

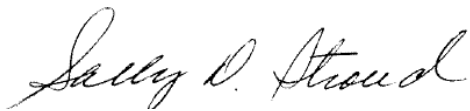
MUSC College of Nursing Undergraduate Clinical Preceptor Packet

To Our Preceptors,

The College of Nursing Faculty and I wish to thank you for freely sharing your time and expertise with our nursing students. Your guidance to our newest members of the discipline is the highest form of professionalism, and is greatly respected by our faculty. Your leadership builds student development of critical thinking, decision making, professional role, and organizational abilities. Your generosity teaches students to actively give back to the profession. For all those things and more we thank you!

The Preceptor Packet provides general information about the College and CON clinical guidelines related to students. The packet also contains a section on the preceptor role including preceptor and student responsibilities. Specific guidelines about your individual courses and students will be given to you by the course faculty with whom you work. We encourage you to access more information about the college at our website, <http://www.musc.edu/nursing/>.

If at any time you have questions or concerns that cannot be answered by course faculty, please do not hesitate to contact me. I can be reached at 843-792-3815, or stroudsd@muscd.edu.



Sally Stroud, EdD, APRN, BC
Associate Dean for Academics and Associate Professor

Table of Contents

The College of Nursing

- History of the College of Nursing
- College of Nursing Vision, Values, and Philosophy
- Accreditation of the College
- The University Honor Code

College of Nursing Clinical Policies

- Clinical Course Policies
- Student Dress Code: Undergraduate

Clinical Faculty and Preceptor Guidelines

- Preceptor Benefits
- MedMentor Program
- Becoming a Modified Faculty Member
- Preceptor and Student Responsibilities
- Preceptor Teaching and Mentoring Tips

THE COLLEGE OF NURSING

History

The College of Nursing of the Medical University of South Carolina had its origin in 1882 when the City Council of Charleston approved a request by the City Hospital for \$2,000 to establish a "Training School for Nurses." The school was opened in 1883 and continued until the City Hospital was destroyed by an earthquake in 1886. It was reestablished as "The Charleston Training School" in 1895. A two-year program of instruction was offered, with some lectures given by the Medical College faculty.

In 1916, the Board of Commissioners of the Roper Hospital proposed the incorporation of the Training School with the Medical College, and in 1919 the Roper Hospital Training School for Nurses became the School of Nursing of the Medical College of the State of South Carolina. Later the words "of the State" were deleted.

In September 1966, the school began the process of phasing out the three-year diploma program and establishing a four-year baccalaureate program. In 1969, when the Medical College was redesignated as "The Medical University of South Carolina" by the State Legislature, the school became one of the six colleges comprising the University.

In 1976, the Master of Science in Nursing degree program was added. In 2008 the College of Nursing celebrated one hundred and twenty-five years of nursing education and service to the citizens of South Carolina and the nation. The College of Nursing initiated the Doctor of Philosophy in 2001 and in 2009 the College admitted the first class of DNP students. The College of Nursing now offers programs of study leading to the Bachelor of Science in Nursing and the Master of Science in Nursing degrees, as well as the Doctor of Philosophy in Nursing and Doctor of Nursing Practice.

History of the College of Nursing



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From 1916 to the Present

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South Carolina and the nation. The College of Nursing launched a Doctor of Philosophy in Nursing in 2001.

Current Programs

The College of Nursing now offers programs of study leading to the Bachelor of Science in Nursing and the Master of Science in Nursing degrees as well as a Doctor of Philosophy in Nursing. There are both on-campus and online offerings.

MEDICAL UNIVERSITY OF SOUTH CAROLINA
College of Nursing

Vision Statement

The College of Nursing of the Medical University of South Carolina educates nurses to change lives, and is proactive in leading the state and beyond in advancing the profession, reducing health disparities and improving health outcomes.

Mission Statement

The College of Nursing supports the mission of the Medical University of South Carolina, an academic health science center, and is committed to

- * Providing evidence-based nursing education
- * Developing, testing, and disseminating nursing knowledge
- * Demonstrating excellence in nursing practice
- * Sharing expertise and leadership through service to professional organizations and communities in an environment that is accountable, respectful, adaptive, and innovative.

Core Values

Professionalism is represented by the adoption of core values as part of a nurse's commitment to competency, consistency, compassion in practice, and the highest standards of care in the ethical conduct of nursing. The following are the core values shared by the faculty and reflected in the MUSC College of Nursing.

Scholarship: Scholarship is the discovery, translation, application, integration, and transmission of knowledge which contributes to the development of evidence-based nursing.

Life-Long Learning: Learning is a continuous, life-long process of involving, instructing, motivating, and changing students, faculty, staff, patients, and the community for the betterment of health and well-being.

Diversity: Diversity is the recognition and inclusion of human variation in the education and care of individuals, families, communities, and nations. It is shaped by the historical forces of race, ethnicity, socioeconomic status, gender, language, religion, sexual orientation, abilities, ages, and geographical regions.

Service: Service is a commitment to participate in organizational activities and processes that benefit the college, university, institutions, communities, and the profession. Service is viewed as essential to developing, maintaining, and sustaining the structure and relationships that are critical to the profession.

Caring: Caring is central to the health and healing processes, and is intrinsic in the therapeutic nature of person-centered care. Caring is predicated upon mutual respect, and it engenders trust in implementing the role of the nurse in all of the settings and relationships in which nurses contribute to society.

Creativity: Creativity requires an innovative and futuristic perspective, an openness to change, and continuous personal development in order to respond to the dynamic and fluid nature of current health care and educational environments.

Empowerment: Empowerment emerges as individuals develop the knowledge, attitudes, skills, and other resources they need to determine their own learning and health care needs and to assume a primary role in their learning and health care activities, building upon their individual capacities and experiences.

Collaboration: Collaboration involves **effective teamwork and** relationships based on trust, respect, shared resources, a commitment to joint goals, and mutual satisfaction, in which nurses work with and learn from individuals, communities, and colleagues across professions.

Advocacy: Advocacy includes actions for health policies, programs, and practices to secure the highest level of care, education, and research necessary for societal health and well-being.

Equity: Equity is the state, action, and principle of treating all persons in a just and unbiased manner. It includes attention to the social determinants of health, and a nursing commitment to fairness and action to secure the full participation of patients, families and communities in their health care. Nurses strive for equity in health service access, content, and quality of care to end discrimination and disparities in health outcomes.

Integrity: Integrity refers to the quality of being honest and ethical and having the moral strength to do the right thing. The nurse incorporates this value in every aspect of one's personal and professional life, and in the care of one's patients.

Leadership: Professional leadership is active participation and progressive responsibility in organizational activities related to nursing, health care, or education.

Philosophy

The College of Nursing, one of six colleges of the Medical University of South Carolina, is responsible for the education, research, and practice of nurses in an interprofessional health sciences environment. The philosophy of the College of Nursing embodies the concepts of nursing, health, person, and environment, as well as nursing education, nursing research, and nursing practice. The faculty believes that the discipline of nursing is both an art and a science.

Nursing, interpersonal and caring in nature, encompasses the promotion of health, the prevention of disease and injury, and the diagnosis and treatment of human responses to actual or potential health problems. The domain of nursing is based on the synthesis of biological, behavioral, social, and nursing sciences, with the focus on populations across the life span to maximize their potential for optimal health. As a practice discipline, nursing permits its members to enter and improve the lives of individuals, families, and communities for purposes of healing, learning, and adaptation. Nursing practice is dynamic because it grows continually through interpersonal connections with research, education, and advocacy. Operating within professional value systems and ethical frameworks, nurses work independently and collaboratively in teams with other health care providers. They assume accountability and responsibility for the delivery of evidence-based, cost effective nursing care. Nurses incorporate the concept of diversity in practice and in relations with the communities they serve and their fellow workers. Nurses realize human differences require continual investigation, learning, critical self-reflection, and change for people to achieve full access, inclusion, and participation in human relations, education, and health care.

Health is a dynamic state of being in which a person's biologic, developmental, and behavioral characteristics are maximized. Each human being possesses strengths and limitations resulting from the interaction of environmental and genetic factors, which determine the person's biological and behavioral integrity. Health promotion is the science of helping people change their lifestyle within their sociocultural contexts and environmental conditions to move toward a state of optimal health. Health promotion is an interpersonal process and an intrapersonal product. As an interpersonal process, health promotion motivates persons and communities through the provision of education to adopt positive attitudes and behaviors that will assist persons in attaining their optimal health. As an intrapersonal product, health promotion assists persons and communities to incorporate attitudes and behaviors that maintain wellness within the cultural frameworks in which they make decisions. Persons are holistic, social, and culturally diverse beings with integrated body, mind, and spirit, existing within the context of families, groups, and communities. Each person is unique, has dignity and self-worth, has the potential for change, and has the right to self-determination. A person has an inherent capacity to grow and develop throughout the life cycle. As unique individuals with different capacities and vulnerabilities, each person has the potential to affect their human responses and health outcomes. A person has the right to access, fair representation, equity, respect, and participation in health services. Environments have an impact on the health, availability of services, and quality of care of individuals, families, groups, and communities. Environments include the natural, institutional, man-made, and physical arrangements in which a being operates. Each person and community exists within an ecological balance that influences human well-being, while at the same time human decision-making affects the health of environmental systems. Nursing interventions are directed toward creating, modifying, and enhancing environments to promote optimal health.

Learning is an active, life-long process of acquiring and integrating new information and insights that build upon previous knowledge. The faculty facilitates learning environments in which students assimilate and apply scientific and humanistic knowledge and experience, and develop self-awareness, self-direction, creativity, and critical thinking. Students are accountable and assume responsibility for their own learning by engaging in ongoing independent, self-directed learning. The faculty is responsible for providing a respectful environment conducive to learning and to serve as role models of professional nursing practice. The faculty believes that collaboration with other health care professionals, consumers, and communities is essential to teaching, learning and providing health care in a changing society.

Research, a systematic process of creating, evaluating, disseminating, translating, and utilizing knowledge, is critical to the development of nursing as a scientific discipline, and includes clinical research, epidemiology, public health, social science, health systems and outcomes research, and nursing education research. Nursing research focuses on “the understanding and easement of the symptoms of acute and chronic illness; prevention or delayed onset of disease or disability, or slowing the progression thereof; finding effective approaches to achieve and sustain optimal health; and, improvement of clinical settings in which care is provided (NINR, 2003).”

Nursing practice involves the care of patients, families and communities. Additionally, it is the clinical laboratory for student education, faculty enrichment, and clinical research. Nursing practice occurs within multiple settings in health care institutions and the community. It encompasses the care of individuals, families, groups, and communities across the lifespan. Nursing promotes wellness, prevents illness, restores health, and facilitates adaptive coping. Professional nurses provide services independently and in teams with other health care providers and consumers of health care. Academic faculty practice fosters improvement in information management, synthesis and application of knowledge, evidence-based outcomes and changes in nursing and health care policy.

COLLEGE ACCREDITATION

The College of Nursing Undergraduate and Graduate Programs are accredited by the Commission on Collegiate Nursing Education from April, 2005 to April, 2010. The Commission on Collegiate Nursing Education is a resource for information regarding the Nursing program. Information may be obtained by writing or telephoning them directly at:

Commission on Collegiate Nursing Education
Suite 530
Washington DC, 20036-1120
Telephone: (202) 887-6791 FAX: (202) 887-8476
Internet: <http://www.aacn.nche.edu/CCNE/reports/accprog.asp>

The Undergraduate Program is fully approved by the South Carolina Department of Labor, Licensing and Regulation, Board of Nursing, Synergy Business Park, Kingstree Building, 110 Centerview Drive, Suite 202, Columbia, SC 29210. The mailing address is P.O. Box 12367, Columbia, SC 29211-2367. You may contact them by telephone at (803) 896-4550, by FAX at (803) 896-4525, or by email at <http://www.llr.state.sc.us/POL/Nursing/>

The Department of Continuing Education is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation, 600 Maryland Avenue, SW, Suite 100 West, Washington, DC 20024-2571. You may contact them by telephone at (800) 274-4ANA or by email at <http://www.ana.org>.

The Adult Nurse Practitioner, Family Nurse Practitioner, Gerontological Nurse Practitioner, and Psychiatric Mental Health Nurse Practitioner Tracks are approved by the American Nurses Credentialing Center (ANCC). You may contact them at www.nursingworld.org or by calling 1-800-284-2378.

The Neonatal Nurse Practitioner Program meets the "Essentials of Masters Education for Advanced Practice Nurses" by AACN and the "Education Standards for Neonatal Nurse Practitioner Programs" set by NANN. Accreditation by CCNNE meets approval by the National Corporation for Obstetrics, Gynecological, and Neonatal Nursing Specialties (NCC). You may contact them at www.nccnet.org or by calling 1-800-367-5613.

The Nurse Administration Track is approved by the American Nurses Credentialing Center (ANCC). For specific information you may contact them at www.nursingworld.org or by calling 1-800-284-2378.

The Graduate Program Nurse Midwifery Track meets the "Essentials of Masters Education for Advanced Practice Nurses" and is accredited by the American College of Nurse Midwives Division of Accreditation, 8403 Colesville Road, Suite 1550, Silver Spring, MD, 20910-6374.

The Pediatric Nurse Practitioner track of the masters program is fully approved by the National Certification Board of Pediatric Nurse Practitioners and Nurses, 800 South Frederick Avenue, Suite 104, Gaithersburg, MD 20877-4150. You may contact them by telephone at (888) 641-2767, by FAX at (301) 330-1504, or by email at <http://www.pncb.org/ptistore/control/index>

The University Honor Code

The development of a student into a professional must include the display of high moral character expected of this status. In governing their actions, students must look to their own judgment. Individuals of professionally acceptable moral character are those who have established high ethical standards for themselves and who consistently abide by them. When entering the Medical University of South Carolina (MUSC), students become part of a much larger professional community, extending far beyond the boundaries of this campus. It is a community whose foundation is healing but whose bricks and mortar are compassion, honesty, trust, and integrity. Even though sources of ethical principles may differ, students must aspire to reach certain standards of behavior.

The foundation of the Honor Code depends entirely upon the willingness of every individual to live up to the standards set by the student body, the individual colleges, MUSC, and each of the professions the students are entering. Acceptance of the Honor Code bestows upon students the responsibility to respect and protect the integrity of MUSC and also assures that the integrity of students is unquestioned and accepted by all in the academic, clinical, and research communities. The Honor Code presumes the absolute honesty of each individual and as a result, students live with the freedom of knowing that: 1) their integrity, intentions, work, and word are unquestioned; 2) their personal property and academic work is respected and free from theft; and 3) classroom, clinical, and research environments for learning and evaluation are honorable. Trust in these beliefs is established, maintained, and protected by students rather than by faculty. The honor councils subscribe to the following infractions to attempt to adjudicate cases fairly for the accused, MUSC, and all others concerned.

Violations of the Honor Code include, but are not limited to, the following acts that violate academic integrity:

1. **Lying:** Lying is the statement of an untruth with the intent to mislead fellow students, faculty, patients, hospital staff, or administrative officials. Lying includes "lies of omission" or failure to divulge voluntarily the whole and complete truth. Fabrication or falsification of information (verbal or written) in any academic or clinical exercise is in violation of the Honor Code. Lying also includes any false testimony presented during Preliminary or Formal Hearings.
2. **Cheating:** All tests, quizzes, written work, laboratory work, research, and examinations at the Medical University of South Carolina are conducted under the Honor Code. Cheating is defined as using or attempting to use unauthorized assistance, devices, material, or study aids in or prior to examinations or any other academic work; or attempting to prevent others from using authorized assistance, material or study aids.

- a. Plagiarism: using the ideas, information, work, or writings of another person and accepting credit for the work as one's own without proper acknowledgment on any paper, test, essay, lab work, research, or similar course activity.
 - b. Altering records: misrepresenting or tampering with transcripts, academic records, research data, or computer programs; obtaining or using another's ID code, social security number, or electronic password.
 - c. Knowingly using, buying, selling, transporting, or soliciting, any part of the contents of an examination or other assignment not authorized for release, including the use of previously administered exams without the permission of the instructor.
3. **Stealing:** Possession of MUSC property or another individual's private property without permission or knowledge.
4. **Any of the following also constitute a violation of the Honor Code, but this list should not be interpreted as all-inclusive.**
- a. Facilitating academic dishonesty: colluding with another in the violation of any provision of this code.
 - b. Breach of appropriate standards of behavior in the presence of patients.
 - c. Breach of confidentiality with respect to information about patients.
 - d. The use of pressure, threat, abuse, bribery, or other practices that result in harassment.
 - e. The failure to report any violation of this Honor Code or the withholding of evidence pertinent to any case under investigation.
5. **Unauthorized entry or presence** in any office, laboratory, clinic, or other location is a violation of the Honor Code. Likewise, the abuse or destruction of any instruments, equipment, supplies, property, or books constitutes an offense of the Honor Code.

COLLEGE OF NURSING CLINICAL POLICIES

Clinical Course Policies

Attendance

1. **Attendance at 100% of clinical experiences is expected of every student.** Exceptions, if made, will be made at the discretion of the clinical instructor/preceptor and the faculty course coordinator.
2. Punctual attendance is required at all clinical sessions.
3. If the student is going to be late to the clinical area, the student is expected to call the clinical site as soon as possible.
4. When the student cannot attend the clinical session, the student must:
 - a. Call the assigned unit one hour prior to the start of the clinical session; and
 - b. Call the assigned clinical instructor/preceptor and faculty member, either before or during the clinical session.
5. **Failure to adhere to these attendance policies will result in an “Unsatisfactory” evaluation for the day and could be grounds for failing the course.**
6. Students should not bring a large number of personal items to the clinical settings.
7. ***Participation Policy:***
A student who does not participate in a class for three consecutive weeks will be automatically dropped from the course. A definition of class participation will be provided in every course syllabus.

Clinical Preparation

1. Students are expected to come prepared for clinical.
2. **If a student is unprepared for the clinical day, he/she can be sent home, which will result in an unsatisfactory evaluation for the day and could be grounds for failing the course.**

Evaluation Criteria

1. The student must have a satisfactory performance in each clinical behavior by the last clinical day or the student will fail the course.
2. If the student's performance is unsatisfactory on any given clinical day, the clinical instructor/preceptor will initiate an informal conference with the student.
3. Should the student's performance continue to be unsatisfactory on a subsequent clinical day, the clinical instructor/preceptor will formulate a written plan explaining to the student deficient areas and behaviors necessary to correct these deficient areas. The faculty course coordinator of the course will be a participant in this conference and a copy of the written plan will be placed in the student's record.

4. If the conditions of the written plan are not met by the student by the last clinical day, the student's clinical performance will be unsatisfactory and the student will receive a failing grade.
5. **When a student's clinical performance in a clinical nursing course indicates an inability to perform at a safe and/or professional level of practice, the clinical instructor/preceptor, in consultation with the faculty course coordinator, may assign a course grade of "0" regardless of the point in time such a decision is made. In such case, the student will be ineligible to continue in the course.**

Dress Code

Professional Dress Code for Undergraduate Students

In recognition of the educational and professional environment of the Medical University of South Carolina (MUSC), all individuals associated with this institution are expected to maintain a neat and clean appearance at all times. All students enrolled in the College of Nursing must project the professional image of nursing when engaged in learning experiences.

Specific guidelines follow:

1. **Uniform:** When involved in nursing practice in hospital settings, students must wear a white uniform. All uniforms should be neat, clean, without wrinkles and properly fitting with appropriate undergarments. During specific clinical rotations, the student may be allowed to modify their uniform (khaki pants with navy blue polo or a long or short sleeved white tee shirt under the standard top for warmth). The student is to remove any outerwear i.e., fleece or jersey knit jackets prior to initiating care. The lab coat may be worn in clinical for added warmth.
2. **Shoes:** While wearing the uniform, shoes should be white and clean. Non-canvas footwear with an enclosed toe and heel are required. The shoes can be any style of white professional or all-white athletic shoes worn exclusively in the clinical setting. In other settings, (psych, community health, day care), appropriate attire will be designated by Course Faculty in accordance with agency policies.
3. **Lab Jacket/Lab Coat:** A lab jacket with the MUSC College of Nursing over the breast pocket is worn in designated settings (preplanning activities and the health assessment/skills lab). Undergraduate students are required to own a white long sleeve lab jacket (hip length) with tailored hemline. Graduate students are required to own a white, long sleeve lab coat (knee length).
4. **In designated settings,** students may be required to change to scrubs and/or gown. In this event, the undergraduate uniform should be worn to and from the clinical setting (professional clothes and lab jacket are not permitted). When the graduate student is in the clinical area for direct patient contact or other clinical or administrative learning experiences, they must be dressed appropriately for their professional role and the specific clinical site. In general professional clothes and a lab coat are

appropriate dress for the professional image. In some cases, graduate students may need to follow dress codes that are appropriate and designated for specific sites. During class lecture, preplanning activities and specified clinical and administrative experiences, professional street clothes must be worn. Clothing must be neat, clean, in good repair, appropriate length skirts (knee) or denim (for class) trousers, professional shoes and collared shirts for men. Jeans are not acceptable.

5. **Unacceptable** attire is interpreted by patients/families as unprofessional and inappropriate: open heeled clogs, heels higher than 2½ inches, foot thongs, shorts, mini-skirts, visible cleavage, frayed or camouflaged clothing, hats, caps or other head wear (unless for medical/religious reasons) sunglasses, fish net stockings, see-through clothing, crop tops and other bare midriff tops that expose chest, back or midsection are not allowed.
6. **No chewing gum or tobacco:** Neither of these products are allowed during clinical experiences, pre-planning, or specified clinical and administrative experiences. Smoke odors embedded in clothing are as offensive as smoking.
7. **Tattoo:** A tattoo must be covered during a clinical experience. The Course Coordinator must be consulted by the student if the uniform, opaque hosiery or other cover up is unable to provide adequate coverage.
8. **Hair:** Hair must be short or pinned up off the shoulders. It is to be neat, clean and maintained so as not to contaminate the patient or the caregiver. Extreme hair colors, hairstyles and hair ornaments should not be worn in a professional health care setting. Beards and mustaches must be well groomed and kept clean.
9. **Nails:** Nails must be kept short enough so as not to injure the patient. Clear or light colored nail polish may be worn, as long as it is neat and without designs. As there are institutions that do not allow nail polish, the clinical faculty will advise students of the specific agency policy. Artificial nails harbor yeast and bacteria and are, therefore, not allowed.
10. **Jewelry:** Jewelry must be conservative and kept to a minimum. Visible pierced body jewelry is limited to one stud style earring (less than ½ inch) in each ear lobe. Visible body piercing including tongue stud/ring, clear nasal stud or brow jewelry is to be removed prior to patient care and not worn while in uniform. It is not acceptable to cover these areas with flesh covered materials. A single short necklace and wristwatch may be worn, bracelets are not allowed. An official South Carolina Student Nurse's Association, Sigma Theta Tau or original nursing school pin may be worn.
11. **Fragrance:** Non-scented make up and hair products may be worn. No perfumes or colognes are permitted. Lotions and deodorants must be limited to those bearing a light scent.

Identification:

The following identification must be worn in every clinical setting

a) A **name pin** (black lettering on white background) as follows:

BSN Students: Student's Name
MUSC-College of Nursing
BSN Student

b) **MUSC Student ID Badge.**

c) An **Institutional ID Badge** in any health care agency which requires one and provides it.

Failure to comply with the CON dress code will result in potential dismissal from the class lecture, preplanning activities, and any specified clinical and/or administrative experience. The student will receive an unsatisfactory for the clinical day for failure to comply to the dress code. If there is repeated classroom or clinical violations, the student will receive an Academic Warning for unprofessional behaviors. Ultimately, student will fail the clinical portion of the course.

Preceptor Guidelines

Benefits of being a MUSC Clinical Preceptor

1. Eligibility for a modified clinical faculty appointment.
2. Eligibility for the Med-Mentor program (see next section).
3. Networked into a CON website with clinical instructor/preceptor communication and updates.
4. Recognition by the College of Nursing with a pin or plaque.
5. You may be eligible to use preceptor efforts toward the requirements of ANCC and other accrediting bodies for the accrual of continuing education credit.

MedMentor Program

For Clinical Faculty, Preceptors, and Facilitators who work with MUSC students: The Med-Mentor Faculty Liaison provides informational services, direction, and guidance related to Library and Informatics resources available to MUSC clinical faculty, preceptors, and facilitators involved in community-based educational programs. Clinical faculty and health professionals throughout the state who participate in the teaching programs of MUSC, whether or not they are employed by MUSC, are eligible for benefits including Library privileges, an MUSC Network Account, and access to electronic resources. As a direct line of contact for educational or technical support, available via phone or email, the Liaison will foster a sense of unity between the geographically distant professional and the University environment.

Please contact Joshua Ivey at 843.792.2371 or 5534 or iveyjc@musc.edu for more information.

Becoming a Modified Faculty Member

A modified clinical faculty appointment is available for paid and non-paid clinical faculty and preceptors who have demonstrated a substantial contribution to the College in teaching or precepting for at least one year. The process for application is the following:

1. The course or track coordinator approaches a preceptor about a potential modified clinical faculty appointment.
2. The course or track coordinator submits a letter of support for the appointment to the Dean of the College of Nursing.
3. Preceptor submits a letter, current CV, and an abbreviated CV (attached 1 page form) to the Dean of the College of Nursing requesting an appointment and indicating his/her contribution to the College of Nursing.
4. Preceptor requests original transcripts to be sent to the Dean of the College of Nursing and provides a copy of his/her nursing license to the Dean's office.
5. Dean of the College of Nursing submits materials to the Provost for approval.
6. Status as a modified clinical faculty will be evaluated on a yearly basis. Active preceptors in good standing will be maintained in the appointment.

Medical University of South Carolina

College of Nursing

Preceptor and Student Responsibilities

Preceptor Responsibilities

1. Provide scheduled clinical hours for the duration of the clinical experience. Orient the student to the clinical site and agency policies. Facilitate an informal, collaborative and mutually respectful environment in which to learn. Be an expert role model.
2. Offer multiple methods for communication with students and course faculty, including email, telephone, fax, or written messages.
3. Respond to communication with the student and the faculty course coordinator in a timely manner.
4. Understand the objectives of the course, and the clinical experiences, and type of learning opportunities that will enhance the learning of the student. Direct the student to resources and evidence based readings.
5. Guide student learning through selection of increasing complex duties in order to meet clinical objectives.
6. Know the expected learning outcomes for the student.
7. Promptly communicate issues of concern (student behavior, clinical skills, and/or student progression) regarding the student to the faculty course coordinator.
8. Provide daily feedback to improve the student's assessment and management skills. Provide valuable and evidenced based learning experiences with appropriate client populations. Encourage participation in interdisciplinary team meetings.
9. Provide track specific written evaluations of the student's academic progress and completion of requirements to the student and the faculty course coordinator.
10. Assume responsibility for providing a substitute preceptor in the event of an absence.

Student Responsibilities

1. Know the course objectives and course requirements for completion.
Develop personal learning objectives
Integrate personal learning objectives with course objectives.
2. Complete clinical preplanning and clinical requirements.
Arrange an agreeable clinical schedule with the preceptor.
3. Attend all scheduled clinical, on time and fully prepared
Notify preceptor of illness/absence and arrange to make up missed clinical time
4. Uphold the expected standards of professional behavior as listed in the Student Handbook at all times.
Observe policies of the agency.

5. Communicate regularly with the clinical instructor/preceptor and faculty course coordinator, updating both on relevant information that influences one's educational progress.
6. Provide clinical instructor/preceptor and clinical site evaluations.
7. Indicate own learning need to preceptor.
Complete required clinical documentation.

Preceptor Teaching Tips

1. **Avoid using the same teaching-learning approach for everyone.**
Students learn in many ways. Some are visual, oral or written learners, some concrete and some abstract, and others are multidimensional. Recognize that your style of learning may be very different from the student's.
2. **Spend some time to know your student.**
Find out your student's talents, prior experiences, and learning needs. This information helps you know how to best guide the student. Knowing the student's current knowledge base and readiness to learn helps both of you know how much work you have ahead of you. This is essential to help the student see the gap between where they are and where they need to be.
3. **Create a positive and safe learning environment**
Students are more likely to take risks when the teacher creates a safe environment. Admitting what one doesn't know or making a wrong decision is an uncomfortable feeling for anyone. Allow students the opportunity to learn from their mistakes. Establish mutual trust, respect, and support.
4. **Give frequent feedback along the way, not just at the end.**
Students need to have information about their behavior and performance as they are learning. Focus on the performance, not the person. Involve the learner in the self evaluation process.
5. **Share your passion for nursing and health care.**
If the teacher has passion for the art and science of nursing and/or health care, the student is likely to catch it. You are teaching by example all of the time. Students learn as much from observing your behavior and communication of caring as they do from listening.
6. **Repeat the important points.**
Give the most important points more than once and in various ways. The first time something is stated it is heard and will be recognized, but it takes repetition and application to be learned. Repeat the important points!
7. **Ask questions.**
Learning requires exploring the unknown and considering ideas from a different perspective. The preceptor guides the student to seek a deeper understanding. For example, "how does that work?" "What would have happened if we had done exactly opposite of what you suggested?" You are teaching how to think.

Ask questions that encourage students to demonstrate the thinking process that led to the right answer.

- 8. Talk out loud about your decision making process.**
Share your thought process that led to making decisions. Problem solving skills can be learned. Point out the factors in the clinical situation that guided your thinking.
- 9. You don't have to be perfect.**
Acknowledging that you don't know something shows you are still learning. The student expects you to know the answers to most questions, but does not expect you to be perfect.
- 10. Sometimes "less is more".**
Making one or two teaching points in a case may be better than trying to have the learner focus in on all possible learning points.
- 11. Break larger tasks into step by step skills.**
Give feedback on the performance of each step of the process. Give rationale during demonstration. Allow active practice and repetition.
- 12. Be punctual, present, presentable, professional and personable, NOT perfect.**

REFERENCES:

Myrick, F. and Yonge, O. (2002). Preceptor questioning and student critical thinking. *Journal of Professional Nursing*, 18 (3), 176-181.

Teaching Tips Index:

<http://www.honolulu.hawaii.edu/intranet/committees/FACDEVCON/guidebk/teachtip/teachtip.htm>