceptor's name: \_\_\_\_\_ b. preceptor's SSN: \_\_\_\_\_

4. Provide the following information regarding the agreement under which the preceptor will be employed during the term for which the exemption is requested:

a. Name of educational institution: \_\_\_\_\_ b. Name of affiliating agency: \_\_\_\_\_

***Attach a copy of the agreement to this application before submitting the application to your institution.***

4. Have you previously received an exemption through this program? ☐ Yes ☐ No [ If yes, please list the terms/semesters and years:

7. Do you hold a baccalaureate (bachelor's) degree? ☐ Yes ☐ No

8. Are you currently classified as a resident by this institution? ☐ Yes ☐ No

### Applicant's Certification Statement

Term	Year	Term	Year

I hereby certify that the information I have provided in this application is true and correct.

\_\_\_\_\_  
Printed Name Date

Signature