**NURSING** 

As a student in the FHSU RN-BSN program you will enroll in course NURS 449 Leadership and Management for the RN. This course requires 32 direct care clock hours. You will need an approved site and preceptor for the course. It is important that you choose a site now as it can take 8 to 12 weeks for site approval. Please email your planned site to Lesley Ostrom at <a href="mailto:laostrom@fhsu.edu">laostrom@fhsu.edu</a>. Ms. Ostrom can let you know if your site is already approved or if we need to get a site contract. You may fill out the following worksheet for your site request and preceptor approval. Below is a list of frequently asked questions to help you with this process.

- 1) What can I wear to clinicals? You are welcome to wear business casual attire with a FHSU name tag. You do not need to purchase scrubs. You will need to purchase a name tag through the following link: <a href="http://webapps.fhsu.edu/nursing/photo.aspx">http://webapps.fhsu.edu/nursing/photo.aspx</a>. This name tag should be purchased at least 2 weeks prior to the start of course NURS 449.
- 2) Where can I perform my clinicals? All clinical sites must be approved. This requires a clinical contract between FHSU and your chosen health care organization. While FHSU has many contracts on file, it can take 8 to 12 weeks to get a contract approved if your site is not listed. Therefore, we recommend you start early in your program. You may choose a site that interests you as long as it meets the objectives of the course. If you are having trouble finding a site within a healthcare organization, we recommend looking at a variety of options including clinics, nursing homes, schools, home health and hospice. Sometimes community sites exist such as parish nursing, health departments, or a nurse in a shelter.

Fort Hays State University works diligently with students to secure clinical contracts across the United States. On rare occasions due to locations or state or facility requirements, we are unable to negotiate a contract. In this event, if another site cannot be obtained at the students location, a clinical site in Hays, Kansas will be provided for the student. If this occurs, students will need a Kansas license and will need to come to Kansas for their practicum experience. We encourage you to start the collaborative process of obtaining a preceptor early in your program. If you have questions about this process, please contact Lesley Ostrom.

3) How many hours are required for clinicals? You will need 32 direct care clock hours in your eight week course. These hours may be done anytime of the day as long as your preceptor is present. You are welcome to utilize evenings and weekends if your site allows this. These hours should be separate from your regular job. If you are performing hours at your workplace, you should not be clocked in for these hours.

**4)What are the requirements of my preceptor?** Your preceptor must be an RN with a current U.S. license. Preceptors should be RNs who participate in leadership activities while providing direct patient care. Variations of this job may exist. If you have questions as to if a preceptor is appropriate, please contact Lesley Ostrom at laostrom@fhsu.edu. We recommend a nurse with a BSN degree, however, we also understand that many nurse leaders have associate or diploma degrees. Therefore, a BSN degree is preferred but not mandatory.

**5)What do I need to get for clinical clearance?** You will need current immunizations including TB, influenza, Hepatitis B, MMR, TDAP, Polio, and Varicella. You will also need BLS, student nursing liability insurance (1 million per occurrence/3 million aggregate) health insurance, confidentiality statement, and drug testing. (See attached form for requirements). Please start collecting these documents. You will receive a URL to create an account and pay for clinical clearance collection through Castlebranch in late July. After payment, you will receive the information needed to complete a drug test. At that time, you can upload all required documents. The cost of Castlebranch is \$62.00. You are responsible to purchase your own liability insurance. Please contact Lesley if you need assistance with this.

#### FORT HAYS STATE UNIVERSITY DEPARTMENT OF NURSING RN to BSN PROGRAM

#### **EDUCATION COORDINATOR**

As a student of FHSU, I have confirmed with my chosen clinical site that it is acceptable for me to conduct my clinical hours in this organization. If needed I have completed the new site request form.
Clinical Education Coordinator Name:

## E-mail: Phone: PRECEPTORSHIP AGREEMENT FORM \_\_\_\_\_, of the \_\_\_ (Print or type preceptor's legal name) (Print or type legal name of clinical facility) (Preceptor License Number) (Preceptor Address) (Phone) (Email) I agree to facilitate learning experiences as a preceptor for student: beginning (Total Clock Hours) (Print or type student's name) (Date) I have read the Preceptor Guideline document below will provide the preceptor evaluation at the end of the scheduled hours. By signing this agreement, I acknowledge review of the preceptorship information with the student (Preceptee): **Student - I have attached:** Preceptor Signature Date Preceptor's Resume Student (Preceptee) Signature Date

Academic Program Specialist

#### NURS 449 Leadership and Management for the RN Preceptor Guidelines

NURS 449 Leadership and Management for the RN is a theory based course with practicum hours. In this course, students will synthesize nursing knowledge related to leadership and management in health care with an emphasis on professional development and evidence based practice while providing direct patient care.

Prior to the practicum experience, the course faculty member will communicate with the preceptor to provide a detailed preceptor orientation video, determine appropriate activities, and answer any questions. Students are required to spend 32 hours with an experienced Registered Nurse who is in a leadership role in a health care organization but still has contact with patients and families. Examples of nurse leaders who provide direct patient care include charge nurses, assistant nurse managers, house supervisors, unit educators, wound care nurses, or team leaders. Other roles may be appropriate as long as the preceptor is a nurse leader who provides patient care. During this time, the student will work with the nurse leader to acquire practical applications of nursing leadership, management, and advanced skills while delivering patient care in healthcare organizations. During their time with the preceptor, students will demonstrate appropriate nursing behaviors by adhering to confidentiality policies and general nursing professionalism.

Each day the preceptor will document the hours spent with the student. At the end of the precepted time, the preceptor will complete a confidential evaluation of the student. The evaluation can be emailed directly to the course faculty. The preceptor should communicate any unprofessional student behavior to the course faculty immediately. Below are more details concerning the NURS 449 practicum hours.

#### **NURS 449 Student Outcomes:**

- 1. Assess nursing leadership and management roles in complex organizational systems.
- 2. Incorporate evidence-based practice into leadership, management, & healthcare systems.
- 3. Integrate principles of quality and safety improvement for cost-effective practice in healthcare delivery.
- 4. Practice leadership and management strategies with an experienced nurse leader.

#### **Preceptor Role Description and Qualifications:**

A preceptor serves the Department of Nursing as a clinical facilitator for RN-BSN nursing students. A preceptorship appointment has no remuneration from the Department of Nursing. A Bachelor of Science in nursing degree is preferred, but not required. The preceptor must hold a current U.S. RN license. All preceptors will provide the Department of Nursing with a current resume (renewed every 2 years).

#### **Preceptor Responsibilities:**

Each preceptor is accountable to the course faculty member. The faculty member retains the primary responsibility for the education of the student. The preceptor is expected to contribute to the attainment of selected objectives of the Department of Nursing by:

- 1. Serving as a clinical facilitator for students in their education experience, by maintaining an educational milieu conducive to teaching and learning, and supporting the educational objectives of the Department of Nursing.
- 2. Evaluating the student's performance with written evaluations and utilizing verbal communication when necessary with the instructor. The Preceptor will inform the instructor of any problems that develop. The faculty will assign the student a final grade.
- 3. Complying with current laws, regulations, and standards of education/practice.

<b>Student complete</b>	this area. (please print)
Preceptor Name:	
For Student Name:	
For Course:	
Tor Course.	Seni11

# **Preceptor Resume**

### Fort Hays State University Department of Nursing

#### PRECEPTOR INFORMATION

Name:		Li	cense #:	Stat	te:
E-mail :					
Facility (Agency) Name:Facility State:			Facility Address:		
		State:	Facility Zip:		acility Phone
<b>Current Position</b>	Title & Unit:			Y	rs. in position:
Do you hold natio	onal certification? _	YES	NO If yes	, area:	
Degree: (circle his	ghest level) MD P	PhD DNP	MSN BSN A	DN Other_	
Nursing Education	on: complete section o	r attach resun	ne or curriculum	vitae	
Nam	e of Institution		Graduation	Date	Name of Degree
Previous Work E	<b>xperience:</b> (Brief) or	attach resume	or curriculum v	itae	
Dates Of Employment	Facility Name	Position T	Title	Ex	periences
Brief Description	of Current Responsi	<b>bilities:</b> (Brie	ef) or attach resu	ne or curriculu	ım vitae
Signature:				Date:	
****Please retur	n ASAP to (Clinical I	nstructor):	FHSU Depar Stroup Hall 600 Park Str Hays, KS 67	reet	sing

Fax: 785-628-4080

Student Name	_Fort Hays State University	Course Number
	Department of Nursing	

## NEW FACILITY AGREEMENT INFORMATION FORM

# Information to be completed by the student and returned to \_\_\_\_\_

Name of F	acility:			
Address:				
City:	State	: Zip:		
Contact Pe	rson:			
Phone Number:				
Preceptors' names:				
(attach preceptors' credentials)				
I have contacted the above facility and have obtained a verbal commitment				
that the facility will serve as a clinical site for preceptorship experience.				
Signature	(Student)	Date		
Approval	(Coordinator)			

------BELOW FOR OFFICE USE ONLY-------