



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™

School of Nursing

Clinical Coach Handbook

Accelerated BSN Program:

Second Degree & Veteran to BSN Tracks

Table of Contents

Contact Information.....	3
Role of the Coach.....	4
Coach Position Description	5
Clinical Coach Responsibilities Page	6
Letter of Welcome & Orientation Manual Objectives	7
Texas Tech University Health Sciences Center (TTUHSC) Mission & Vision	8
SON Mission, Vision, & Values	8
Brief History	9
Accreditation.....	10
Undergraduate Program Purpose and Learning Outcomes	11
Accelerated BSN Program Tracks and Degree Plan	12
Course Descriptions	13
Definition of a Clinical Coach/Preceptor.....	16
Rewards and Challenges of Coaching	17
Faculty, Coach and Student Responsibilities	19
Clinical Facility and Nursing Program Responsibilities.....	20
Legal and Ethical Aspects of Being a Preceptor	21
Successful Coach Characteristics	21
Clinical Teaching Strategies.....	22
The Fine Art of Questioning.....	23
Modeling Clinical Practice	25
Providing Feedback.....	26
Evaluating Student Progress	27
Coaching Frequently Asked Questions	28
Skills Competence	30
Student Policies.....	31
Clinical Dress Code	32
Coaches “Should” and “Should Not”	33
What Students Cannot Do	35
References	36
Coaching Tools	38
Accelerated BSN “Coach’s Portal”	39
Library Resources.....	40

Mobile Resources	41
Texas Tech University Health Sciences Center (TTUHSC) School of Nursing (SON) Education Technology – Help Desk	42
Accelerated BSN Curriculum Documents.....	43
Guidelines for Student Activities in Clinical	46
Detailed Clinical Standards	49
Academic Integrity	50
TTUHSC Exemption Program for Clinical Preceptors	51
Micromedex Drug Resource	52

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Role of the Coach

Position Description
Second Degree BSN/Veteran to BSN Clinical Coach
TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER
SCHOOL OF NURSING

Position Description

TITLE

Second Degree BSN/Veteran to BSN Clinical Coach

FUNCTION

Serves as a preceptor to a Second Degree/VBSN student for the Foundations, Chronic Care, and Acute Care course clinical components.

TYPICAL RESPONSIBILITIES

- Works with the Second Degree/VBSN student in the clinical setting for 12 to 24 hours per week, depending upon course requirements.
- Assists the Second Degree/VBSN Student in meeting clinical objectives set by the course
- Completes student evaluations with the student present at mid-term and at the end of the semester,
- Notifies appropriate clinical faculty of student problems in a timely manner to facilitate the remediation of
- Offers objective, fair critique of student performance and assists in remediation as
- Reviews student progress of coursework through regular review of course information provided through
- course syllabi.

QUALIFICATIONS

Education

Bachelor of Science in Nursing, preferred

Experience

Minimum two years' experience as a Registered Nurse on a Medical-Surgical or Acute Care unit.

Knowledge, Skills and Abilities

Minimum of two years' experience as a Registered
Recommendation of direct supervisor (Nurse Manager, Director, etc.)
Nurse on a Medical-Surgical or Acute Care unit
Effective verbal/written communication skills

Licensure

Unencumbered licensure as a registered nurse in the State of Texas

TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER SCHOOL OF NURSING
Accelerated BSN Program

Clinical Coach/Preceptor Responsibilities

Collaboration between the Clinical Site Coordinator (SON faculty), the Clinical Coach/Preceptor, and the student is formally established at the beginning of the experience. It is important that each individual obtain a clear and mutual understanding of the purpose of the arrangement and the related responsibilities of each role. Lines of communication must be established at the outset with frequent and open communication throughout the experience. The primary responsibilities for the Clinical Coach/Preceptor are described below:

- Participate in coach orientation/training (date of completion: _____)
- Retain ultimate responsibility for patients' care
- Contact Clinical Site Coordinator (SON faculty) if assistance is needed or if any problem with student performance occurs
- Provide faculty with primary and secondary contact information
- Collaborate with the student to develop a clinical schedule
- Function as a role model in the clinical setting
- Facilitate learning activities for no more than 2 students at a time
- Orient the student to the clinical agency
- Supervise the student in the performance of nursing care with the goal of moving the student toward more independent functioning of specific nursing tasks while assuring safe practice
- Follow all hospital and school policies, i.e. medication administration
- Participate in conferences (direct, email, and/or via phone) with the Clinical Site Coordinator (SON faculty) to discuss the student's clinical performance
- Evaluate the student's level of proficiency in clinical performance honestly and accurately using course-specific guidelines
- Provide feedback to the student regarding clinical performance on a regular and frequent basis
- Communicate to student and Clinical Site Coordinator (SON faculty) any absences from the clinical setting (illness, vacation, cancellation) – NOTE: If the Clinical Coach/Preceptor is consistently absent, the student will be assigned to a different Clinical Coach/Preceptor.
- Provide feedback to the nursing program regarding the clinical experience

The Texas Board of Nursing (BON) Education Guidelines for precepted clinical learning experiences are outlined on the BON website (www.bon.state.tx.us) in Guideline 3.8.3.a. and the definition of a preceptor is found in BON Education Rule 215.2 and 215.10 (http://bon.state.tx.us/laws_and_rules_rules_and_regulations.asp).

Signature of Clinical Coach/Preceptor

Date

Printed Name of Clinical Coach/Preceptor

Letter of Welcome

Welcome to the Texas Tech University Health Sciences Center School of Nursing (TTUHSC - SON) Accelerated BSN Program, consisting of the Second Degree BSN and Veteran to BSN tracks. You have been selected as a clinical coach because you are recognized by your facility as a proficient provider of care with clinical expertise and an exemplary role model for future nurses. Thank you for your willingness to serve as a BSN coach to a well-qualified nursing student for the 12-month program.

TTUHSC - SON has been providing professional nursing education for more than 25 years. Unlike a traditional undergraduate program in which a group of students is under the supervision of a single faculty member, the Accelerated BSN Program pairs one student with a BSN coach for the entire program. The accelerated, coaching format has proven successful and is truly a hallmark of the Accelerated BSN Program.

The purpose of this orientation manual is to give you the tools you need to be a successful coach and to prepare you for the joys and challenges of serving as a preceptor for nursing students. The manual provides you with the essential information you need to understand your responsibilities as a preceptor, the responsibilities of the student, as well as the faculty's role and responsibilities. In addition, you will find helpful teaching strategies, information about the legal and ethical aspects of your role, and several helpful resources.

Thank you again for agreeing to participate in this worthwhile program and for giving back to the profession in such a direct way! Please let us know how we can continue to assist you during the year.

Orientation Manual Objectives:

1. Identify the TTUHSC and School of Nursing mission and vision statements.
2. Describe the Accelerated BSN curriculum.
3. Outline the definitions of the term *preceptor* located in the Texas Board of Nursing Rules and Regulations and in current literature.
4. Explain the responsibilities of the clinical coach, the student, and the faculty.
5. List the incentives and rewards offered to nurses who agree to serve as clinical coaches.
6. Discuss the responsibilities of the clinical facility and the nursing programs related to coaching/precepting.
7. Explain legal liability and ethics related to the role of the clinical coach.
8. Demonstrate clinical teaching strategies useful in assessing learning needs of the students, in coaching students to think like nurses, and in evaluating the students' clinical activities in the clinical setting.
9. Describe the characteristics of a successful and well qualified clinical coach.

*(Adapted from the Austin Area Health Industries Steering Committee
Preceptor Module - Precepting Nursing Students: The Essential Elements)*

TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER

MISSION

The mission of the Texas Tech University Health Sciences Center is to enrich the lives of others by educating students to become collaborative health care professionals, providing excellent patient care, and advancing knowledge through innovative research.

VISION

Transform health care through innovation and collaboration.

VALUES

Through our values-based culture, TTUHSC is committed to cultivating an exceptional workplace community with a positive culture that puts people first. Five core values-One Team, Kindhearted, Integrity, Visionary, and Beyond Service-are integral to our purpose, and we aim to align with those values on a daily basis (<https://www.ttuhsc.edu/human-resources/values-based-culture.aspx>).

SCHOOL OF NURSING

MISSION

The School of Nursing's mission is to educate students for practice in evolving healthcare systems and to advance knowledge and practice through research, service, and community engagement.

VISION

The School of Nursing's vision is to shape healthcare of the future by advancing the profession, improving the health of others, and inspiring exceptional care.

VALUES

TTUHSC School of Nursing team members commit to:

- Seek transparency through open communication respect, and clarity;
- Advance a work ethic of excellence, accountability, and integrity; and
- Promote a spirit of teamwork, trust, and compassion.

BRIEF HISTORY

Texas Tech University and Texas Tech University Health Sciences Center (adapted from Student Catalog, www.ttuhschool.edu/son/catalog.aspx)

Texas Tech University (TTU), which was founded in 1923 and enrolled its first students in the fall of 1925, is a state-supported, coeducational institution comprising the instructional colleges of Agricultural Sciences and Natural Resources, Architecture, Arts and Sciences, Business Administration, Education, Engineering and Human Sciences; the School of Law; the Graduate School and a number of special departments and divisions. Graduate work has been offered at TTU since 1927. The 61st Legislature of the State of Texas authorized the creation of the Texas Tech University School of Medicine as a separate educational institution. The Texas Tech University Health Sciences Center (TTUHSC) was officially designated by the 66th Texas State Legislature. Together with TTU, the Schools of Allied Health, Graduate Biomedical Sciences, Medicine, Nursing, and Pharmacy are classified as a Research institution.

The City of Lubbock

Lubbock, the home of TTU & TTUHSC, has a population of over 250,000 people. It is situated on the South Plains of West Texas at an altitude of 3,250 feet. Dry, crisp air and sunny days throughout practically the entire year provide a healthy and invigorating climate. The university campus, a contiguous tract of 1,839 acres, lies at the western edge of the business section of the city. University buildings number 245, including the Lubbock campus, Junction campus, Pantex campus, agricultural field laboratories at New Deal, and campuses in Abilene, Amarillo, Dallas, El Paso, Odessa and Fredericksburg/Marble Falls. The present plant value is approximately \$230 million.

Texas Tech University Health Science Center School of Nursing (adapted from Student Catalog, www.ttuhschool.edu/son/catalog.aspx)

The TTUHSC School of Nursing (SON) is the only nursing school on the South Plains that provides baccalaureate, masters, and doctoral education. Since its inception in 1979, the SON has offered innovative educational programs to meet the needs of Texas residents. With an expanded selection of program options offered throughout Texas and beyond, the SON continues to help bolster the state's nursing workforce by educating more than 1,400 students each year.

The first students were admitted to the Traditional Bachelor of Science in Nursing four-year degree on the Lubbock campus in August, 1981. Four years later, RN to BSN students were admitted in the Permian Basin. The first students were admitted to the Master of Science in Nursing track in 1988, and the Accelerated Second Degree BSN track was launched in Austin and Lubbock in 2005, and is now offered in Abilene, the Permian Basin, Amarillo, and Dallas-Fort- Worth area. In 2008, the inaugural cohort of doctoral students was admitted into the Doctor of Nursing Practice degree program in 2009, the Traditional BSN program was expanded to include Abilene and the Permian Basin.

Texas Tech University Health Sciences Center Accreditation (adapted from Student Catalog, www.ttuhschool.edu/son/catalog.aspx)

Texas Tech University Health Sciences Center is accredited by the Commission on Colleges of

the Southern Association of Colleges and Schools to award bachelor's, master's, doctoral, and professional degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia, 30033-4097, or call 404.679.4500 for questions about accreditation of Texas Tech University Health Sciences Center. The Commission should be contacted only if there is evidence that appears to support the institution's significant non-compliance with a requirement of standard.

School of Nursing Program Accreditation (adapted from Student Catalog, www.ttuhschool.edu/son/catalog.aspx)

In November 1982, the undergraduate program received full accreditation from the Board of Nursing for the State of Texas and in December 1983, the National League for Nursing granted initial accreditation, which was retroactive prior to the first graduation in June 1983. The graduate program received initial accreditation in March 1992. The School of Nursing programs are currently accredited by the Commission on Collegiate Nursing Education (CCNE) and the Board of Nursing for the State of Texas. The CCNE can be contacted at One DuPont Circle, NW Suite 530, Washington, DC, 20036; by phone at 202.463.6930; or by visiting the CCNE website at www.aacn.nche.edu. The Board of Nursing for the State of Texas can be contacted at 333 Guadalupe #3-460, Austin, Texas, 78701, or by telephone at 512.305.7400.

In July 1980, the TTUHSC School of Nursing Continuing Education Program was first accredited by the Western Regional Accrediting Committee of the American Nurses' Association as a provider of continuing education in nursing. That accreditation, now offered through the American Nurses Credentialing Center, remains in effect. The official accreditation statement is: Texas Tech University Health Sciences Center ATP School of Nursing Continuing Nursing Education Program is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

UNDERGRADUATE PROGRAM PURPOSE AND OUTCOMES

Under the guidance of an admissions committee all qualified applicants are carefully evaluated individually and holistically. Admission to the nursing program is highly competitive and only the most qualified applicants are selected.

Purpose

The purpose of the Undergraduate Program is to prepare generalist nurses who will develop into leaders for the future as they provide competent, compassionate patient care in the rapidly changing health care environment.

Student Learning Outcomes

Upon program completion, graduates will be able to:

- Provide patient-centered care for individuals, families, and communities.
- Work as an effective member of interdisciplinary teams to ensure continuous and safe patient care.
- Employ evidence-based practice (EBP) by integrating current research with clinical expertise and patient values to provide optimal patient care.
- Apply quality improvement measures to continually improve health outcomes consistent with current professional knowledge.
- Utilize informatics to enhance patient safety, manage knowledge and information, make decisions, and communicate more effectively.
- Provide safe care to individuals, families and communities through individual performance and system effectiveness.

Accelerated BSN Program: Second Degree BSN and Veteran to BSN Tracks

The Accelerated BSN Program consists of two tracks: Second Degree BSN and Veteran to BSN. The Second Degree BSN Track is designed for baccalaureate prepared graduates who are changing careers. Students are required to complete a certified nursing assistant program prior to admission to the Second Degree BSN Program. The Veteran to BSN Track is designed for veterans with prior military medical training and experience and builds on the education and knowledge of the veteran.

The three semester degree plan (one calendar year) is outlined below, followed by the course descriptions for all the courses. The **highlighted** courses are the ones in which the BSN coach and student work together:

Semester 1		
Course Number	Course Name	Credits
NURS 3213	Evidence-Based Nursing Concepts (2:2:0, O)	2
NURS 3327	Health Promotion Concepts (3:3:0, O)	3
NURS 3555	Fundamental Nursing Concepts (5:5:0, O)	5
NURS 3415	Pharmacological Concepts (4:4:0, O)	4
NURS 3610	Experiential Learning I, CL (6:0:18, F)	6
Total Credit Hours		20

Semester 2		
Course Number	Course Name	Credits
NURS 3328	Mental Health Nursing Concepts (3:3:0, O)	3
NURS 3335	Perinatal Nursing Concepts (3:3:0, O)	3
NURS 3338	Community and Public Health Nursing Concepts (3:3:0, O)	3
NURS 4515	Advanced Nursing Concepts (5:5:0, O)	5
NURS 4715	Experiential Learning II, CL (7:0:21, F)	7
Total Credit Hours		21

Semester 3		
Course Number	Course Name	Credits
NURS 4321	Leadership Concepts in Nursing (3:3:0, O)	3
NURS 4323	Child Health Nursing Concepts (3:3:0, O)	3
NURS 4325	Synthesis of Conceptual Nursing Knowledge (3:3:0, O)	3
NURS 4530	Complex Nursing Concepts (5:5:0, O)	5
NURS 4615	Experiential Learning III, CL (6:0:18, F)	6
Total Credit Hours		20

Total Credit Hours		61
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COURSE DESCRIPTIONS

NURS3555 Fundamental Nursing Concepts (5:5:0, 0)

(Pre-requisite: None, Co-requisite: All first semester courses.) This course introduces the foundations of nursing as a systems-based practice to provide safe, quality, equitable care to diverse populations. Using evidence-based practice, the skills of health assessment, communication, and select nursing skills are explored. Select standards of nursing care an introduction to the professional nursing role will inform safe use of these skills. Clinical reasoning is introduced as the foundational basis for providing patient-centered care, recognizing shared commonalities and uniqueness of a patient's health such as age, gender, race, ethnicity, culture, lifestyle, socio-economic class, and sexual orientation. Knowledge is applied and evaluated in the clinical and simulation setting in the co-requisite clinical course, NURS3610 Experiential Learning I.

NURS3327 Health Promotion Concepts (3:3:0, 0)

(Pre-requisite: None, Co-requisite: All first semester courses.) This course introduces the concepts of health promotion and maintenance across the lifespan to establish holistic, individualized, developmentally appropriate person-centered care. This includes a focus on physiologic changes, maintaining functional capacity, and access to health care. Content will focus on respect for diversity, differences, preferences, values, needs, resources, and the determinants of health unique to the individual. Emphasis will be placed on foundational concepts to improve quality of life through routine wellness assessment, advocacy, and education resulting in risk reduction and disease prevention across the lifespan.

NURS3415 Pharmacological Concepts (4:4:0, 0)

(Pre-requisite: None, Co-requisite: All first semester courses.) This course introduces the principles of pharmacokinetics, pharmacodynamics, and pharmacogenetics in the promotion, maintenance, and restoration of wellness. Emphasis is on the knowledge of drug classifications required for nursing practice. Legal, ethical, cultural, and life span implications of drug therapy are also explored. Concepts of safe medication administration, dosage calculation, client monitoring and education are a major focus. Knowledge is applied and evaluated in the clinical and simulation setting in the co-requisite clinical course, NURS3610 Experiential Learning I.

NURS3213 Evidence-Based Nursing Concepts (2:2:0, 0)

(Pre-requisite: None, Co-requisite: All first semester courses.) This course introduces evidence-based practice and the basic principles of the research process. Emphasis is on the process of generating, synthesizing, translating, applying, and disseminating nursing knowledge to improve health and transform health care.

NURS3610 Experiential Learning I (6:0:18, F)

(Pre-requisite: None, Co-requisite: All first semester courses.) This course introduces the application of foundational knowledge, skills, and values central to evidence-based professional nursing. The course integrates knowledge from foundational concepts, health promotion, and pharmacology for the delivery of evidence-based person-centered care. Select nursing skills, health assessment, medication administration, and standards of professional nursing care are included. Knowledge is applied within the simulation and clinical setting to develop mastery of

designated nursing skill competencies. Various levels of fidelity of simulation and evaluation by formative/summative examination are implemented.

NURS4515 Advanced Nursing Concepts (5:5:0, O)

(Pre-requisite: All first semester courses. Co-requisite: All second semester courses.) This course emphasizes chronic care nursing concepts essential for professional nursing practice in a variety of settings. Special focus is on the concepts of aging, health promotion, disease prevention, genetics, and illness management. Clinical judgment, reasoning, and select nursing skills are developed in the context of evidence-based chronic care. Knowledge is applied and evaluated in the clinical and simulation setting in the co-requisite clinical course, NURS4715 Experiential Learning II.

NURS3328 Mental Health Nursing Concepts (3:3:0, O)

(Pre-requisite: All first semester courses. Co-requisite: All second semester courses.) This course emphasizes the concepts of mental health including altered states and pathological processes associated with mental health disorders. The focus is on person-centered care approaches to promote optimal mental health of patients, including families and/or important others, experiencing varying states of mental health utilizing evidence-based standards. Knowledge is applied and evaluated in the clinical and simulation setting in the co-requisite clinical course, NURS4715 Experiential Learning II.

NURS3338 Community and Public Health Nursing Concepts (3:3:0, O)

(Pre-requisite: All first semester courses. Co-requisite: All second semester courses.) This course emphasizes the concepts of community and public health essential for professional nursing practice. Epidemiology and disease transmission, comprehensive assessment of risk factors and health problems, program planning and intervention, environmental health, collaboration with the interprofessional team, health promotion, and disease prevention related concepts are explored. Diversity, equity, inclusion, and ethics are also emphasized. Knowledge is applied and evaluated in the clinical and simulation setting in the co-requisite clinical course, NURS4715 Experiential Learning II.

NURS3335 Perinatal Nursing Concepts (3:3:0, O)

(Pre-requisite: All first semester courses. Co-requisite: All second semester courses.) This course emphasizes the concepts of perinatal nursing related to the safe delivery of evidenced-based care to childbearing families throughout the antepartum, intrapartum, postpartum, and newborn experience. Knowledge is applied and evaluated in the clinical and simulation setting in the co-requisite clinical course, NURS4715 Experiential Learning II.

NURS4715 Experiential Learning II (7:0:21, F)

(Pre-requisite: All first semester courses. Co-requisite: All second semester courses.) This course develops clinical judgment and reasoning through the integration of therapeutic nursing skill concepts essential for professional nursing practice in a variety of settings. The course integrates knowledge from advanced concepts, community health, mental health, and perinatal nursing for the delivery of evidence-based person-centered care. Knowledge is applied within the simulation and clinical setting to develop mastery of designated nursing skill competencies.

Various levels of fidelity of simulation and evaluation by formative/summative examination are implemented.

NURS4530 Complex Nursing Concepts (5:5:0, O)

(Pre-requisite: All first and second semester courses. Co-requisite: All third semester courses.)

This course emphasizes acute care nursing concepts essential for professional nursing practice in a variety of settings. Special focus is on complex disease management including environmental factors, genetic risks, and preventive care using a collaborative approach. Clinical judgment, reasoning, and select nursing skills are strengthened in the context of evidence-based acute care. Knowledge is applied and evaluated in the clinical and simulation setting in the co-requisite clinical course, NURS4615 Experiential Learning III.

NURS4323 Child Health Nursing Concepts (3:3:0, O)

(Pre-requisite: All first and second semester courses. Co-requisite: All third semester courses.)

This course emphasizes the concepts of child health related to the safe delivery of evidenced-based nursing care. The focus is on growth and development, health promotion, alterations in health, the role of the nurse, and coordination with the interprofessional team. Knowledge is applied and evaluated in the clinical and simulation setting in the co-requisite clinical course, NURS4615 Experiential Learning III.

NURS4325 Synthesis of Conceptual Nursing Knowledge (3:3:0, O)

(Pre-requisite: All first and second semester courses. Co-requisite: All third semester courses.)

This course emphasizes the integration and application of a broad knowledge base to demonstrate clinical judgment. Conceptual knowledge is analyzed to identify and address areas needing enhanced understanding. Emphasis is on demonstrating content mastery to promote the successful transition of the student nurse into the professional role.

NURS4321 Leadership Concepts in Nursing (3:3:0, O)

(Pre-requisite: All first and second semester courses. Co-requisite: All third semester courses.)

This course focuses on responding to and leading within complex systems of health care. The nurse's role as a leader, manager, and member of the interprofessional team are emphasized. Quality and process improvement, conflict resolution, care coordination, and related concepts and theories are explored. Knowledge is applied and evaluated in the clinical and simulation setting in the co-requisite clinical course, NURS4615 Experiential Learning III.

NURS4615 Experiential Learning III (6:0:18, F)

(Pre-requisite: All first and second semester courses. Co-requisite: All third semester courses.)

This course strengthens clinical judgment and reasoning through the application of complex decision-making essential for professional nursing practice in a variety of settings. The course integrates knowledge from complex concepts, child health, and leadership nursing for the delivery of evidence-based person-centered care. Knowledge is applied within the simulation and clinical setting to develop mastery of designated nursing skill competencies. Various levels of fidelity of simulation and evaluation by formative/summative examination are implemented.

DEFINITION OF A CLINICAL COACH/PRECEPTOR

Clinical coaches function in the role of a preceptor. According to the Board of Nursing for the State of Texas Rules and Regulations, Chapter 215 Professional Nursing Education, Rule 215.2 (10) Definitions, a preceptor is:

“A registered nurse or other licensed health professional who meets the minimum requirements in 215.10(j)(6) of this chapter (relating to Clinical Learning Experiences), not employed as a faculty member by the controlling agency/governing institution, and who directly supervises a student’s clinical learning experience. A clinical preceptor facilitates student learning in a manner prescribed by a signed written agreement between the educational institution, preceptor, and affiliating agency (as applicable).”

Rule 215.10(h) indicates: (h) Clinical preceptors may be used to enhance clinical learning experiences after a student has received clinical and didactic instruction in all basic areas of nursing or within a course after a student has received clinical and didactic instruction in the basic areas of nursing for that course or specific learning experience. (1) In courses which use clinical preceptors for a portion of clinical learning experiences, faculty shall have no more than twelve (12) students in a clinical group; (2) In a course which uses clinical preceptors as the sole method of student instruction and supervision in clinical settings, faculty shall coordinate the preceptorship for no more than twenty-four (24) students. (3) The preceptor may supervise student clinical learning experiences without the physical presence of the faculty member in the affiliating agency or clinical practice setting; (4) The preceptor shall be responsible for the clinical learning experiences of no more than two (2) students at a time per clinical group.

Rule 215.10(j)(6) indicates “Clinical preceptors will shall have the following qualifications: competence in designated area of practice, philosophy of health care compatible with the nursing program, current licensure or privilege to practice as a registered nurse in the State of Texas, or, if not a registered nurse, a current license in Texas as a health care professional with a minimum of a bachelor’s degree in that field.

In congruence with these BON rules, TTUHSC-SON prefers that clinical coaches be prepared with BSN or higher degrees. Education Guideline 3.8.3.a *Precepted Clinical Learning Experiences* may be accessed on the BON web page for additional information.

REWARDS AND CHALLENGES OF COACHING

Rewards and benefits of serving as a preceptor can be both personally and professionally satisfying.

Personal Rewards:

As a preceptor, you have a unique opportunity to serve as a role model for nursing students by setting an example of excellence in nursing practice. As you answer students' questions and continually clarify and present the role of the nurse, you potentially will discover that you are affirming your own knowledge and reenergizing yourself in your nursing practice.

Another potential outcome of these experiences with students is that you will revisit your own professional career goals as you begin to recognize your strengths as an educator and the rewards that come from this experience.

Because the Accelerated BSN Program is primarily web-based, you will have access to clinical nursing software containing clinical references that can be loaded on a smartphone. Your student will also have the same technology and should be encouraged to use its references when providing nursing care.

Professional Benefits:

Serving as a preceptor you obtain valuable practice experience to add to your resume that strengthens your potential for promotion or other career opportunities.

As a preceptor, you may be entitled to invitations to school and scholarly events, such as conferences or workshops.

As a preceptor, you may receive points or credit for career ladder advancement depending upon what your facility offers.

As a preceptor, you and/or your eligible children may qualify for exemption of up to \$500 of tuition per semester for up to 10 semesters.

<http://www.fiscal.ttuhsc.edu/studentbusserv/exemptionsandwaivers.aspx>.

Challenges:

Coaching can be very rewarding personally and professionally. However, working with students at any educational level can be stressful. Burns et al. (2006) discuss some of the challenges that coaches face as they balance job pressures with coaching responsibilities. The table on the following page looks specifically at role expectations.

Student	Faculty	Preceptor
Role expectations Arrange schedule Develop personal learning objectives Address course objectives Observe policies and procedures of agency Confer with preceptor and faculty about progress and problems Prepare for each clinical day Review and read about past day's work Evaluate faculty, course, and preceptor	Identify and secure appropriate sites for students Prepare student with necessary clinical skills Provide preceptor with course objectives Visit site during student experience Support and help preceptor develop teaching skills Monitor and evaluate student progress Provide evaluation feedback to preceptor Solve student and/or preceptor problems with the rotation Guide student clinical learning through class, chart reviews, case studies, assignments Provide feedback to student Teach clinical reasoning and skills from own knowledge and experience	Orient student to site, policies, procedures Facilitate informal, collaborative, respectful learning environment Be a positive and effective role model Provide learning experiences with appropriate patients Provide on-going feedback Pace learning experiences to meet student needs Direct student to resources, readings Notify faculty of concerns about student's behavior, work, or progression Provide evaluation data to preceptor
Role pressures: potential areas of difficulty Make connections between didactic and clinical work Work according to prescribed trajectory for clinical progress Balance adult life with student expectations Achieve learning needs within a service environment	Identify preceptors and appropriate settings that meet student learning needs in a time of preceptor shortage Evaluate student progress indirectly through written documentation and short visits to the site Keep learning expectations from impacting too greatly on preceptor service demands Orient and develop preceptors within their time and interest constraints Reward preceptors for their work	Teach from experience base Maintain patient care service expectations Fit clinical teaching into the program's curriculum Maintain rapport with patients and families while involving student in a meaningful way Persuade colleagues to assist with student education Convince administration to permit students at site

(Burns et al., 2006, p. 174)

The authors also discuss “strategies for teaching while practicing on busy days.” Developing an optimal climate for learning on your unit will pay off for everyone:

- Maintain ongoing student assessment and feedback
- Focus on close communication
- Respond quickly to student's stress
- Establish trusting relationships with your student
- Show mutual respect
- Treat the student as part of team

The Clinical Site Coordinator is a valuable resource for coaches to identify effective strategies for working with students. Additionally, each site has a Retention Counselor to assist with skills, content review, tutoring, etc.

FACULTY, COACH, AND STUDENT RESPONSIBILITIES

Collaboration between the Clinical Site Coordinator (SON faculty), the Clinical Coach/Preceptor, and the student is formally established at the beginning of the experience. It is important that each individual obtain a clear and mutual understanding of the purpose of the arrangement and the related responsibilities of each role. Lines of communication must be established at the outset with frequent and open communication throughout the experience. The primary responsibilities for each role are described below:

Clinical Site Coordinator Responsibilities:

- Orient both the student and the Clinical Coach to the clinical experience and course policies indicated in the SON policies and course syllabi
- Assure that all required Clinical Coach paper work is returned to the TTUHSC-SON Accelerated BSN Admissions/Application Coach Coordinator, as directed by the site coordinator
- Provide the Clinical Coach with the semester newsletter, containing information about the course syllabus and expectations for the specific course
- Establish communications such as, conferences, emails, texts, and phone calls with the Clinical Coach to discuss the progress of and to evaluate the student's performance
- Support the Clinical Coach in guiding the student's clinical experiences and making assignments
- Be readily available for problem-solving and consultation through telephone, text, and/or email communication and periodically visit the clinical setting (a minimum of once every other week)
- Provide student feedback to support student's efforts to refine performance
- Assume overall responsibility for assigning the student's clinical performance grade
- Obtain feedback from the Clinical Coach regarding the coach-student dyad
- Document all visits with the student and Clinical Coach (this is done in the SON electronic database)

Preceptor/Coach Responsibilities

- Retain ultimate responsibility for patients' care
- Contact Clinical Site Coordinator (SON faculty) if assistance is needed or if any problem with student performance occurs
- Provide faculty with primary and secondary contact information
- Collaborate with the student to develop a clinical schedule
- Function as a role model in the clinical setting
- Facilitate learning activities for no more than 2 students at a time
- Orient the student to the clinical agency
- Supervise the student in the performance of nursing care with the goal of moving the student toward more independent functioning of specific nursing tasks while assuring safe practice
- Follow all hospital and school policies, i.e. medication administration
- Participate in conferences (direct, email, and/or via phone) with the Clinical Site Coordinator (SON faculty) to discuss the student's clinical performance
- Evaluate the student's level of proficiency in clinical performance honestly and accurately using course-specific guidelines

- Provide feedback to the student regarding clinical performance on a regular and frequent basis
- Communicate to student and Clinical Site Coordinator (SON faculty) any absences from the clinical setting (illness, vacation, cancellation) NOTE: If the Clinical Coach/Preceptor is consistently absent, the student will be assigned to a different Clinical Coach/Preceptor.

Student Responsibilities:

- Collaborate with the clinical coach/preceptor to schedule clinical experiences
- Submit the clinical schedule to the Clinical Site Coordinator prior to the start of the experience (preferably 2 weeks in advance whenever possible)
- Maintain open communication with the Clinical Coach, Clinical Site Coordinator, and staff
- Adhere to safety principles and legal and ethical standards in the performance of nursing care, including but not limited to those identified in the Accelerated BSN Degree Program Detailed Clinical Standards
- Be accountable for learning activities and nursing actions in the clinical area
- Provide nursing care, including medication administration, under the supervision of the Clinical Coach and/or Clinical Site Coordinator, in compliance with institutional and course policies
- Contact Clinical Site Coordinator by telephone, text, or email, if faculty assistance is necessary
- Notify Clinical Site Coordinator immediately of any medication error or clinical incident; complete the medication/clinical incident form for the school and comply with the clinical agency policy and procedures, in collaboration with the Clinical Coach
- Develop greater competency in organizing self, managing patient care, and delivering complex nursing care
- Complete course evaluation as indicated by faculty instruction and the school policy
- Complete all required paper work to complete course requirements and submit to faculty according to faculty instruction and the course syllabus

CLINICAL FACILITY AND NURSING PROGRAM RESPONSIBILITIES

The clinical facility and nursing program enter into a formal collaborative agreement before preceptorships are arranged for the clinical experiences of nursing students. These written agreements detail the responsibilities of both entities.

Nursing Program Responsibilities:

- Assure that coaches/preceptor(s) meet the requirements as stipulated by the Board of Nursing for the State of Texas
- Maintain a written affiliation agreement with the facility for the provision of student clinical experiences
- Assume overall responsibility for orientation of coaches/preceptors, or confirm training previously attained by the preceptors
- Assume student compliance with standards on immunizations, CPR certification, criminal background screening, liability insurance coverage, clinical agency environment of care orientation, and training for OSHA standards
- Work cooperatively with the coach/preceptor and agency to determine appropriate placements and assignments

- Communicate instructor and student assignments and other essential information to the facilities.

Clinical Agency Responsibilities:

- Retain ultimate responsibility for the care of clients
- Retain responsibility for coach's/preceptor's salary, benefits, and liability
- Interpret the coach/preceptor program and expectations of students to other agency personnel who are not directly involved with the preceptorship
- Assist with the school's evaluation of the coach/preceptor experiences

LEGAL AND ETHICAL ASPECTS OF BEING A PRECEPTOR

- LEGAL – BON Rules and Regulations, Texas Nursing Practice Act, Student Handbook and Catalog, Delegation
- ETHICAL – ANA Code of Ethics, Student Code of Conduct, Honest and Accurate Feedback/Evaluation

A Coach website (<http://nursing.ttuhsu.edu/coaches>) has been developed to provide 24/7 access to clinical objectives and skills, clinical evaluation tools, orientation modules, coach newsletters, and the Coach Manual. There is also a link to submit questions directly to the program director.

SUCCESSFUL COACH CHARACTERISTICS

We already know that you are highly respected for your clinical expertise and leadership abilities. Take a minute to review the list of the characteristics of a successful coach (Baltimore, 2004; Croxon & Maginnis, 2009). How many of these characteristics can be applied to you?

- | | |
|-----------------------|----------------------------|
| ○ Knowledgeable | ○ Skilled clinician |
| ○ Patient | ○ Competent |
| ○ Enthusiastic | ○ Advocate |
| ○ Strong social skill | ○ Empathetic |
| ○ Teacher | ○ Confident |
| ○ Sense of humor | ○ Respectful |
| ○ Lifelong learner | ○ Self-aware |
| ○ Self-controlled | ○ Motivated |
| ○ Motivational | ○ Passionate about nursing |

GETTING TO KNOW YOUR STUDENT

During your initial meetings with your student, it would be good to share information and get to know each other, such as, “personal and professional backgrounds, teaching–learning and communication styles, and common reactions to stress” and “circumstances that could potentially affect learning” (Baltimore, 2004, p. 134).

When the student first comes to the unit, be sure to introduce him/her to the staff, provide an orientation to the physical environment, and review how to locate policies and procedures related to

patient care. Help the student feel like a member of the health care team rather than a guest. The student will slowly, but surely become a contributing member of the team.

It will be helpful to understand your student's learning style. Ask how the student learns best. If he/she doesn't know, suggest that he/she complete a learning style inventory, such as the ones found on the following websites: www.vark-learn.com or www.kiersey.com.

CLINICAL TEACHING STRATEGIES

You are probably already very good at teaching. After all, you are a nurse! Teaching is what we do. This portion of the orientation is designed to give you some tips for using your teaching skills in your new role as coach-educator.

Let's start with four basic principles about clinical teaching and learning (Burns, Beauchesne, Ryan-Krause, & Sawin, 2006, p. 175):

1. Learning is evolutionary.
2. Participation, repetition, and reinforcement strengthen and enhance learning.
3. Variety in learning activities increases interest and readiness to learn enhances retention.
4. Immediate use of information and skills enhances retention

Remember, your student is completely new to nursing – a blank slate, if you will. The student's knowledge base will “evolve” over time. You will see it happening before your very eyes. Be patient; it is a beautiful (and sometimes slow) process.

The most important teaching strategies to employ with nursing students in the clinical setting include: questioning and timely feedback, assessing learning needs to determine what they already know about their patient(s) and the patient care required, and evaluating the progress and competencies required for high quality and safe clinical practice.

Let us examine some key teaching strategies:

Questioning students to determine what they know and exactly what they plan to do and why is a most important tool

Modeling clinical practice, including thinking out loud, to demonstrate how you formulate clinical judgments will be critically important to the students' learning

Providing on-time feedback (both positive and negative) is another helpful and essential strategy to employ that allows for thoughtful reflection with the “fresh” experience

And finally, evaluating the progress of students is an ongoing, continuous process that will culminate in a formative review and conclusion about students' work

The faculty will maintain the responsibility of awarding the final clinical grades but will rely on your invaluable input. Assisting students to improve throughout the course will hopefully lead to a successful completion of all clinical objectives and ultimately course objectives and eventually, successful practice as a registered nurse.

The Fine Art of Questioning

One of your primary goals is to help the student apply theory (what he is learning in the online course) to practice (what he sees in the clinical setting) in order to think critically and make sound clinical decisions. To find out what the student is learning in the online course ask the student and review the semester newsletter. Let's assume that you have accessed the course information and are ready to reinforce some concept or learning objective. How should you proceed? Ask questions!

Learning goal	Script	Rationale
1. The student is to make a decision regarding the case at hand	"What do you think?"	This question is helpful throughout the decision-making analysis—from making a diagnosis to working out a plan; the student is not simply providing information to the preceptor to make decisions
2. Probe for supportive findings and evaluate the critical thinking that led to the decision	"Why do you think that?" "What led you to that conclusion?" or "What else did you consider and rule out?"	Diagnose the learner's understanding—gaps and misunderstandings, poor reasoning or attitudes; do not ask for textbook knowledge
3. Tell student what was right in the conclusions and critical thinking	"Specifically, you did a good job of _____ . . . and this is why it is important. . . ."	State specifically what was done well and why it was important to reinforce excellent performance
4. Correct student errors	"You did well based on your knowledge of older children but didn't factor in the infant's development"; "I disagree with . . ."; "A more efficient way. . ."	Specific correction will reinforce correct ideas and extinguish incorrect ones
5. Teach a general principle/ clarify the take-home lesson	"The key point I want you to remember is . . ."	Point out key ideas, prioritize essential points among many details
6. Your own one-minute reflection	"What did I learn about my teaching?"; "What did we learn from this?"	Place exercise into larger context of patient care and refocus for teaching episodes

Adapted from Neher, Gordon, Meyer, & Stevens, 1991.

(From Burns et al., 2006, p. 174)

Guide the student to think about theory as it applies to the current situation. Help them connect the pathophysiology of underlying diseases with assessment findings and interventions. Shift report is a perfect time to stimulate critical thinking as your student learns to quickly summarize key patient care issues, events, goals, and outcomes (Baltimore, 2004).

Forneris & Peden-McAlpine (2005) found that "coaching is integral to a process of thinking critically." One resource gave specific examples of questions that help the student focus on important details while setting aside irrelevant data during decision making. You may find these questions, shown in the table below, helpful during your work with your student.

Coaching Questions to Engage Critical Thinking Attributes©

35 17 Ask Why

- Why did you do that?
- Why would you do that?

35 17 Ask about the patient

- What's happening with the patient?
- How do you know?

35 17 Use imagination to explore possible options for change in action

- If you could do anything to change the situation, what would that be?

- ³⁵₁₇ Evaluate the timing of questions
 - Is the question being asked at the appropriate time and level?
- ³⁵₁₇ Use divergent questions
 - What do you think is happening?
 - What do you predict will happen if you do this?
 - Tell me if what happened was appropriate? Why or why not?
 - Tell me how you think the actions accomplished the goals or met the patient's needs
- ³⁵₁₇ Avoid memory questions
 - Don't ask for fact questions or questions phrased to give either a right answer or wrong answer; INSTEAD guide questions so that multiple answers can be given
- ³⁵₁₇ Focus on problem solving questions
 - What are you paying attention to that is bringing your care to a stop?
 - What data will need to be collected?
 - To what information should you pay attention?
 - What information is not helpful?
 - Are there any patterns that you should pay attention to?
- ³⁵₁₇ Focus on cues
 - Which cues are leading you to draw a conclusion?
 - What prior learning experiences do you have?
 - What aspects of the situation were significant?
- ³⁵₁₇ Help novice nurse to draw conclusion
 - What are the data saying?
 - What are the necessary nursing interventions to support this medical approach?
 - What was your rationale for the action you chose?
 - Is this experience similar to other care situations?

Note: Adapted from Ironside, 2003b; Myrick & Yonge, 2002 (as cited in Forneris & Peden-McAlpine, 2005)

Besides the Socratic Method (questioning described above), you can help your student by “thinking aloud.” As your student observes you throughout the shift, tell her what you are thinking as you go. This may take some practice on your part, because your thoughts are automatic now and many may feel like intuition. If you take the time to explain your actions, you will teach your student so much more than if she simply observes you in action without commentary.

Modeling Clinical Practice

Students will learn from your role modeling whether or not you purposefully present yourself as a role model. Two of the most significant aspects of learning accomplished through role modeling are critical thinking and professional role behavior in interaction with patients, interdisciplinary colleagues, and others.

Your thinking is invisible – just as the student’s thinking process is invisible unless you ask for responses that call for the student to describe his or her thinking. Make your thinking visible to teach clinical judgment. Think-out-loud whenever appropriate. Since thinking-out-loud is not a very natural behavior, practice. As you go about patient management without a student present, challenge yourself to formulate a description of your thought process.

You may find at times that it can be inappropriate for thinking-out-loud (because of concerns about the effect on a patient who is present or because of concerns about the effect on interdisciplinary or political relationships). In those situations, alert the student in advance to attend to particular critical features of your behavior. Afterward, ask the student questions about his or her observations and ask the student to interpret your rationale. This approach is a version of a “pop- quiz” on thinking-out-loud.

When you are thinking-out-loud, call attention to the essential features of your actions. In some situations, there may be a crucial sequence of actions or other features that are more important than others are. Let the student see the consequences of your actions. Seeing your favorable outcomes and tying them to specific actions focuses the student’s attention and motivates.

Brookfield (1990), an adult education authority, refers to our mistakes as our “instructional friends.” Our instructional friends teach us how to improve, what to watch out for and many other valuable lessons. You will find students extremely attentive to your war stories of valuable lessons learned from mistakes.

Experienced professionals know that everyone makes mistakes occasionally or at least can see a better course of action with 20/20 hindsight. Use an occasional, “I remember the time...” or “I learned this the hard way when...” This approach is a variety of role modeling that draws upon reflection on practice. With this approach you can sometimes prevent student errors.

Students may also have greater willingness to approach you with their uncertainties if they perceive that you have a reasonable tolerance for error. This certainly is not meant to suggest lowering performance standards or quality of care. Rather, the intent is that when mistakes occur, as they inevitably will, find the learning opportunity as well as apply whatever corrective action is indicated.

It is extremely important for the student to understand the connection between nursing practice and the rules and regulations that govern that practice. Please refer to and discuss the Nursing Practice Act and Rules and Regulations (http://www.bon.state.tx.us/laws_and_rules_nursing_practice_act.asp) with your student.

Providing Feedback

Providing both positive and negative feedback to students is a critically important role of the preceptor. Feedback answers the question, “How am I doing?” Providing positive feedback frequently and directly will help students know when they are making good decisions and increasing their critical thinking and psychomotor skills. Negative feedback offered from a positive perspective also provides them with an immediate alert that they have misunderstood, acted on or omitted something that may not be in the best interest of the patient. Absence of feedback can go both ways. A student may think they are doing either well or poorly. Students thrive on feedback and in this way are provided with useful information related to areas of improvement.

Because this teaching strategy is so essential to your role, an in-depth discussion of the principles of effective feedback will be provided. Feedback should be helpful to the person who receives it. Feedback will be most helpful when the student:

- Understands the information
- Receives the information close to the time of the activity in question
- Is able to accept the information
- Is able to do something about the information

Important Points about Feedback:

- Everyone deserves feedback
- Saying the right words is not nearly as important as knowing why you are saying them
- Negative feedback (or criticism) will most often be uncomfortable for both parties
- Positive feedback can be equally uncomfortable but no less needed

Guidelines for Providing Constructive Criticism:

Focus on CHANGEABLE THINGS

- Feedback can lead to improvements only when it is about things which can be changed
- Share ideas and information and explore alternatives rather than expecting answers or solutions

Make DESCRIPTIVE, NOT INTERPRETIVE, statements

- Act as a video camera. Playback a report of your observations rather than your interpretation about why things happened or what was meant by them. If you observe a practice that the student needs to improve, state your observation and then ask questions such as, “How could you do that more efficiently?” or “How could you do that procedure more safely?” or “What was a risk or potential problem with that approach?”

Make SPECIFIC statements

- Look for the details
- Give concrete and objective “playback”
- Focus on the student’s actions (or sequence of actions, or omitted actions)
- Offer specific positive, as well as corrective, statements. “Good job,” is too general; state what exactly was “good” and why
- Give specific suggestions about how to improve

Provide IMMEDIATE feedback

- The sooner feedback is given, the more effective it will be
- When you must delay, identify the specific time or incident to which you are referring
- Many occasions will arise when you must defer feedback. You may defer feedback to avoid delays in care, to avoid embarrassing the student, or for other reasons. Because such delays are appropriate in the practice environment, it is important to make a habit of giving feedback at the end of the day

Choose APPROPRIATE TIMES

- Give feedback when the receiver is ready to become aware of it. Of course, issues of safety, ethics or legal requirements take precedence over the student’s readiness to receive feedback
- Critical feedback in front of others may be more damaging than helpful
- Feedback provided should serve the needs of the recipient rather than the needs (for “release”) of the giver

Choose ONE ISSUE at a time

- Focus on the most critical behavior needing feedback at the time

Do NOT DEMAND A CHANGE

- Providing feedback and helping the student explore alternatives is not the same as requesting or demanding that the student change. There will be occasions when you request or demand changes in student practice. However, keep in mind the video playback analogy. Share your observations and perceptions with the student, reflect on your observations with the student and encourage the student to develop the habit of reflecting on practice.

Evaluating Student Progress

You are responsible for ongoing evaluation of your student’s progress toward course objectives and professional role expectations. As you monitor your student’s clinical performance and skill development, ask “check-point questions” to identify issues related to “overconfidence” or “underconfidence” and additional learning needs (Baltimore, 2004).

- What do you like about what you did today?
- If you could do it over, what would you do differently?
- What would you like to work on next shift?

Providing constructive feedback can be challenging for coaches. You must be able to tell your student both good news and not so good news. He needs both your positive and negative feedback. You are the expert. You can help him identify strengths and areas for improvement.

Informal and ongoing evaluations and feedback should take place each shift. Clinical site coordinators will gather feedback during site visits, as well as during formal midterm and final clinical evaluations.

Formal evaluation and feedback will take place in the middle and at the end of each semester on the evaluation tool designed for each medical-surgical course. The tool can be found on the Coaches Website (<http://nursing.ttuhschool.edu/coaches>). The evaluation tool is divided into two sections: Clinical Standards and Clinical Performance. The SON Student Handbook (<https://www.ttuhschool.edu/nursing/student-affairs/student-handbook.aspx>), the TTUHSC Student Handbook (<https://www.ttuhschool.edu/student-affairs/handbook.aspx>) and the course syllabi contain information regarding clinical standards and associated behaviors. Clinical Site Coordinators will also enter Coach feedback and evaluation information collected during site visits in the Clinical Database.

COACHES' FREQUENTLY ASKED QUESTIONS

How can I help the student feel a part of the unit where I work?

- Introduce the student to the staff
- Include the student in nurse reports
- Participate in a student tour of the unit
- Dialogue with the student while making decisions
- Communicate with the student consistently
- Utilize the student's goals/clinical checklists in the learning process
- Provide constructive feedback routinely

How and when do I communicate with the Clinical Site Coordinator?

- Notify the Site Coordinator immediately if you observe the student in unsafe or unprofessional conduct.
- Information shared with faculty is held in strict confidence.
- The faculty liaison is available to assist the coach at any time via phone or email; site visits will also be made every other week.

Is the student working under my license?

- The student does not work under your license.
- The Board of Nurse Examiners for Texas states (Rule 215.10) that the nursing program and faculty liaison assumes overall responsibility for the precepted student's teaching and evaluation.
- Clarity about the student's level of competence will serve as a basis for appropriate patient assignments and adequate supervision.
- Agency nursing staff maintains primary responsibility for patient care.

What if I just cannot work with the student?

- Personality differences can create challenges in communication on occasion. This nursing program's

goal for a student's clinical experience is that the experience be mutually positive for both the student and coach. Therefore, the Site Coordinator is committed to assisting you to resolve problems. Contact the faculty as soon as you notice a problem.

How closely do I have to monitor the student?

- The Board of Nurse Examiners for the State of Texas states that preceptors are responsible to guide, facilitate, supervise, and monitor the student in achieving the clinical objectives.
- Each nursing program requires that students be observed closely for any behaviors that do not meet the three criteria of the Critical Safety Elements: Safety, Knowledge, Communication.
- Each student is expected to function in the role of a pre-licensure student nurse during the clinical experience. Each of them will need close supervision, at least initially. As increasing competence is demonstrated through the observed delivery of safe and comprehensive care, less direct supervision should be needed.

How can I be sure I have the knowledge and skill to teach students?

- You have been recognized by your facility as possessing the clinical expertise to serve as a role model for the student in the clinical setting.
- These students are motivated to learn and will benefit from your ability to function as an expert in your area of specialization.
- The clinical course objectives will serve as guides in planning and teaching this orientation. Review syllabus and clinical checklists.

What if the student is critical of the way I do things?

- The student is responsible and accountable for his or her own learning needs.
- Effective professional communication with the preceptor and other members of the health care team is a valuable part of this clinical experience. It can provide an opportunity for the preceptor to role model appropriate, professional communication.
- There are usually many different ways to view a situation or accomplish a goal without compromising patient care. Discussing alternative approaches provides the student with critical thinking skills required to provide safe care.

What if the student is not successful in this rotation?

- Concerns about the student's performance should be communicated to the faculty early so that any possibility for remediation can be collaboratively planned between the coach and the faculty.
- Should the student still fail the course, after early intervention, the fault is not yours, but lack of readiness on the part of the student to fulfill all the course requirements.

What if the student is about to make a mistake or makes a mistake while I am working with him/her?

- Stop and question the student about what he/she is about to do and why.
- Help them to see the correct answers to your questions and suggest, "Next time this happens, try this."
- If an error occurs after initiating corrective action, involve the student in completing an incident report (as per hospital policy) and call the faculty. Show the student how to take responsibility for the error.

SKILLS COMPETENCE

Now is probably a good time to talk about the skills your student can perform when they arrive on the unit. Your student completed a certified nurse aid (CNA) course before being admitted to the Second Degree BSN Track. Veteran to BSN students have gained training in their military expertise fulfilling the requirement for a certified nursing aid. The student may or may not have CNA experience in a clinical setting. Students will be checked off in the clinical laboratory by TTUHSC-SON faculty on the following psychomotor skills:

- Hygiene
- Vital Signs
- Health History
- Skin Assessment
- Standard Precautions & Hand Washing
- Isolation Procedures
- Wound Care (sterile and non-sterile dressings)
- CVC management (sterile dressing change)
- All Routes of Medication Administration
- GI/GU Assessment
- Bowel Management Techniques (toileting, enemas, etc.)
- GI Techniques (NG tube insertion and feeding)
- Urinary Management Techniques (toileting, catheterization, etc.)
- Cardiopulmonary Assessment
- Respiratory Therapies
- Suctioning (oral-pharyngeal, naso-pharyngeal, naso-tracheal, tracheal)
- Tracheostomy Care
- IV Insertion/Blood draw

Your student may perform any of these skills under your direct supervision in the clinical setting. Once you have determined that your student consistently performs safely and competently, they may perform the skills with indirect supervision and random spot checks. Institutional policy must be followed with regard to delegation of skills, with particular attention paid to skills students are not allowed to perform, i.e. IV push for high risk medications.

Your student will be co-enrolled in other courses, like fundamentals and pharmacology, during your student's time with you on your unit. As your student's skill level increases, you will expect more evidence-based rationale from your student. Use the curriculum timeline provided by the Clinical Site Coordinator] to help you keep up with your student's academic progress and establish appropriate clinical expectations. Each course also has clinical objectives the students should meet and clinical checklists to guide learning. The course objectives and specific clinical skills the student should be able to perform with appropriate guidance and supervision are provided by the Clinical Site Coordinator.

You will be instrumental in helping your student learn to effectively organize and prioritize patient care and delegate appropriately to unlicensed personnel. The following suggestions are adapted from the work with hospital preceptors by Baltimore (2004):

- Instruct your student to formulate a shift routine and plan. Show your student your organizational tools and encourage him to observe other coworkers' methods of organization and then formulate their own. Good organizational skills will help your student handle unexpected events and competing responsibilities inherent in daily clinical practice.
- To help your student prioritize patient care responsibilities, have them categorize tasks based on their urgency, the level of skill required to complete tasks, and the consequences of delay or inaction.

Once your student has demonstrated competence in skills that are usually carried out by other staff, they may delegate some tasks to unlicensed assistive personnel. Help your student understand the delegation rules and how to recognize when delegation would be inappropriate. Effective delegation will ensure that your student will be more equipped to meet the multiple demands of patient care assignments during school and after graduation. (Delegation rules and resources can be found at Texas Board of Nursing web site at www.bon.texas.gov/pdfs/delegation_pdfs/Delegation-Rule225.pdf).

STUDENT POLICIES

Policies can be found in the *Student Handbook of the School of Nursing* (<https://www.ttuhschool.edu/nursing/student-affairs/student-handbook.aspx>). Here are a few excerpts that are pertinent to the clinical setting (TTUHSC-SON, 2023):

Code of Ethics

Students are expected to function within the framework of the Code for Nurses (ANA). Students may purchase the Code for Nurses by contacting the American Nurses Association Publishing Company or it can be downloaded at <http://www.nursingworld.org/codeofethics>.

Confidentiality/Health Insurance Portability and Accountability Act of 1996 (HIPAA)

The School of Nursing is dedicated to ensuring each student is current in issues as they relate to nursing practice and research. One such regulation includes the Health Insurance Portability and Accountability Act (HIPAA). Annually, each student is required to provide proof of education in HIPAA training. The training requirements vary by the curriculum; the student will receive information regarding HIPAA training and will be asked to sign a Confidentiality Agreement during New Student Orientation (both face to face and virtual). All proof of training will be placed in the student's advising file located in the appropriate Department Chair's Office. Those who cannot show proof will not be allowed to attend clinical. In addition, release of confidential information (including verbal communications, written communications, or electronic communications with or about patients or involving patient health information to anyone who does not need the information for treatment, payment, or health care operation) is a cause of dismissal from the School.

Personal Appearance/Uniform

The SON expects nursing students to maintain a professional image at all times while in the clinical setting. It is the expectation that the professional uniform of the School of Nursing shall be worn only for

clinically related activities. Second Degree BSN and Veteran to BSN students must follow the standards listed below:

**Hospital Clinical Settings
Dress Code**

Equipment:	Stethoscope, watch, penlight, Skyscape software/device, scissors, pen, and pad
Uniform:	The uniform shall be the official TTUHSC uniform (red scrub top and black scrub pants) with patch permanently affixed to left chest. The uniform shall be clean and without needed repair.
Shoes:	The shoes shall fit securely and be primarily white or black impenetrable material.
Socks/Hose:	White and clean (Women may wear socks with pants. White or natural color hose must be worn with skirts or dresses.)
Lab Jacket:	The lab coat shall be the official TTUHSC jacket (white) with patch permanently affixed to left chest and should be clean.
Name Tag & ID Badge:	These items must be worn with the uniform or lab jacket in all clinical settings.
Hair:	The student's hair must be clean, neat, and managed in such a way as to not require the student to touch hair during clinical. A student with long hair must secure hair behind his or her head; hair must be off the shoulders. Long hair is defined as any hair length that obstructs peripheral vision when the student bends over at waist level or that may dangle onto a patient or treatment surface.
Makeup:	Wear in moderation. No bright lipsticks, blush, or eye shadow.
Nails:	Nails must be clean and well groomed. Artificial nails are not acceptable. Nails need to be short. Polish, if worn, must be a natural/neutral color.
Perfume/Aftershave:	Avoid wearing perfume, cologne, or aftershave.
Piercing/Tattoo:	Students may have one stud earring in each ear lobe. All other piercing must be removed for the clinical setting. Tattoos must be covered or not visible during clinical.
Additional:	Additional requirements based on clinical agency policy will be communicated by Clinical Site Coordinators.

Cell Phones

Cell phones should be placed in the silent mode or turned off when students are in attendance at any learning activity at the SON or any clinical activity. Phone conversation on cell phones, texting, or use of any other non-approved applications must occur outside of direct patient care areas.

Unsafe Student Practices

A student who demonstrates any unsafe practices as outlined below may be subject to disciplinary actions dependent upon the severity of the unsafe practice, including but not limited to, the following: verbal warning, written warning, formal reprimand, failure and/or dismissal. Every effort will be made to use progressive discipline; however, at the discretion of the faculty member, a student can be failed at any time during the semester for an unsafe practice as defined above.

- Violates or threatens the physical, psychological, microbiological, chemical, pharmacological or thermal safety of the patient.
- Violates previously mastered principles/learning objectives in carrying out nursing care skills or delegated medical functions.
- Accepts assignments beyond knowledge, education, experience or competence.
- Fails to recognize or accept legal/ethical responsibility for actions as defined in the Nursing Practice Act for the State of Texas or the Code for Nurses of the American Nurses Association.
- Fails to carry out CDC Standard Precautions.

Texas Tech University Health Sciences Center, School of Nursing
Accelerated BSN Program: Second Degree BSN/Veteran to BSN Tracks
The Coaching Role – “Shoulds” & “Should Nots”

Coaches Should:

1. Provide the student with an appropriate patient assignment according to his/her shift assignment and the expectations of the course/semester in which the student is enrolled. It is expected students will start with one patient in the first semester and build up to a full load by the end of the final semester.
2. Assist the student with performing nursing skills and provide verbal guidance in the proper procedure for skills. Consult policy and procedure for correct performance of skills and allow the student to become familiar with any unit-specific protocol. Skills should be performed under direct supervision of the coach at least two to three times before a student performs the skill independently. Coaches should consistently supervise medication administration.
3. Take advantage of teaching opportunities to assist the student to understand concepts of pathophysiology and disease process and to apply these concepts to the nursing process.
4. Review ALL student documentation for thoroughness and accuracy. At the beginning of the program, the students will need assistance and direction for proper documentation. As the student progresses and documents independently, the coach must
5. Provide timely, constructive feedback to the student regarding performance, decision-making skills, and patient interactions. The students truly value their coach’s opinion and desire to know where they can improve in their patient care.
6. Communicate his/her schedule and plans to the student. Let his/her student know if the schedule changes or if a shift is cancelled. Students are asked to let coaches know when their schedule changes, and they greatly appreciate when the coach does the same.
7. Communicate compliments or concerns by contacting the site coordinator at any time. Coach input is appreciated as the coach is intimately involved with the student experience.
8. Complete the mid-term and final clinical evaluations per the course requirements. Please take time to thoroughly and accurately evaluate the student’s performance. Students require genuine and timely feedback in order to identify areas of strength or improvement opportunities.
9. Supervise the care the student provides to assigned patients. Take special care to ensure the delivery of safe patient care and the provision of accurate and thorough documentation.
10. Recognize the impact you have on the student as a coach, professional, and role model. The time the student spends with you and your unit lays the foundation for their nursing career. Students spend a minimum of 120-160 clinical hours each semester with their assigned coach; each moment they spend with you is valuable to their learning.

Coaches Should NOT:

1. Overload the students at the beginning of the program with heavy patient assignments. Remember that these are fresh, new nursing students, many of whom have never worked in a clinical environment before this program. Anticipate their learning needs and allow for appropriate growth as they progress in the program. They will need more direction in the beginning but will be more independent by the end of the program.
2. Be absent or unavailable/unapproachable during the shift. Students need coaches to be readily available to assist them and educate them as opportunities arise.
3. Allow a student to be in the automated medication dispenser without RN supervision. The students do not have access to the medication dispenser and require for a nurse to sign them in. DO NOT leave them signed into the medication dispenser without observation.

Texas Tech University Health Sciences Center, School of Nursing
Accelerated BSN Program: Second Degree BSN/Veteran to BSN Tracks
What Students Cannot Do

Interventions a student cannot do:

1. Take or write doctor's orders
2. Administer any type of blood product – they can assist with assessment, monitoring, initiation of IV but they cannot check or sign for blood products. Student should not be alone with a patient in the first 15 minutes of the infusion.
3. Discontinue central lines
4. Administer medications during a code
5. Defibrillation or cardioversion
6. Administer any medication without the knowledge of mechanism, action, side effects, adverse reactions, expected action, or any parameters of medication (for example pulse rate for beta blockers)
7. Give Chemotherapy
8. Witness consents

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Coaching Tools

The Accelerated BSN “Coach’s Portal”

The “Coach’s Portal” is a website housing many important resources for successful coaching to the Second Degree BSN/VBSN student. It is updated annually with updates as needed. The website can be found at: <http://nursing.ttuhschool.edu/coaches/>. You can also find a link to this website on www.ttuhschool.edu/son.

Resources



Clinical Objectives and Skills

- [NURS3510 Foundations Clinical Checklists](#)
- [NURS3520 Chronic Care Clinical Information and Checklists](#)
- [NURS4510 Acute Care Clinical Information and Checklists](#)



Clinical Evaluation Tools

- [Coach Directions for Clinical Evaluation Tools](#)
- [Acute Care Clinical Evaluation Tool](#)
- [Foundations Clinical Evaluation Tool](#)
- [Chronic Care Clinical Evaluation Tool](#)
- [Detailed Clinical Standards](#)



Coach Newsletters

- [Vol. 18 – Cultural Competence](#)
- [Vol. 17 – Coach Impact](#)
- [Vol. 16 – Nursing Mistakes](#)
- [Vol. 15 – Professional Dress](#)
- [Vol. 14 – Debriefing](#)
- [Vol. 13 – Evaluation Tool & Feedback](#)
- [Vol. 12 – Coach Portal](#)
- [Vol. 11 - Debriefing a Critical Incident](#)
- [Vol. 10 - Fostering Teamwork](#)
- [Vol. 9 – Being Empowered](#)
- [Vol. 8 - Time Management](#)
- [Vol. 7 - The Harm in Shortcuts](#)
- [Vol. 6 - Critical Thinking](#)
- [Vol. 5 - VBSN & Professional Environments](#)
- [Vol. 4 - A Coach's Impact & Pharmacology](#)
- [Vol. 3 - Second Degree & Pharmacology](#)
- [Vol. 2 - Title IX Training](#)
- [Vol. 1 - Starting with a New Student](#)



Accelerated BSN Program Coach Training

- [Module 1](#)
- [Quiz 1](#)
- [Module 2](#)
- [Quiz 2](#)
- [Module 3](#)
- [Quiz 3](#)



Coach Manual (2019)



Clinical Coach Responsibilities



TTUHSC SON Coach Information Form



Coach Recruitment Information

- [TTUHSC Accelerated BSN Program and Coach Model Overview](#)
- [Coach Recruitment Flyer](#)



Curriculum Timelines

- [2019 Curriculum Timeline](#)



IT Resources

- [School of Nursing IT Dept. / Help Desk](#)



Contact Us / Ask a Question

Library Resources

Library resources can be located at <http://www.ttuhsc.edu/libraries/>

Information can be accessed by highlighting the section (ex. Databases) and clicking on the link

The screenshot shows the Texas Tech University Health Sciences Center Libraries website. Red arrows and boxes highlight various navigation paths:

- Searches:** A box highlights the 'Searches' section at the top, which includes links to PubMed, MeSH, PMID, Journals, Books, and eBooks, along with a 'Search PubMed' button.
- Navigation Bar:** A box highlights the 'Resources' link in the main navigation bar.
- Left Sidebar:** A box highlights the 'Databases A-Z [search by topic]' link in the left sidebar.
- Popular Resources:** A box highlights the 'Popular Resources' section, which lists various databases like Access Products Index, CINAHL Complete, ClinicalKey, Cochrane, DynaMed Plus, Embase, Essential Evidence Plus, LexiComp, Medical Letter, Micromedex, Nursing Reference Center, Ovid databases, SCOPUS, PubMed, and Web of Science.
- Right Sidebar:** A box highlights the 'A-Z Databases' section, which lists various databases like Access Products Index, CINAHL Complete, ClinicalKey, Cochrane, DynaMed Plus, Embase, Essential Evidence Plus, LexiComp, Medical Letter, Micromedex, Nursing Reference Center, Ovid databases, SCOPUS, PubMed, and Web of Science.
- Bottom Right:** A box highlights the 'Ovid' database interface, showing a search results page with a list of resources.

Annotations include:

- Information can be accessed by highlighting the section (ex. Databases) and clicking on the link
- Or by hovering over the section (ex. databases) and clicking on the link to a specific resource (ex. Ovid)
- Another way to access and search Library resources

Mobile Resources

Mobile resources can be accessed through the library website at
<http://www.ttuhsc.edu/libraries/>

The screenshot shows the TTUHSC Libraries website. A red box highlights the 'Searches' section at the top, which includes links to PubMed, MeSH, PMID, Journals, Books, and eBooks, along with a search bar. A red arrow points from this box to a text box on the right that says: 'Click on the Resources tab at the top, then select the Mobile Apps & Resources tab. You will need to install the Texas Tech Mobile app.' Another red arrow points from the 'Resources' tab in the main navigation bar to a text box at the bottom left that says: 'There are many resources, some may require an Eraider username and password. The Librarians can be contacted for assistance using the "Ask a Librarian" link'. A third red arrow points from the 'Mobile Apps & Resources' tab in the right-hand sidebar to a text box at the bottom right that says: 'Click on the resource link, and download the resource (ex. Nursing Reference Center Plus)'. The right-hand sidebar also contains a 'Q. How do I discover and download TTUHSC library mobile apps?' section with a QR code and a list of steps. Below this is a 'Mobile Resources' section with a table of resources.

Searches

PubMed | MeSH | PMID | Journals | Books | eBooks

Q Search PubMed

Texas Tech University Health Sciences Center / Libraries / New / Home

New: Home

Home Resources Services Schools & Programs Faculty Students HELP!

Databases A-Z [search by topic]

GoldRush [search by journal title]

Literature Search Requests

Books and eBooks [Catalog]

Document Delivery & ILL

TeamViewer

Download TeamViewer for Windows

Download TeamViewer for Mac

Popular

- Access Products Index [*note]
- CINAHL Complete
- ClinicalKey
- Cochrane
- DynaMed Plus
- Embase
- Essential Evidence Plus
- LexiComp [*note]
- Medical Letter
- Micromedex
- Nursing Reference Center
- Ovid databases
- SCOPUS
- PubMed - [PubMed Announcement]
- Web of Science

Library Hours

All Libraries

Contact Us

- 806.414.9964
- 806.743.2200
- 432.703.5036
- Staff Directory

We're Social!

Facebook Twitter Instagram YouTube

Q. How do I discover and download TTUHSC library mobile apps?

Answered By: Paul Landers Aug 21, 2018 1958

1. First install the official Texas Tech Mobile app using this link or the QRcode below.
2. Search within the TTU app for additional apps to install as follows:
 1. Tap the menu button > My Institution > TTUHSC Liblook
 2. Tap the menu button > Library Mobile Resources
 3. Select additional apps to install

See also: What's the difference between Mobile Web and a Mobile App?

Mobile Resources

Software	Cost	Platform
Access Medicine	Paid by TTUHSC	iOS Android
Description: The AccessMedicine® app delivers invaluable point of care solutions for clinical practice. Requires creation of a personal account with a 90-day refresh cycle.		
Click HERE to register or refresh		
AgileMD	Paid by TTUHSC	iOS Android
Description: AgileMD lets you quickly search for topics and search within articles. Spend less time digging through pages of dense text and more time with your patient.		
Click HERE to register or sign in		
AudioDigest	Paid by TTUHSC	iOS
Description: Audio-Digest produces audio		

There are many resources, some may require an Eraider username and password. The Librarians can be contacted for assistance using the "Ask a Librarian" link

Click on the resource link, and download the resource (ex. Nursing Reference Center Plus)

School of Nursing Help Desk

SCHOOL OF NURSING

Search TTUHSC.edu

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School of Nursing Education Technology Services and Help Desk

[Home](#) > [School of Nursing](#) > [School of Nursing Education Technology Services](#)



Contact

Email

sonitstaff@ttuhsc.edu

Phone

(806) 743-4248

Toll Free Phone

(866) 669-4248

24 Hour Support

The 24-hour Help Desk Support service is only available for TTUHSC School of Nursing students.

To access this service, please follow the link from your Sakai course.

The link will be in the main menu of any of your courses, generally located towards the bottom.

- [Login to Sakai](#)
- [Login to Canvas](#)

Important Links

- [TTUHSC Email](#)
- [Current Student Resources](#)
- [Sakai](#)
- [Canvas](#)
- [Canvas Training](#)
- [eRaider Account Management](#)
- [TTUHSC Student Web Portal](#)(Registration, Payments, etc.)
- [NCLEX Preparation](#)
- [Library eReserves](#)

Useful Software

- [Respondus Lockdown Browser](#)
- [TeamViewer](#)
- [Java](#) (Only recommended if necessary for certain applications)

Tips and Tutorials

- [Sakai tutorials](#)
- [Office tips and tutorials](#)
- [Is Online Learning For You? Self-assessment](#)
- [Recording audio on your computer](#)

Frequently Asked Questions

- [How do I access my HSC email on my phone?](#)
- [How do I purchase and install Skyscape resources on my mobile device?](#)
- [What are the basic requirements for my PC?](#)
- [How do I activate the TTUHSC Domain on my eRaider Account?](#)
- [How do I access VoiceThread?](#)

CURRICULUM DOCUMENTS

Guidelines for Student Activities in Clinical

Assignment and Delegation of Care:

1. Patient care assignments should be negotiated with the coach to provide the best possible learning experiences for the student and to enable the student to meet personal and course objectives.
2. Under the guidance of the coach/preceptor, in accordance with the Texas Nursing Practice Act and Board of Nursing Rules and Regulations, students should practice delegating duties to other team members as appropriate.

Medications:

1. ***Students must be knowledgeable about every medication administered*** (See BNE Rule 217.11 (3) and (4).
2. **ALL medications MUST be checked before administration by an RN coach/preceptor or the clinical site coordinator.**
3. The RN coach/preceptor must consult their institution's policy regarding student administration of medications. Supervision of the administration of oral and topical medications should follow the specific policy of the institution in which the student is attending clinical. **ANY MEDICATION ERROR MUST BE REPORTED IMMEDIATELY TO THE CLINICAL SITE COORDINATOR. APPROPRIATE INCIDENT REPORTING MUST BE COMPLETED IN ACCORDANCE WITH HOSPITAL POLICY.**

Intravenous (I.V.) Therapy:

1. All I.V. catheters insertions and administration of I.V. therapies must be initiated and administered in accordance with the specific institution's policy. Supervision of these skills should follow hospital policy. I.V. therapies include the additional of I.V. additives, I.V. bags or bottles, and I.V. push or piggyback.
2. I.V. chemotherapeutic agents or experimental drugs may not be administered by students at any time under any circumstances.
3. Students may observe an RN coach/preceptor in the process of administration of blood or blood products, BUT students may not administer blood products at any time under any circumstances.

Documentation:

1. All students are expected to document their assessments, nursing interventions, etc., for their assigned group of patients following agency or institutional policy in a timely fashion.
2. Students should discuss intended documentation with the coach/preceptor before entry into the medical record or chart.

Physician Orders:

1. Students may **NOT** receive telephone or verbal orders from physicians, residents, interns, or medical students.
2. Students may **NOT** use routine or standing physician orders until an RN coach/preceptor has transferred them to the chart and cosigned them.

3. Students should be involved in the transcription of physician orders under the supervision of their coach/preceptor.

Consents/Permits/Lab Reports:

1. Students may **NOT** witness permits for diagnostic, therapeutic, or surgical interventions.
2. Students may **NOT** receive lab reports over the telephone.

Patient Incidents:

1. Any patient incident should be reported immediately to the clinical site coordinator and documented according to hospital policy.
2. The clinical site coordinator will assist the student with the necessary documentation of the incident and to fill out the required incident report form for the hospital and school.

Report:

1. Students should receive report from the off-going staff member(s) with their assigned coach/preceptor.

Break and Meal Times:

1. Smoking, eating, or drinking beverages is not permitted in patient care areas.
2. One twenty (20) minute break is allowed during the morning of the clinical day, and one-half (1/2) hour (30 minutes) is allotted for meal time during the day. An additional twenty (20) minute break in the afternoon is allotted on 12 hour clinical days. Students are not allowed to leave the facility. Adjustments to break scheduling may be made per hospital policy.
3. Break and Meal times should be negotiated with the coach/preceptor at the start of the shift.
4. Students should always report to their assigned coach/preceptor upon leaving the unit and upon returning to the unit.
5. Work should be organized during the clinical day to allow time for the break and meal times. The continuity of patient care should not be disrupted by break and meal times.

Personal Possessions:

1. Students should bring only the absolute necessities to the clinical area.
2. Personal books and notebooks may be brought to the clinical area, as needed, but all personal books and notebooks should be clearly labeled.
3. Large amounts of money or other valuables should not be brought to the clinical area.

Personal Telephone Calls or Visiting Other Areas:

1. Students should not use the business telephones in the clinical areas for personal use.
2. Students are not allowed to visit in other clinical areas while on duty in the clinical facility.

Student Injury or Illness:

1. Any student injury while on duty in the clinical facility must be reported immediately to the clinical site coordinator. The clinical site coordinator will assist the student to secure medical treatment, if necessary, and complete the required incident report for the SON and hospital.
2. Students who become ill while on duty in the clinical facility should notify the clinical site coordinator for guidance.

Clinical Warnings:

1. Verbal and/or written clinical warnings are used to communicate to students that they are not meeting the clinical objectives for the course or have violated one of the Detailed Clinical Standards or TTUHSC SON Student Handbook standards:
 - a. A student who demonstrates any unsafe practices as outlined below may be subject to disciplinary actions dependent upon the severity of the unsafe practice, including but not limited to, the following: verbal warning, written warning, formal reprimand, failure, and/or dismissal. Every effort will be made to use progressive discipline; however, at the discretion of the faculty member, a student can be failed at any time during the semester for an unsafe practice as defined below:
 - i. Violates or threatens the physical, psychological, microbiological, chemical, pharmacological or thermal safety of the patient.
 - ii. Violates previously mastered principles/learning objectives in carrying out nursing care skills or delegated medical functions.
 - iii. Accepts assignments beyond knowledge, education, experience or competence.
 - iv. Fails to recognize or accept legal/ethical responsibility for actions as defined in the Nursing Practice Act for the State of Texas or the Code for Nurses of the American Nurses Association.
 - v. Fails to carry out CDC Standard Precautions.
2. Some examples of situations that might result in a student being issued a clinical warning include (but are not limited to) the following:
 - a. arriving late for clinical
 - b. not following the student dress code
 - c. making a medication error
 - d. providing substandard care
 - e. performing a procedure incorrectly
 - f. not completing patient care on time
 - g. communicating or interaction (verbal or nonverbal) to patients, faculty, staff, or other students
 - h. not turning in written work on time

**Texas Tech University Health Sciences Center
School of Nursing
Accelerated BSN Program
Detailed Description of Clinical Standards**

The following guidelines are established for students enrolled in the Accelerated BSN Program representing Texas Tech University Health Sciences Center and the School of Nursing in any clinical setting. The SON Student Handbook and the clinical course syllabi contain information regarding the clinical standards and associated behaviors.

Standard I
Clinical Scheduling & Attendance Standards
1 Establishing schedule <ul style="list-style-type: none"> a) Works the coach's schedule b) Posts schedule to Clinical Schedule Management Studio (CSMS) per the course schedule or as directed by site coordinator(s) c) Student must attend clinical with assigned coach only d) No more than 2 schedule changes/cancellations are permitted for personal reasons per semester
2 Commitment <ul style="list-style-type: none"> a) Honors schedule that is negotiated with the coach b) Contacts clinical faculty and coach 2 hours prior to scheduled clinical if unable to attend c) Must work entire shift as the facility defines a shift (no partial shifts)
3 Accountability <ul style="list-style-type: none"> a) Student schedules clinical time each week to allow opportunities to meet clinical objectives (see course syllabi for course standards) b) Clinical schedule must not conflict with other course expectations, i.e., must not leave clinical to take exams c) With the approval of site coordinator, students may elect not to schedule clinical with coach during the weeks that have approximately 24 hours scheduled for specialty clinical courses (Mental Health, Perinatal, Child Health, Community & Population)
Standard II
Professional Behaviors
1 Adheres to Texas Board of Nursing (BON) Standards of Practice
2 Maintains confidentiality in accordance to HIPAA and institutional guidelines, i.e., do not photocopy/photograph items in client record
3 Arrives prepared prior to start of scheduled shift, at least 15 minutes or as directed by coach/faculty
4 Dresses in accordance with dress code in laboratory and clinical settings and in accordance with requirements of assigned institution
5 Demonstrates positive attitude with public, faculty and peers <ul style="list-style-type: none"> a) Communicates respectfully with public, faculty and peers b) Behavior contributes to the teaching/learning process c) Behaves in a collegial, respectful manner d) Maintains collaborative attitude
6 Accepts responsibility for own learning <ul style="list-style-type: none"> a) Sets appropriate priorities for learning and practice b) Is accountable <ul style="list-style-type: none"> i. Manages time wisely ii. Continuously reflects on and evaluates own performance in the clinical setting iii. Seeks guidance from appropriate sources

ACADEMIC and PROFESSIONAL INTEGRITY

All students entering the School of Nursing must subscribe to the standards and codes of profession. Patients and society as a whole expect School of Nursing students, as nursing professionals to adhere to the:

- TTUHSC Code of Academic Conduct (See coach portal)
- American Nurses Association (ANA) Code of Ethics for Nurses (see coach portal)
- Texas Board of Nursing Unprofessional Conduct Rules:
 - Standards of Practice (Texas Administrative Code §[217.11](#))
 - Unprofessional Conduct (Texas Administrative Code §[217.12](#))

Students who fail to uphold and/or comply with the above codes and standards for safe and professional nursing practice will be considered in violation of the law and/ or professional nursing standards. Students holding a license to practice nursing will be subject to the reporting laws on unprofessional conduct.

For more information about student expectations and policies related to academic and professional integrity, refer to the *TTUHSC Student Handbook Code of Professional Conduct* (see coach portal) Part II, E, Other Professional and Ethical School Standards, (2) School of Nursing.

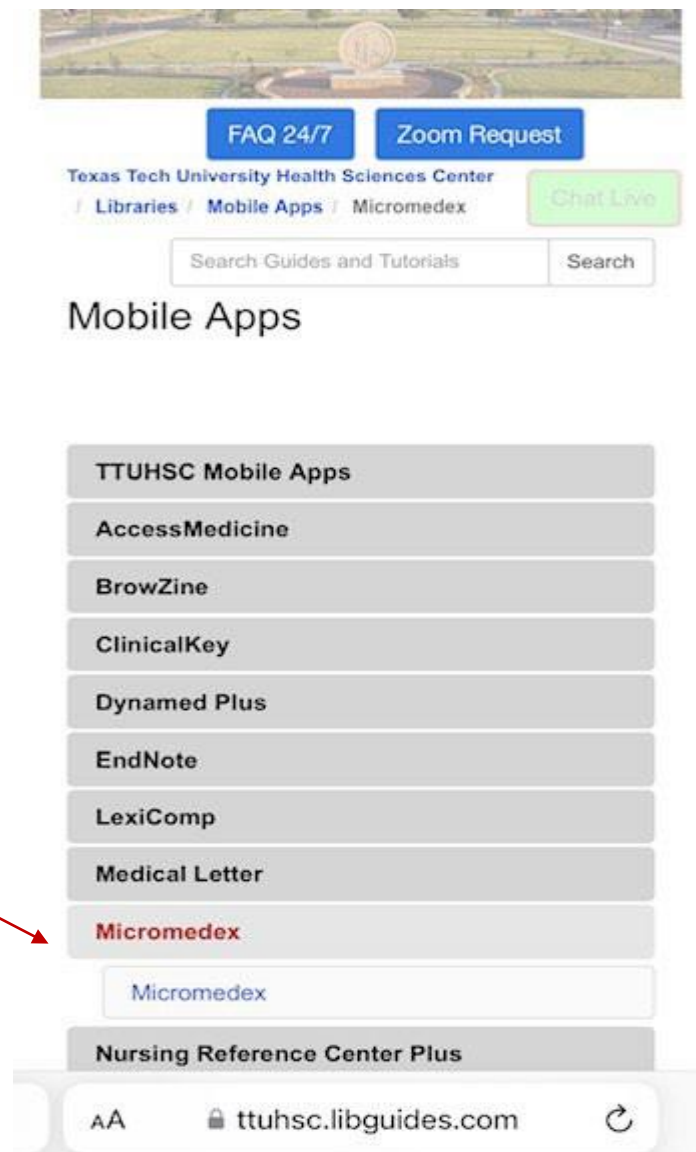
Application for an Exemption through the Exemption Program for Clinical Preceptors and their Children

- Clinical Preceptors and their children qualify for a \$500 scholarship. Please visit the following website for further information: <http://www.collegeforalltexans.com/apps/financialaid/tofa2.cfm?ID=546>
- The application can be accessed to the link below: <http://www.thecb.state.tx.us/reports/PDF/1458.PDF>

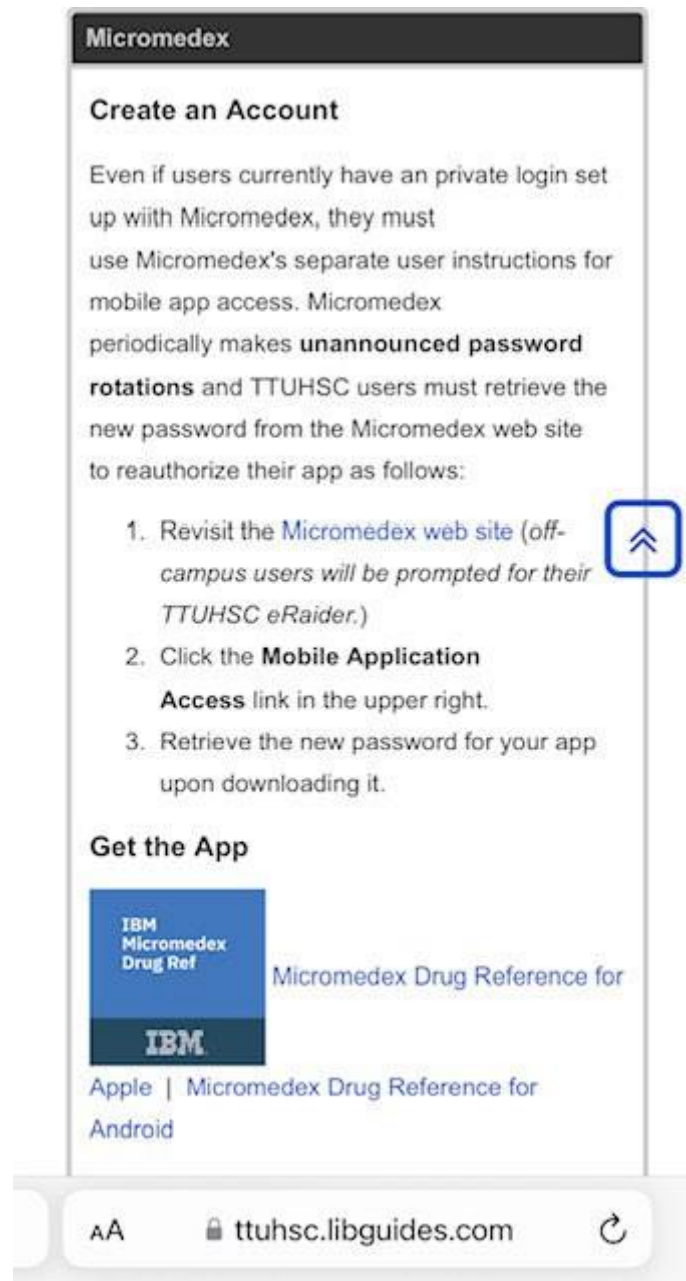
The required drug reference for the Experiential Learning I course is IBM Micromedex. IBM Micromedex Drug Reference and IBM Micromedex IV Compatibility. The resources are available through the app store on your cell phone. There are **no fees** associated with the use of the apps. Using your computer and cellphone you can access the information for the installation. The following steps will give access for both Apple & Android users.

IBM Micromedex

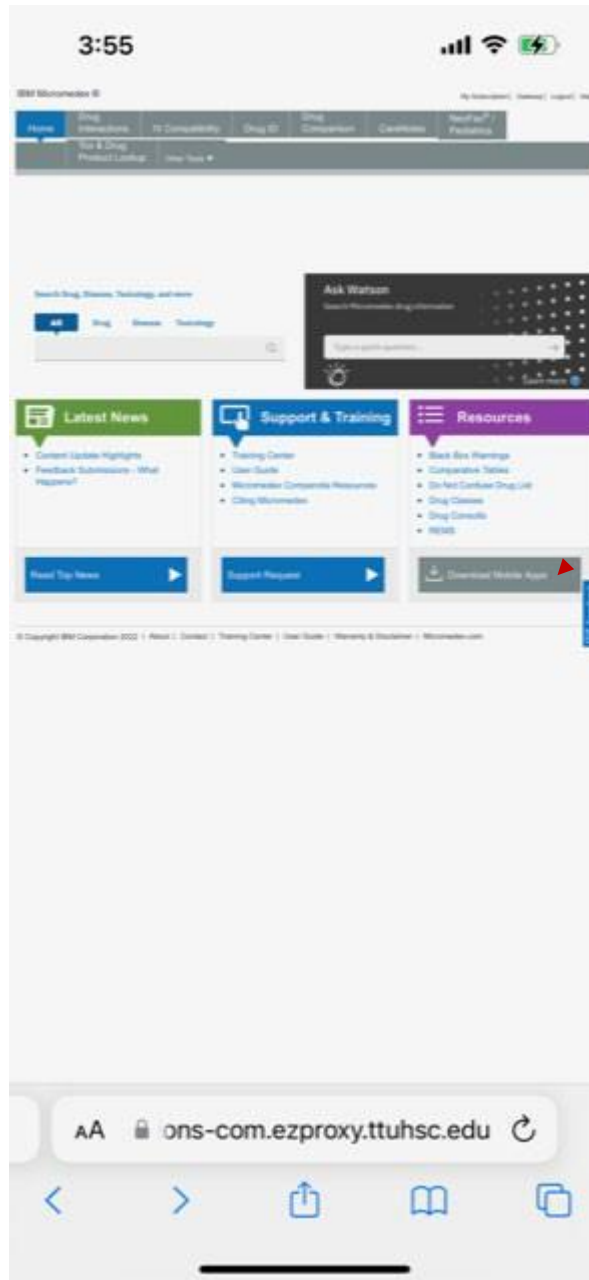
1. Go to your app store on your phone and search “IBM Micromedex Drug Reference” & “IBM Micromedex IV Compatibility”. Download both apps.
2. Type the following link into your browser: <https://ttuhsc.libguides.com/new>



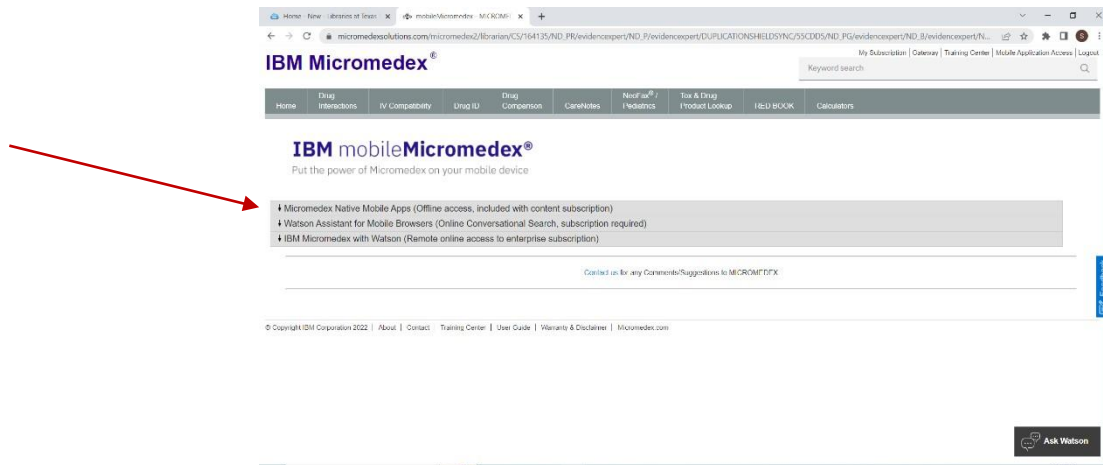
3. Click on "Micromedex". It will prompt you to download the application as pictured below if you are on your cellphone.



4. Using your computer, the following information will be shown. This will lead you to the information needed for logging into the app. There are a few steps to get to the information.



5. Click on “Download Mobile Apps” under Resources column on the far right of the screen as shown above. This will lead you to the following page.



6. Click on “Micromedex Native Mobile Apps (Offline access, included with content subscription)”. Using your TTUHSC login information the following password must be entered when prompted within the apps. Please note there is a different password for each of the apps. *The password is case sensitive and should be entered exactly as it appears here.*

IBM Micromedex® Drug Ref



- The **IBM Micromedex Drug Ref** app for Apple and Android devices is included with Micromedex Drug content subscription.
- You can access these apps via the App Store and Google Play®.
- You can activate the app by following the simple instructions below.

Simple instructions for installation:

Step 1

Visit the App Store from your device and search IBM Micromedex Drug Ref.

Step 2

From the App, select download / install the application. You may be prompted to enter your Apple or Google ID.

Step 3

The app will download to your app library, or directly to your device.

Step 4

Open the app. Enter the password **f9gSd3** to begin using **IBM Micromedex Drug Ref.** *The password is case- sensitive. Please enter it exactly as it appears here.*

IBM Micromedex® IV Comp.



- The **IBM Micromedex IV Comp.** app for Apple and Android devices is included with Micromedex IV Compatibility content subscription.
- With the IV Compatibility mobile app, clinicians can view Y- Site, Admixture, and Solutions results from the Trissel's 2 database.
- You can access these apps via the App Store (Apple devices), or Google Play® (Android devices).
- You can activate the app by following the simple instructions below.

Simple instructions for installation:

Step 1

Visit the App Store from your device and search IBM Micromedex IV Comp.

Step 2

From the App, select download / install the application. You may be prompted to enter your Apple or Google ID.

Step 3

The app will download to your app library, or directly to your device.

Step 4

Open the app. Enter the password **M7mehV** to begin using **IBM Micromedex IV Comp.** *The password is case- sensitive. Please enter it exactly as it appears here.*

Support details for Micromedex

Contacting IBM Watson Micromedex 24x7 Support

Facilitate the transition to value-based care with care delivery efficiency and performance improvement while advancing your strategic direction.

IBM Watson Health Micromedex Create a Case

Support: <https://www.ibm.com/support/pages/node/6210390>

IBM Watson Health Micromedex Phone Support:

U.S. and Canada: 1-877-843-6796

Global: 1-303-354-4100, Press option 2