

Academic Year
2019-2020

Preceptor Packet for:

Fall: N670B Psychiatric Mental Health Nursing Clinical Practicum I

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Course Coordinator

Mechelle J. Plasse, PhD, MS, RN, PMHNP-BC, PMHCNS-BC

Assistant Professor

Course Coordinator for the Psychiatric Mental Health Nurse Practitioner track

Primary phone (cell): 508 735-9406 (text is accepted)

Office: 508 856-3647

Email: Mechelle.plasse@umassmed.edu

Overview

Thank you for agreeing to precept this year. As a preceptor you have a unique opportunity to facilitate a student's professional development. This information is intended to assist you in helping your student to meet clinical competency goals. Since evaluation is an ongoing process, it is recommended that both the preceptor and the student participate in open discussion throughout the semester regarding progress made towards meeting clinical objectives. At the end of the semester you will be asked to perform an evaluation of the student. This will be done electronically, and you will be sent information during the semester regarding how to access the online evaluations. Please include validating and constructive comments in the sections provided. We recognize that it is impossible to be outstanding in all areas and hope to use the evaluation tool to build on the areas the student excels in and assist him/her to build strengths in other areas. Your input is a vital tool enabling the student to reach their potential.

Course Description:

This is the first of three-advanced practice nursing **clinical** courses to prepare psychiatric nurse practitioners to care for acute and chronic mentally ill population. The course focus is on health promotion, illness prevention, assessment and treatment of psychiatric-mental health issues across the lifespan. Students are to develop and refine the skills to conduct a comprehensive and diagnostic mental health assessment inclusive of history taking, psychosocial assessment and mental status exam. In this clinical experience, students work with multidisciplinary teams in applying principles of evidence-based practice. Students participate in supervision clinical preceptors to extend their skills in clinical reasoning to address the biopsychosocial, cultural, and spiritual needs of persons from diverse backgrounds.

Course Objectives:

Upon completion of this course the student will be able to:

1. Examine various models of health care delivery systems in which the student clinical experience occurs.
2. Apply advanced psychiatric-mental health nursing assessment data to the formulation of accurate diagnoses, allowing for the development of an effective treatment plan in the care of those receiving psychiatric-mental health nursing care.
3. Evaluate the use of pharmacological and psychotherapeutic modalities in the treatment of persons with psychiatric/mental health problems.
4. Identify, plan, conduct and evaluate a group psychoeducation project on a selected health problem.
5. Describe the roles of interdisciplinary team members who provide care to individuals, families and groups in a variety of settings.

Course Methodology:

This is a two-credit course for the first clinical component of the program. Students will have approximately 10-12 clinical hours per week on average for a total of 180 hours this semester. The focus is on assessment and diagnosis, development and refinement of skills in conducting a comprehensive mental health assessment and discussion with preceptor of care management and treatment potentials related to clinical encounters.

Course Evaluation:

Clinical Preceptor Evaluation: 180 hours (pass/fail)

Journal submission (x4 @ 5% each): 20%

Case presentation from clinical placement (details to follow): 10%

Seminar participation and submission of all course evaluations: 20%

Students must pass all evaluation methods to successfully complete this course.

Preparation and Study for Class:

At the graduate level, the expectation for preparation time for classes is **3 hours of preparation or course related work for each hour of class or 3 hours per 1 course credit.** Therefore, N760B is a 3-credit course and 9 hours of preparation or related work is expected.

Credit Allocation:

Each credit is equal to 90 hours of clinical time. Students will be registered for 2 credits (180hrs) of clinical in the fall semester, 2 credits (180hrs) of clinical in the spring semester, and 4 credits (360hrs) of clinical in the summer semester which equals a total of 630 direct patient care hours, for the fall, spring, and summer semesters, combined. **Students must complete a minimum of 630 direct care clinical hours by the end of the clinical year,** which is by the last day of the semester in July to progress.

Guidelines for Clinical hours:

Students should expect to be in clinical 10-12 hours per week for a total of 180 hours per semester for the fall and spring and an additional 270 hours for the summer semester (total of 630 for the year). Students are expected to keep up with clinical hours. It is easy to fall behind. Problems with keeping up with clinical hours should be reported to the clinical instructor promptly so that a remediation plan can be instituted.

Students must complete a minimum of 630 direct care clinical hours and must complete the necessary hours by the last day of the semester in July to satisfy requirements to progress in the program.

Student Clinical Expectations:

1. The student will develop clinical objectives and share with their preceptor at the beginning of the clinical practicum. A copy of these objectives is to be given to the

clinical faculty instructor. Objectives are to be reviewed over the course of the practicum to evaluate how they are being met. Objectives may need to be revised throughout the semester.

2. The number of patients seen by the student daily will be determined by the preceptor in collaboration with the student. This decision will be guided by both patient acuity and the student's current skill level with that patient population. Concerns regarding this can be readdressed with the clinical faculty instructor responsible for the student. As a guide, the student will begin with observation of preceptor for 1st 1-2 clinical days. The student will be expected to progress to seeing approximately 4 patients within the clinical day.
3. Students should see patients throughout the lifespan and according to the scope of practice of the preceptor.
4. Students are expected to submit 4 reflective journal submissions over the semester in the guideline provided during practicum session and one case presentation in practicum meeting with faculty.
5. If the student is unable to attend a scheduled clinical day due to illness or weather, the student is expected to notify the preceptor, the site and their clinical instructor prior to the session (phone or email is acceptable). Please identify the preceptors preferred contact at the beginning of each rotation.

Patient Care Expectations:

1. Expectations of the patient assessment includes performing a comprehensive mental health assessment (including psychiatric and medical history, medication and treatment history, family and psychosocial history, mental status exam and ROS).
2. The student will then present assessment findings to preceptor and offer a diagnostic impression with differential consideration, justified using characteristics of disorders as outlined in the DSM-V. Documentation of the same to be provided according to site specific format.
3. The student will discuss an appropriate plan(s) of care with their preceptor and receive feedback as this is an emerging skill only in the Fall semester. Plans should include identification of additional information needed, diagnostic or pre-treatment initiation testing and ongoing monitoring, psychotherapeutic treatment recommendations including level of care and psychopharmacologic considerations. Patient education needs and follow-up recommendations should also be included.
4. The student will document a note of the patient interview/assessment based on whether the assessment is episodic or routine. All notes are to be reviewed in clinical by the preceptor. The preceptor is expected to see the patient after reviewing the findings with the student.

Evaluation of clinical performance:

Each preceptor, UMass Clinical faculty, and student is expected to complete and sign an evaluation form and submit this towards the end of the semester. The semester grade cannot and will not be submitted until all properly completed evaluations are returned to the faculty.

Evaluation is an ongoing process; therefore, it is recommended that both the preceptor and student participate in open discussion throughout the semester regarding progress made towards meeting the clinical objectives. The clinical faculty determines the student's grade for the clinical component.

The pass-fall behaviors are critical elements of the program. Failure to pass a critical element constitutes failure of the student to pass the course. Semester I passing grade is 3.0 (of a possible 5.0 points) or above. Semester II passing grade is 3.5 (of a possible 5.0 points) or above.

Preceptor Role

Since evaluation is an ongoing process, it is recommended that both the preceptor and the student participate in open discussion throughout the semester regarding progress made towards meeting clinical objectives. At the end of the semester you will be asked to perform an evaluation of the student. This will be done electronically and you will be sent information during the semester regarding how to access the online evaluations. Please include validating and constructive comments in the sections provided. We recognize that it is impossible to be outstanding in all areas and hope to use the evaluation tool to build on the areas the student excels in and assist him/her to build strengths in other areas. Your input is a vital tool enabling the student to reach their potential.

Specifics of role include:

Clinical supervision is to be provided by an identified preceptor(s), a board-certified psychiatric nurse practitioner or psychiatrist however additional opportunities can be designated to another temporary preceptor who is also an independently licensed masters level clinician.

A. The preceptor will:

- Orient the student to the clinical setting, patient population, health care team, and key aspects of care delivery in the environment.
- Student will initially observe clinical encounters with preceptors of first clinical practicum however once preceptor is comfortable with student's skill level the student may engage with patients without direct observation and then report back to supervisor.
- Preceptor reviews and directly or indirectly supervises all patient encounters and treatment plan development
- Fosters critical thinking by questioning students about the rationale for interventions.
- Immerses and engages students in clinical practice experiences, integrating them into the practice setting and treatment team
- Negotiates clinical learning objectives related to each clinical experience.

B. In order to assist in the assessment of student performance the preceptor will:

- Gives verbal feedback to the student at the end of each clinical day, following performance and as needed.
- Utilizes soft skills guide to address any interpersonal or professional competency concerns
- Formally reviews the soft skills guide with the student at mid-point
- Completes an electronic evaluation of student performance at the end of the semester (10 minutes maximum to complete) that includes an optional narrative feedback section.
- Informs faculty of student progress and contact faculty immediately with any concerning issues related to the student's performance.

C. To assist the student to revise his/her learning objectives the preceptor will:

- Note progress toward meeting established objectives.
- In collaboration with clinical faculty, identifies additional clinical experiences to meet the student's needs and enhance learning.

Clinical Site Visits:

The preceptor will be contacted to discuss student's performance. This contact maybe in-person meeting, via phone or e-mail. The preceptor is encouraged to contact the clinical instructor with any concerns or questions related to the clinical experience. Additional meetings with student and preceptor together may occur, and is warranted when there are any concerns regarding clinical performance or other issues of concern.

Monitoring of student skills by faculty is done via participation in seminar and performance in OSCE in related, accompanying class. Comprehensive assessment and diagnostic skills are evaluation in the OSCE simulation with standardized patients.