





Dear Preceptor,

Thank you so much for agreeing to be a preceptor for a nursing student from Andrews University. The faculty has designed a curriculum that provides a variety of practicum experiences for our students. Community Health Nursing and Nursing Leadership require a practicum. In these courses, our students (registered nurses) observe and participate in professional roles related to these courses under the guidance and supervision of a preceptor and Andrews University faculty.

That is where you as a preceptor come into the picture. We rely upon a number of experienced professional nurses to be a part of our students' practicum education in these courses. As a preceptor, we would like you to be a guide and mentor to students as they learn and experience the roles in these specialties. Our students appreciate the opportunity of working with an experienced professional nurse. They will ask questions, share their thoughts and feelings, and learn new skills as nurses.

We hope that your time working with our students is rewarding to you; we know that it is extremely beneficial to our students, who consistently rate their precepted experiences very highly. Again, we thank you for your time, energy and wisdom! You make a difference in the professional education of nursing students!

Sincerely,

Sara Kim, JD, DNP, FNP-BC
Chair, School of Nursing

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Seek Knowledge. Affirm Faith. Change the World

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DESCRIPTION OF PROGRAM

RN-to-BSN Online Program

The RN-to-BSN online program provides the RN who has an associate degree with an opportunity to complete their Bachelor of Science in nursing. The curriculum focuses on the professional and leadership roles of the BSN-prepared nurse. Normally students complete the program in three to six semesters. The program requirements will involve practicum activities that may not be carried out in the student's work unit.

Andrews University recognizes the associate degree as a whole package, leaving a minimum of 32 credit hours to be completed at the University for the bachelor's degree. Some general education courses (Andrews Core Experience) may have been fulfilled within the associate degree package. See Andrews Core Experience: Professional Degrees. Additional general education courses needed to complete the BSN requirement can be taken online through the College of Education & International Services.

This program is offered in an interactive online format. In the interactive online format, courses have specific start and end dates. The interactive online program does not require any time on campus. Students in the interactive online program are encouraged to come to campus for graduation. Thirty hours of practicum are required for Leadership and thirty hours for Community Health Nursing.

Accreditation

The baccalaureate nursing program at Andrews University is accredited by the Accreditation Commission for Education in Nursing (ACEN).

3390 Peachtree Road NE, Suite 1400, Atlanta, GA 30326

The most recent accreditation decision made by the ACEN Board of Commissioners for the baccalaureate nursing programs is continuing accreditation.

View public information disclosed by the ACEN regarding this program on the ACEN website.

RN-BSN Student Learning Outcomes

Students who successfully complete the bachelor's program will:

1. Reflect in their nursing care the application of Christian values and formula for health for the purpose of "Restoring humans to the image of God."
2. Demonstrate cultural sensitivity using verbal, non-verbal and written methods.
3. Foster open and effective communication using verbal, non-verbal, written and technological methods.
4. Utilize critical thinking, clinical reasoning, judgment, evidence-based practice and research in implementation of the nursing process, while delivering patient-centered care.
5. Apply leadership concepts, principles of advocacy and decision making in the provision of quality patient care.
6. Function effectively as part of intra- and inter-professional teams, fostering open communication, mutual respect and shared decision-making to achieve quality patient care.

Contacts

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Vision

To prepare professional nurses to reflect Christian spirituality, caring attitudes, clinical excellence, and cultural competence for service and practice in concert with the four main initiatives from the Institute of Medicine and the Robert Wood Johnson Foundation's report on the future of nursing (October 5, 2010):

- Nurses should practice to the full extent of their education and training.
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- Nurses should be full partners, with physicians and other healthcare professionals, in redesigning healthcare in the United States.
- Effective workforce planning and policy making require better data collection and information infrastructure.

Mission Statement

The Andrews University School of Nursing, a program based on Seventh-day Adventist precepts and Restoration to the Image of God, provides transformational nursing education which equips students to function as professional nurses in direct care, advanced practice, research and education. Through the following activities, the School of Nursing encourages students to Seek Knowledge, Affirm Faith and provide Changes that impact the World of healthcare:

SEEK KNOWLEDGE	AFFIRM FAITH	CHANGE THE WORLD
<ul style="list-style-type: none"> • Prepare nurses that provide culturally competent, high quality, evidence-based, patient-centered care • Prepare nurses for first-time licensing and certification success • Encourage lifelong learning 	<ul style="list-style-type: none"> • Prepare nurses to practice within the Christian context of “Restoration to the Image of God” • Promote personal spiritual growth • Teach theoretical underpinning of wellness, illness and disease within the context of the Great Controversy 	<ul style="list-style-type: none"> • Teach with service/mission focus; medical evangelism • Teach current whole-person nursing care across the life span, which addresses wellness and illness • Prepare nurse leaders with a mindset for professional and ethical practice which incorporates communication (all venues), teamwork and collaboration

ONLINE RN-TO-BSN CURRICULUM:

The RN-to-BSN degree plan articulates with community college programs and provides a baccalaureate completion program for licensed RNs with an associate degree in nursing. Students are individuals already licensed by the state to practice as registered nurses and are seeking to advance their nursing knowledge and education. The RN-to-BSN curriculum gives students an opportunity to broaden their base of liberal education through upper-division courses. RN-to-BSN students complete eight-week courses online.

Nursing courses enhance knowledge of human development, assessment skills, theories of nursing, ethics and current issues in the practice of professional nursing, community health, leadership and research. Upper-level nursing coursework includes:

Course Number	Course Title	Credit Hours
NRSG 305-999	Health Assessment	3
NRSG 315-999	Pathophysiology	3
NRSG 466-999	Complementary Wellness II	3
NRSG 443-999	Nursing Informatics	3
NRSG 433-999	Nursing Leadership with Practicum	4
NRSG 445-999	Nursing Research	4
NRSG 450-999	Community Nursing with Practicum	4
NRSG 438-999	Intercultural Mission Service	2
PBHL 440-999	Fundamentals of Spirituality & Ethics in Healthcare	3
STAT 285	Introduction to Applied Statistics	3
Total Number of Nursing Credits		32

PLACEMENTS FOR PRACTICUM EXPERIENCE

Overview

The student works in consultation with the course instructor and practicum director. Placement is arranged in consultation with the practicum preceptor and student. The course instructor verifies that the student objectives are appropriate to the practicum and assures that the preceptor has been approved by the School of Nursing. The instructor maintains appropriate contact with the preceptor, and awards the final grade. This will help the students to discuss their learning and ensure that course objectives are followed and met.

Procedure

The student must hold RN licensure in the state in which the practicum takes place. The RN-to-BSN student practices under his or her own RN license and is covered by the University's professional liability insurance for course-related incidents. Interpretation and proof of University's insurance status can be documented and provided for the agency if required.

Appropriate student placement with a qualified preceptor is determined by course objectives, student objectives and experiential background.

Sites or practices may require additional paperwork prior to the student beginning their practicum. It is the responsibility of the student to complete these requirements prior to the first day of class.

It is the student's responsibility to provide the School of Nursing office with a completed Preceptor Curriculum Vitae or Résumé which is sent to the course instructor and nursing office.

The completed and signed Agency/Preceptor Contract Letter of Agreement should be sent to the School of Nursing before students can start clinical or practicum experience.

SELECTION CRITERIA

Preceptors

Preceptors who participate in teaching in practicum sites must meet specific qualifications, to include the following:

1. Have an earned BSN degree or higher and be licensed as an RN in the state of practice. Have at least one year of experience in practicum-related specialty.
2. Have an interest in teaching, role modeling, mentoring and counseling. Be willing to assume the additional responsibility of a student's learning.
3. Must be willing to complete the Preceptor Curriculum Vitae (page 11) and the Agency/Preceptor Contract Letter of Agreement (pg 12) and submit it to the School of Nursing prior to the beginning of the course.

Practicum Site

1. Student practicum sites should be in settings applicable to practicum-related specialty.
2. Patient characteristics represent the appropriate population age and diversity.
3. Patient volume is adequate to provide sufficient numbers of patients for the student to learn skills related to course objectives and give opportunity for skills' practice.
4. Adequate resources available on-site:
 - a. Preceptor
 - b. Medical Record System
5. Students may not be placed in the same unit where they are currently employed.

ROLES AND EXPECTATIONS

Faculty

In general, the course faculty will coordinate and facilitate the orientation of the student to the expectations of the preceptorship; meet with the preceptor to answer questions and explain expectations; assist the preceptor by identifying student learning needs; describe role of student, faculty and preceptor; and be available as a consultant. Additionally, the faculty member will mutually plan meetings/conferences as needed to discuss student progression.

In order to be consistent with preceptor policy and provide clarification of roles, the following faculty responsibilities are further identified:

1. Assume responsibility for the overall coordination of the student's practicum experience. Assist students in selecting experiences that match learning objectives.
2. Provide the preceptor with the course syllabus, designated course objectives, course outcomes and directions on how to assist the student in achieving these outcomes.
3. Establish and maintain communication with the practicum preceptor and the student during the course by email, phone or Zoom sessions.
4. Incorporating data from discussions with the student, preceptor and preceptor-written documentation, will provide the final student evaluation and assignment of performance rating, or grade.
5. Provide the student with the opportunity to evaluate the practicum experience and the practicum agency.
6. Discuss with the preceptor any information from the student concerning ways to improve the practicum experience for future students.
7. Assist in the orientation of the preceptors for the practicum course. Orientation will include the following:
 - a. A review of the mission, goals and curricular outline of the program;
 - b. Student objectives, course objectives, course outline;
 - c. Role and responsibilities of the faculty, preceptor and student;
 - d. Performance expectations of the student;
 - e. Evaluation responsibilities;
 - f. Avenues of communication;
 - g. Student assignments; and
 - h. Expected initial level of knowledge, skills and abilities of the student.
8. Responsible for ensuring that the practicum contract between the Andrews University School of Nursing and the practicum agency is in place.
9. Ensure that students have met all agency compliance requirements for practice in the practicum facility.
10. Communicate with each preceptor during the practicum experience by phone, email or Zoom.
11. Responsible for the evaluation of the student with input from the preceptor.

Students

In general, the role of the student is to provide the preceptor with weekly objectives and learning goals, and identify a plan to meet these objectives and goals; to discuss outcomes of the experience daily with the preceptor; to achieve the practicum objectives at a satisfactory level; to accept accountability and responsibility for assignments; to communicate with other healthcare professionals as needed when providing patient care; to be respectful in all interactions with patients and others; and to communicate with the course faculty.

Roles include:

1. Adhere to all practicum agency policies and procedures.
2. Adhere to all University policies and procedures identified in the Student Handbook, ANA Standards of Practice and ANA Code of Ethics, within which the practicum experience is occurring.

3. Establish with the preceptor a schedule of experiences and provide it to the course faculty.
4. Collaborate with the course faculty and the practicum preceptor, learning goals for this practicum experience. This may be provided in the form of the learning portfolio. Come to the first practicum day prepared to discuss these learning objectives.
5. Maintain a weekly journal of activities and practicum experiences according to the course objectives. Upload the journal in LearningHub as directed by course faculty.
6. Participate actively in Zoom sessions with faculty. Be prepared to discuss journal entries with preceptor and faculty.
7. Comply with all health and other professional requirements of the practicum agency prior to the start of the practicum experience.
8. Dress in a professional manner as required by the practicum agency with Andrews University School of Nursing patch/logo and Andrews University ID badge on the lab coat.
9. Maintain patient confidentiality. Do not remove records from the agency for any reason.
10. Conduct him/herself in the practicum setting in a manner that demonstrates safety, adherence to professional standards and that reflects positively upon Andrews University.
11. Be prepared to work the same shift and hours as the preceptor, and as agreed upon between the student, the preceptor and the faculty.
12. Maintain the student role. Do not allow yourself to fill a staff nursing position. Perform only the role agreed upon by you, the faculty and the preceptor to meet the course objectives.
13. Document and notify the faculty immediately of any issues or concerns with preceptor experiences.
14. Complete the Student Evaluation of Practicum Site form and the Student Evaluation of Preceptor form. These are to be completed in Learning Hub as directed.
15. Andrews University Photo ID is to be worn during practicum.

Preceptors

Responsibilities include the following:

1. Complete the practicum preceptor information form and CV prior to the first practicum experience. Student will submit to the program director for approval.
2. Provide license state and number to the student. Student will submit the document to the School of Nursing prior to the first practicum experience
3. Discuss with student the preferred method of communication. Orient student to the facility and their policies.
4. Discuss with student the patient population for the site and most common diagnoses and procedures.
5. Discuss the expectations of patient encounters and documentation.
6. Communicate to Andrews University course faculty immediately of any issues of concern or unsafe practice.
7. Discuss course objectives and learning opportunities to enhance learning.
8. Direct student to resources for evidence-based readings.
9. Provide a variety of learning experiences with appropriate client populations.
10. Encourage participation in interdisciplinary team meetings.
11. Support student's autonomous assessment and evaluation and facilitate progression towards independence.
12. Complete practicum evaluation and review with practicum faculty during required phone conference and/or email communication as well as with the student. The final grade will be awarded by the practicum faculty.
13. Verify student's practicum log.
14. It is the student's responsibility to upload the following documents: Agency Preceptor Contract, Preceptor CV, and Licensing information of preceptor.

Student Health Requirements for Clinical Practicum

1. Immunization records are maintained in electronic form according to School of Nursing policy. It is the student's responsibility to make sure the documents are current.
2. Current RN license—Must have an unencumbered license in the state where you are doing practicum.
3. Health Insurance—It is the student's responsibility to provide his/her own health insurance throughout the program.
4. CPR—Students must maintain a current American Heart Association Healthcare provider CPR card.
5. Physical Exam—The completed form must be in the School of Nursing prior to the beginning of the semester of enrollment in the practicum course. This data is used to confirm that a student is in good physical and mental health for participation in the practicum. Please see appendix A.

6. Quanteferon Gold Blood Test—Please see Appendix B.
7. Hepatitis B Vaccine—The Hepatitis B vaccine or titers are required for all students. It may be obtained through your private physician or healthcare institution.
8. Tetanus/Tdap—Tetanus, diphtheria, and acellular pertussis (Td/Tdap) vaccinations require one-time dose of Tdap to adults younger than age 65 years who have not received Tdap previously or for whom vaccine status is unknown to replace one of the 10-year Td boosters.
9. Varicella—Evidence of immunity to varicella in adults includes any of the following:
 - a. Documentation of two doses of varicella vaccine at least four weeks apart.
 - b. Laboratory confirmation of immunity through IgG antibody detections.
10. Current Immunization Records—Some agencies will require documentation of PPD, MMR, Varicella and Hepatitis B immunizations or titers.
11. Additional laboratory testing/immunizations may be required per individual hospital policy.
12. Professional Liability Insurance—RN professional liability insurance is strongly suggested prior to attending any practicum, although the University will provide some coverage.

Student Evaluation by Preceptor

One very important area that the preceptor will be involved in is the evaluation of the students. When a student's performance needs to be corrected or improved, constructive feedback can create a learning opportunity. Constructive feedback is conveyed with supportive language and is intended to modify performance.

In summary, feedback should be:

1. Specific rather than general
2. Factual rather than opinionated
3. Descriptive rather than judgmental
4. Timely
5. Appropriate
6. Complete

Important tips for feedback:

1. Inform the student about things they are doing well and provide concrete examples (praise).
2. Inform the student about things they need to improve upon (constructive criticism).
3. Motivate the student with positive comments about their performance (praise).

Using these tips will cushion the constructive feedback between two positive comments. This sandwich approach allows the preceptor to provide the feedback in a specific and timely manner.

Student Evaluation of the Preceptor

Toward the end of the practicum experience, the student will have the opportunity to evaluate the experience and complete a preceptor evaluation form. A copy of the form the student will use is included for your review in this handbook.

Some Tips from Expert Preceptors

1. Remember how you felt when you started a new job and how incompetent you felt. If you can remember how overwhelmed you felt, then you can understand the student.
2. Make the student feel welcome by introducing him/her to other staff members.
3. Listen to what the students need or want to learn, and don't present only what you want to teach. One teaches more by what one does than by what one says.
4. Take time in the beginning to explain explicitly what will be expected. This decreases anxiety and helps both parties know what to expect of the other. Be sure you are accurate in what is expected.
5. Remember that every individual is unique and that you must tailor the learning to the individual.
6. Get to know the student's strengths and weaknesses as soon as possible, and then help find experiences to address the weaknesses and capitalize on the strengths.
7. Learn from your student: they usually bring a wealth of information with them.
8. Be patient and understanding.
9. Give the student some independence; don't do too much for them.
10. Don't rush the teaching.

11. Communicate!
12. Be open and honest.
13. Encourage the student to either ask for advice or consult with any member of the staff if unsure of his/her assessment of a patient.
14. Let people make mistakes—as long as it doesn't jeopardize patient safety. This is an excellent way for learning to have an impact.
15. Encourage questions, and make sure the student understands that no question is stupid.
16. Make sure to take 10–15 minutes at the end of the shift to review what was learned, answer questions and set goals for the next time.
17. Go step by step. Students cannot be taught shortcuts—they first need to learn things the established way. On the other hand, if there is a safe shortcut, share it!
18. Build on previously learned knowledge.
19. Create a non-threatening environment that is friendly because learning can be stressful.
20. Give feedback along the way—find the positives and share them; don't wait to “drop a bomb” till the end of the experience.
21. Keep a brief outline of what was covered each day—better still, have the student do it!
22. Set clear goals with time for feedback in both directions.
23. Be open and available after the new training time has ended.
24. Have fun! Laughter can be most helpful sometimes.
25. Remember that everyone has a contribution to make.

FORMS

PRECEPTOR CURRICULUM VITAE

****Please attach business card if available & additional sheets as needed.**

Name: _____

Preferred mailing address: _____

RN License Number: _____

State/Province/Country: _____

Preferred telephone number: _____

FAX: _____

Email address (if available): _____

Education

<u>School & location</u>	<u>Degree obtained</u>	<u>Year completed</u>
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EXPERTISE (limit to past 2
years) Employment:

<u>Agency & location</u>	<u>Title</u>	<u>Length in position</u>
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Preceptor Contract Letter of Agreement

The student is responsible for making copies of agreement, agreed clinical schedule, and providing copies of the documents to both the preceptor and the course faculty.

NRSG _____

Dear Preceptor,

The Department of Nursing at Andrews University appreciates your willingness to assist in the learning of _____, as an RN-to-BSN nursing student. This contract is to formalize the verbal agreement made with you by the above student. Please read the following and sign that you are willing to accept this responsibility. One copy is for you to keep, one is for the student, and the other copy will be returned to me by the student. As the course instructor, I will arrange a brief visit to meet you and answer any additional question you may have. We welcome any questions, feedback, or concerns you may wish to bring to our attention during this student's experience.

Andrews University agrees to ensure that:

1. The student is a registered nurse with a current license to practice.
2. The student has current certification in CPR.
3. The student meets current health requirements for tuberculin testing, rubella, and hepatitis B immunity.
4. The student is covered by professional liability insurance.
5. Practicum course is monitored by Andrews University faculty member.

The student agrees to:

1. Communicate with preceptor his/her personal learning objectives based on student learning outcomes and course objectives.
2. Fulfill all obligations as arranged with the agency and/or preceptor.
3. Demonstrate initiative, responsibility, accountability, and honesty throughout the practicum experience.
4. Carry out activities with adequate speed and autonomy in order to avoid requiring excessive time and effort on the part of the preceptor.
5. Maintain professional confidentiality regarding all concerns of patients as well as of the agency.

The preceptor is expected to:

1. Be willing to serve as a preceptor.
2. Complete a written evaluation of the student's progress and competence.
3. Allow the student to gain experience in varied aspects of the RN specialty role. (Course objectives are attached).
4. Communicate any problems to the faculty instructor or chair of the nursing department.
5. The preceptor acknowledges that this is an evidence-based practice site.

Preceptor Printed Name

Preceptor Work Address

Preceptor's work phone number

Preceptor Cell Phone Number

RN BSN APRN
Type of practice (circle)

Preceptor Signature

Date

CLINICAL EDUCATION AGREEMENT

THIS AGREEMENT, made and entered into the _____ day of _____ by and between Andrews University, a Michigan nonprofit educational corporation of Berrien Springs, Michigan, hereinafter referred to as the "University", and

_____, of
(Facility Name)

_____, Herein after
(Facility Address)
referred to as the "Agency," Witnesseth;

WHEREAS, the University is conducting the Doctor of Nursing Practice (DNP) educational program in Berrien Springs, Michigan, requiring clinical education facilities for the purpose of providing clinical experience to its students, and

WHEREAS, the Facility recognizes the need for and desires to aid in the education of health care professionals, and is willing to make its facilities available to the University's nurse educator students for such purposes.

NOW THEREFORE, in consideration of the mutual covenants continued herein, the parties hereto agree as follows:

I. THE FACILITY AND THE UNIVERSITY MUTUALLY AGREE:

1. To established in advance the number of students who will participate in the clinical education program and the length of the respective clinical experiences.
2. To appoint the appropriate representative to be responsible for the clinical education program. The University shall appoint a clinical coordinator and the Facility shall appoint a clinical supervisor. These individuals shall be called Academic Coordinator of Clinical Education ("A.C.C.E.") and Center Coordinator of Clinical Education ("C.C.C.E.") respectively. Each party will supply the other party with the name of this person along with the person's professional and academic credentials for approval by the other party. Each party shall notify the other in writing of any change of the person appointed.
3. That each student assigned as a clinical affiliate complies with the policies and procedures of the Facility, including policies on confidentiality of patient information. The Facility reserves the right to refuse access to and/or remove from its clinical areas any student who does not meet the Facility's standards and policies. No action will be taken until the grievance against the student has been discussed with the A.C.C.E., unless the student's behavior poses an immediate threat to the effective delivery of health care services to patients of the Facility.
4. To remain responsible for the acts of their respective employees and agents.
5. To notify the other party if one party becomes aware of a claim asserted by any

person which arises out of or appears to arise out of this agreement or any activity carried out under this agreement.

6. That the Facility maintains administrative and professional supervision of students of the University insofar as their presence effects the operation of Facility and the direct or indirect care of the Facility's patients.
7. That University students and faculty are not the agents, representatives or employees of the Facility and will not represent themselves as such.
8. That the parties will not discriminate on the basis of race, color, creed, ethnic background, country of origin, age, sex, height, weight, physical handicap, marital status, political or gender preference, or past military service regarding the educational or clinical experience of the student.
9. The University agrees to indemnify and save harmless the Facility and its agents and employees from any liability or damages the Facility may suffer as a result of claims, costs, or judgements, including reasonable attorney's fees, against it arising out of acts or omissions of the University in the operation of the clinical education program covered by this agreement, to the extent allowed by Michigan law. The Facility agrees to indemnify and save harmless the University and its agents and employees from any liability or damages the University may suffer as result of claims, costs, or judgments, including reasonable attorneys fees, against it arising out of acts or omissions of the Facility in the operation of the clinical education program covered by this agreement. The Facility agrees to give the University notice in writing within thirty (30) days of any claim made against it on the obligations covered hereby.
10. That the University will develop letter agreements, as necessary, with the Facility to formalize operational details of the clinical education program. These letter agreements shall be approved with the same formalities as this agreement.
11. That the Facility shall remain responsible for the patient.
12. That each party shall carry professional liability or self-insurance with minimum limits of liability of \$1 million/\$3 million for suits and claims that may be asserted for any professional liability claim arising out of any service rendered pursuant to this agreement. Each party shall, upon request, furnish the other party with evidence of such coverage.
13. That students will be responsible for all personal expenses including meals, lodging, and transportation unless provided by the Facility.
14. Modification of any term or provision of this agreement will not be effective unless in writing with the same formality as this agreement. The failure of either party to insist upon strict performance of any of the provisions of this agreement shall constitute waiver of that provision only and not the entire agreement.

II. RESPONSIBILITIES OF THE FACILITY

In addition to other provisions in this agreement, the Facility specifically agrees as follows:

1. To provide clinical education learning experiences which are planned, organized, and administered by qualified staff in accordance with mutually

agreed upon educational objectives and guidelines.

2. To prepare written objectives or guidelines for structuring the clinical education program. A copy of these objectives or guidelines will be available for review by the A.C.C.E.
3. To permit, upon reasonable request, the University or its accrediting agency to inspect the Facility and its services and records which pertain to the clinical education program.
4. To provide or otherwise arrange for emergency medical care for students at the student's expense.
5. To provide reasonable classroom, conference, storage, dressing, and locker room space for students.
6. To evaluate the student(s) according to the guidelines provided by the University and to utilize the evaluation standards and forms furnished by the University.
7. To accept the University's student clinical attire guidelines and to inform the University of the Facility's standards and policies regarding dress and appearance.

III. RESPONSIBILITIES OF THE UNIVERSITY

In addition to other provisions in this agreement, the University specifically agrees as follows:

1. To assign to the Facility only those students who have satisfactorily completed the prerequisite portions of the curriculum.
2. To direct the students to comply with the rules and regulations of the Facility.
3. To provide assurance to the Facility that each student accepted for the clinical education program will have had a physical examination within the last year. This examination will include a Tuberculum test and immunizations for MMR, tetanus , and Hepatitis B(or a signed waiver). The Facility reserves the right to restrict the clinical activity of students who evidence symptoms of communicable infections.
4. To provide evidence of professional liability insurance coverage for all of its students, employees, and agents in the facility in connection with the clinical education program of the University's students.
5. To assure and provide evidence that the student(s) possess health insurance either through the University or an individual policy.
6. To assure that students hold correct C.P.R. certification.

IV. TERM AND TERMINATION

This agreement will be effective as of the date signed by both parties and will continue in effect until terminated by either party. Either party may terminate the agreement upon ninety (90) days written notice to the other party. The notice required by this clause shall be sent by certified or registered mail.

If the termination date occurs while a student of the University has not completed his or her clinical learning experience at the Facility, the student shall be permitted to complete the scheduled clinical learning experience, and the University and the Facility shall cooperate to accomplish this goal.

IN WITNESS WHEREOF, the parties have executed this agreement and warrant that they are officially authorized to so execute for their respective parties to this agreement.

THE FACILITY

Signature

Name: _____

Title: _____

Date: _____

THE UNIVERSITY

ANDREWS UNIVERSITY

Signature

Name: _____

Title: _____

Date: _____

Signature

Name: _____

Title: _____

Date: _____

RN-to-BSN Student Assessment of 'self'

Student Name (Printed): _____ Course/Semester: _____

Competencies/Student Learning Outcomes	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	N/A
1. Utilized course objectives to guide clinical experiences	1	2	3	4	5	0
2. Participated/ took advantages of agency learning experiences	1	2	3	4	5	0
3. Assumed responsibility for own actions/behavior	1	2	3	4	5	0
4. Abided by agency policies/ procedures	1	2	3	4	5	0
5. Managed time effectively to accomplish goals	1	2	3	4	5	0
6. Utilized critical thinking, clinical reasoning, nursing judgment, evidence-based practice and research in implementation of the nursing process in clinical problem solving.	1	2	3	4	5	0
7. Demonstrated cultural competence in providing care and working with others	1	2	3	4	5	0
8. Demonstrated understanding of health promotion and disease prevention plans for individuals, families and/or populations						
9. Demonstrated understanding of the nursing leadership role as it pertains to decision making in the provision of quality patient care and patient advocacy.	1	2	3	4	5	0
10. Engaged in interdisciplinary collaborative relationships to improve professional nursing practice and the quality of healthcare.	1	2	3	4	5	0
11. Demonstrated an understanding of ethical and professional nursing roles, values, social justice and human dignity	1	2	3	4	5	0
12. Demonstrated effective verbal and written communication with individuals, families and professionals	1	2	3	4	5	0

Explanation on items that were 'not met'

In addition, I verify that I have completed the required 30 clinical hours and submitted the log as required by my instructor.

Student Signature: _____

Date: _____

_____ Semester _____

NRSG _____

RN-to-BSN Student's Evaluation of Preceptor

Item	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	N/A
I participated in an orientation at the beginning of the clinical.	1	2	3	4	5	0
Preceptors were readily accessible to me.	1	2	3	4	5	0
I was given clear explanations and directions.	1	2	3	4	5	0
My preceptor gave me adequate opportunity to utilize critical thinking skills.	1	2	3	4	5	0
I was given adequate opportunity to ask questions and discuss applicable nursing concepts.	1	2	3	4	5	0
I was able to achieve my clinical goals for this rotation.						
Overall, my assigned preceptor was an effective clinical teacher.	1	2	3	4	5	0
Overall, this was an effective clinical rotation.	1	2	3	4	5	0

Student Name: _____ Date: _____

_____ Semester _____

NRSG _____

RN-to-BSN Student's Evaluation of Clinical Site

Item	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	N/A
1. Receptivity to accepting students	1	2	3	4	5	0
2. Adequate orientation to the facility	1	2	3	4	5	0
3. Provided opportunity to meet student learning outcomes and program outcomes	1	2	3	4	5	0
5. Organization and planning that facilitate an excellent learning experience	1	2	3	4	5	0
6. Supportive and receptive staff	1	2	3	4	5	0
7. Appropriate resources for learning experience	1	2	3	4	5	0
8. Access to patient records and documentation	1	2	3	4	5	0
9. Clean, well-organized and updated facility	1	2	3	4	5	0
10. Access and availability to use EHR	1	2	3	4	5	0

Student Name: _____ Date: _____

PRECEPTOR ORIENTATION

Preceptor Name _____ **Orientation Start Date:** _____

Class Name and Number _____

Student Name _____

Group	Item	Date Completed	Instructor Initials
<u>Basics</u>	Welcome		
	Review of Organizational chart and job description		
	Provide current Nursing license		
	Preceptor Handbook		
	Zoom/Telephone/Face to face		
	Sign and submit Preceptor Contract/Letter of Agreement		
	Submit Curriculum Vitae or Resume to the School of Nursing		
<u>Teaching</u>	Method for course evaluation		
	Student Evaluation		

Preceptor Signature _____

Date _____

Course Instructor Signature _____

Date _____

Preceptor Evaluation of Clinical Course

We welcome your comments regarding your experience as a preceptor for the following course:

Course name Semester, Year.

1. I felt I was adequately prepared for my role in this course. (Circle One)
 Strongly Disagree Disagree Neutral Agree Strongly Agree N/A

2. I felt the course outcomes were adequately explained and I understood them. (Circle One)
 Strongly Disagree Disagree Neutral Agree Strongly Agree N/A

3. Please comment any suggestions below for course improvement.

4. Please comment on your interaction with the faculty liaison (e.g.: knowledgeable, collegial, receptive, professional, flexible, created a partnership with you).

5. Please indicate how, if at all, this course provides a service to or enhances your organization.

6. Are you willing to serve as a preceptor again? (Circle One)
 Fall Spring Summer Year _____

Preceptor Name: _____

Preceptor Signature: _____

Agency _____ **Date:** _____

Thank you for your valuable contribution to this course!



PRACTICUM HANDBOOK: 2025–2026

As an Andrews University nursing student, I understand that I must follow the procedures and policies that are included in this handbook, as well as the Andrews University Bulletin. I have given a copy of the preceptor handbook to my preceptor.

I acknowledge that I am responsible for this material.

Student's Name (please print)

Student's Signature

Date

This page is the property of the Andrews University School of Nursing, and shall remain in the School of Nursing files online.



Students must have an annual health/physical exam while participating in clinical practicum courses with the School of Nursing.

History and Physical Clearance

A report, signed by the physician, physician’s assistant, or nurse practitioner, shall be provided to the nursing program. This report shall indicate that the students do not have health condition(s) that would create a hazard to themselves, employees, or patients, and that they can meet the essential duties of the program.

NOTE: Nursing students who have a condition (impairment) which could interfere with the performance of their essential duties should connect with the University Disability Services to determine what accommodations would be recommended in a clinical setting. The clinical coordinator will collaborate with the clinical facility to determine if accommodations are possible. Any student with a condition that could impact decision making or the physical ability to provide client/patient care, must discuss his/her condition with the program director for his/her program of study.

HEALTH/PHYSICAL EXAMINATION FORM		
Student Name: _____		
ID: _____	DOB: _____	Date of Entry into AU Nursing: _____
TO BE COMPLETED BY HEALTHCARE PROVIDER		
I have verified that the individual I have examined is the named individual on this form and find that this individual (please check all that apply):		
<input type="checkbox"/> _____ does not have any health conditions(s)/ communicable disease(s) that would create a hazard to themselves, employees, or patients <input type="checkbox"/> _____ is free of any mental or physical impairment that would prevent the student from meeting his/her essential duties		
*If needed, please indicate what accommodations would be reasonable in the clinical setting. The student is to follow-up with the University Disability Services regarding the following: _____ _____ _____		
Signature of Healthcare Provider (MD/DO/PA/NP): _____		
Printed name of Healthcare Provider (MD/DO/PA/NP): _____		
Provider ID Number (PTAN) : _____		
Phone Number: _____		
Date of Exam: _____		

UPLOAD THIS PAGE ONLY

Health/Physical Exam Requirements

Students must have an annual health/physical exam while participating in all Andrews University Programs. If you are not current with this requirement, you will not be allowed to attend your clinical course until you are in compliance. This may result in needing to take the course at another time, delaying progression in your program of study.

Procedure

1. Make an appointment with your healthcare provider for a health/physical exam
2. Give a copy of the Health/Physical Examination Form (pg 1-3) to your healthcare provider to complete.
 - a. Be sure your healthcare provider stamps the bottom of the form (pg 1) with his/her office stamp.
3. Give a copy of the Essential Duties to Meet Clinical Requirements form (pg 2-3) to your healthcare provider to use as the basis for the health/physical exam.
4. Upload completed Health/Physical Examination form (pg 1) and copies of Immunizations as instructed on pg 3
5. Make an appointment with Student Disability Services if there are any conditions that may interfere with performance of essential duties and to determine what accommodation would be reasonable in a clinical setting.
6. Save a copy of all documents for your personal files.

Essential Duties to Meet Clinical Requirements

To enter and complete the nursing program, students must be able to meet the emotional and physical requirements of the School of Nursing and the agencies in which students are placed for clinical. Students and faculty are to work with Student Disability Services determine what accommodations would be reasonable in a clinical setting to meet these requirements.

Emotional Requirements

The student must have sufficient psychological stability and emotional health to use intellectual abilities, exercise good judgement, complete responsibilities relating to the care of patients, and develop effective relationships with patients.

Physical Requirements

In order to participate in Andrews University's Nursing Program, students are required to travel to agencies and hospitals and to homes with unpredictable environments, Students need to have the endurance to adapt to a physically and emotionally demanding program. The following physical requirements are necessary to participate in the clinical application courses in nursing:

1. **Strength:** Sufficient strength to lift, move and transfer most patients; to restrain and carry children; to move and carry equipment; and to perform CPR, which requires sufficient body weight and adequate lung expansion.
2. **Mobility:** Sufficient to bend, stoop, get down on the floor; combination of strength, dexterity, mobility and coordination to assist patients; ability to move around physically and adequately in confined spaces (patient rooms, bathrooms, treatment settings, around patient equipment, etc.).

Be able to perform all physical skills required to deliver patient care such as CPR, ambulation, transport, reposition, lifting, and other nursing duties.

3. **Fine Motor Movements:** Necessary to manipulate syringes and IVs; to assist patients with feeding and hygiene; to write appropriate notations; to document in health record, to perform sterile procedures and other skilled procedures.
4. **Speech:** Ability to speak clearly in order to communicate with staff, physicians and patients; need to be understood on the telephone.
5. **Communication:** The applicant must be able to communicate with patients and members of the health care team with accuracy, clarity, and efficiency within rapidly changing health care settings. The applicant must also be able to give and/ or receive verbal directions about or to a patient or members of the health care team within rapidly changing health care settings. The applicant must be able to gather data from written documents, oral presentations, and observation of patients within a variety of settings.
6. **Vision:** Visualize patients in order to assess and observe their health status; skin tone, color changes, dermatological conditions, non-verbal behaviors, changes in signs and symptoms of illness, health improvements or deterioration, etc.
7. **Hearing:** Hear and see patients, monitor signs and symptoms, hear alarms patient voices, call lights, assess patient conditions, non-verbal behaviors, changes in signs and symptoms of illness, health improvement or deterioration, hear through the stethoscope to discriminate sounds, and accurately hear on the telephone.
8. **Touch:** Ability to palpate both superficially and deeply and to discriminate tactile sensations.

Required Immunization

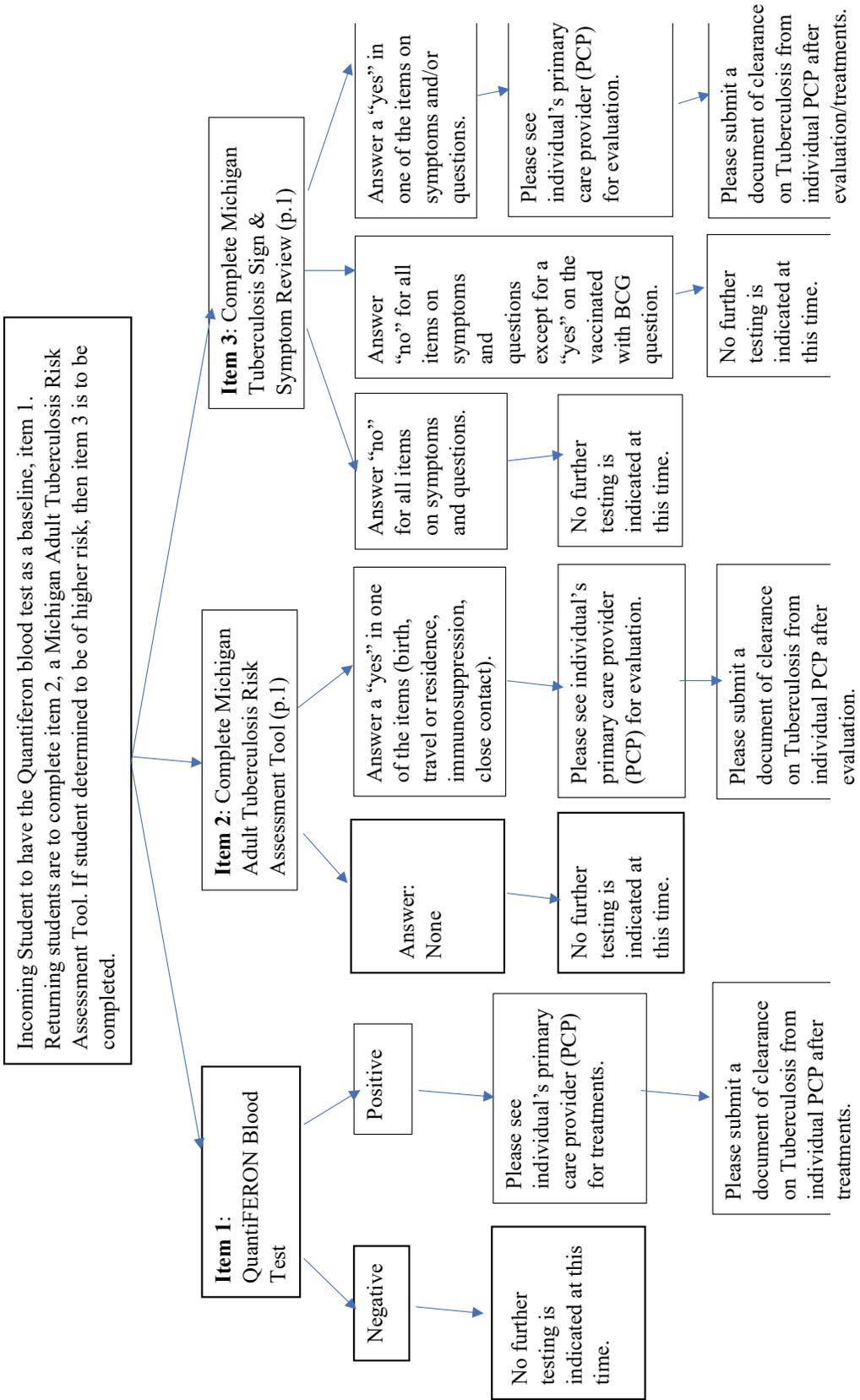
Submit copies of an official immunization record or lab reports for the following immunizations (keep originals for your own files).

1. **Rubella (German Measles)**
- Documentation of 2 doses MMR 4 weeks apart OR a positive Rubella Titer
2. **Rubeola (Hard Measles)**
- Documentation of 2 doses MMR 4 weeks apart OR a positive Rubeola Titer
3. **Parotitis (Mumps)**
- Documentation of 2 doses MMR 4 weeks apart OR a positive Mumps Titer
4. **Varicella**
-Documentation of 2 doses of Varicella given 28 days apart OR a positive Varicella Titer
5. **Diphtheria/Tetanus/ Pertussis (Tdap)**
- Documentation of a booster within the past 10 years.
6. **Hepatitis B**
-Documentation of a 3 dose Hepatitis B series at 0-1-6 months interval OR a positive Hepatitis B surface antibody titer
7. **Tuberculin Test (QuantiFERON Gold blood test)**
- Documentation of a Negative blood test
8. **Annually*-Influenza Vaccination (flu shot)**
-Documentation of an annual influenza vaccination (due October 15th of each year).

TB Testing Flow Chart for Andrews University Undergraduate Nursing Students (BSN Program)
 Prepared by Grace Chi PhD, MS, RN

https://www.cdc.gov/mmwr/volumes/68/lwr/mm6819a3.htm?s_cid=mm6819a3_w

<https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm>





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