

**University of Colorado College of Nursing
Graduate Clinical Placement Office
Adult Gerontology Clinical Nurse Specialist**

Assistant Dean: **Rosario Medina** rosario.medina@ucdenver.edu
Specialty Director: **Mary Beth Makic** marybeth.makic@ucdenver.edu
Clinical Placement Manager: **Kathy Foss** katherine.foss@ucdenver.edu
Graduate Clinical Placement Specialist: **Deana Alfonso** deana.alfonso@ucdenver.edu

Thank you for volunteering your time as a preceptor in the in the **University of Colorado College of Nursing**. Your direction and leadership is an integral part of our student's training and development into a leader in the nursing field. We appreciate your participation and welcome you into our University of Colorado College of Nursing community.

The success of clinical training of students depends on maintaining good communication among the student, the program, the preceptors, and the clinical faculty. The program strives to maintain open faculty–colleague relationships with its preceptors and believes that, should problems arise during a rotation, by notifying appropriate program personnel early, problems can be solved without unduly burdening the preceptor. In addition, open communication and early problem solving may help to avoid a diminution in the educational experience.

InPlace is the electronic system for the University of Colorado College of Nursing students to record clinical encounters. Student will be tracking clinical encounters utilizing an approved Excel program and InPlace.

- Students will be logging information into to describe clinical experiences as they relate to the CNS clinical competencies including direct care, consultation and collaboration, system leadership, coaching (education), and research/evidence-based practice.
- The data obtained is in compliance with HIPAA and no patient-specific identifying information will be entered.
- This data is used to provide documentation of adherence with our accreditation standards as well as provide a synopsis of what was experienced during the clinical rotation.

Prior to start of clinical rotations, the student will provide you with clinical objectives. You are asked to review the objectives with the student and make changes as needed to provide the best clinical experience. You will be asked to provide feedback on the student's developmental progress and attendance. Upon the completion of your rotation, you will be sent a student evaluation. . Please complete the evaluation at your earliest convenience. The preceptor's evaluation of the student is tremendously important. On required rotations (i.e., core rotations required by the institution for all students prior to graduation), a passing evaluation from the preceptor is mandatory. If deemed "not passing," the student may be requested to repeat the rotation or undergo procedures specified by the program. ***The program faculty ultimately makes the final grade for a clinical rotation and the decision to pass or fail a student.*** The program will designate how often evaluations need to be completed. Please contact the clinical faculty for specific evaluation forms and policies, in accordance with the student handbook.



Professional Role	Course Description	Student Competencies
NURS 5901 Novice	A clinical course that focuses on beginning-level competencies in the novice Advanced Practice role in a selected population	<ol style="list-style-type: none"> 1. Heavy reliance on preceptor; needs explicit, clear instructions 2. Decision-making is slow, rigid, and halted, governed by rules 3. By end of semester, should demonstrate foundational clinical and evidence based skills.
NURS 5902 Advanced Beginner	A clinical course that allows students to refine competencies as an advanced-beginner Clinical Nurse Specialists (CNS) in a selected population;	<ol style="list-style-type: none"> 1. Increased emphasis on communication, assessment, differential diagnosis, and therapeutic plan development. 2. Decreased reliance on preceptor; performance becomes marginally acceptable. 3. May feel overwhelmed and frustrated, attention global. 4. By end of semester, demonstrates growth in palliative care.
NURS5903 Competent	A clinical course that allows students to practice and refine higher-level competencies in the competent Advanced Practice role of the Clinical Nurse Specialist	<ol style="list-style-type: none"> 1. Increasing abilities in the development of nursing leadership and clinical practice guidelines. 2. Less reliance on preceptor; accepts more individual accountability but may lack self-confidence. 3. May have issues with time utilization. 4. By end of semester, is able to demonstrate role of CNS in a leadership role.
NURS5904 Proficient	A clinical course that allows students to demonstrate competence in the Advanced Practice role of the Clinical Nurse Specialist	<ol style="list-style-type: none"> 1. Recognition of critical aspects of a situation, patterning care, easier decision-making, views from holistic perspective. 2. Preceptor oversight primarily for validation of competency and ensuring patient safety. 3. Able to effectively communicate need for evidence based care and identify areas of improvement in a clinical environment 4. By end of semester, is able to demonstrate role of CNS throughout the 5 clinical roles

Faculty and School Responsibilities	Student Responsibilities	Preceptor Responsibilities
<p>Negotiates clinical affiliation agreements with the clinical agency</p> <p>Validates completion of student health requirement, liability insurance, licensure, and CPR certification</p> <p>Clarifies expectations of the preceptor</p> <p>Is available to preceptor for questions, problems, and concerns that may come up during the clinical experience</p> <p>Provides feedback to both the students and the preceptor</p> <p>Organizes computer training and agency paperwork as necessary</p>	<p>Develops individual learning objectives for the clinical experience</p> <p>Completes all clinical and course assignments</p> <p>Meets with the preceptor prior to clinical experience to discuss details and logistics of the clinical experience</p> <p>Is prepared and punctual in the clinical area on scheduled days and times</p> <p>Schedules any make-up time at the convenience of the preceptor after notifying faculty and preceptor of schedule changes</p> <p>Participates in ongoing evaluations of self, preceptor, and faculty</p> <p>Maintains client confidentiality</p> <p>Maintains liability insurance, RN licensure, CPR certification, and completes all health requirements</p>	<p>As applicable, maintains certification as advanced practice nurse or physician's assistant</p> <p>Negotiates dates and times for student clinical experience and is present or arranges for a qualified substitute</p> <p>Reviews objectives for clinical experience and determines feasibility of meeting them</p> <p>Assists students in meeting and modifying clinical-learning objectives of the clinical experience</p> <p>Serves as a host, sponsor, teacher, and role model for student at clinical site</p> <p>Orients student to clinical agency</p> <p>Selects, with student, clinical experiences appropriate to objectives</p> <p>Intervenes where appropriate to manage situations beyond the student's ability</p> <p>Evaluates student's care while providing immediate feedback and co-signing all charts</p> <p>Contacts faculty if there are problems with student</p> <p>Evaluates the student verbally and in writing</p> <p>Meets with student and faculty members prior to the clinical experience</p>

The **UCD CON Graduate Program Learning Outcomes** are based on the American Association of Colleges of Nursing (AACN) essentials (2011) and the National Association of Clinical Nurse Specialists (NACNS) Adult-Gerontology Clinical Nurse Specialist Competencies (2010). The AACN Essentials delineate the knowledge and skills that all nurses prepared in master's nursing programs acquire. These Essentials guide the preparation of graduates for diverse areas of practice in any healthcare setting.

Essential I: Background for Practice from Sciences and Humanities

Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.

Essential II: Organizational and Systems Leadership

Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision-making, effective working relationships, and a systems-perspective.

Essential III: Quality Improvement and Safety

Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within ***an organization.***

Essential IV: Translating and Integrating Scholarship into Practice

Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.

Essential V: Informatics and Healthcare Technologies

Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.

Essential VI: Health Policy and Advocacy

Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.

Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes

Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.

Essential VIII: Clinical Prevention and Population Health for Improving Health

Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and ***evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations.***

Essential IX: Master's-Level Nursing Practice

Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.

Clinical Nurse Specialist Competencies

<http://www.aacn.nche.edu/geriatric-nursing/adultgeroCNScomp.pdf>

The Patient population for the Adult-Gerontology CNS includes young adults including late adolescents and emancipated minors, adults, and older adults including the young-old, frail and old-old adults in all contexts of care.

1. **Direct Care:** Direct interaction with patients, families and groups of patients to promote health or well-being and improve quality of life. Characterized by a holistic perspective in the advanced nursing management of health, illness, and disease states.
2. **Consultation:** Patient, staff, or system-focused interaction between professionals in which the consultant is recognized as having specialized expertise and assists the consultee with problem solving.
3. **Systems Leadership:** The ability to manage change and empower others to influence clinical practice and political processes both within and across systems
4. **Collaborative Practice:** Working jointly with others to optimize clinical outcomes.
5. **Coaching:** Skillful guidance and teaching to advance the care of patients, families, groups of patients, and the professional of nursing.
6. **Research (Evidence-Based Practice):** The work of thorough and systematic inquiry. Includes the search for interpretation and use of evidence in clinical practice and quality improvement as well as active participation in the conduct of research as it relates to the adult/older adult population.
7. **Ethical Decision-Making Agency and Advocacy:** Identifying, articulating, and taking action on ethical concerns at the patient, family, health care provider, system, community, and public policy levels.