WINONA STATE UNIVERSITY

Adjunct Nursing Faculty Manual





Department of Nursing

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Welcome to the WSU Department of Nursing

Welcome to the intellectually stimulating, exciting, caring world of nursing education, where you have the opportunity to make a difference in the lives of student nurses! This manual was developed in order to provide easy access to informative materials that will be helpful for orienting to your role and as a future reference. We are excited to have you join the ranks of WSU nursing faculty who are improving our world by providing expert nursing care and educating the future of our profession!

In order to help prepare for your role as Adjunct faculty, we have prepared this manual, along with an orientation session for you to attend prior to your first clinical day with students. The orientation session provides specific information about WSU, the Department of Undergraduate Nursing (DUN), faculty & student policies with which you need to be familiar, as well as essential information for the nurse who is transitioning to the role of nurse educator.

In order to support your successful transition, the role of the **Adjunct Coordinator** (**AC**) has been created. Please utilize the AC as needed. Feel free to provide feedback on measures that the DUN can take to further assist in your success, as we are always looking to improve the experience of our Adjunct faculty.

MISSION

Grounded in an environment of scholarship, the mission of the WSU Department of Nursing is to educate knowledgeable **Caring, Ethical, Creative,** and **Accountable** nurse leaders who provide person- and relationship-centered care for individuals, families, groups, communities and populations in a diverse society. This mission is based on the beliefs that:

- 1. A caring, diverse, and respectful community provides the best environment for students to learn how to care for themselves and others;
- 2. Optimal learning to care for self and others occurs in a caring, diverse and respectful community;
- 3. Faculty and students are accountable for maintaining and modeling professional standards of moral, ethical, and legal conduct;
- 4. Recognizing and valuing human diversity is essential to person- and relationship- centered care:
- 5. Individuals have different ways of knowing and learning about the world;
- 6. Creativity and innovation contribute to continuous quality improvement and sustainability;
- 7. An enriched learning environment is the responsibility of faculty, staff, and students;
- 8. Effective nurse leaders engage in continuous professional development and lifelong learning;



PHILOSOPHY

The philosophy of the Department of Nursing states that the professional nurse provides care that is:

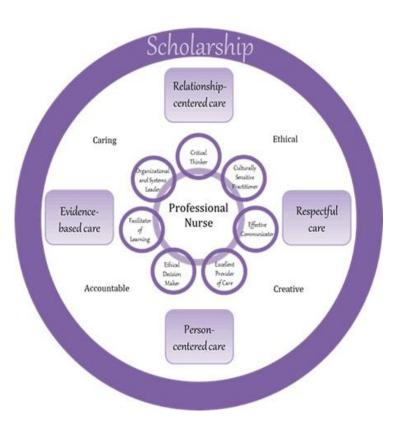
- 1. **Person-Centered.** Person-centered care is an approach in which individuals are viewed as whole persons. It involves advocacy, empowerment, and respecting the person's autonomy, voice, self-determination, and participation in decision-making. Persons are defined as the participants in nursing care or services. They may be individuals, families, groups, communities, aggregates, organizations, systems, and populations. Persons may seek or receive nursing interventions related to health promotion, health maintenance, disease prevention, illness management, and end-of-life care. Depending on the context or setting, persons may be referred to as patients, clients, residents, consumers, customers and/or organizations of nursing care or services.
- 2. **Relationship-Centered.** Relationship-centered care values and attends to the relationships that form the context of compassionate care, including those among and between:
 - a. Practitioners and recipients of care
 - b. Individuals as they care for themselves and others
 - c. Practitioners and communities in which they practice
 - d. Healthcare practitioners across various professions
 - e. Administrators and managers as they set the environment and resources for care
- 3. **Evidence-Based.** Evidence includes research findings and their interpretation, practitioner and consumer expertise and preferences. The nurse draws upon these types of evidence to inform critical thinking and decision-making.
- 4. **Respectful.** Respectful care is based upon mutual relationships that embrace diversity, and promote dignity and choice. Diversity includes the range of human variation that professional nurses encounter. Age, race, gender, disability, ethnicity, nationality, religious and spiritual beliefs, sexual orientation, political beliefs, economic status, native language, and geographical background are included.

The professional nurse achieves the following educational outcomes in relation to **seven key characteristics**:

- 1. **Critical Thinker:** Integrates questioning, analysis, synthesis, interpretation, inference, inductive and deductive reasoning, intuition, application and creativity to aid in clinical reasoning and to make appropriate clinical judgments.
- 2. **Culturally Sensitive Practitioner:** Demonstrates knowledge, understanding, and skill in providing culturally sensitive care to diverse individuals, families, and populations.
- 3. **Effective Communicator:** Demonstrates effective professional communication with persons, members of their support system, and interdisciplinary team members to build relationships that promote person- and relationship-centered care and improve outcomes.
- 4. **Excellent Provider of Care:** Provides safe, compassionate, person-centered, relationship-centered, evidenced-based, and respectful care to individuals, families, and populations across the lifespan and continuum of care.
- 5. **Ethical Decision Maker:** Demonstrates moral, ethical and legal conduct in practice.
- 6. **Facilitator of Learning:** Implements teaching and learning strategies to ensure the development of attitudes, knowledge and skills to maximize health outcomes. Promotes lifelong learning for self and others.
- 7. **Organizational and Systems Leader:** Applies leadership skills to manage environmental and system resources, within and across health care systems, to provide evidence-based nursing care that contributes to safe, high quality, patient outcomes and improvements in healthcare delivery.



These outcomes are contained in each specific Course Outline. These outlines are available on the corresponding D2L course site (https://winona.learn.minnstate.edu/).



Courses Utilizing Adjunct Faculty:

(Please log into D2L for further information for each course)

NURS 341 Therapeutic Applications of Nursing Skills & Health Assessment [Term 1 students]

Credit Hours: 4 SH—2 SH theory, 2 SH practicum

Course Description: Develops the skills and assessments necessary for nursing care of individuals and families in professional nursing practice.

NURS 343 Professional Practice I [Term 1 students]

Credit Hours: 5 SH--3 SH theory, 2 SH practicum

Course Description: Provides an introduction to the profession of nursing in the context of foundational concepts important to medical-surgical nursing. Focus is on developing knowledge, beginning clinical judgment skills, beginning communication skills, and the application of therapeutic interventions for diverse adult patients and their families in acute care settings.



NURS 352 Caring for the Older Adult [Term 2 students]

Credit Hours: 3 SH—2 SH theory, 1 SH practicum

Course Description: Examines the complexity of elder care, including factors contributing to longevity and health in old age as well as genetic predisposition, lifestyle, culture, and environment.

NURS 353 Professional Practice II [Term 2 students]

Credit Hours: 6 SH--3 SH theory, 3 SH practicum

Course Description: Focus will be on continued development of content knowledge, critical thinking, clinical reasoning, and clinical judgment skills. Emphasis will be on effective communication skills and application of therapeutic interventions that address the needs of a diverse adult patient population in acute care settings.

NURS 426 Clinical Prevention & Population Health I [Term 3 students]

Credit Hours: 4SH—2 SH theory, 2 SH practicum

Course Description: Introduces the core public health sciences and explores the principles and practices necessary for integrating clinical prevention and population health into nursing practice. Successful completion of this course means that students will be able to provide healthcare activities, which contribute to decreasing morbidity and mortality and improving quality of life in a diverse society.

NURS 443 Professional Practice III [Term 3 students]

Credit Hours: 3 SH Practicum

Course Description: This clinical course focuses on providing nursing care to individuals and families across the lifespan. This course emphasizes evidence-based practices, supporting and therapeutic care for childbearing and child-rearing families, and for individuals and families coping with acute and chronic illness, health promotion and disease prevention, and developmentally appropriate communication through site based and/or simulation learning.

NURS 453 Professional Practice IV [Term 4 students]

Credit Hours: 5 SH practicum

Course Description: This clinical course focuses on leadership and the development and provision of nursing care to individuals, families, and populations in a variety of settings. The course emphasizes evidence-based practice, clinical prevention, and population health.

NURS 454 Leadership in Professional Practice [Term 4 students]

Credit Hours: 4 SH—1 SH theory, 3 SH practicum

Course Description: Synthesis course encapsulating the essence of the baccalaureate nursing role. Students consolidate their understanding of evidence-based, quality and safe nursing care. They will collaborate within clinical settings to improve systems and patient outcomes.



Contact information for the Department of Nursing:

| Faculty | Title | Office | WSU Phone | Email |
|--|---|------------------------|---|--|
| Dr. Julie Anderson | Dean of School of Nursing & Health Sciences | Stark 301A | Winona: (507) 457-5122 Rochester: (507) 285-7349 | Julie.Anderson@winona.edu |
| Dr. Sandy Herron | Department Chairperson | Stark 325 | (507) 457.5136 | SHerron@winona.edu |
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| Brittany Borhart | Adjunct Coordinator (Rochester) | HS 025 | (320) 282-8569 | bboelter@winona.edu |
| Dr. Cyndy Jones | Program Coordinator (Winona) | Stark 311 | (507) 457-5132 | CJones@winona.edu |
| Dr. Megan Anibas | Clinical Placement Coordinator (Winona) | Stark 313 | (507) 457-5125 | MAnibas@winona.edu |
| Dr. Sara Laker & Elizabeth Green- Kronebusch | Adjunct Coordinators (Winona) | Stark 321 Stark 319 | (507) 961-5030 (563) 271-7447 | Slaker@winona.edu elizabeth.green@winona.edu |



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Nursing: Stark Hall, Room 303

Phone: (507) 457-5120 Fax: (507) 457-5550

http://www.winona.edu/nursingandhs/nursing.asp

Nursing Department Hours: 8 a.m.-4 p.m.

WSU Rochester:

Nursing: Health Sciences 107

859 30th Ave. SE Rochester, MN 55904 Phone: 507.285.7349 Fax: (507) 285.7138

Accreditation

The Commission on Collegiate Nursing Education (CCNE) has accredited the Winona State University Baccalaureate Degree Program in nursing through June 2023. The undergraduate nursing program maintains ongoing approval from the Minnesota Board of Nursing. Graduates are eligible to write the professional nurse licensure examination (NCLEX) and to apply for Public Health Nursing Certification. A student may be eligible to apply for school nursing certification by taking specified electives required by the State Department of Education. Graduates are capable of giving professional nursing care in first-level nursing positions and have a base for graduate study.

In fulfillment of CCNE accreditation requirements, the WSU Department of Nursing requires that all Adjunct Faculty complete the Adjunct Nurse Educator lessons as evidence of your professional preparation for your role as an educator. **The ANE lessons can be accessed below and completion will be tracked.** (https://www.softchalkcloud.com/lesson/serve/KyLgsaA6FoN9pM/html)





Policies & Procedures

- 1. WSU Email- all adjunct faculty members will be issued a WSU email address. During your contractual period, it is expected that you will utilize and check your WSU email for correspondence with students, other faculty, course coordinators and adjunct coordinators. This will be the standard method of communication.
- 2. **Faculty Illness** will result in cancellation of clinical experience (unless other arrangements can be made, with Department consultation). Faculty will be responsible to notify students <u>and</u> clinical unit of cancellation. The faculty member should then contact both the Adjunct Coordinator and the Course Coordinator. In most cases, one extra week has been allotted each semester for a make-up clinical experience. All changes in schedules will be communicated as early as possible to the group of students.
- 3. **Student Illness** Students will contact clinical instructor (faculty preference of call/text/email) and assigned clinical unit regarding absences (as applicable), with reason provided, no less than 4 hours prior to the start of the clinical experience. See Undergraduate Nursing Student Handbook for more details.
- 4. **Inclement Weather** In the event of impassable weather conditions, the adjunct faculty has the discretion to cancel the clinical experience or make arrangements for early release during the shift. The adjunct faculty will bear in mind the safety of the students, especially when the clinical site is outside of the Winona area. The adjunct faculty will be responsible to notify the clinical unit of the cancellation. If a clinical experience is cancelled due to inclement weather, the clinical faculty will notify the Adjunct Coordinator and Course Coordinator. In most cases, one extra week has been allotted each semester for a make-up clinical experience. All changes in schedules will be communicated as early as possible to the group of students.
- 5. **Academic Integrity** required throughout the university and the nursing program. Lack of integrity and dishonesty are violations that have very severe consequences, such as dismissal from the nursing program or potentially from the university.

 (https://www.winona.edu/sld/academicintegrity.asp)
- 6. Academic Standards & Progression- grade of "C" or above must be achieved in each required nursing course. Grades less than "C" constitute a failure in the course. Students will be required to repeat said course and adhere to any other remediation measures. Two failures in two different semesters will result in dismissal from the nursing program. Students must adhere to the university standards for retention and scholarship as stated in the current WSU Undergraduate Catalog (https://catalog.winona.edu/).
- 7. Clinical experiences in all of the Professional Practice courses are Pass or Fail. There is not a letter grade assigned. The adjunct faculty determines whether each student in their group passes/fails based on the Clinical Performance Rubric for each course. If a student is not progressing adequately, it is expected that the adjunct faculty will contact both the Adjunct Coordinator and the Course Coordinator in order provide resources to facilitate student success. If a student is performing in an unsafe manner during a clinical experience,



- this could be grounds for a failure and the need to repeat the experience; Adjunct and Course Coordinators are available to assist with this type of decision and further planning.
- 8. Students must maintain a level of health in which they are able to participate in clinical experiences and provide direct patient care. If there is a situation where it is questionable as to whether the student should be on the clinical unit, please contact the Adjunct Coordinator and/or the Course Coordinator. The student is expected to seek appropriate professional assistance as needed. Verification from an appropriate health care provider of adequate health to function appropriately and safely may be required.
- 9. Student's Rights- The student has rights, which must be protected. These include, but are not limited to: fair evaluations, advisement and academic counseling, assistance in identifying and meeting learning goals.
 - a. Each nursing student is **assigned a nursing faculty advisor**. The student is expected to utilize his/her advisor as a resource person. The student is free to request/select a different advisor in the event that he/she does not wish to meet with the assigned advisor.
 - b. WSU Student Grievance Procedure: the purpose of this procedure is to provide a method of processing a student grievance (written claim raised by a student, alleging improper, unfair, arbitrary, or discriminatory action by an employee involving the application of a specific provision of a university rule/regulation or a Minnesota State board policy or procedure). The first step in the grievance procedure is to meet informally with the faculty, staff, or administrator directly involved with the dispute, in an attempt to resolve the complaint/ grievance. (https://www.winona.edu/sld/studentgrievance.asp)
 ***Students have the right to seek a remedy for a dispute/ disagreement. No retaliation of any kind shall be taken against a student for participation in a complaint/ grievance.



Responsibilities of Adjunct Faculty

- I. Complete all Department of Nursing hiring requirements including:
 - **Resume** on file: copy must be sent to the Department Chairperson & Administrative Assistant to the Dean (Carrie).
 - MN/ WI Nursing license number for electronic license verification purposes (ALL Adjunct faculty must have MN RN license; those teaching clinical in WI will also need WI RN license)
 - Adjunct Faculty members are expected to maintain health requirements and provide evidence of compliance with these requirements as needed (e.g. CPR certification, Mantoux screening annually [or per workplace guidelines], Influenza vaccination annually, COVID vaccination, background study)—This information will be uploaded electronically to the TCCP Passport site, and updating will be the responsibility of each individual adjunct faculty member. (https://studentpassport.clinicalcoordination.org/)
 - WSU Photo Name badge to be worn for ALL clinical experiences- may be obtained at either Winona or Rochester WSU campus. Adjunct Coordinator is able to assist as needed.
 - Familiarize yourself with the **WSU Undergraduate Nursing Student Handbook**. (https://www.winona.edu/undergrad-nursing/student-resources.asp)
 - Complete Adjunct Nurse Educator (ANE) lessons prior to first day of clinical/ teaching. These ANE lessons can be accessed through the following link and **completion will be tracked.** (https://www.softchalkcloud.com/lesson/serve/KyLgsaA6FoN9pM/html)

II. Required Trainings for all NEW Employees: (See WSU Training & Developmenthttps://www.winona.edu/HR/training.asp for employees for assistance in accessing:

• Employee Learning Management [ELM] site (https://hub.selfservice.systems.state.mn.us/psp/hubss/SELFSERVICE/?cmd=login&languageCd=ENG&

III. Orientation to assigned clinical unit: once you have received your clinical unit assignment, it is expected that you will be in contact with the Nurse Manager (NM)/Patient Care Supervisor (PCS)/Nurse Educator (NE) for said unit. If you need assistance with this process or with obtaining contact information, please contact the Adjunct Coordinator (AC). PLEASE COMPLETE THE FOLLOWING TASKS:

- 1. Once WSU contract is in effect, schedule a time to orient to the unit with the NM/NE of the unit. May be required to shadow staff nurse to assist with familiarization on unit
 - **EMR training may be necessary**, specific to your clinical agency (unless you are a current employee). Please complete the EMR training in a timely manner to ensure that you are able to utilize the EMR. Some trainings have been made virtual.
 - **EMR training for your students may be necessary;** it is expected that you may need to assist or facilitate this training for students and plan to assist with documentation efforts on the patient care unit. Some trainings have been made virtual.
- 2. Provide the NM/NE with a clinical schedule and contact information for you and your clinical group. The Administrative Assistant in the Department of Nursing will share clinical objectives with the unit.
 - 3. Introduction of self to personnel on the unit, and assist with introduction of students within group
- 4. Become familiar with unit policies/routines/charting
- 5. Share student names/schedules/your contact information with unit



6. Utilize a Student Assignment Sheet- some facilities have designated form otherwise we have included an example of a Student Assignment Sheet (**Appendix C**).



IV. Information related to your affiliated course:

Course Information and Teaching Assignment

A. Course Syllabus, Handouts, Forms & Tools

- Course Outline (D2L)
- Course Schedule (D2L)
- Clinical Assignment and list of students (D2L)

B. Textbooks

• Provided on an as needed basis (Access to Pageburst online textbooks available from Adjunct Coordinator)

C. Cooperating Agencies (AC to assist PRN)

- Unit specific orientation- based on agency requirements
 - Shadowing for 4-8 hours may be required if you are new to a clinical unit
 - Shadowing may not be needed if you have floated to clinical unit in past year
- Unit Contacts
- Unit Policies & routines

D. Student Learning and Evaluation

- Assignments related to clinical experiences (D2L)
- Grading recommendations and examples (D2L)

E. Student Clinical Orientation

- Computer access (username & password)
- EMR orientation
- Medication administration procedure (See 7 Safety Checks document- **Appendix D**)
- Parking/ meals/ dress code

F. D2L Access to Course Documents and Rubrics

- https://winona.learn.minnstate.edu/
- Course should be listed within current semester under "My Courses." Click on this link to enter the course page. Navigate through pages to familiarize yourself with the content. Main D2L areas: Materials- Content; Communication- Classlist; Assessments- Assignments & Grades

G. Student Performance Evaluation

- Ongoing communication throughout the semester with Course Coordinator/Adjunct Coordinator, r/t deficiencies in student performance or need for remediation
- Completed 2x per semester: **Midterm** (informal) & upon **completion** (formal, with signatures) of clinical experiences
- Performance Evaluations are to be submitted to the Course Coordinator within 1 week of the final clinical experience.
- Performance Evaluation rubric- found under Content within D2L Course Website
- Remediation issues (extra lab time, simulation, Performance Improvement Plan- Appendix B)
- **H. Faculty Illness or absence** See Policies. If more than one occurrence, please alert Adjunct Coordinator/Course Coordinator to determine measures to be taken to ensure student success throughout clinical experience.
- I. Communication ongoing with Adjunct Coordinator & Course Coordinator. Establish method of preferred communication with your student group. Keep lines of communication open with assigned clinical unit and leaders.



J. Faculty Dress code- adjunct faculty participating in clinical experiences may wear purple scrubs. You may choose to wear purple top/purple bottoms/both purple tops & bottoms. Faculty can also choose to wear professional dress with a white lab coat. Your attire should distinguish you from the student uniform. Please also wear your WSU photo name badge for **ALL** clinical experiences.

K. Incident Reporting – per clinical facility guidelines and WSU guidelines. DO NOT INCLUDE IDENTIFYING PATIENT DATA. Please see **Appendix G** for a copy of this Report.

***Please inform the Course Coordinator /Adjunct Coordinator immediately. MUST complete State of MN General Liability Incident Report. A copy of this report should be submitted to the Course Coordinator/Adjunct Coordinator who will facilitate submission to WSU Legal Affairs Office.

V. Role conflict

During the time that you are contracted as an adjunct faculty member, you are an employee of both Winona State University and the entire MinnState system. You may also be employed by an outside agency while fulfilling your contractual duties for WSU. It is the expectation that while performing supervision of students in an outside facility (acute/long term/community), your priority will be the experience of the WSU student nurses. A WSU photo name badge will be provided to you and is expected to be worn to ALL clinical experiences. This name badge will indicate your primary purpose for being on the clinical unit to the staff at the clinical facility. As a role model for nursing students, please establish appropriate boundaries with the unit staff, especially if this is a unit that you serve in another professional role.

VI. Evaluation of Adjunct Faculty

Adjunct faculty and all nursing faculty are evaluated by students at the end of each semester. Please see **Appendix F** for a sample of a Student Evaluation of Clinical Instructor form. You may also choose to administer your own evaluations utilizing an on-line survey website (Qualtrics, Survey Monkey, etc.).

VII. Advantages of being an Adjunct Faculty Member

- 1. WSU Fitness Center Membership available to you and your spouse.
- 2. Contributing to the development of competent, confident nurses for the future of our profession.
- 3. Job satisfaction related to a renewed interest in learning, improvement in teaching/coaching skills, and the opportunity to stay current in nursing knowledge.
- 4. Depending on the number of credits/ courses that you teach, you may be eligible for tuition reimbursement benefits. Please contact Human Resources (https://www.winona.edu/hr/newemployees.asp).
 - ***Adjunct faculty members receiving a Bateman Peacock scholarship from Mayo Clinic are not eligible for WSU benefits.



VIII. Supervision of Students in Clinical

- 1. The adjunct faculty is responsible for the instruction and supervision of students in the clinical area. The adjunct faculty is also responsible for the provision of learning experiences that facilitate application and integration of theoretical principles and active participation and experience in patient care management. During clinical experiences the **focus for the students should be on providing direct patient care** and being an active participant on the clinical unit; observation activities and alternate experiences should be kept to a minimum. The instructor is also responsible for ensuring patient safety and for the school's compliance with policies established by the clinical agency. Students may not take verbal orders, sign off ANY orders, or witness narcotic wasting. Please see **Appendix E** for a list of guidelines.
- 2. It is the expectation of WSU Department of Nursing that all adjunct faculty will **actively** supervise students during their clinical experiences. According to the MN Nurse Practice Act, revised in 2013, "Supervision means the guidance by a registered nurse in the accomplishment of a nursing task or activity. Supervision consists of monitoring, as well as establishing, the initial direction, delegating, setting expectations, directing activities and courses of action, evaluating, and changing a course of action (Subd. 23)." Active supervision involves:
 - Directly teach expected behaviors and routines for specific clinical setting
 - Pre-correct, remind, and prompt expected behavior and routine before and while on the clinical unit.
 - Remain visible on the unit by continuously moving, scanning area, and interacting with as many different students as possible.
 - Provide specific acknowledgements and contextually appropriate positive reinforcement for displays of expected behavior and routines.
 - Being the primary supervisor of the care provided by the student, so that you can accurately evaluate their clinical performance (Unit RNs are able to supervise students performing cares, but this should be the exception, as the clinical instructor is the preferred supervisor)
 - Being a support person to both the students and the staff by assisting with patient care when able
- 3. The instructor is responsible for maintaining open communication with the staff nurses and nurse manager on the unit by discussing clinical objectives and clarifying the activities of the students prior to the clinical experience. It is recommended to post the student assignments for the day with the staff/charge nurse, and perhaps put a note as to which students will be administering medications on the given shift. You may also want to give a list of student assignments to the patient care assistants.
- 4. Patient Assignments
 - a. When making patient assignments, it is a good idea to confer with the staff nurses and/or charge nurse in an effort to create the most positive experience for the student. On some units, staffing assignments may be influenced by student assignments, so good communication with the staff nurses is very important.
 - b. Some clinical units have a defined Student Assignment Forms. If there is not a designated form, you may utilize the Clinical Assignment Sheet (**Appendix C**).
- 5. Medication Administration
 - a. Students are expected to pass medications initially with their clinical instructors to assure that they are proficient. Utilization of the "7 Safety Checks" document will guide the clinical instructor's evaluation of the student. After the student is deemed



proficient and at the clinical instructor's approval, the students are then able to pass medications with an assigned RN. If necessary, the "7 Safety Checks" document can be shared with unit RNs to ensure patient safety and continuity of administration (**Appendix D**).

b. Clinical instructors are responsible for working with students who need extra education with medication administration and should be checking with the staff RNs throughout clinical time to assess student's progress and to see if there are any concerns with the students who are giving medications. [Students are NOT granted access to the Pyxis machines]

6. Student errors in clinical

- a. In the case of a medication error, the instructor, the student, and the staff nurse should consult with the patient's physician to correct the error and ensure **patient safety**. Please also follow any Event Reporting guidelines of the specific agency.
- b. Appropriate documentation is essential for the student's evaluation and for instances in which the mistake affects patient care. Medication errors or issues involving patient safety should be discussed with the Course Coordinator & Adjunct Coordinator.

The First Clinical Day

The initial meeting with the student group sets the tone for the entire clinical experience. To be effective, the clinical instructor should make clear the structure of the learning experience and the expectations. These expectations can be presented as professional behaviors observed by all nurses in their practice and include:

- i. Accountability
- ii. Honesty in patient care
- iii. Punctuality
- iv. Attendance
- v. Responsibility (being prepared for clinical, actively participating, completing assignments in a timely manner, maintaining safety)
- vi. Professional decorum (adherence to dress code, collegiality and respect, confidentiality)

Things to encourage when students have down time:

- a. Answer call lights, offer comfort measures e.g. hand massage, back rub
- b. Ask your supervising nurse if you can help with other patients
- c. Look up medications with which you are not familiar, look at most recent lab values
- d. Check out the menu and supplies in the kitchen, tidy your patient's room
- e. Look at patient education information for specific conditions, investigate recreational opportunities available to your patients (TV, Video, newspapers, books, games)
- f. Talk to the unit secretary or charge RN about their role respecting their time constraints
- g. Offer to take your patient for a walk outside/to the chapel/around the building (if appropriate)



Teaching strategies for the clinical experience

Pre-conference

- I. This is useful for the instructor to answer questions, provide a review of what is expected for the day, and to talk with the students to decrease student anxiety levels.
- II. This time is useful to assist the student in organizing their day and prioritizing the care they must give.

The clinical day

The structure of the clinical day will vary according to the course, the course objectives, and the level of the student.

Teaching methods:

- I. Demonstration
 - a. The instructor explains the concept, shows the student how to apply the concept or perform the procedure, then elicits a comparable performance from the student
- II. Discussion & questioning
 - a. Instructors ask questions of the students, students ask questions of the instructor. Skilled questioning stimulates the discovery of the idea or answer by the student.
- III. Observation only assignments (to be kept to a minimum)
 - a. Students are assigned to observe various aspects of health care. This assignment should be guided by specific objectives.
 - b. Individual instructors should NOT initiate any observations within the clinical setting. All observation opportunities will be disseminated from the Course Coordinator, with input from all faculty within the Department of Nursing.
- IV. Clinical logs or journals
 - a. The student is asked to write notes about the clinical day. This may be based on assigned topics to address, such as skills they performed, or reactions to care provided.
- V. Nursing rounds
 - a. The purpose of nursing rounds is to expose learners to more nursing situations and to encourage them to consult with each other in planning and evaluating patient care. Each student is asked to share a verbal report of their patient situation, utilizing SBAR format whenever possible.

Post-conference

- I. This can be an ideal opportunity for pointing out application of theory to practice, and for evaluating nursing care. The post-conference session should be guided by the <u>Student Learning Outcomes</u> (see below), so that this time does not result in an unstructured summary of the day. These outcomes are outlined for each specific course within the Course Syllabus on D2L course site. See below for examples of how students may meet these outcomes.
- II. The primary topic of discussion should be congruent with the clinical objectives or the topic in the theory portion of the course. Please refer to D2L course content for schedule of topics. Other ways of structuring this session may include having the student evaluate their care and give rationales for their nursing interventions.



Role modeling in the clinical setting

❖ Below are the seven major outcomes that must be achieved by nursing students within the WSU nursing program. It is suggested that instructors consider which behaviors they will focus on, how these can be demonstrated, and then provide positive feedback to the student when the behaviors are exhibited. These behavior clusters are:

Critical Thinker

- Listens to change of shift reports
- o Asks questions regarding patient's condition
- o Demonstrates problem-solving ability in the clinical setting

Culturally Sensitive Practitioner

- Uses therapeutic communication skills with patients
- o Demonstrates caring attitude toward patients
- o Demonstrates a caring attitude toward peers/staff

Effective Communicator

- o Interacts with physicians in a confident manner
- o Displays a sense of humor in appropriate context
- Appears to have respect for agency personnel
- o Identifies self to patients when first meeting them

***** Excellent Provider of Care

- o Demonstrates the use of equipment unique to the clinical setting
- o Demonstrates nursing care procedures
- o Demonstrates up-to-date and evidence-based nursing practice
- o Demonstrates ability to care for patients' needs
- o "Pitches in" when needed to assist others

Ethical Decision Maker

- o Keeps confidential information to self
- Demonstrates accountability for own actions

***** Facilitator of Learning

- o Provides a positive atmosphere for students to learn
- o Listens to students' point of view
- o Gives positive feedback
- o Is flexible when the situation requires a different approach

Organizational and Systems Leader

- o Demonstrates the use of equipment unique to the clinical setting
- o Reports clinical data to staff personnel in a timely fashion
- Is neat and clean in personal appearance
- o Is organized in the clinical setting
- o Demonstrates an enthusiastic attitude toward nursing



Evaluating the clinical performance

Each course has objectives that are congruent with the program mission, philosophy, and expected outcomes. The method of evaluation of the student's clinical performance may vary somewhat, but there is consistency within the program for accreditation purposes. Each Course Coordinator should carefully review the clinical performance documentation with all instructors teaching in the clinical course for consistency.

Feedback should be given to the students on a regular basis. If a student is unsafe, a private conversation is held with the student to discuss the instructor's concerns. Appropriate documentation of this conversation is also very important and necessary. Documentation should clearly describe the unsafe practice, the objective(s) not met, the actual consequences to the patient, consequences if the student does not meet the objective(s), and the student's comments. Students who are not meeting the course objectives need to be aware of this as soon as possible, and appropriate documentation should be initiated. One strategy to assist the student is to work with the student to develop a specific plan for their improved performance and have the student sign this plan. You are encouraged to utilize the form titled **Performance Improvement Plan (Appendix B)**.

- ❖ Anecdotal notes are helpful to keep track of student performance. It is important to record both strengths and weaknesses, and to make notes on all students, not just the weaker students. Keeping notes on only the students with problems could be seen as discriminatory. Weekly notes are also helpful when completing Performance Evaluations at midterm and at the completion of clinical experiences.
- ❖ Formative evaluation is ongoing feedback given throughout the semester. Formative feedback may be given orally or in writing. Formative evaluation is the basis for summative evaluation.
- Summative evaluation is the summary evaluation given at the end of clinical experience. Summative evaluation results in a grade of some type being given (Clinical experiences are Pass/Fail). Clinical evaluation tools may differ among terms & courses, but all contain the Seven Key Characteristics, which evaluate the extent to which students have achieved course outcomes.
- * Evaluation data may be gathered from several sources. Of course the instructor's observation of the student will be included, but the instructor may also ask the assigned patient broad questions to elicit data about the student's overall interaction. The instructor may also ask the staff nurse that worked with the student for informal input. Learner self-evaluations are also very useful. Students can be asked to grade themselves for the day's experience using the same tool the instructor uses, and provide rationales for their self-reported grade. This can be a valuable tool to promote reflection and critical analysis of self-performance.

On behalf of the Winona State University Department of Nursing, **THANK YOU** for your time and commitment to the role of adjunct clinical instructor this semester for our WSU nursing students. We sincerely appreciate the energy and professional influence you will share with our WSU students. Your dedication to preparing student nurses is essential to ensure a caring and competent nursing workforce!

Without your efforts, the profession would not continue to move forward in exciting and wonderful ways. We are proud to have you as a member of this esteemed nursing program and appreciate all that you do. We look forward to working with you again and again!



Appendix A: Orientation Checklist

Department of Nursing

Adjunct Clinical Faculty Orientation Checklist

| Adjunct Clinical Faculty Orientation Checklist Date | | | | | |
|---|--|-----------|--|--|--|
| Orientation Items | Resources | Completed | | | |
| Orientation to Clinical Faculty role | ~~~~~~~ | | | | |
| Adjunct Orientation on campus (except Bateman) | AC | | | | |
| Expectations of Faculty role (active supervision, perform skills, review all documentation, med administration, etc.) | Manual- p. 11-15 | | | | |
| Expectations for level of students (level of independence, professional behavior etc.) | CC / AC | | | | |
| Course Coordinator contact information | CC/AC to initiate contact | | | | |
| Contact info for department | Manual- p. 7 | | | | |
| Policies/Procedures for clinical experiences | Manual- p. 9-10 | | | | |
| Undergraduate Nursing Student Handbook | Link included p. 11 | | | | |
| Agency Orientation/ EMR training/ Facility Name Badge | CC / AC / Clinical agency | | | | |
| M#, Pyxis access | CPC/ Clinical agency | | | | |
| Unit Routine (clinical unit) | Clinical agency | | | | |
| Orientation to clinical unit (Shadow if 1st time on unit) | CPC/Arrange with Unit NM/NES | | | | |
| Orientate students to clinical unit | Clinical agency; utilize Float routine, scavenger hunt, student assignment sheet | | | | |
| Post-conference room reservation | CPC | | | | |
| Orientation to the University & Department | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | | |
| Processing of Contract (copy sent to employee) | Human Resources | | | | |
| Program Mission/Philosophy/Student Outcomes | Manual- p. 3-5 | | | | |
| Computer access (Email, Warrior ID, StarID) | Human Resources | | | | |
| WSU Faculty Photo Name badge (Campus Card Ofc) | AC | | | | |
| Tour of Department (as needed) | AC/CC | | | | |
| Orientation to the Course | ~~~~~~~ | | | | |
| D2L access for affiliated course | CC / AC | | | | |
| Course content | D2L/ CC | | | | |
| Course outline & Schedule | D2L/ CC | | | | |
| Course specific assignments (examples avail.) | D2L/CC | | | | |
| Names & Email Addresses of Students | D2L/ CC/ AC | | | | |
| Invitations to scheduled course meetings | CC | | | | |
| Grading criteria/rubrics | D2L/CC | | | | |
| Online Textbooks (upon request) | AC | | | | |
| Coordinator Site visits clinical sites PRN | AC/CC | | | | |
| Role of Adjunct Coordinator | AC | | | | |

CC: Course Coordinator
AC: Adjunct Coordinator
CPC: Clinical Placement Coordinator
D2L: https://winona.learn.minnstate.edu/



Appendix B: Performance Improvement Plan (PIP)

Please follow the following progression in the event that a student indicates the need for a PIP. The form can be found on the following page. These forms are meant to assist the students with remediation efforts so that they can ultimately be successful nursing students. When completing the PIP, please be sure to use clear, concise statements, without including opinions. If you need assistance with this process, please contact the Adjunct Coordinator, who would be happy to provide guidance and facilitation.

Copies of PIP sent electronically to:

- 1. Student
- 2. Advisor
- 3. Progression (Chair)

PIP (hard copy) is placed in the student's file. Student does have the right to append a statement

Meeting with student and appropriate notifications made (CC/AC)

PIP is shared with student's Academic Advisor, who also will sign the document

PIP completed and signed by faculty member who witnessed incident, with development of Plan for F/U

PIP is shared with student and signed by student



WINONA STATE UNIVERSITY College of Nursing and Health Sciences Department of Nursing

PERFORMANCE IMPROVEMENT PLAN

| Name of Student: | |
|---|---|
| Name of Faculty Member: | |
| Date of Behavior: | |
| Description of Unsatisfactory Behavior: | |
| | |
| | |
| | |
| | |
| Student Learning Outcomes: Please mark which ou | utcomes are affected by this student's behavior: |
| Critical Thinker | Ethical Decision Maker |
| Culturally Sensitive PractitionerEffective Communicator | Facilitator of LearnerOrganizational & Systems Leader |
| Excellent Provider of Care | |
| Plan for Follow-up: | |
| | |
| | |
| | |
| | |
| Student Signature: | |
| Faculty Signature: | Date: |
| Academic Advisor Informed: | Date: |
| | |
| Copy to:Progression Chair | |
| Copy in File Copy to Student | |
| Copy to StudentCopy to Program Coordinator | |



BSN/BAN students eligible to give meds with staff RN

AD RN students eligible to give meds with staff RN

during 4th semester rotation

2nd clinical Rotation in

instructor's approval

institution under

Appendix C: Example Clinical Assignment Sheet

Nursing Program:

Luther College BAN

Department of Nursing Mayo Clinic - Rochester **Education and Professional Development Division** STUDENT ASSIGNMENT SHEET

| University of Minnesota – Roch Rochester Community Technica Rochester Community Technica Winona State University Roche Winona State University Winor Viterbo University Other | al College AD RN Instructor: al College LPN ster BSN Phone Number | | during 4" semester rotation within the institution <u>under</u> <u>instructor's approval</u> LPN students eligible to give meds with staff RN during final rotation (June) under <u>instructors</u> approval |
|---|---|-------|---|
| Student's Name | Patient Name & Room No. | Notes | Medications RN/Instructor |
| | | | |
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| | | | 8 |
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| | | | 8 |

Appendix D: Medication Administration Safety Checks

| Sta | Seven Safety Checks Be prepared to discuss these checks with your staff nurse, preceptor or faculty ff nurse, preceptor or faculty must be present throughout the entire medication administration process |
|----------------------------|--|
| Right Medication | Does this medication match the order and Medication Administration Record (MAR)? Was it reviewed by a staff preceptor or faculty? Is this a medication that students are allowed to give (e.g., IV chemotherapy must be given by specially trained RN)? |
| Right Indication | Why is this medication indicated for your patient? What will you assess? How will you know if the medication is helping the patient? What kinds of side effects will you assess for? What will you teach the patient regarding this medication using Mayo-approved patient education resources? Is the patient allergic to this medication? |
| Right Dosage of Medication | Does the dosage of medication you are going to give match the dosage of medication ordered? Is this dosage appropriate for this patient? |
| Right Route | What is the route ordered for this medication (e.g., PO, IV push/piggyback, IM, SQ)? Is the route appropriate for the patient's condition (e.g., patient was NPO but is now eating and can take PO versus IV)? Is the ordered route approved for this medication? If IV, Is the pump programmed correctly? |
| Right Time | Does the time ordered match the time you are going to give the medication? Is this a PRN drug? If so, has sufficient time passed since the last administration? |
| Right Patient | Use two-patient identifier Use Bar Code Medication Administration, where applicable |
| Right Documentation | Explain to your staff nurse, preceptor, or faculty what you are going to do to document. |



Appendix E: Guidelines for Student Nurses (example)

This list pertains to nursing students participating in clinicals at Mayo Clinic and includes students in traditional clinical, capstones/preceptorships and Dedicated Education Units (DEUs). There are separate guidelines provided for Summer IIIs, Nurse Technicians, and Nurse Interns; therefore, this list does not apply to those groups.

Students may perform skills/procedures for which they have received academic preparation and have been deemed clinically competent as designated by their clinical instructor, preceptor, and/or Clinical Nurse Teacher (CNT). The nurse preceptor, CNT, staff nurse, or nursing instructor **must be present throughout the entire medication administration process** for every medication the student administers.

- Please note, this is not an exhaustive list, there may be other skills that the student should perform at the discretion of the preceptor, CNT, staff nurse, or instructor. They should not perform any skill that requires specialty training and/ or certification of nurses.
- The student can observe these skills being performed, unless there are extenuating circumstances, such as patient/ family refusal, infection control issues, or too many people in the room.

Students may NOT perform the following skills (even under the supervision of a nurse): Medications

- Administer the following medications: Calcium injection, chemotherapeutic medications (parenteral & oral), concentrated electrolyte injections (see list of high alert medication resource), epoprostenol injection (Flolan), neuromuscular blocking agents, Treprostinil injection (Remodulin), anesthetic agents, ketamine, propofol, etomidate.
- Students may not act as a secondary licensed witness for medication administration, or any other task

Equipment

- Initiate patient restraints or seclusion
- Point-of-care testing (glucometer): Mayo employees and clinical instructors who have received the training and have maintained competency are allowed
- Remove any type of wound drain (Penrose, JP, Duval, etc.)
- Maintenance of mechanical ventilators and external/ transvenous pacers
- Pregnancy test point-of-care
- Change batteries in Ventricular Assist Device (VAD)/ artificial heart

Procedures

- Assist with central venous catheter insertion
- Access or de-access implanted venous access devices (IVADs)
- Remove central lines
- Administer blood products
- Perform venipuncture for blood draws
- Scrub in for surgical procedures
- Interpret ECG or fetal monitor tracings

Orders

- Take verbal/telephone orders, or critical lab value results
- Verify or witness informed consent
- · Accompany transportation of patients who require licensed personnel supervision

Appendix F: Sample Student Evaluation of Clinical Instructor

Instructions to students: Please complete the following survey. You are evaluating clinical teaching effectiveness.

| 1 | Was available to the students in the clinical area | 00000 |
|----|---|--|
| 2 | Gave individual help when I requested it | 00000 |
| 3 | Showed enthusiasm for the course and interest in the students | 00000 |
| 4 | Encouraged student participation and discussion during conference time | 00000 |
| 5 | Encouraged independence in managing client care where appropriate | $\circ \circ $ |
| | Provided feedback (assignments, written, verbal) that was timely and constructive, which helped define progress, strengths, and areas for improvement | 00000 |
| 8 | Promoted student writing ability through computer documentation and assignments | 00000 |
| 9 | Made resources and optional resource readings available as appropriate | 00000 |
| 1(| Defined student responsibilities to me and the clinical agency | 00000 |
| 11 | Demonstrated clinical expertise about client intervention | 0000 |
| 12 | Used alternative teaching methods when needed to stress important information (i.e. assignments, discussion, demonstration) | 00000 |
| 13 | Encouraged independent thinking and learning | 00000 |
| | | |



^{**}Responses range from "Strongly Disagree" to "Strongly Agree," with a neutral option in the center.

Appendix G: WSU Incident Report- https://www.winona.edu/undergrad-nursing/media/gl_incident_report.pdf



State of Minnesota General Liability Incident Report

(To be completed by appropriate <u>agency employees.</u>
For cases not involving an automobile)

| DEPARTMENT OF ADMINISTRA | ATION | | | | |
|--|---|--------------------------------------|---|--|--|
| Name of Agency: | | | Name of Contact Person (name, phone and email): | | |
| Winona State University | | Lori Mikl, Director of Legal Affairs | | | |
| | | (507) | 457-2766; lmikl@winona.edu | | |
| Date of Accident (mm/dd/yy): | Time (am/pm): | | Weather Conditions | | |
| | | | | | |
| Description of Incident (how, where, why): | | | | | |
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| Extent of Damage to Property | | | | | |
| Zinem er Zummge ie rreperi, | | | | | |
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| Extent of Injury to Person(s): | | | | | |
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| Person(s) Injured (names, addresses and telep | phone number): | | | | |
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| | | | | | |
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| Witnesses (names, addresses and phone numbers): | | | | | |
| (| Willesses (maines), addresses and phone hamoers). | | | | |
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| at hath a state of the | | l, | 16.46.1.1.10 | | |
| Submit Claim to: risk.management@state: Risk Management Divisi | | Person co | ompleting the form name, phone, and email): | | |
| 310 Centennial Office Br 658 Cedar Street | uilding | | | | |
| St. Paul, MN. 55155 | | A ddisia | al Comments: | | |
| Phone 651-201-2592, Fa | ax 651-297-7715 | Addition | ai Comments: | | |
| Emergency Reporting—After Hours and Weekends | | | | | |
| Gallagher Bassett Phone (866) 489-5797, Fax (800) 748-6459 Email tnwclaims@tnwine.com | | | | | |
| GB Client Number 004276 | | | | | |



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