



**University of Colorado College of Nursing
Graduate Clinical Placement Office
Psychiatric Mental Health Nurse Practitioner (PMHNP)**

QUICK START

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Thank you for volunteering your time as a preceptor 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.

PMHNP students complete 14 credits of clinical experience which equals 630 contact hours. 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.

Student level:

Students have 4 semesters in clinical rotations in which they will continually be advancing their skill set. Students come into the program with varying experience, some with years of mental health experience as Registered Nurses others with more limited exposure. Students in beginning rotations will focus on initial psychiatric evaluations, therapeutic communication and applying DSM diagnostic principles. In subsequent levels, students will continue to work on more advanced skills in medication management, risk assessments and complex case management. Students will concurrently be taking didactic coursework on psychiatric mental health. These courses include:

- Psychotherapy, Behavior Change and Health Promotion Disease Prevention
- Integrated Behavioral Health Care
- Advanced Assessment, Neurobiology and Psychopharmacology
- Diagnosis and Management of the Adult- complex care
- Diagnosis and Management of the Child, Adolescent and Geriatric populations- complex care.

Best types of rotations for students:

For the best clinical rotations, students have the opportunity to initially shadow preceptors to become comfortable with the environment in the first 1-2 weeks and then ideally can develop more independence. For example, students can lead patient interactions/interviews with the preceptor either present and observing or not present but available for consultation. We would like our students to have the opportunity to develop clinical decision-making. The more independence the better, though, collaboration and supervision is necessary.

Documentation:

Students additionally are working on skills related to documentation and can be expected to help with clinical notes- both initial evaluations and follow-up notes. Students cannot bill for any services.



Preceptors:

Students may be precepted by any providers with an active behavioral health license (PsyD, PhD, LCSW), but primary hours must be with a Psychiatric Nurse Practitioner or Psychiatrist. If opportunities arise for students to observe or participate in groups or therapy, we highly encourage this.

Rotation time frames/hours:

All students are completing approximately 90-270 clinical hours per semester. This can be scheduled between the student and preceptor. Students are expected to be flexible and work with preceptor schedules.

Requirements of Preceptors and Students:

- At the start of a rotation, students are required to discuss with preceptors the goals for the rotation and competencies they will be working towards.
- Preceptors are asked to complete an evaluation related to these competencies at the end of the clinical rotation. Students will provide the paperwork for this *at the beginning* of the semester
- UC Denver faculty will also be in contact with preceptors to provide support and consultation regarding students and will perform 1-2 site visit per rotation to observe the student interacting with patients. This can be done in person or via the College of Nursing's telehealth technology with both organization and patient consent.
- Students will log hours with their preceptor through InPlace, a system for managing clinical hours for students. See below for details.
- Students will request that preceptor sign the "Hours Verification Form" at the end of the rotation that confirms they have completed the required number of hours.
- A current CV is requested from all preceptors for our records.
- The program faculty ultimately makes the final grade for a clinical rotation and the decision to pass or fail a student.
- Students are required to adhere to professional behavior as per the CU Denver student handbook and the expectations of your organization.

Graduate Placement Office:

The Graduate Placement Office, headed by Allison Boyrer, provides documentation of student compliance with immunizations CPR, etc., to the precepting organization prior to the start of the rotation. Similarly, they can help facilitate any paperwork, HR needs or electronic record access that your facility may require of students.

Perks of being a Preceptor:

As preceptors, access to the UC Denver Health and Sciences Library is granted and a certificate of hours precepting is provided at the end of the rotation by our Graduate Placement Office. For Nurse Practitioner preceptors, these hours can be used as ANCC requirements towards recertification. Hopefully, you are training future colleagues for your organization!

InPlace:

InPlace is the electronic system for the University of Colorado College of Nursing students to record clinical encounters.

- Students will be logging information into InPlace regarding patient demographics, chief complaints, CPT and ICD-9 codes, procedures, etc.
- The data obtained is in compliance with HIPPA and no patient-specific identifying information will be entered. InPlace adheres to all HIPPA regulations.
- 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.
- InPlace is an interactive program that also allows you, as a preceptor, to become a more integral and involved part of the NP program.

Course Level	Course Description	Formative Skills per Student Level
NURS 6755- Level I Novice	A clinical course that focuses on beginning-level competencies in the novice Advanced Practice role in a selected population. Students will concurrently be taking Advanced Assessment, Neurobiology and Psychopharmacology coursework.	<ol style="list-style-type: none"> 1. Patient interviews, history-taking, physical examination and written communication. 2. Heavy reliance on preceptor; needs explicit, clear instructions 3. Decision-making is slow, rigid, and halted, governed by rules 4. By end of semester, should demonstrate foundational clinical skills.
NURS 6756- Level II Advanced Beginner	A clinical course that allows students to refine competencies as an advanced-beginner Advanced Practitioner (NP) in a selected population. Students will concurrently be taking course work in advanced diagnosis and management for adult populations	<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 toward assuming role of NP.
NURS 6757- Level III Competent	A clinical course that allows students to practice and refine higher-level competencies in the competent Advanced Practice role for a select population. Students will be concurrently taking coursework on child, adolescent and geriatric mental health	<ol style="list-style-type: none"> 1. Increasing abilities in the presentation of clinical findings, differential diagnosis, and therapeutic plan to the preceptor. 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 NP in advanced-clinical skills.
NURS 6758- Level IV Proficient	A clinical course that allows students to refine higher-level competencies in a more-autonomous, proficient Advanced Practice role.	<ol style="list-style-type: none"> 1. Recognition of critical aspects of a situation, patterning care, easier decision-making, views client from holistic perspective. 2. Preceptor oversight primarily for validation of competency and ensuring patient safety. 3. By end of semester, is able to demonstrate role of NP through competence and management skills.



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>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> <p>Maintains certification/licensure</p>



The **UCD CON Graduate Program Learning Outcomes** are based on the American Association of Colleges of Nursing (AACN) essentials (2011) and the National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Core Competencies (2012). 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. View the national [NONPF Psychiatric Mental Health Nurse Practitioner Competencies here](#).

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.



Sample Nurse Practitioner Competency Evaluation

(This is the terminal skill set... formative learning forms for each class will be provided)

Student Name _____ Specialty Option _____ Number of Clinical Hours Completed _____ Semester/Year _____

Key

1	Below expected level.
2	At expected level.
3	Above expected level.
NA	Not applicable to the site or not assessed.

	Skill	1	2	3	NA	Comments
A) Knowledge and Integration of Skills						
1	Knowledge of Anatomy & Pathophysiology <i>Consistently integrates findings of anatomy and pathophysiology into differential diagnosis and care management.</i>					
2	Physical Exam (PE) Techniques & Skills <i>Demonstrates knowledge and beginning application of advanced exam skills and techniques. Students may require some assistance with refining techniques and the use of appropriate diagnostic equipment.</i>					
3	Uses Clinical Guidelines <i>Consistently identifies and incorporates clinical guidelines to create theory driven and evidence-based plan of care for pediatric patients and families.</i>					
4	Evidence-Based Practice <i>Consistently identifies and utilizes appropriate resources to support decision-making.</i>					
B) Communication Skills						
5	Interview Skills <i>Uses comprehensive, problem-focused, respectful, and culturally sensitive interview skills to obtain organized patient-specific data</i>					
6	Professional Behaviors <i>Works respectfully, professionally and collaboratively with agency's health care toward patient and family care goals</i>					
7	Case Presentation <i>Presents patient encounter to preceptor and other professionals in an organized, systematic format, and include all pertinent data. At this stage, students need to demonstrate the ability to clearly and accurately differentiates subjective and objective data, and include differential diagnosis formation.</i>					



8	<p>Written Communication</p> <p><i>Document patient encounters according to agency format. <u>At this level, students should be able to independently complete this skill.</u></i></p> <p><i><u>Evaluation focuses on skill in documentation that clearly and accurately differentiates subjective and objective data, identifies diagnosis and contains detailed treatment plan. Documentation of care meets legal and ethical guidelines.</u></i></p>					
C) Assessment Skills						
9	<p>History Taking</p> <p><i>Obtains health history relevant to clinical situation. <u>At this level, evaluation outcomes include: ability to gather adequate data to appropriately assess patient situation, ability to target and focus on pertinent elements, and the use of a systematic and organized manner to the encounter.</u></i></p>					
10	<p>Psychosocial & Developmental Assessment</p> <p><i>Collect and assesses relevant psychosocial & developmental health data as relevant to the patient encounter. Begins to incorporate these elements into treatment plan and counseling.</i></p>					
11	<p>Diagnostic & Laboratory Data</p> <p><i>Identifies and orders supportive diagnostic/lab evaluations, and develops appropriate treatment plans around interpretation of diagnostic & laboratory testing data. Students are able to present logical rationale for testing and treatments based on screening standards, pathology, or treatment guidelines.</i></p>					
D) Critical Thinking and Intervention Skills						
12	<p>Diagnostic Reasoning Skills</p> <p><i>Demonstrates advanced reasoning skills, problem-solving skills & critical thinking skills in formulating differential diagnose and treatment plans: including the ability to synthesize, prioritize data to formulate the list of differential diagnoses. <u>At this level, students are encouraged to demonstrate this skill by discussing potential differential diagnoses and then elaborating on the reasons to either select or reject the potential diagnosis, and rationale for selected treatment options.</u></i></p>					
13	<p>Therapeutic Plan</p> <p><i>With limited to no assistance, student is able to formulate treatment/management plan. At this level, outcome evaluation focus on the ability to develop a complete plan of care that is patient centered, comprehensive, culturally sensitive, theory-guide, evidenced-based with attention to diagnostic, treatment and pharmacotherapeutics, with educational interventions appropriate for the patient.</i></p>					
14	<p>Adaptation of Therapeutic Plan</p> <p><i>Adapts the therapeutic plan, in a timely manner according to the patient's response to therapy.</i></p>					



E) Humanistic, Caring, and Relationship Skills					
15	Views Patient as Holistic Being <i>Respects social and cultural context of patient's health care.</i>				
16	Interaction with Patient, Family, & Community <i>Identifies issues of concern for patient, family and community.</i>				
17	Patient and Family Advocate <i>Serves as patient and family advocate.</i>				
F) Management Skills					
18	Case Management <i>Coordinates care for complex patients—includes patients on multiple medications, multiple conditions or social situations. Care management may include coordination with other health professionals.</i>				
19	Cost Issues <i>Considers cost issues in care delivery, and utilizes cost, efficacy/evidence-based findings and patient's ability to engage in care as factors in care management.</i>				
20	Time Utilization <i>Utilizes time efficiently and effectively. At this level, outcome competency is evaluated on ability to manage simple care issues in 20 min, complex patients in 3-40 min. Anticipate ability to carry 85-90% of preceptor caseload in a primary care setting.</i>				
G) Teaching Skills					
21	Health Promotion and Preventive Care <i>Integrates health promotion and disease prevention into plan of care.</i>				
22	Health Teaching <i>Provides patient education that is evidence-based and appropriate to the patient and family situation.</i>				
H) Ethics and Leadership					
23	Ethical Practice <i>Applies ethical standards to the patient's care according to the nursing code of ethics considering patient's race, culture, language, literacy, gender, sexual orientation, and disability status</i>				
24	Acute Care Nurse Practitioner Role <i>Student assumes APN role though demonstrated responsibility for establishing diagnosis, formulating treatment options, collaborating with other professionals as appropriate and professionalism in the clinical setting. <u>At this stage, students should require LIMITED to NO assistance in differential diagnosis and plan formation.</u></i>				

Rate the Student's Overall Clinical Performance.

When comparing this student to other students you have worked with who are at this level of education, please place a line at the appropriate point on the scale that reflects this student's performance.

Outstanding	Passing	Failing
Student Strengths		Student Challenges