



**NORTHEAST TEXAS**  
COMMUNITY COLLEGE

# Nurse Preceptor Orientation

## Guidebook

# TABLE OF CONTENTS

<b>Introduction</b> .....	2
<b>Welcome</b> .....	2
<b>About our Program</b> .....	2
<i>Philosophy</i> .....	2
<b>Foundational Framework</b> .....	3
<i>Code of Ethics for Nurses</i> .....	3
<b>Preceptor Orientation</b> .....	3
<b>Clinical Learning Outcomes</b> .....	3
<b>Clinical Preceptor Responsibilities</b> .....	4
<b>Nursing Education Program/Faculty Responsibilities</b> .....	4
<i>Agency/Facility Responsibilities</i> .....	5
<i>Student Responsibilities</i> .....	5
<i>Preceptor Agreement</i> .....	5
<i>Preceptor Evaluation of Student</i> .....	5
<i>Student Evaluation of Preceptor</i> .....	5

# Introduction

## Welcome

This guidebook serves as an orientation to policies and procedures for precepting NTCC student nurses in the clinical setting. Clinical preceptors are utilized to enhance clinical learning experiences after a student has received clinical and didactic instruction in all basic areas of nursing. The preceptor will play a vital role as a facilitator and resource person to the student during the clinical learning experience.

## About our Program

### Philosophy

The faculty of the Nursing Programs at Northeast Texas Community College believes that nursing education rightfully belongs in institutions of higher learning, and the nursing program is an integral part of the college. We, therefore, accept the philosophy and objectives of the college as it fulfills its mission to meet the diverse educational needs of the community.

We believe that man is a holistic being. He is unique and complex with biological, psychological, sociological, and communication needs that vary throughout his life. Health is the right of every individual, and health services should be available to him through the cooperative efforts of a wide range of professions and disciplines, commonly called the interdisciplinary healthcare team. The inherent dignity of the individual gives one the right to actively participate with the interdisciplinary healthcare team in decisions that affect their state of health.

The faculty believes that nursing is primarily assisting clients with those activities which contribute to health, recovery of health, or achieving an optimal level of health that one would perform unaided when there is the capacity, will, or knowledge; while promoting independence compassionately. Nursing care is a service primarily concerned with supporting the highest quality of life that each individual is capable of achieving. The knowledge base and practice of nursing span several levels and are applied in a multiplicity of settings. Nursing is a multi-level practice and derives its body of knowledge and scope of practice from selected elements of the total body of professional nursing and related social, life, physical, chemical, and biological sciences.

The scope of practice for the nurse occurs within the nursing roles of provider of client-centered care, member of a profession, client safety advocate, and member of a healthcare team. Within these roles, there are identified competencies that construct the behaviors associated with entry-level practice for nursing. Nursing practice focuses on individuals, families, and groups with problems that have predictable or unpredictable outcomes. This practice takes place in a variety of settings, including acute care, extended care, rehabilitative, and community-based facilities. These major concepts, as well as the role of the nurse as a provider of client-centered care, manager of care, advocate for patient safety, member of the healthcare team, and member of a profession, guide the student experience throughout the curriculum.

The faculty believes that learning is an additive process, progressing from simple to complex, and is demonstrated by a change in behavior. Students learn in various ways, and learning is enhanced by a multi-sensory, nurturing approach. Teaching is the art and science whose aim is to bring about learning in a logical, efficient manner. Learning processes are designed toward identified entry-level competencies through the use of objectives, relevant content, learning activities, and evaluation of the outcomes. As

the effort and energy put into learning is under personal control, learning is ultimately the responsibility of the student. The faculty shares the responsibility of directing curricular planning and, with the assistance of other healthcare professionals, selecting experiences to enable the student to apply theory to practical situations. The faculty encourages the development of a nursing conscience based upon professional, moral, ethical, and legal standards and further encourages the formulation of the goal for continuing education throughout the nursing career.

## Foundational Framework

### Code of Ethics for Nurses

The code of ethics was developed by the American Nurses Association as a guide for carrying out the responsibilities of professional nursing in a consistent ethical manner. This document addresses nurses' ethical responsibilities in interacting with clients, the community, other nurses, the profession, the environment, policy, and self. Please access this document and read through all the provisions and subcategories within these provisions. The Nursing Program at Northeast expects actions to be within the guidelines of this code. <http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses.a.spx>

## Preceptor Orientation

### Clinical Learning Outcomes

After completion of the clinical course, students will be expected to:

1. Utilize a systematic process to analyze selected health care concepts to manage care for diverse patients across the lifespan.
2. Describe the interrelatedness between health care concepts to assist in developing clinical judgement.
3. Describe the attributes and roles of the professional nurse including leadership, management and principles of delegation.
4. Apply a systematic problem-solving process for the development of clinical judgement.
5. Discuss the legal-ethical parameters for professional nursing practice including the Nursing Practice Act and the ANA Code of Ethics as related to selected exemplars.
6. Utilize professional communication techniques in providing patient-centered care and collaborating with members of the health care team.
7. Identify health promotion needs for diverse patients across the life-span.
8. Utilize clinical reasoning and knowledge based on the nursing program of study to date, applying mindfulness, situational awareness and sense-making while integrating best current evidence and clinical expertise into care of patients, acknowledging their preferences and values.
9. Minimize risk of harm to patients and providers through both system effectiveness and individual performance.
10. Demonstrate mechanisms by which to achieve high-quality patient outcomes by effectively communicating and collaborating with as well as actively participating in activities to plan, deliver, implement and evaluate value-added nursing care with members of the inter-professional team; demonstrating mutual respect and utilizing shared decision making.
11. Monitor outcomes of care processes and use improvement methods to design and test changes to improve the health care system.

## **Clinical Preceptor Responsibilities**

1. Participate in a preceptor orientation.
2. Function as a role model in the clinical setting.
3. Facilitate learning activities for no more than two students during the clinical session.
4. Orient the student(s) to the clinical agency.
5. Guide, facilitate, supervise, and monitor the student in achieving the clinical objectives. Supervise the student's performance of skills and other nursing activities to ensure safe practice.
6. Collaborate with faculty to review the progress of the student toward meeting clinical learning objectives.
7. Provide direct feedback to the student regarding clinical performance.
8. Contact the faculty if assistance is needed or if any problem with student performance occurs.
9. Collaborate with the student and faculty to formulate a clinical schedule.
10. Discuss with faculty/student arrangements for appropriate coverage for supervision of the student should the preceptor be absent.
11. Give feedback to the nursing program regarding clinical experiences for students and suggestions for program development.

## **Nursing Education Program/Faculty Responsibilities**

1. Ensure that preceptors meet qualifications in Rule 214.10 or Rule 215.10, as appropriate. It is recommended that the preceptor has been licensed and in practice for at least one year.
2. Ensure that there are written agreements which delineate the functions and responsibilities of the affiliating agency, clinical preceptor, nursing program, and student.
3. Ensure that clinical experiences using preceptors should usually occur only after the student has received applicable theory and clinical experiences necessary to safely provide care to clients (within course or curriculum), as appropriate.
4. Inform the preceptor of the skill level of the student to guide the preceptor's expectations of the student.
5. Orient both the student and the preceptor to the clinical experience.
6. Provide an orientation for the preceptor outlining the philosophy, curriculum, course, and clinical objectives of the nursing education program. Discuss student expectations, skills performance, student guidelines for performance of procedures, and methods of evaluation.
7. Approve the scheduling arrangement for the student and preceptor to assure availability of the faculty member when needed during the precepting experience.
8. Assume overall responsibility for teaching and evaluation of the student.
9. Assure student compliance with standards on immunization, screening, OSHA standards, CPR, and current liability insurance coverage, as appropriate.
10. Collaborate with the preceptor to ensure student learning needs are met through appropriate student assignments and clinical experiences.
11. Communicate assignments and other essential information to the agencies.
12. Meet regularly with the clinical preceptor and the student in order to monitor and evaluate the learning experience.
13. Monitor student progress through rounds, student clinical seminars, student- faculty-preceptor conferences and review of student clinical assignments.
14. Be readily available, e.g., telephone, pager or email for consultation when students are in the clinical area.
15. Receive feedback from the preceptor regarding student performance.

16. Provide feedback to preceptor regarding performance as preceptor and the clinical learning experience.
17. Provide recognition to the preceptor for participation as a preceptor. Ex: adjunct faculty plaque, certificate.

## **Agency/Facility Responsibilities**

1. Retain ultimate responsibility for the care of clients.
2. Retain responsibility for preceptor's salary, benefits, and liability.
3. Provide basic information about the agency's expectation of the preceptor experience to the program and nurses.
4. Interpret the preceptor program and expectations of students to other agency personnel who are not directly involved with preceptorship.

## **Student Responsibilities**

1. Maintain open communications with the preceptor and faculty.
2. Maintain accountability for own learning activities.
3. Prepare for each clinical experience as needed.
4. Be accountable for own nursing actions while in the clinical setting.
5. Arrange for preceptor's supervision when performing procedures, as appropriate.
6. Contact faculty by telephone, pager or email if faculty assistance is necessary.
7. Respect the confidential nature of all information obtained during the clinical experience.
8. Adhere to safety principles and legal standards in the performance of nursing care.

Reference: Texas Board of Nursing, Education Guideline 3.8.3.a, Precepted Clinical Learning Experiences, Revised 07/10/2020. Retrieved from

[https://www.bon.texas.gov/pdfs/education\\_pdfs/education\\_nursing\\_guidelines/3.8Clinical\\_Learning\\_Experiences/3-8-3-a.pdf](https://www.bon.texas.gov/pdfs/education_pdfs/education_nursing_guidelines/3.8Clinical_Learning_Experiences/3-8-3-a.pdf) on February 14, 2025

## **Preceptor Agreement**

The preceptor agreement is completed at the beginning of each clinical experience. The student will present the agreement's QR code and ask the preceptor to complete the Forms survey. A copy of the agreement is available on the NTCC.edu website or by emailing [knewland@ntcc.edu](mailto:knewland@ntcc.edu)

## **Preceptor Evaluation of Student**

At the end of the clinical shift with the student, the preceptor will conduct an evaluation of the student's performance with the presented QR code. The Forms survey is done in confidence and without coercion from the student.

## **Student Evaluation of Preceptor**

The student will complete an evaluation of the preceptor at the end of the clinical experience. Any concerns noted in the evaluation will be addressed with the facility's education coordinator and the preceptor's unit director.

Thank you for your commitment to fostering the next generation of nurses. Your dedication to the profession and the student is a vital aspect of a caring nursing workforce.