



*Preceptor  
Handbook for DNP  
Students*

---

## TABLE OF CONTENTS

---

Description of the Program.....	3
Program Preceptor Guidelines .....	4
Code of Professional Conduct .....	7
Student Academic Integrity Policy .....	8
Program Outcomes.....	10
Curriculum Overview .....	11

For additional information on mentoring and coaching strategies, see  
[http://www.nonpf.org/?page=PreceptorPortal\\_Main](http://www.nonpf.org/?page=PreceptorPortal_Main)

Approved June 2006

Updated June 2009, June 2016, June 2018, January 2021

## DESCRIPTION OF THE DOCTOR OF NURSING PRACTICE PROGRAM

The Doctor of Nursing Practice (DNP) prepares graduates for a career as an advanced practice nurse with exceptional clinical and leadership skills. The student who attains a DNP degree becomes a specialized practice expert who demonstrates accountability and responsibility for the care of patients, populations and organizations/systems. The program is designed to expand breadth and depth in clinical practice and build entrepreneurial skill with a strong emphasis in healthcare leadership and entrepreneurship.

The DNP Program has two options: The post-MSN Doctor of Nursing Practice (DNP) degree and the BSN-DNP degree. The post-MSN DNP is a 44 credit hour program and applicants must be nationally certified as an FNP, AGNP, and/or PMHNP. The BSN-DNP program is comprised of 73 credit hours. Successful completion of the program will allow students in this track to sit for national certification as an FNP, AGNP, or PMHNP. Both programs required successful completion of 1000+ direct patient care hours.

The Doctor of Nursing Practice program at Washburn University is accredited by the Commission on Collegiate Nursing Education, (<http://www.ccnaccreditation.org>). The Higher Learning Commission and the Kansas State Board of Nursing have also granted accreditation for the DNP program.

The DNP curriculum builds upon the baccalaureate degree in nursing in order to develop an advanced practice nurse with a high level of expertise in clinical practice. All graduates possess advanced core knowledge to assess and manage health care within complex systems. The curriculum was developed using *The Essentials of Doctoral Education for Advanced Practice Nursing* (AACN, 2006) and *Criteria for Evaluation of Nurse Practitioner Programs* (NONPF, 2012) and adheres to guidelines provided by credentialing and regulating organizations while creating a flexible and contemporary graduate education.

**The Mission of the School of Nursing is to transform the professional nursing workforce to improve health, enhance the experience of care, and maximize the value of health services to a diverse population.**

## **GRADUATE PROGRAM PRECEPTOR GUIDELINES**

### Purpose

The purpose of the preceptor/faculty clinical arrangement is to provide a one-to-one relationship between an experienced APRN or a physician and a DNP nursing student in the clinical setting. Preceptors have the unique opportunity to facilitate an orientation and overview of the agency/facility and establish valuable learning experiences for students.

### Overview of the Precepted Experience

The clinical preceptor program provides flexible opportunities within the curriculum to achieve learning experiences in a one-to-one format. Prior to clinical placement, the DNP student has been prepared to practice clinical skills with preceptor supervision. Clinical faculty and the student work together to match the student with a preceptor. Orientation to the clinical experience is provided and includes the preceptor role, program requirements, expectations for oversight, and evaluation of the student. The faculty member and preceptor plan clinical activities to meet the needs and objectives of the student(s) as related to the course outcomes.

Each agency and the School of Nursing will agree on the parameters of the experience including the length of clinical experience, the number of students assigned to the agency/preceptor, and any other agency requirements. A contract between Washburn University and the respective agency is maintained at all times. Students may not begin a clinical rotation until all documentation is in place.

### Criteria for Selection of Preceptor

The following criteria are applied in the selection of preceptors:

1. Has a minimum of one-year experience in the advanced practice role and has one year experience at the agency;
2. Is currently licensed as an (a) advanced practice nurse, medical doctor or doctor of osteopathy in state where clinical practice experiences will be held
3. Carries own malpractice insurance;
4. Has an understanding and positive appreciation of learning and can create a setting that is effective and that will enhance student learning;
5. Possesses the knowledge and clinical skills that reflect excellence in health care delivery;
6. Is willing to and capable of teaching and advising students;
7. Is recognized as a role model among colleagues;
8. Possess effective communication and interpersonal skills;
9. Has the ability to identify student strengths and weaknesses and is willing to assist students in meeting goals and expectations; and
10. Has expressed interest in and is committed to the role of preceptor.
11. Clinical course coordinator prior to start of clinical practice experiences must approve all preceptors.

Note: It is highly recommended that the clinical practice experiences not be in a setting where the student has previously or is currently functioning in the RN role. However, if the student is going to complete their clinical rotation in their current place of employment, the course coordinator will meet with the student and preceptor to establish guidelines prior to the beginning of the clinical experience.

## **RESPONSIBILITY**

### Preceptor Responsibilities

1. Provides a resume to the School of Nursing. The resume must include name, credentials, contact information, license number, educational background and evidence of malpractice insurance.
2. Provides clinical experiences for a specified period as arranged with the clinical course coordinator.
3. Provides orientation to the agency.
4. Establishes a supportive relationship with the student(s) and helps them feel welcome and a part of the team.
5. Collaborates with students to develop learning experiences based on the student learning needs and goals and course outcomes.
6. Monitors clinical competencies of each student.
7. Provides regular constructive feedback to students.
8. Participates in regular virtual communication with course instructor.
9. Seeks solutions to clinical problems or issues related to student experiences and consults with faculty immediately when a problem arises.
10. Completes the mid-term and final written evaluation for the student's clinical performance.
11. Completes the evaluation for the orientation process.

### Faculty Responsibilities

1. Collaborates with student in selection of the preceptor.
2. Provides orientation for preceptors to include Preceptor Handbook, course description/outcomes, and faculty contact information.
3. Facilitates the relationship between preceptor and student.
4. Is available by pager or telephone when students are in the agency.
5. Maintains regularly scheduled contact with the preceptor to coordinate learning experiences, student schedule changes and student progress.
6. Provides timely feedback to students and preceptors for concerns expressed by preceptors.
7. Evaluates clinical site(s) and preceptors at the completion of each clinical practice experiences.
8. Is responsible for awarding the final course grade with input from the preceptor.
9. Maintains required documentation of preceptors and agencies in collaboration with SON staff.

## **RESPONSIBILITY CONTINUED**

### Student Responsibilities

1. Identifies individual learning goals based on course outcomes and is involved in self-directed learning.
2. Plans, with the preceptor and faculty, activities to meet these goals and outcomes.
3. Requests guidance and assistance from appropriate sources.
4. Adheres to the rules and regulations of the state Nurse Practice Act and follows the Code of
5. Professional Conduct required by the School of Nursing.
6. Is accountable in providing safe, competent care in the clinical setting.
7. Maintains compliance with agency requirements.
8. Meets with the preceptor and faculty at mutually agreed upon times.
9. Evaluates own clinical performance and responds appropriately to feedback from
10. The preceptor and faculty.
11. Provides feedback to faculty for evaluation of preceptor and clinical site by
12. Completing Preceptor Evaluation and Clinical/Agency Site Evaluation.

## **CODE OF PROFESSIONAL CONDUCT FOR NURSING STUDENTS**

The professional nurse is responsible for maintaining and promoting health, caring for people in acute and chronic illness, alleviating suffering whenever possible and providing supportive and restorative measures for individuals and families to realize their maximum health potential. Inherent in nursing is respect for life and the dignity and rights of all persons. Nursing practice is unrestricted by considerations of race, color, religion, age, national origin, ancestry, disability, sex, marital or parental status, sexual orientation, political affiliation or social status.

These fundamental beliefs are inherent in the profession of nursing. The development of a code of ethics is an essential characteristic of a profession and provides one means for the exercise of professional self-regulation. The conduct of nursing students is part of the evaluation process in nursing education.

This code of professional conduct specifies for nursing students what is meant by appropriate professional conduct and will be used as a means to better prepare graduates to enter the profession of nursing. The following list of behaviors will be incorporated into each nursing course and will be a part of every clinical evaluation.

Professional conduct for nursing students includes, but is not limited to, the following behaviors:

1. Students in the clinical setting are representing Washburn University School of Nursing as well as the profession of nursing. They will always present themselves in appropriate professional clothes with a name tag clearly visible.
2. Students will demonstrate physically and psychologically stable behavior so that clients can be the focus of care.
3. Students will communicate with clients, clinical agency personnel, other students and the faculty in a manner that is respectful, is receptive to feedback and promotes open communication.
4. Students will provide care that is client-centered and shows respect for human dignity and the uniqueness of the client, free from all bias and discrimination, and without consideration for personal attributes or the nature of health problems.
5. Students will maintain confidentiality of protected patient information.
6. Students, when acting in a professional capacity, will at all times, maintain standards of professional conduct.
7. Students will always place client care and safety as the primary concern in any clinical situation.
8. Students who are unable to attend class, clinical or client meeting, are responsible for contacting appropriate persons in a timely manner and arranging make up assignments as required.

## STUDENT ACADEMIC INTEGRITY POLICY

Academic integrity is essential for maintaining a standard of professional behavior expected of all students enrolled in the School of Nursing. Becoming a member of the School of Nursing obligates implicit and explicit adherence to academic integrity.

Academic integrity implies honesty in all aspects of the educational process and is essential for promotion of an optimum learning environment, and for the development of personal and professional responsibility and accountability in nursing students.

Students in the School of Nursing are expected to conduct themselves in a professional manner according to the ANA Code for Nurses (see Student Handbook) and to adhere to all School of Nursing and University policies in any endeavor associated with School of Nursing activities either on or off campus.

Dishonesty, disruption of learning experiences, or any other form of academic impropriety or misconduct will not be tolerated. A partial list of proscribed behaviors pertaining to academic misconduct in the School of Nursing is included below. See also the Washburn University Student Conduct Code (Washburn University Student Planner Handbook) and the Washburn University Academic Impropriety Policy <http://www.washburn.edu/faculty-staff/faculty-resources/faculty-handbook/faculty-handbook-section-7.html>

### Academic Improprieties

An academic impropriety is any student action that undermines, or could reasonably be interpreted as undermining, the presumption that the academic work being produced or submitted by a student is his or her own, or that undermines, or could reasonably be interpreted as undermining, the presumption that the student is not enjoying, or has not enjoyed, an unfair advantage over other students in the production of the work in question. Thus, an academic impropriety is any action by a student that either actually undermines, or could reasonably be interpreted as undermining, the validity of the basic presumption.

All academic improprieties are hereby officially forbidden.

Academic improprieties may or may not involve dishonesty. Accordingly, the claim or determination that a student has engaged in academically improper behavior does not always require the claim or determination that the student acted dishonestly.

**There are two kinds of academic improprieties: Academic irregularities and academic dishonesties.** Each kind is defined below.

All academic improprieties, whether irregularities or dishonesties, require appropriate academic action by the faculty member in whose course the impropriety takes place. Academic action is defined below. Academic dishonesties require, in addition, appropriate disciplinary action by the Dean of Students.

**Academic Irregularities** - An academic irregularity is any form of academic impropriety whose commission by a student does not by itself imply any dishonest motive or intent on the part of the student and which either is expressly described in this document or is both described and prohibited by the course instructor in a syllabus or other announcement.

Although academically irregular behavior does not necessarily involve dishonesty on the part of the student, it does not preclude it either. Thus, an instance of academic irregularity may subsequently be determined to be also an instance of academic dishonesty. The following actions, unless specifically authorized by the course's instructor, are considered academic irregularities:

- Failure to acknowledge the incorporation of another person's work into one's own, including the failure to properly identify as such material that is being paraphrased or quoted (plagiarism).
- Failure to document properly all works consulted, paraphrased, or quoted (plagiarism).
- Submitting the same work for more than one course, unless authorized to do so by the instructors of all the courses in question.
- Submitting work previously submitted by another student in an earlier semester.
- Submitting under one's name a research or term paper bought through the mail from "paper mills".

These examples are presented for guidance in defining acts of academic irregularity, which, if they are found to have occurred, require academic action, by the faculty in whose course they occurred.

**Academic Dishonesties** -An academic dishonesty is any form of academic impropriety whose commission by a student involves a dishonest motive or intent. The following actions are examples of academic dishonesty:

- Knowingly obtaining, using, buying, selling, transporting, or soliciting in whole or part the contents of, or information about, and unreleased examination, test, or quiz.
- Plagiarism, which shall mean the appropriation of another person's work, with or without that person's consent, and the unacknowledged incorporation of that work into one's own work offered for credit.
- Collusion, which shall mean the unauthorized collaboration with any other person in preparing work offered for credit.

This list of examples is not meant to be all-inclusive, but is presented for guidance in defining acts of academic dishonesty, which, if they are found to have occurred, require academic action, by the faculty in whose course they occurred.

Each student in the School of Nursing is responsible for adhering to these stipulations. Violations will be dealt with according to the guidelines in the *Washburn University Student Conduct Code and Washburn University Academic Impropriety Policy*.

<http://www.aanp.org/images/documents/education/PreceptorToolkit.pdf>

## **DOCTOR OF NURSING PRACTICE PROGRAM OUTCOMES**

At the completion of the nursing program, the learner will be able to:

1. Integrate nursing science with ethics, natural, social and organizational sciences for advanced nursing practice.
2. Support quality healthcare innovations through systems-level leadership.
3. Use evidence-based practice methods to optimize healthcare outcomes and reduce disparities.
4. Integrate technology with nursing practice to improve quality and accessibility of care.
5. Advocate for health care policies that seek to improve social justice, equity and ethical treatment.
6. Collaborate with intraprofessional and interdisciplinary teams to create innovation within complex healthcare systems.
7. Synthesize concepts of health promotion and disease prevention to evaluate interventions aimed to improve health indicators.
8. Demonstrate evidence-based competencies in advanced practice nursing as identified by the APRN consensus model.

## CURRICULUM OVERVIEW

The curriculum consists of online didactic courses supplemented with virtual class sessions, clinical experience, and three intensive on-campus seminars throughout each academic year. During these on-campus seminars, students participate in examinations, lectures, presentations, and skills demonstrations.

It is expected that a graduate of the Washburn University DNP Nurse Practitioner program will:

1. Integrate nursing science with ethics, natural, social and organizational sciences for advanced nursing practice.
2. Support quality healthcare innovations through systems-level leadership.
3. Use evidence-based practice methods to optimize healthcare outcomes and reduce disparities.
4. Integrate technology with nursing practice to improve quality and accessibility of care.
5. Advocate for health care policies that seek to improve social justice, equity and ethical treatment.
6. Collaborate with intraprofessional and interdisciplinary teams to create innovation within complex healthcare systems.
7. Synthesize concepts of health promotion and disease prevention to evaluate interventions aimed to improve health indicators.
8. Demonstrate evidence-based competencies in advanced practice nursing as identified by the APRN consensus model.

### Pre-Clinical Preparation:

Prior to clinical, students complete Advanced Pathophysiology and Advanced Pharmacology. Additionally, students must pass a demonstrated physical examination competency before proceeding on to clinical sites. Advanced Health Assessment and Differential Diagnosis begins in the fourth semester of the curriculum. Students complete two on-campus seminars to prepare them for continued health assessment learning in the clinical setting. During this class, students refine their history taking, physical assessment, problem focused exams, and documentation skills.

Clinical course work in practice sites spans several semesters. The curriculum is designed to provide learning activities that require the student to acquire critical thinking and analytical skills. Primary Care didactic classes provide common clinical content that is then divided into population specific modules: family, adult-gerontology, and psychiatric/mental health.