

**UNIVERSITY/COLLEGE
EXPECTATIONS &
PREPARATION
FOR CLINICAL FACULTY**



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NURSE PRACTICE ACT

- **KNOW WHAT THE NURSE PRACTICE ACT SAYS!**
- **60-2-103: FACULTY AND PRECEPTOR QUALIFICATIONS**
- **60-2-105: CLINICAL RESOURCES**

WELCOME TO ACADEMIA!

- **EDUCATIONAL REQUIREMENTS:**

- **RN PROGRAMS: GRADUATE DEGREE REQUIRED**

- **PN PROGRAMS: BACCALAUREATE DEGREE REQUIRED**

SCHOOLS CAN REQUEST A FACULTY HIRE EXCEPTION.

RESOURCES

- **STUDENT TO FACULTY RATIO IN KANSAS: 1:10**
- **OTHER RESOURCES FOR CLINICAL EDUCATORS:**
 - **ANA CODE OF ETHICS**
[HTTP://WWW.NURSINGWORLD.ORG/CODEOFETHICS](http://www.nursingworld.org/codeofethics)
 - **NATIONAL EDUCATION ASSOCIATION STATEMENTS**
[HTTP://WWW.NEA.ORG/HOME/19583.HTM](http://www.nea.org/home/19583.htm)
 - **AMERICAN ASSOCIATION OF UNIVERSITY PROFESSORS (AAUP)**
[HTTP://WWW.AAUP.ORG/](http://www.aaup.org/)
 - **AMERICAN ASSOCIATION COLLEGES OF NURSING (AACN)**
[HTTP://WWW.AACN.NCHE.EDU/FACULTY/TOOL-KITS](http://www.aacn.nche.edu/faculty/tool-kits)

NOVICE TO EXPERT

- THINK ABOUT WHAT IT IS LIKE TO MOVE FROM A ROLE OF “EXPERT CLINICIAN” TO THE ROLE OF A NOVICE NURSE EDUCATOR”
- POSITIVE????
- NEGATIVE????

TRANSITION FROM CLINICIAN TO NURSE EDUCATOR

- STUDIES HAVE POINTED OUT THAT NURSE CLINICIANS WHO LEAVE THE SECURITY OF THEIR CLINICAL POSITION TO ASSUME A NURSE EDUCATOR ROLE OFTEN DESCRIBE THEIR EXPERIENCE AS STRESSFUL, FRIGHTENING, AND OVERWHELMING, WITH FEELINGS OF APPREHENSION, AMBIVALENCE, AND UNCERTAINTY ABOUT THEIR CAREER MOVE.
- HOW CAN WE HELP THIS?

WELCOME TO ACADEMIA!

What are the expectations for the role of
faculty member?

TEACHING

SCHOLARSHIP

SERVICE

What do these mean?

CLINICAL EXPERT TO NOVICE EDUCATOR

- 8 CORE COMPETENCIES (NLN)

- FACILITATE LEARNING
- FACILITATE LEARNER DEVELOPMENT & SOCIALIZATION
- USE ASSESSMENT & EVALUATION STRATEGIES
- PARTICIPATE IN CURRICULUM DESIGN & EVALUATION OF PROGRAM OUTCOMES
- FUNCTION AS A CHANGE AGENT & LEADER

- PURSUE CONTINUOUS QUALITY IMPROVEMENT IN THE NURSE EDUCATOR ROLE
- ENGAGE IN SCHOLARSHIP
- FUNCTION WITHIN THE EDUCATIONAL ENVIRONMENT

MCDONALD, P. J., (2010). TRANSITIONING FROM CLINICAL PRACTICE TO NURSING FACULTY: LESSONS LEARNED. JOURNAL OF NURSING EDUCATION, 49(3), 126-131.

BROWN, T. & SORRELL, J. (2017). CHALLENGES OF NOVICE NURSE EDUCATOR'S TRANSITION FROM PRACTICE TO CLASSROOM. TEACHING & LEARNING IN NURSING, 12, 207-211.

WELCOME TO ACADEMIA!

- **WITH 48% OF NURSING FACULTY AGE 55 OR OLDER, HOW DO WE SERVE AS PRECEPTORS AND MENTORS TO NEW NURSING EDUCATORS?**
- **WHAT WOULD BE HELPFUL TO YOU?**
 - **EFFECTIVE TEACHING STRATEGIES**
 - **TEST CONSTRUCTION**
 - **SYLLABUS DEVELOPMENT**
 - **CLASSROOM MANAGEMENT & INCIVILITY**
- **SOCIALIZATION TO THE ROLE**
 - **CURRICULUM**
 - **CLINICAL AGENCIES**
 - **TESTING & ADVISING**
 - **RESOURCES AVAILABLE**

WHAT MAKES THE CLINICAL ENVIRONMENT
DIFFERENT
THEN THE CLASSROOM?

CLASSROOM VS CLINICAL?

Left Brain	Right Brain
Linear	Relational
Rules	Values
Accountability	Ownership
Management	Leadership
Measureable	Seeable
What you do	Who you are
Boring	Chaos

“Important part of the art of leadership is knowing how to balance , and how to integrate, the two” (Tye, 2014, p134)

The Florence Prescription from Accountability to Ownership: Manifesto for a Positive Healthcare Culture

AGENCY EXPECTATIONS



GOALS OF CLINICAL EDUCATION

Develop communication

Practice skills

Caring care

Appreciate ethics

Engage in the environment

These align with the expectations the agency has of the faculty and student

COMMUNICATION



- PROFESSIONAL NOT SOCIAL
 - GOAL ORIENTED
 - WORK ON PROFESSIONAL LANGUAGE
 - APPROPRIATE USE OF TERMS

*AGENCY EXPECTS BOTH VERBAL AND
WRITTEN PROFESSIONAL
COMMUNICATION*

COMMUNICATION



- LISTENING
 - MUST HEAR AND ABSORB WHAT IS SAID
 - ANXIETY MAY BE DIFFICULT
 - TAKES TIME
 - NONVERBAL CUES

*INSTRUCTOR AND AGENCY STAFF ARE
ROLE MODELING*

SKILLS

- FIRST THINGS FIRST...PATIENT SAFETY
- STUDENTS ARE ALL ABOUT THE SKILLS
- BALANCE THE TWO (SOMETIMES) COMPETING DESIRES
- STUDENTS MAY NEED HELP MANAGING PATIENT WHILE PERFORMING A SKILL
- INSTRUCTOR MUST ALLOCATE TIME AS EVENLY AS POSSIBLE



CARING CARE

- Agency (and Joint Commission) expect anyone delivering patient care to be as accountable as an employee
- Students challenged by being self-focused
- Students recognize caring and non-caring
- Faculty must role model, reinforce and help student reflect on caring

ETHICS



**AGENCIES EXPECT
FACULTY AND
STUDENTS TO DO
WHAT IS RIGHT**



**STUDENTS MUST
AVOID ANY “BAD
HABITS” LEARNED IN
SCHOOL LIFE I.E.
GUESSING WHEN NOT
SURE, AVOIDING
ASKING FOR HELP**



**FACULTY MUST
ESTABLISH
STANDARDS, I.E. ASK
QUESTIONS, LOOK
UP ANSWERS,
ADMIT MISTAKES**

ETHICAL PRINCIPLES

Remember the ethical principles as a guide for your faculty practice



Beneficence: The obligation to do good for patients.



Nonmaleficence: The obligation to do no harm to patients.

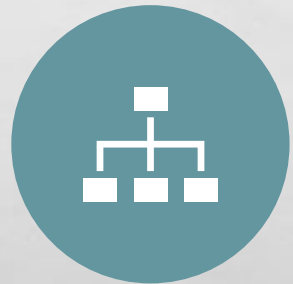
ENGAGE IN THE ENVIRONMENT



Clinical setting is affected by pace and urgency



Technical equipment



Variety of roles



Workplace rules, i.e. documentation procedures, use of supplies

FACULTY ROLE

WHAT IS EXPECTED? WHAT IS REQUIRED?



BEFORE THE FIRST DAY

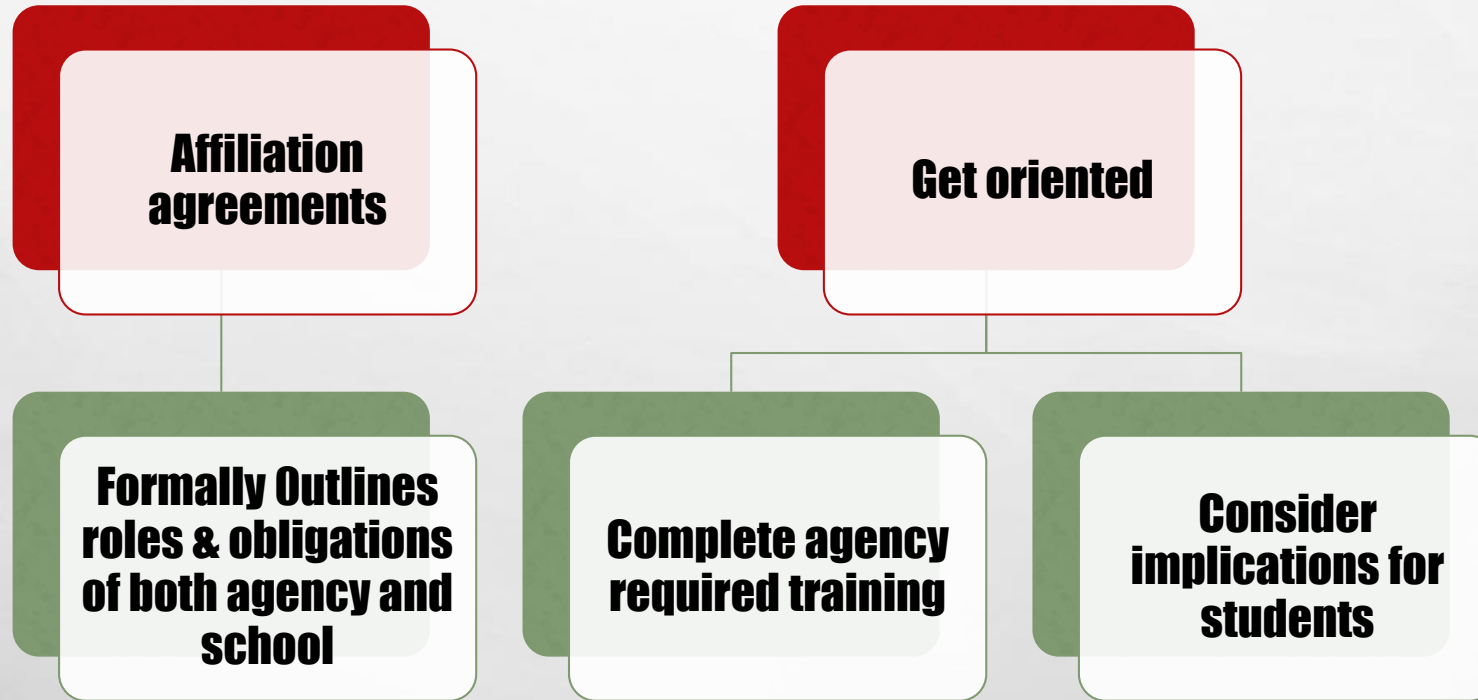


**DURING CLINICAL
EXPERIENCE**



**AFTER CLINICAL IS
FINISHED**

BEFORE THE FIRST DAY



BEFORE THE FIRST DAY

Get prepared

- **Have a working knowledge of patient population**
- **The details i.e. name badges, access codes, space**
- **Alternative experiences**

Build relationships

- **Promotes learning environment**
- **Communicate**
 - **Past experiences, assignments, level of student**
- **Role of instructor and supervision of student**

THE FIRST DAY



- ORIENTATION
 - AGENCY BASIC ORIENTATION
 - TOUR
 - INTRODUCTIONS
 - AREA SPECIFIC
FOCUS/CONCERNS
 - REVIEW STUDENT SCHEDULE

THE FIRST DAY



- GROUND RULES
 - CLINICAL PREP
 - ATTENDANCE
 - CELL PHONES
 - PROFESSIONALISM

DURING CLINICAL EXPERIENCE



COMMUNICATION



TIMELY CARE



TEAMWORK



**INTERVENE WHEN
NECESSARY**



GUEST STATUS

TABLE SHARING

EDUCATOR RESPONSIBILITIES:

Know your clinical agencies policies and procedures, become familiar with the curriculum.

As the clinical faculty member it is critical to evaluate the level of supervision needed in a situation in order to provide safe patient care. Consideration must be given to what procedures are required and the student's level of preparation.

Is the student able to take what they have learned in the classroom and incorporate into care they provide in the clinical setting?

WELCOME TO ACADEMIA!

Be

Be engaged with your colleagues.

Ask

Ask questions of faculty and staff.

Seek

Seek assistance with grading and evaluation expectations.

Use

Use other faculty as role models.

Find

Find a mentor.

STUDENT WHO IS UNSAFE:

- **BE SURE TO DOCUMENT SITUATION!**
- **FOLLOW YOUR INSTITUTION'S POLICIES.**
- **NOTIFY STUDENT OF REASONS FOR POTENTIAL FAILING.**
- **DISCUSS WAYS THEY CAN IMPROVE PERFORMANCE.**
- **EXPLAIN WHEN IMPROVEMENTS MUST OCCUR.**
- **CONSEQUENCES OF LACK OF IMPROVEMENT.**

THANK YOU

“ The role of the clinical teacher is demanding: balancing the needs of students and staff, keeping up-to-date with clinical knowledge and skills, and managing the time commitment in addition to other teaching and personal responsibilities. The best clinical teachers are enthusiastic, care about students and respect them, set high expectations and help students meet them, give prompt feedback and evaluate fairly, are role models, and are passionate about patient care and clinical teaching.

To all clinical nurse educators: thank you for guiding students in the clinical setting, preparing them for the realities of practice, and helping them develop as professionals.”

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