



COLLEGE OF PUBLIC HEALTH AND  
ADMINISTRATION

SCHOOL OF NURSING

NURSE PRACTITIONER  
SPECIALIZATION HANDBOOK

**MASTER OF SCIENCE IN NURSING (MSN)  
POST-GRADUATE CERTIFICATE IN NURSING (PGC)  
DOCTOR OF NURSING PRACTICE (DNP)**



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## PREFACE

The [Franklin University Catalog/Bulletin](#) contains policies and procedures applicable to all students. The Student Handbook is provided to all Master of Science in Nursing (MSN), Post-Graduate Certificate (PGC), and Doctor of Nursing Practice (DNP) nurse practitioner students as a supplemental guide related to specialized topics associated with completion of their degree program. The information in this handbook should supplement, not substitute, information published in the Franklin University Academic Bulletin. In any situation of unintended incongruence, the University Catalog/Bulletin takes priority.

Successful matriculation and graduation from an academic program require adherence to all policies, procedures, and regulations as stipulated by the MSN, post-graduate certificate or DNP programs, and the university. If you have any questions regarding requirements or policies, do not hesitate to refer them to your academic advisor, program chair, or other appropriate people.

This handbook presents the policies, procedures, and general information in effect at the time of publication. Students affected by any changes to this handbook will be notified in writing and acknowledgement of receipt is required.

This handbook is not intended to state contractual terms and does not constitute a contract between the student and the University.

## MISSION AND PURPOSE STATEMENTS

The mission of the College of Health & Public Administration (COHPA), which houses the School of Nursing (SON) and the nursing programs, states that the college will:

- Provide a relevant, high-quality, lifelong education that will enable our students to:
- Enhance the quality of healthcare and public service
- Advance healthcare and public service careers
- Succeed in providing leadership that improves the quality of life in communities

School of Nursing (SON) Purpose:

We transform the future of healthcare through innovation, collaboration, opportunity, enthusiasm, and excellence in nursing education to benefit our students, our partners, and the communities we serve. By embracing diversity, change, and educational excellence based on the values of integrity and compassion, we nurture our students and provide them with robust learning opportunities.

## MSN, DNP, and Post-Graduate Certificate Overview

Graduate education builds upon knowledge and competencies gained in baccalaureate education. Graduate students use critical thinking, creativity, and problem-solving skills that require in-depth nursing knowledge and are prepared to coordinate healthcare programs within complex systems in an era of healthcare reform. The Advanced Practice Registered Nurse (APRN) curriculum is based on nursing and related theories and the application of research findings to clinical and administrative nursing issues. Graduate students are also prepared for doctoral study in nursing and continued personal and professional development.

The School of Nursing is committed to supporting all learners and fostering an inclusive environment. We strive to create a sense of belonging while preparing students for the realities of practice. If you experience bias or discrimination, please report it to your course or clinical faculty, lead faculty, or program chair.

**The DNP nurse practitioner concentrations** are designed for those nurses who want to translate community factors, social determinants, and health risks into delivering the highest quality patient care. This degree prepares the student to become an APRN who provides healthcare to individuals, families, and communities at various points across the lifespan. In addition, the DNP prepares the graduate to optimize patient care through data, technology, and other clinical and evidence-based practices.

**The MSN nurse practitioner tracks** are designed for those nurses who want to pursue more advanced positions in today's challenging healthcare environments. The MSN prepares the student to become an APRN who provides healthcare to individuals, families, and communities at various points across the lifespan. This program blends nursing theory and advanced practice concepts necessary to work within the structure, culture, and mission of a variety of healthcare organizations.

**The Post-Graduate Certificate (PGC)** tracks are designed for nurses with an MSN or nursing doctoral degree who wish to increase their scope of practice in a nurse practitioner specialty role as described above.

**National Certification:** Graduates of the DNP, MSN, or PGC are prepared for the national certification examination in their role specialty through the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP).

## PROGRAM OUTCOMES

### DNP Program Outcomes

By completion of the program, graduates will be able to:

1. Apply evidence-based findings to improve clinical practice and healthcare delivery systems.
2. Analyze and evaluate the local and global aspects of a healthcare organization's structure, function, and resources.
3. Strategically lead improvements in health outcomes, quality, safety, and policy.
4. Develop interprofessional teams that promote quality care, reduce risk, and improve complex healthcare delivery systems.
5. Integrate data from information systems and technology to support clinical decision-making for clinical prevention and population health.

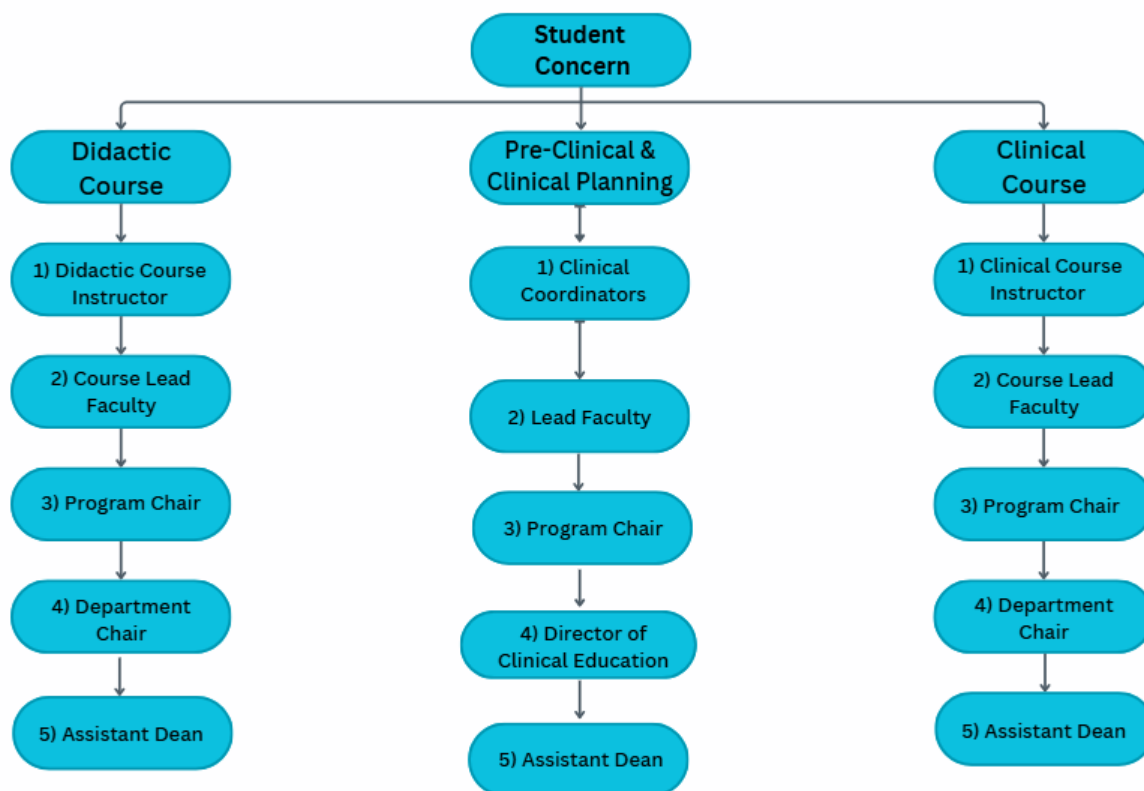
### MSN and PGC Program Outcomes

By completion of the program, graduates will be able to:

1. Synthesize theories and knowledge from nursing and related disciplines to develop a theoretical basis to guide practice in an advanced nursing role.
2. Apply leadership skills and decision making in the provision of high-quality nursing care in diverse settings.
3. Provide leadership across the care continuum in diverse settings to promote high-quality, safe, effective patient-centered care.
4. Appraise, use, and participate in the extension of nursing knowledge through scientific inquiry.
5. Integrate current and emerging technologies into professional practice.
6. Demonstrate responsive leadership, collaboration, and management to influence the advancement of nursing practice and the profession of nursing and to influence health policy.
7. Employ collaborative strategies and effective communication to advocate for the role of the professional nurse as a member and leader of interprofessional teams.
8. Integrate clinical prevention and population health concepts to provide holistic, comprehensive nursing care for individuals, families, and aggregates.
9. Demonstrate an advanced level of understanding of nursing and relevant sciences and integrate this knowledge into practice.

## School of Nursing Communication Flow Chart

The communication flow chart establishes appropriate communication channels between students and faculty. This framework ensures that issues and concerns are addressed promptly and appropriately while promoting a safe and effective learning environment for students. Students are first expected to contact their course or clinical faculty directly with concerns prior to reaching out to the course lead faculty. If concerns escalate to higher levels of administration, decision once made are final and any further concerns should be taken to the next level of administration.



## GENERAL INFORMATION

**MSN/PGC/DNP APRN Curriculum:** The curriculum is designed to meet the standards of the profession for graduate nurses. The APRN tracks for the MSN, PMC and DNP programs (family, adult-gerontology primary care, and psych-mental health) are guided and informed by the following professional standards and guidelines: Criteria for Evaluation of Nurse Practitioner Programs (National Task Force on Standards for Quality Nurse Practitioner Education [NTF], 2022), Nurse Practitioner Core Competencies (National Organization of Nurse Practitioner Faculty [NONPF], 2022), Adult-Gerontology Acute Care and Primary Care NP Competencies (NONPF, 2016), AACN Essentials: Core Competencies for Professional Nursing Education (NONPF, 2021), and the American Nurses Association Scope and Standards of Care for Psychiatric-Mental Health Nursing 3rd Edition (2022). Detailed information for the [MSN](#), [PGC](#), and [DNP](#) curricula is available on the Franklin University website.

**Resources and Guides:** Franklin University offers extensive resources to all students. Each course provides links to general and course-specific resources. Students are expected to become familiar with all resources, policies, and expectations outlined in the [University Catalog](#) (Bulletin).

**APA Format and Writing Mechanics:** Unless otherwise stated, all assignments are in APA format (American Psychological Association (2020) *Publication manual of the American Psychological Association* (7<sup>th</sup> ed.). **Students are expected to be familiar with and correctly use this format.** Numerous resources are available through the Franklin University [Library Research Guides](#)

Students are expected to use correct grammar, spelling, paragraph structure, and writing formats. Writing services and tutoring are available through Franklin University's [Learning Commons](#). Grammarly, a writing feedback application, is also available. Students are expected to submit papers and assignments in Microsoft Word (unless otherwise instructed).

**Course Examinations:** Examinations may be required in some graduate nursing courses. These examinations are proctored. A fee may be associated with each proctored exam. It is the student's responsibility to pay the associated fee and schedule the appropriate exam within the course in a timely manner.

**Academic Integrity:** As members of Franklin's campus community, all students are expected to uphold and abide by its published standards of conduct, embodied within a set of core values that include honesty and integrity, respect for others, and respect for the campus community. Academic-based violations committed in the context of submitted course assignments, group projects, or examinations, or violations of course or program policy included in the syllabus provided to the student, are subject to a charge of academic misconduct. Expectations are outlined in the [University Catalog](#) (Bulletin) and Franklin University Website.

**AI Use:** No AI tools can be utilized for any portion of any course assignment unless explicitly stated in the assignment details. This includes editing software and references/citation resources generated by AI. The full Academic Integrity Policy can be found [here](#).

**Code of Conduct:** Students are expected to become familiar with and adhere to the [Community Standards and Student Code of Conduct](#) policies. This applies to all communication in emails and other forms of communication methods. All students are expected to maintain professionalism at all times.

Student wellness information can be found at this [website](#).

## NURSE PRACTITIONER PROGRAM PROGRESSION, READMISSION, AND GRADUATION POLICIES

### Progression Requirements for Nurse Practitioner Students

1. An MSN, DNP, or post-graduate certificate student must achieve a “B” or better in each course required to earn the degree or post-graduate certificate. Franklin University considers the grade of “B” (3.0) (B+ or B) or higher as representing “mastery” criteria. Students earning a B- or lower in a course leading to the MSN or DNP degree or post-graduate certificate must repeat the course and may repeat the course only one time. A maximum of two courses may be repeated in the program.
2. For nurse practitioner courses only - students must complete the clinical component with a “meets expectation” **AND** earn a “B” or better in the course grade to pass the class.
3. Students in the MSN or DNP degree or post-graduate certificate must maintain a minimum grade point average (GPA) of 3.0 (B). If a student’s cumulative grade point average falls below a 3.0, the Academic Standard for Probation and Dismissal will go into place. This policy can be found in the [Franklin University Bulletin](#).
4. In lieu of academic dismissal, MSN or DNP degree or post-graduate certificate students who do not satisfy these standards will have the option to change to a different graduate program, provided they satisfy the admission requirements for that program and are in compliance with the University's academic standards for graduate students.
5. Academically dismissed graduate students seeking reinstatement to Franklin University may submit an appeal to the Graduate Council. (Please see the [Academic Standards](#) policy).
6. Students in nurse practitioner courses may only take an “I” incomplete due to verifiable (documented) extenuating circumstances as long as there are no greater than 30 clinical hours remaining to be completed. The “I” grade cannot be used to allow a student to complete additional didactic course work to raise a deficient grade or to repeat a course. The “I” must be resolved within 30 days of the beginning of the next trimester or will be converted to an “IF.” Students may not progress to any course which lists the incomplete course as a pre-requisite until the “I” is resolved with a “B” or better. More information regarding University Policies can be found [here](#).
7. Students must maintain an unencumbered registered nurse license in all states where they are currently licensed throughout the duration of the graduate program and in the state(s) where they fulfill clinical course requirements. If at any time during enrollment in the graduate program a student’s nursing license becomes encumbered, suspended, or revoked, the student must immediately report this to the Program Chair. If a student’s registered nurse license is suspended or revoked, or if the student fails to report any changes in licensure status, the student will be administratively withdrawn from the graduate program. A student’s ability to continue enrollment in the graduate program with an encumbered license will be reviewed on an individual basis considering the restriction/limitations placed on the student’s practice as a registered nurse by the board of nursing in the state issuing the encumbered license.

8. Information regarding graduation can be found [here](#). Student who are receiving a Post-Graduate Certificate (PGC) are unable to walk at the graduation ceremony. Questions related to graduation should be directed to [registrar@franklin.edu](mailto:registrar@franklin.edu). Information regarding student transcripts can be found [here](#).

(Effective Fall 2023-2024 Catalog)

## CLINICAL PRACTICUM POLICIES AND PROCEDURES

The Nurse Practitioner program is offered in an online format. This model provides students with online coursework and 600 hours of required clinical practice. Please consult the Academic Calendar and individual course syllabi for detailed information.

As a Franklin University student, you will engage in clinical placement experiences designed to help you achieve the competencies required in each clinical course. The clinical team will collaborate with you to secure appropriate clinical sites and preceptors based on course objectives and your geographic location. The faculty and the clinical team will carefully review your placement request to ensure it meets academic and accreditation standards before submitting it for faculty approval.

### **Clinical Course Credit Hour Update – Effective Fall 2025**

Beginning in Fall 2025, the School of Nursing will increase the credit hours for each Nurse Practitioner (NP) clinical course by 2 credit hours. This change ensures that the credit hour calculation accurately reflects the student effort required to complete the 150 clinical hours per course, which were previously not represented in the transcript credit hours.

Students who enter any NP track (degree or certificate) through Summer 2025 may complete their program under the current catalog requirements, without the additional clinical course credit hours. These students will also have the option to adopt the updated catalog, including the revised credit hours, if they wish.

The current catalog will remain active for three years following the implementation of this change. After that time, all students, regardless of their original catalog year or any gap in enrollment, will be required to complete the clinical courses with the updated credit hour structure.

**IMPORTANT NOTE:** Occasionally, a student may need to travel a significant distance for a clinical placement opportunity. Faculty approved clinical placements enable us to organize clinical learning experiences that meet the high standards and curricula of Franklin University.

### Clinical and Practicum Placement

Students are responsible for securing their own preceptor and clinical/practicum site. This approach fosters a strong professional relationship between the student and preceptor while minimizing travel-related burdens and expenses.

***Students are responsible for following all policies and procedures established by prospective and approved clinical sites.*** Many healthcare organizations, particularly large health systems, require

students to use a formal application process for Advanced Practice Provider (APP) student placements and may prohibit direct contact with providers or site representatives.

Before contacting a potential preceptor or clinical site, students should review the organization's website for placement requirements, application deadlines, and onboarding procedures. When known, organization-specific requirements will be communicated through Exxat announcements.

If a potential preceptor is affiliated with a hospital or healthcare system, students should verify the organization's placement process before initiating contact. Questions regarding clinical site policies or placement procedures should be directed to the Clinical Education team at [clinicals@franklin.edu](mailto:clinicals@franklin.edu).

To increase the likelihood of securing a clinical placement, students are encouraged to meet with potential preceptors in person and bring relevant materials, such as a resume and a summary of clinical course requirements. Students should approach these interactions professionally, as they may be viewed as informal interviews. Clinical placements provide valuable opportunities to demonstrate professionalism, build professional relationships, and explore potential future employment opportunities.

Other strategies for securing a site include direct messaging potential preceptors via LinkedIn or leveraging existing professional relationships within the workplace, community organizations, or personal networks.

If a student experiences difficulty securing a site after multiple documented attempts, the School of Nursing provides support to ensure access to the required clinical practicum experiences. For assistance, students should contact [clinicals@franklin.edu](mailto:clinicals@franklin.edu) **with the completed [clinical log](#) of at least 20 sites** that you have documented for contact.

Clinical sites may, at their discretion, charge a placement fee. Students are responsible for any costs associated with securing a clinical site. The School of Nursing may offer an honorarium of up to \$300 paid directly to the preceptor or clinical site at the end of the semester. For more information, students should contact [clinicals@franklin.edu](mailto:clinicals@franklin.edu).

### Clinical and Didactic Course Registration

***The clinical team will register students for the NP-specific course and clinical courses.*** All clinical placement requirements must be completed and approved in order for students to be registered for clinical course sections and the associated didactic course sections. Failure to complete all clinical placement requirements by at ***least 30 days prior*** to the start date of the term may result in the inability to be registered. Please contact [clinicals@franklin.edu](mailto:clinicals@franklin.edu) with any questions regarding status. Note, future sections may not be available for one to two terms depending on the program and course. ***Students are not permitted to request a certain course instructor or section for didactic or clinical courses.*** Students are scheduled in course sections based on demand and availability and requests cannot be accommodated due to this.

**IMPORTANT NOTE:** In order to be compliant with federal and state regulations related to distance education and professional licensure programs, not all professional licensure programs are open for enrollment or completion of required clinical experiences in every state or U.S. territory. Practicum sites must be in a state where Franklin is open and authorized to host a practicum experience. To see which

locations are open for Franklin's nursing programs, please check the "Program Availability" list on your program's webpage or search by program or location through our [Program Availability by Location Tool](#).

## Health and Safety

All students participating in clinical/practicum experiences must meet health and safety requirements. Documentation must begin six (6) months before the practicum/clinical course, and students *must* maintain current documentation throughout their program of study. Students must ensure that all health documents remain valid throughout their clinical rotation. Failure to maintain current documentation will result in immediate removal from clinical until the necessary updates are completed. See Appendix A for all required items. *Students cannot start any practicum experience until all requirements and documentation have been submitted to EXXAT and the status is marked as "Cleared and Placed" by the Clinical Coordinator ([clinicals@franklin.edu](mailto:clinicals@franklin.edu))*. During clinical rotations, if you have a compliance item that expires, EXXAT will be deactivated and you will not be allowed to return to clinical rotations until the item is updated.

## Preceptors and Clinical Sites

Clinical sites will be determined by track/role specialization and clinical expectations. Program Chair/Lead Faculty are responsible for approving clinical site placements and will communicate with students before the start of each clinical course.

Before beginning the clinical experience, students are encouraged to consult with their preceptor and clinical supervising faculty to discuss the patient population and common health conditions they may encounter at the clinical site. When selecting a preceptor, students should ensure that the preceptor's clinic hours and patient population align with the course and program requirements

**FNP/AGPCNP students:** Appropriate preceptors include nurse practitioners, MDs, DOs, and physician associates (when approved by the state).

**PMHNP students:** Appropriate preceptors include nurse practitioners with PMHNP certification, MDs, DOs, and physician associates (when approved by the state and Program Chair). MD or DO preceptors must be able to demonstrate a psychiatry residency or certification. PA preceptors must have a psychiatry certification such as a CAQ in psychiatry. Licensed Clinical Social Worker, Psychologist, or Licensed Professional Counselor preceptors should be utilized for required therapy hours only and must have at least a master's degree with an independent license.

Note: In all cases, physician associate preceptors require prior approval. Currently, physician associates are not permitted to serve as NP preceptors in Nevada and Pennsylvania. Please contact the clinical coordinator ([clinicals@franklin.edu](mailto:clinicals@franklin.edu)) for more information.

To expedite the clinical placement process, check with the facility and/or preceptor to ensure policies related to clinical placement are being followed (for example: an application). Additionally, to expedite the clinical placement process you can obtain your preceptors license, certification copy, and resume/CV to upload with your EXXAT MyRequest form.

## Preceptor Qualifications

- The preceptor must have a current unencumbered state license and *at least one year of experience* in an area of practice relevant to the student's clinical needs.
  - FNP/AGPCNP: APRN, Physician (MD/DO), or Physician Associate (PA)
  - PMHNP: APRN, Physician (MD/DO with psychiatry residency or current board certification), Physician Associate (PA's with current CAQ-Psychiatry), Independently Licensed Clinical Social Worker, Licensed Psychologist, or Independently Licensed Professional Counselor.
- Nurse Practitioners must have a master's or doctoral degree.
- Nurse practitioners must hold national certification, though exceptions may be allowed based on state board of nursing regulations. To ensure the preceptor's scope of practice aligns with the program requirements, NP preceptors must provide proof of national certification.
- Curriculum Vitae/Resume, copy of the license, and certification (as appropriate) are required for faculty approval.

## Assignment of Preceptors

- Preceptors **may not have more than one (1) student** during a clinical day. Contact the clinical supervising faculty member if there are additional students and you are not seeing adequate patients.
- Students may spend no more than 10 hours on a clinical site in one day. Students may be placed in an office or clinic owned or managed by their employer. However, this **cannot be the office, clinic, or unit where they are employed**. Preceptors **cannot** be relatives, close friends, or the student's personal healthcare provider.
- Students may have more than one preceptor during a clinical course **with prior faculty approval documented in EXXAT**.
- Preceptors will be provided a preceptor handbook that includes progressive expectations and course outcomes and competencies. The preceptor will provide an acknowledgment and agreement before starting each clinical experience.

## Approval of Preceptor and Clinical Site

- Students complete the EXXAT MyRequest at least six (6) months before the clinical rotation.
- Faculty are responsible for final approval of the preceptor and clinical site.
- The student will submit clinical rotation requests via MyRequest in the EXXAT clinical documentation system. The Program Chair/Lead will work with the clinical coordinators when the request is submitted. Students are expected to check the status of their request frequently to monitor the status and supply information as requested.
- Students may not start clinical experiences until all compliance documents are approved and the student has an approved clinical site. Approval for the clinical site includes receipt of preceptor documents and completed Memorandum of Understanding (MOU). If at any time students compliance items expire, students will be deactivated from EXXAT and cannot attend clinical or complete clinical hours as required until the compliance items is approved. This will result in an

unexcused absence for required clinical assignments/work in the clinical course and can result in a loss of points for these assignments until updated and approved.

### Scheduling Clinical Hours

Before beginning the clinical practicum, the student is expected to discuss the schedule with the preceptor to determine the days and times that the student will be at the clinical site. The student's personal and work schedules are expected to accommodate participation in the required clinical hours specified by the course. Students may not begin clinical practicum hours until they have received confirmation that they are "cleared and placed" to start clinical, and students may not start until the first official day of the semester that the course starts.

Clinical hour scheduling for the semester **must** be completed in EXXAT no later than the first week of the course (Sunday at 1159pm EST). Students are expected to begin communication about their clinical schedule with preceptors when initially meeting with them to discuss clinical rotations at their site. Any changes must be communicated to the clinical supervising faculty member via email at the same time the change is made in EXXAT. All required supervised practice hours must be completed by the end of the semester unless an Incomplete has been authorized by the clinical faculty (see the Clinical Disruption Policy). You are encouraged to add additional clinical days in case of an emergency or unforeseen circumstance where make-up hours would be necessary.

The student should secure a method of emergency communication with the preceptor before or on the first day of clinical. If the student is unexpectedly unable to attend clinical, they are expected to communicate with the preceptor or site manager about the absence. Additionally, the student must inform the clinical supervising faculty and course instructor of the absence and negotiate make-up clinical time with the preceptor.

If a preceptor has a planned absence, the student must arrange a qualified backup preceptor and obtain approval from the Program Chair or Lead. If the absence is expected to exceed one day, the lead course faculty and clinical coordinators will assess the credentialing requirements for the backup preceptor.

### Number of Clinical Hours Required

The clinical hour requirements are detailed in the course syllabus. Students are expected to schedule a clinical day at least *once a week* throughout the semester until they have completed the required hours. Students are not permitted to be in the clinical site during weekends, holidays, or other times when the university is not in session. If the student requests weekend or evening hours, they should contact their clinical supervising faculty member and program chair or lead faculty at least 2 weeks in advance of the scheduled time for approval. Approval for weekend, night, or holiday hours will be given only for extenuating circumstances, and students who complete these hours without pre-approval will not receive credit for these hours.

Clinical hours completed above the course minimum requirements do not count toward the required hours for any other course. If a course is dropped or a student withdraws from any course, all didactic and clinical assignments including clinical hours must be repeated and new original work. No clinical hours can be carried over from one course to another.

## Student Attendance on Scheduled Clinical Days

Students are required to complete the designated number of clinical hours as outlined in their clinical course and program requirements. Any clinical hours completed beyond the minimum course requirement cannot be applied to future courses.

Students should not assume that they will be allowed to make up missed clinical hours with their preceptor. If a student is unable to complete the required hours during the term, approval from the clinical supervising faculty and course instructor is required to extend clinical hours beyond the semester (refer to the Clinical Disruption Policy). In cases of unforeseen circumstances preventing the completion of clinical hours, the student must immediately notify the clinical supervising faculty to assess whether an extension is warranted and under what conditions it may be granted.

## Student Clinical Absences

Before starting clinical rotations, students should establish a procedure for notifying their preceptor in case of an absence. If a student is unable to attend a scheduled clinical day due to illness or an emergency, they must:

- Notify the preceptor before the start of the clinical day.
- Inform the clinical supervising faculty and course instructor as soon as possible.
- Coordinate with the preceptor to negotiate make-up clinical time, if applicable.
- If a student is repeatedly absent or fails to attend clinical hours as scheduled, the preceptor must notify the clinical supervising faculty and course instructor promptly.

## Preceptor Clinical Absences

- In the event of a planned preceptor absence, the student is responsible for arranging a qualified backup preceptor. If the absence is expected to last more than one day, the clinical course lead faculty and clinical coordinators will determine the credentialing requirements for the backup preceptor.

## Professional Dress and Behavior

Students are expected to dress appropriately and behave in a professional manner consistent with Occupational Safety and Health Administration (OSHA) standards. The clinical site may specify an alternative dress code (i.e., scrubs) following OSHA and state law considerations. This should be discussed with the preceptor or site manager before the student has their first day of clinical. Unless otherwise specified by the preceptor or clinical site, a white lab coat is required. Lab coats are offered as part of the White Coat ceremony and should always be clean, ironed, and in good condition. **Students must wear their Franklin University picture identification nametag and always introduce themselves as nurse practitioner student in the clinical setting.**

## Clinical Experience Preparation

Students are expected to adequately prepare for their clinical experience as guided by their preceptor, course instructor, clinical supervising faculty, and Program Chair. Preparation includes:

- Understanding and meeting course learning objectives.
- Consulting with faculty to address areas for improvement.
- Engaging in independent learning to build confidence and competence.

Before beginning the clinical experience, the preceptor should review the patient population and common health conditions encountered at the site with the student and supervising faculty. Students are responsible for reviewing relevant reference materials to ensure they are well-prepared for the clinical setting.

On the first day of clinical, the preceptor will provide an orientation to the clinical practice setting, including facility policies, procedures, and any required safety or learning modules.

### Patient Care Responsibility and Medical Record Documentation

The student is expected to document in the patient's medical records (paper or electronic) and sign all entries with their first and last name **followed by a student designation (i.e., Jane Doe, Nurse Practitioner Student)**. Since the preceptor is legally responsible for examining the patient, establishing the diagnosis, and determining the treatment and evaluation plan, they must also sign the medical record and all billing documentation. In some settings, students are not permitted to document in the official patient medical record and will need to provide alternative sample documentation to the preceptor. Patient confidentiality, consistent with the Health Insurance Portability and Accountability Act (HIPAA), must be observed. **At no time may patient records be copied, photographed, or removed from the clinical site. Any infraction of this policy will result in a failure of the course and a written notice in the student file.**

### Clinical Logs

Students are required to keep a log of all patient encounters and clinical hours throughout their clinical courses. Students maintain an official clinical log in an electronic format in EXXAT. Students enter encounters into EXXAT at the end of each clinical day, and patient encounters must be entered into EXXAT within 72 hours of the clinic visit. Patient encounters entered after 72 hours may not be approved, which can result in additional clinical hours being required. The student is responsible for ensuring that the patient encounter log dates are congruent with the timesheet dates. Timesheets without correlating patient encounter logs will not be approved and will not count towards the final clinical hours total. It is the responsibility of the clinical supervising faculty to routinely evaluate the clinical case and time logs, but the student is responsible for ensuring that they meet the clinical course and program requirements.

- **FNP students must complete 150 clinical hours in NURS 701, 702, 703, and 790.** Clinical hours and required case logs in EXXAT must be verified and approved by the clinical supervising faculty member to pass the course.
- **AGPCNP students must complete 150 hours in NURS 701, 702, 710, and 791.** Clinical hours and required case logs in EXXAT must be verified and approved by the clinical supervising faculty member to pass the course.

- **PMHNP students must complete 150 hours in NURS 732, 733, 734, and 793.** Clinical hours and required case logs in EXXAT must be verified and approved by the clinical supervising faculty member to pass the course.

Patient confidentiality, consistent with the Health Insurance Portability and Accountability Act (HIPAA), must be observed. Specifically, the information in EXXAT will disclose no patient identifiers. Students will receive information and instructions on using EXXAT during orientation to the clinical experience.

### Preceptor Evaluations of Student Performance

At the midterm and the end of each clinical course, the preceptor will evaluate the student via the evaluation tool in EXXAT. This is a required component of the course, and if it is not completed before the end of the clinical course, the student will receive a grade of I (incomplete). The student will not be registered for their next course if either evaluation (midterm or final) is outstanding.

### Student Evaluation of the Clinical Experience

Following the clinical practicum, the student will give feedback to the preceptor regarding their satisfaction with the quality of their learning experience. Students will complete an evaluation of the preceptor and clinical site in EXXAT.

### Student Health: Illness/Injury During Clinical

1. In the event of a medical emergency, hazardous materials exposure, needle stick or sharp object injury, or other clinical-related injury as defined by the clinical preceptor, the student should be sent to the nearest emergency room. *The student will be responsible for any charges incurred for these events.* The preceptor and student will immediately notify the course faculty of any such events.
2. In non-emergency situations, the student may verbally tell the course instructor faculty that they elect to seek care from a private healthcare provider/clinic. *Any expenses incurred will be the responsibility of the student.* The student or preceptor will notify the course instructor and clinical supervising faculty of these events as soon as possible.

### Clinical Disruption Policy

Students with a documented disability that temporarily affects their clinical coursework must notify the Lead Faculty/Program Chair and register with the Office of Accessibility Services, providing appropriate documentation. The Office of Accessibility Services will determine accommodations in consultation with faculty, and the Lead Faculty/Program Chair will oversee their implementation. Students will receive the necessary time to complete clinical coursework if it does not fundamentally alter course requirements. Possible accommodations include an Incomplete ("I") with a set deadline for completion following the university's incomplete policy or a possible Tuition Fee Waiver if withdrawal is necessary.

**Students must provide medical clearance documentation before resuming clinical coursework.**

## Impaired Student Policy: Perception of Impairment

If a preceptor, nursing faculty, or other individual suspects that a student is mentally or physically impaired, immediate action must be taken to remove the student from their duties and place them in a safe area away from the clinical setting to protect patients, the public, fellow students, and the student themselves.

Indicators of impairment may include, but are not limited to:

- Odor of alcohol or marijuana
- Slurred speech, unsteady gait, confusion, or mood swings
- Lack of manual dexterity, excessive health issues, or irritability
- Frequent absenteeism or tardiness
- Severe weight loss, needle track marks, or carelessness in hygiene

If impairment is suspected, the preceptor must immediately inform the student of the concern and notify the clinical supervising faculty for further action. The student must not be sent home or allowed to leave the building until faculty guidance is received.

All incidents will be documented in the Student Injury and Incident Report, completed by both the preceptor and clinical supervising faculty. The incident will be documented in the Student Injury and Incident report, which will be completed by the preceptor and clinical supervising faculty. Please review the Franklin University policies on alcohol and drug/controlled substances on the [Drug Free Schools and Communities Act](#) web page.

## Nurse Practitioner Student Responsibilities

### Preparing for Clinical

1. ***In preparation for clinicals, students are required to attend a mandatory clinical preparation day. This will be scheduled in NURS 700 for FNP/AGPCNP students and NURS 730 for PMHNP students.***
2. A clinical placement student checklist for each program detailing the requirements with expected time frames can be found on this [webpage](#).
3. Submit to the Clinical Placement Request Form at least six (6) months prior to the start of a clinical course as instructed by the clinical coordinator.
4. Franklin University Nursing faculty assigns students to clinical sites after the appropriateness of site and preceptor have been determined. Franklin University requires an affiliation agreement to be in place before student attendance at the clinical site. Preceptors are required to complete credentialing and a preceptor agreement for each student. For a preceptor to be approved, documentation of the preceptor's license, certification, resume or curriculum vitae, and acknowledgment of receipt of the preceptor handbook must be on file. Students are not permitted to participate in clinical experiences at sites that the nursing department does not approve.
5. Clinical experiences are Monday through Friday during regular business hours. ***Students are expected to work around the preceptors hours which may require amending of work and personal schedules.*** Evenings or weekends are not permitted unless prior arrangements have been made

with the clinical supervising faculty and this cannot be determined until you are registered for your clinical course.

## Responsibilities While in Clinical

1. Students are expected to begin clinical experiences in the first week of classes and attend at least once weekly through finals week unless otherwise notified by the lead course faculty member. This may lead to more hours than required for the course and provides some flexibility in case of student or preceptor illness, vacation, or unexpected days off. Hours in excess of course requirements do not count towards another course.
2. Maintain patient confidentiality. Comply with HIPAA standards per clinical agency and course syllabi policy. Under no circumstance may records be copied, photographed, or removed from the agency.
3. Adhere to all clinical agency policies and procedures. **Students must identify themselves and sign any medical records as a Nurse Practitioner Student.**
4. Maintain all required documentation, including current Basic Life Support (BLS), immunizations, healthcare insurance, and student professional liability insurance in EXXAT. The student is responsible for ensuring all documentation is current and updated throughout clinical practicums.
5. Adhere to all Franklin University policies and procedures and your state Board of Nursing rules. Failure to exhibit integrity, ethical conduct, professional standards, or any violation of the responsibilities listed herein may result in a failing grade or dismissal from the nursing program and the University. Student conduct in the clinical setting must be in a manner that demonstrates safety, adherence to professional standards, and reflects positively upon Franklin University. Furthermore, the student will notify the clinical supervising faculty immediately of any unprofessional behavior or breach of contract by the preceptor.
6. Comply with all health documentation and other professional requirements of the clinical agency prior to the start of the clinical experience, including any request for a drug screen or additional background check. **Students who are unable to successfully complete these requirements will not be permitted to complete the MSN, PGC, or DNP Nurse Practitioner track. In addition, each site may have unique requirements which the student is responsible for fulfilling.**
7. Be prepared to work the day(s) and hours of the preceptor, as agreed upon between the student, the preceptor, and the clinical supervising faculty. Students may have an occasional opportunity to work with an additional practitioner on-site. The primary preceptor must be on site during this experience. All preceptors must be approved and credentialed prior to extended periods of supervision.
8. Maintain a clinical log per course in EXXAT. Patient experiences must be entered within 72 hours of a clinical day.
9. Attend all scheduled clinical days or notify the supervising clinical faculty and the clinical preceptor if an absence is necessary. Arrange for make-up time.
10. Collaborate with the clinical preceptor and clinical supervising faculty to develop specific learning goals for this clinical experience; set up virtual site visits; ensure mid-term and final preceptor evaluation of student are completed (See Appendix III).
11. Demonstrate to the preceptor competence of specific skill(s) prior to performing them on the patient without direct supervision.

12. Maintain the student nurse practitioner role. **At no time is the student to assume a fully independent role in seeing patients** without appropriate collaboration and reporting to the preceptor per the progressive expectation algorithm.
13. Arrange appointments, either in person or electronically, with the supervising clinical faculty to discuss progress toward goal achievement.
14. **Check the Franklin University outlook email account for messages at once daily.** Your Franklin student email does not reach the Canvas LMS inbox.
15. Simulation experiences may be available for clinical hours or additional practice with permission from clinical supervising faculty.

## Clinical Course Faculty Responsibilities

### Overall Responsibility

The clinical supervising faculty is responsible for the student's clinical experience in a specific course. Faculty responsibilities that provide direct or indirect supervision of students in the clinical setting will vary by course. The course syllabus details requirements and evaluation criteria for successful student performance. In addition, courses may have specific guidelines describing clinical faculty responsibilities for a particular course, and faculty members are expected to comply with those guidelines.

### Student and Preceptor Contact

Frequent contact with the student and preceptor in the clinical setting is necessary for the supervising faculty to understand how the student is performing. Frequent contact also facilitates early intervention when a student's performance is not at the level expected for that course. A minimum of three contacts per course are expected between the clinical supervising faculty, student, and preceptor. These contacts may be made by phone, video conferencing (i.e., Zoom), or in person.

Clinical supervising faculty are responsible for evaluating the student using their own assessment data and input from the preceptors and posting the final grade for the clinical component of the course.

### Site Visits

The purposes of a site visit include observation and evaluation of the student in an actual patient care situation and observation of the student's interaction with preceptors and staff. In addition, it provides the clinical supervising faculty, the preceptor, and the student with an opportunity to discuss the student's progress. Site visits will occur between weeks 5-6 and 8-10 in a 12-week course (or weeks 6-8 and 13-15 in a 16-week course). This will permit sufficient time for remediation and additional site visits if needed. Clinical supervising faculty will make one to two site visits per term (depending on the course level) and not more than three unless circumstances warrant additional visits. The date and time of the visits are confirmed in advance by the student, and the student is responsible for facilitating the meeting with the preceptor.

Site visits may occur via virtual media such as Zoom. It is the student's responsibility to have an appropriate electronic device (i.e., Smart Phone or Tablet) and adequate data available for an electronic site visit. These visits may be recorded and available to the student for review upon request.

During the site visit, the clinical faculty will evaluate the student's progress toward clinical requirements (see Appendix), provide feedback to the student, evaluate the clinical site and the preceptor, and communicate the student's status to the course lead faculty member. Monitoring EXXAT entries to assess student progress in meeting the course requirements and competencies will be done during the site visit and routinely throughout the semester to ensure that hours and documentation are being properly recorded and in a timely manner.

Written documentation of the site visit is required, and at the conclusion of the visit, the evaluation form will be signed by the student and clinical supervising faculty member. Instructions for submitting these forms in the course and saving them to your EXXAT portfolio will be provided in the course instructions.

### Availability

The clinical supervising faculty will maintain contact with the student and preceptor at times other than the site visit. They will be available by phone when students are at the clinical site. Should a scheduling conflict or emergency arise, the clinical supervising faculty must plan with another member for coverage and notify the lead course faculty member of the change.

## Clinical Preceptor Role and Responsibilities

A preceptor guides the student's clinical learning experience while acting as a role model and supports the nurse practitioner role by facilitating student autonomy and promoting self-confidence, leading to clinical competency for safe and effective practice.

- Directs overall progressive expectations and goals for the clinical experience
- Identifies and discusses learner needs to meet course objectives
- Assesses the nature of the patient care encounters to enable the student to meet their progressive expectations and required clinical experiences
- Utilizes appropriate teaching methods to help the student meet her/his learning objectives
- Evaluates whether the student objectives have been achieved
- Provides ongoing feedback to the student
- Demonstrates attitudes and qualities consistent with the ethics of the health professions
- Completes midterm and final evaluations on EXXAT

### Expectations of Preceptors

- Review course descriptions, outcomes, and progressive clinical expectations to structure the experience.

- Meet with clinical supervisors 2-3 times per course (depending on the course) using ZOOM software for audio-video or audio-only meetings. These sessions may be recorded, but students cannot access the recording.
- Complete clinical midterm and final evaluations and send them via email promptly as set forth by the university.
- Orient the student to the clinical site and staff.
- Advise the student of expectations with respect to communication, attire, documentation, patient visits, teaching, and disposition.
- May only work with one student in the clinical setting on a given day (1:1 ratio during clinical hours), and students should not be utilized as additional staff/clinicians
- Provide patient access and help the student select appropriate patients to develop the advanced practitioner role.
- Promote a positive learning environment – encourage inquiry, critical analysis, and reflection.
- Provide direct supervision, including supervision of any clinical procedures practiced in your setting (ex. suturing, casting, & GYN exams/biopsies). Students will make a list of procedural competencies obtained.
- Be present during all student clinical experiences – substitution is accepted during absences if approved in advance.
- Validate clinical findings and data reported by the student and review documentation in medical records.
- Assist students in making differential diagnoses, offer a broad spectrum of treatment options from which they can choose, offer feedback to facilitate learning, and give homework assignments if desired.
- Observe the student for steady improvement in critical reasoning, diagnostic thinking, exam techniques, plan development, and documentation.

## Appendices

### Appendix A: Clinical/Practicum Documentation

| <p><b>All students participating in clinical / practicum experiences must meet the following health and safety requirements to be enrolled in clinical courses.</b> To ensure that documentation always meets requirements, students should provide evidence before the start of each semester.</p> <p><b>Failure to keep documents current may result in an administrative withdrawal from the course or prohibition from attending clinical until the deficit is corrected.</b></p> |                                                                                                                                                                                                                                                                                                                                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBMITTED ONCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | SUBMITTED EVERY YEAR (AS APPLICABLE)                                                                                                                                                                                                                                                                                                                                                         |
| <p><b>Tuberculin: Initial Requirements</b><br/>           2-Step Tuberculin Skin Test<br/> <b>OR</b> QuantiFeron Gold <b>OR</b> T-SPOT<br/>           TB blood tests are not affected by the BCG vaccine</p>                                                                                                                                                                                                                                                                          | <p><b>Tuberculin: Annual Requirements</b><br/>           1-Step Annual TST<br/> <b>OR</b> T-Spot <b>OR</b> QuantiFeron Gold<br/> <b>OR</b> known positive annual symptom checks from a healthcare provider<br/>           Tuberculosis Chest X-Ray: required for a positive TB test</p>                                                                                                      |
| <p><b>Hepatitis B</b><br/>           The 2 or 3-dose series documentation (and any boosters) <b>AND</b> post-vaccination anti-HBs titer showing immunity <b>OR</b><br/>           Recent anti-HBs titer showing immunity <b>OR</b><br/>           Non-responder documentation</p>                                                                                                                                                                                                     | <p><b>Influenza Vaccination</b><br/>           Effective dates: 10/1-4/30 annually</p>                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <p><b>COVID 19 Vaccination</b><br/>           Some sites require COVID vaccines and booster for attendance. Students must comply with the requirements of their site.</p>                                                                                                                                                                                                                    |
| <p><b>Measles, Mumps, Rubella (MMR)</b><br/>           2 dose series documentation <b>OR</b> titer</p>                                                                                                                                                                                                                                                                                                                                                                                | <p><b>Professional Liability Insurance</b><br/>           Minimum Liability Limits: \$1M/\$3M at the appropriate level of practice.<br/>           The policy must state that you are a nurse practitioner student.<br/>           Must be current each semester.</p>                                                                                                                        |
| <p><b>Tetanus/Diphtheria/Pertussis</b><br/>           Tdap <b>OR</b> Td vaccination with a date within 10yr</p>                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                              |
| <p><b>Varicella</b> (Chicken Pox)<br/>           Vaccine series <b>OR</b> titer</p>                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                              |
| <p><b>BLS</b><br/>           American Heart Association (AHA) BLS provider or Red Cross (including both hands on and written components)<br/>           Must be current through a semester to be placed in clinical/practicum.<br/>           *ACLS/PALS will not be accepted in lieu of BLS</p>                                                                                                                                                                                      | <p><b>Background Check and Drug Screens</b><br/>           National Criminal Background Check must be completed through <b>Verified Credentials</b> including excluded Provider Search on OIG and GSA. (Clinical/practicum facility has the right to request additional background checks and drug screens. These items must be conducted through Verified Credentials at student cost.)</p> |
| <p><b>Authorization for Release of Record</b><br/>           to clinical/practicum site</p>                                                                                                                                                                                                                                                                                                                                                                                           | <p><b>Additional Requirements: this list may change as clinical/practicum sites may require more than our standard minimum. Changes will be communicated to you in writing within 10 days of notification to the University</b></p>                                                                                                                                                          |
| <p><b>Required Education</b><br/>           Each healthcare institution will communicate to faculty and students any required educational content to be completed before participating in clinical/practicum experience</p>                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                              |

**RN License:** must be active and unencumbered in the student's primary licensing state ***and the state of clinical placement, as applicable***, throughout the nurse practitioner program. The license will be verified before each clinical rotation.

**Health Insurance:** covers acute illness and emergencies and must be maintained in active status throughout clinical courses.

**Declinations:** Declination of ANY of the compliance items requires a letter, ***typed on clinic letterhead and hand signed***, that states that the clinical site is aware of the declination and approves the student. This letter is required for every semester that the student is in clinical. To obtain a copy of the declination forms, please contact [clinicals@franklin.edu](mailto:clinicals@franklin.edu) directly. This is due by the due date for all compliance items in EXXAT.

**Note:** Clinical/practicum facility has the right to refuse access to the site due to declinations and/or require masks at their discretion.

## Appendix B: Franklin University FNP and AGPCNP Clinical Requirements

This chart represents the recommended minimum requirements for clinical hours, visits, and procedures for completing the FNP and AGPCNP Clinical Competencies.

| Population                       | Total Hours (Recommended) | Minimum Number of Visits (Required) | Procedures/Visits (Recommended)                                            | Percent of Time | Course Focus            |
|----------------------------------|---------------------------|-------------------------------------|----------------------------------------------------------------------------|-----------------|-------------------------|
| <b>Pediatric</b>                 | 50-100 hours              | 50 total                            |                                                                            | 15%             | NURS 701, 702, 703, 790 |
| Newborn (0-4 weeks) exams**      | 5                         |                                     |                                                                            |                 |                         |
| Well child (5 weeks – 5 years)** | 15                        |                                     | 15 well-child exams                                                        |                 |                         |
| School-age (5-12 years)**        | 15                        |                                     | 5 well-child exams                                                         |                 |                         |
| Adolescents (13-17)              | 15                        |                                     | 5 wellness exams or sports PE                                              |                 |                         |
|                                  |                           |                                     |                                                                            |                 |                         |
| <b>Adult</b>                     | 300-500 hours             | 300 total                           |                                                                            | 60%             | NURS 701, 702, 703, 790 |
| Ages 18-65 and Geriatric 66+     |                           |                                     | 150 episodic, acute and wellness exams<br>150 chronic care                 |                 |                         |
|                                  |                           |                                     |                                                                            |                 |                         |
| <b>Women's Health **</b>         | 50-100 hours              | 50 visits                           | 5 pelvic examinations                                                      | 15%             | NURS 701, 702, 703, 790 |
|                                  |                           |                                     |                                                                            |                 |                         |
| <b>Specialty ***</b>             | Up to 100 hours           |                                     | Specialty hours are <b><i>not required</i></b> .<br>See below for options. | 10%             | NUR 790                 |

Potential sites include clinics, medical offices, mobile clinics, rural health centers, retail health (limited), long-term care settings, school or college health centers, employee health, health departments, and other appropriate settings for the course and content.

\*Women's Health Visits may include well-woman examinations, dysmenorrhea, STI testing, pelvic pain, breast pain/mass, menopause and menopause-related problems, contraception, pregnancy, and post-partum.

\*\*Not applicable to the AGPCNP program

\*\*\*Specialty areas may include dermatology, urgent care, cardiology, pulmonary, long-term care, additional rotations in pediatrics, women's health and gerontology, telehealth, and other common specialties. The application for a specialty rotation must be pre-approved.

## Appendix C: Family Nurse Practitioner or Adult Gerontological Primary Care Nurse Practitioner Preceptor Evaluation of Student

**NOTE: This information is collected via EXXAT at the midterm and final points in the semester. The criteria for evaluation are as follows:**

- 1 = Unacceptable**
- 2 = Poor**
- 3 = Fair**
- 4 = Good**
- 5 = Excellent**

1. The student obtains a problem-focused health history from the patient, including chief complaint, history of present illness, past medical history, appropriate family and social history, and review of systems. The student performs an appropriate assessment and is able to distinguish between normal and abnormal changes, and variations of normal, across the lifespan. (AACN Domain 1, ILO 1, ILO5; MSN.PLO1, MSN.PLO4, MSN.PLO9; DNP.PLO1, DNP.PLO3, DNP.PLO5).\*
2. The student formulates appropriate diagnoses and includes comprehensive differential diagnoses while considering epidemiology, life stage development and environmental and community characteristics for each patient. (AACN Domain 2, ILO 3, ILO5; MSN.PLO8, MSN.PLO9; DNP.PLO1, DNP.PLO3, DNP.PLO5).\*
3. The student effectively demonstrates cultural competence in providing care to diverse population by actively listening, respecting diverse beliefs and practices, and adapting care to meet each patient's cultural needs. The student communicates effectively with patients, using appropriate terminology, and considers available resources and socioeconomic factors. (AACN Domain 3, ILO 3, MSN.PLO2, MSN.PLO3, MSN.PLO8; DNP.PLO1, DNP.PLO3, DNP.PLO5).\*
4. The student formulates a plan that is appropriate for the diagnosis and accurately addresses the problem identified. The student articulates how to effectively evaluate the plan, including appropriate follow-up. The plan is based on scientific rationale, evidence-based standards of care and practice guidelines. AACN Domain 4, ILO2, MSN.PLO4, MSN.PLO9; DNP.PLO1, DNP.PLO3, DNP.PLO5).\*
5. The student utilizes evidence-based practice to inform and improve nursing care and can recognize the relationship between economics and delivery of quality patient care (AACN Domain 5, ILO3, ILO4, MSN.PLO2, MSN.PLO7; DNP.PLO1, DNP.PLO3, DNP.PLO5).\*
6. The student engages in interprofessional partnerships in the clinical setting, demonstrating effective teamwork and communication skills while integrating evidence-based practice and research findings into clinical decision-making processes (AACN Essential 6, ILO1, MSN.PLO7; DNP.PLO4).\*
7. The student effectively works within the complex systems of healthcare, has an understanding of interprofessional roles, and seeks ways to improve health outcomes through collaboration (AACN Domain 7, ILO2, MSN.PLO2; DNP.PLO4, DNP.PLO5).\*
8. The student integrates healthcare informatics and patient care technology in the context of patient care, and effectively utilizes data, information systems, and technology to support safe, high-quality

patient care and clinical decision-making (AACN Essential 8, MSN.FNP5, MSN.PLO6; DNP.PLO4, DNP.PLO5).\*

9. The student communicates effectively with patients, using appropriate terminology, and provides appropriate patient education that includes follow up. The student treats the patient with respect and coaches the patient in an empathetic manner by encouraging healthy behavior changes with a non-judgmental approach. (AACN Essential 9, ILO1, ILO6, MSN.PLO7; DNP.PLO1).\*
10. The student effectively integrates interprofessional collaboration and leadership principles into the clinical care of patients, while including patient advocacy, and ethical decision-making (AACN Essential 10, ILO1, MSN.PLO2; DNP.PLO4).\*
11. Are there areas where you feel that the student excels in the clinical setting? \*
12. Are there areas of opportunity? \*
13. Would you be interested in being a preceptor for another Franklin University student? \*

## Appendix D: Family Nurse Practitioner Progressive Clinical Expectations

| Nursing 701 (150 hours)                                                                                                                                                                                                                                                                                                                                            | Weeks 1-3 | Weeks 4-6 | Weeks 7-9 | Weeks 10-12 | Learning Outcomes                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|-------------|---------------------------------------|
| 1. Completes facility orientation and reviews relevant policies and procedures.                                                                                                                                                                                                                                                                                    |           |           |           |             |                                       |
| 2. Communicates effectively with office staff, nurses, and other professionals.                                                                                                                                                                                                                                                                                    |           |           |           |             |                                       |
| 3. Maintains professional standards including dress, timeliness, and language.                                                                                                                                                                                                                                                                                     |           |           |           |             |                                       |
| 4. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                                                                                                         |           |           |           |             |                                       |
| 5. <i>Student will see at least 4 through midterm and no more than 6 (after midterm) adult patients in an 8-10 hour clinical day.</i>                                                                                                                                                                                                                              |           |           |           |             |                                       |
| 6. Has references and uses them effectively and efficiently in the clinical setting.                                                                                                                                                                                                                                                                               | 1         | 2         | 2         | 3           | MSN.PLO 4 & 9;<br>DNP.PLO 1           |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                               | 1         | 2         | 2         | 3           | MSN.PLO 2 & 9;<br>DNP.PLO 5           |
| 8. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues.                                                                                                                                                                                                 | 1         | 2         | 2         | 3           | MSN.PLO 3, 6, 7, & 8<br>DNP.PLO 3 & 4 |
| 9. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. | 1         | 2         | 2         | 3           | MSN.PLO 1 & 9<br>DNP.PLO 1            |
| 10. Performs appropriate and accurate physical examination on the <b>adult patient (18+)</b> for the presenting problem using correct techniques and equipment.                                                                                                                                                                                                    | 1         | 2         | 2         | 3           | MSN.PLO 9<br>DNP.PLO 1                |

|                                                                                                                                                                                                |   |   |   |     |                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|-----|-------------------------------------------------|
| 11. Identifies appropriate diagnostic testing as appropriate.                                                                                                                                  | 1 | 2 | 2 | 3   | MSN.PLO<br>2 & 9<br><br>DNP.PLO<br>1 & 5        |
| 12. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).                                                                                        | 1 | 2 | 2 | 3   | MSN.PLO<br>2 & 9<br><br>DNP.PLO<br>1            |
| 13. Arrives at correct diagnosis based on clinical data.                                                                                                                                       | 1 | 2 | 2 | 3   | MSN.PLO<br>2 & 9<br><br>DNP.PLO<br>1            |
| 14. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. | 1 | 2 | 2 | 3   | MSN.PLO<br>2, 4, 8, & 9<br><br>DNP.PLO<br>1 & 3 |
| 15. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.                                                  | 1 | 2 | 2 | 3   | MSN.PLO<br>3, 7, & 8<br><br>DNP.PLO<br>3 & 4    |
| 16. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.                             | 1 | 2 | 2 | 3   | MSN.PLO<br>3, 7, & 8<br><br>DNP.PLO<br>3        |
| 17. Chooses appropriate medication and therapeutic dosage.                                                                                                                                     | 1 | 2 | 2 | 3   | MSN.PLO<br>2 & 9<br><br>DNP.PLO<br>1            |
| 18. Determines healthcare maintenance and screening needs utilizing USPSTF recommendations.                                                                                                    | 1 | 2 | 2 | 3-4 | MSN.PLO<br>4, 8, & 9<br><br>DNP.PLO<br>1 & 5    |
| 19. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.                                                          | 1 | 2 | 2 | 3-4 | MSN.PLO<br>2, 5, & 7<br><br>DNP.PLO<br>5        |

|                                                                                                                                                                          |           |           |           |             |                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|-------------|--------------------------------------|
| 20. Presents patients to preceptor in a thorough, concise, and organized manner.                                                                                         | 1         | 2         | 2         | 3-4         | MSN.PLO<br>6 & 7<br>DNP.PLO<br>4     |
| 21. Identify patients whose health needs require urgent or emergent care.                                                                                                | 1         | 2         | 2         | 3-4         | MSN.PLO<br>2, 3, & 9<br>DNP.PLO<br>3 |
| 22. Completes patient encounter in a timely manner. New patient or complete exam (90 minutes); Chronic or complex visit (60 minutes); Acute episodic visit (45 minutes). | 1         | 2         | 2         | 3-4         | MSN.PLO<br>2 & 6<br>DNP.PLO<br>2 & 3 |
| 23. Incorporates cost in decision-making.                                                                                                                                | 1         | 2         | 2         | 3           | MSN.PLO<br>2 & 6<br>DNP.PLO<br>2 & 3 |
| 24. Correctly uses ICD coding for diagnosis documentation.                                                                                                               | 1         | 2         | 2         | 3           | MSN.PLO<br>2 & 5<br>DNP.PLO<br>2 & 5 |
| <b>Nursing 702 (150 hours)</b>                                                                                                                                           | Weeks 1-3 | Weeks 4-6 | Weeks 7-9 | Weeks 10-15 | Learning Outcomes                    |
| 1. Completes facility orientation and reviews relevant policies and procedures.                                                                                          |           |           |           |             |                                      |
| 2. Communicates effectively with office staff, nurses, and other professionals.                                                                                          |           |           |           |             |                                      |
| 3. Maintains professional standards including dress, timeliness, and language.                                                                                           |           |           |           |             |                                      |
| 4. Demonstrates interest and takes initiative in learning.                                                                                                               |           |           |           |             |                                      |
| 5. <i>Student will see 6 through midterm and no more than 8 (after midterm) adult and adolescent patients in an 8-10 hour clinical day.</i>                              |           |           |           |             |                                      |
| 6. Has references and uses them effectively and efficiently in the clinical setting.                                                                                     | 3         | 3         | 3         | 3           | MSN.PLO<br>4 & 9;<br>DNP.PLO<br>1    |

|                                                                                                                                                                                                                                                                                                                                                                    |   |   |     |   |                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|-----|---|---------------------------------------------|
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                               | 3 | 3 | 3   | 3 | MSN.PLO<br>2 & 9;<br>DNP.PLO<br>5           |
| 8. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues. <i>Communication incorporates knowledge of child growth and development.</i>                                                                                                                    | 3 | 3 | 3   | 3 | MSN.PLO<br>3, 6, 7, & 8<br>DNP.PLO<br>3 & 4 |
| 9. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. | 3 | 3 | 3   | 3 | MSN.PLO<br>1 & 9<br>DNP.PLO<br>1            |
| 10. Performs appropriate and accurate physical examination on <b>adult and adolescent patients (13-17 only)</b> for the presenting problem using correct techniques and equipment. <i>Performs examination considering the patient's age and stage of development.</i>                                                                                             | 3 | 3 | 3   | 3 | MSN.PLO<br>9<br>DNP.PLO<br>1                |
| 11. Identifies appropriate diagnostic testing as appropriate.                                                                                                                                                                                                                                                                                                      | 3 | 3 | 3   | 4 | MSN.PLO<br>2 & 9<br>DNP.PLO<br>1 & 5        |
| 12. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).                                                                                                                                                                                                                                                            | 3 | 3 | 3   | 4 | MSN.PLO<br>2 & 9<br>DNP.PLO<br>1            |
| 13. Arrives at correct diagnosis based on clinical data.                                                                                                                                                                                                                                                                                                           | 3 | 3 | 3   | 4 | MSN.PLO<br>2 & 9<br>DNP.PLO<br>1            |
| 14. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. <i>Incorporates knowledge of growth and development in development of treatment plan.</i>                                                                           | 3 | 3 | 3-4 | 4 | MSN.PLO<br>2, 4, 8, & 9<br>DNP.PLO<br>1 & 3 |

|                                                                                                                                                                          |   |   |     |     |                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|-----|-----|------------------------------------------|
| 15. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.                            | 3 | 3 | 3-4 | 4   | MSN.PLO<br>3, 7, & 8<br>DNP.PLO<br>3 & 4 |
| 16. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.       | 3 | 3 | 3-4 | 3-4 | MSN.PLO<br>3, 7, & 8<br>DNP.PLO<br>3     |
| 17. Chooses appropriate medication and therapeutic dosage.<br><i>Can calculate medication dosage for pediatric patients.</i>                                             | 3 | 3 | 3-4 | 4   | MSN.PLO<br>2 & 9<br>DNP.PLO<br>1         |
| 18. Determines healthcare maintenance and screening needs for adult and pediatric patients utilizing USPSTF recommendations.                                             | 3 | 3 | 3-4 | 3-4 | MSN.PLO<br>4, 8, & 9<br>DNP.PLO<br>1 & 5 |
| 19. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.                                    | 3 | 3 | 3   | 3-4 | MSN.PLO<br>2, 5, & 7<br>DNP.PLO<br>5     |
| 20. Presents patients to preceptor in a thorough, concise, and organized manner.                                                                                         | 3 | 3 | 3   | 3-4 | MSN.PLO<br>6 & 7<br>DNP.PLO<br>4         |
| 21. Identify patients whose health needs require urgent or emergent care.                                                                                                | 3 | 3 | 3   | 3-4 | MSN.PLO<br>2, 3, & 9<br>DNP.PLO<br>3     |
| 22. Completes patient encounter in a timely manner. New patient or complete exam (60 minutes); Chronic or complex visit (45 minutes); Acute episodic visit (30 minutes). | 3 | 3 | 3   | 3-4 | MSN.PLO<br>2 & 6<br>DNP.PLO<br>2 & 3     |
| 23. Incorporates cost in decision-making.                                                                                                                                | 3 | 3 | 3   | 3-4 | MSN.PLO<br>2 & 6<br>DNP.PLO<br>2 & 3     |

|                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |           |           |             |                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|-------------|-------------------------------------------------|
| 24. Correctly uses ICD coding for diagnosis documentation.                                                                                                                                                                                                                                                                                                                                                                                  | 3         | 3         | 3         | 3-4         | MSN.PLO<br>2 & 5<br><br>DNP.PLO<br>2 & 5        |
| <b>Nursing 703 (150 hours)</b>                                                                                                                                                                                                                                                                                                                                                                                                              | Weeks 1-3 | Weeks 4-6 | Weeks 7-9 | Weeks 10-15 | Learning<br>Outcomes                            |
| 1. Completes facility orientation and reviews relevant policies and procedures.                                                                                                                                                                                                                                                                                                                                                             |           |           |           |             |                                                 |
| 2. Communicates effectively with office staff, nurses, and other professionals.                                                                                                                                                                                                                                                                                                                                                             |           |           |           |             |                                                 |
| 3. Maintains professional standards including dress, timeliness, and language.                                                                                                                                                                                                                                                                                                                                                              |           |           |           |             |                                                 |
| 4. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                                                                                                                                                                                  |           |           |           |             |                                                 |
| 5. <i>Student will see 8-10 adult, pediatric, and geriatric patients in an 8-hour clinical day. Primary focus woman and men's health, birth to 12, and older adult</i>                                                                                                                                                                                                                                                                      |           |           |           |             |                                                 |
| 6. Has references and uses them effectively and efficiently in the clinical setting.                                                                                                                                                                                                                                                                                                                                                        | 5         | 5         | 5         | 5           | MSN.PLO<br>4 & 9;<br>DNP.PLO<br>1               |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                                                                                                        | 5         | 5         | 5         | 5           | MSN.PLO<br>2 & 9;<br>DNP.PLO<br>5               |
| 8. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues. <i>Evaluates and incorporates communication challenges (vision and hearing deficits).</i>                                                                                                                                                                                | 5         | 5         | 5         | 5           | MSN.PLO<br>3, 6, 7, & 8<br><br>DNP.PLO<br>3 & 4 |
| 9. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. <i>Considers co-morbidities and chronic illness when obtaining data.</i> | 5         | 5         | 5         | 5           | MSN.PLO<br>1 & 9<br><br>DNP.PLO<br>1            |

|                                                                                                                                                                                                                                                                                    |   |   |   |     |                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|-----|-------------------------------------------------|
| <i>Student will see 8-10 adult, pediatric, and geriatric patients in an 8-hour clinical day. Primary focus woman and men's health, birth to 12, and older adult</i>                                                                                                                |   |   |   |     |                                                 |
| 10. Performs appropriate and accurate physical examination on <b>patients across the life span</b> for the presenting problem using correct techniques and equipment.                                                                                                              | 3 | 4 | 4 | 4-5 | MSN.PLO<br>9<br><br>DNP.PLO<br>1                |
| 11. Identifies appropriate diagnostic testing as appropriate.                                                                                                                                                                                                                      | 3 | 4 | 4 | 4-5 | MSN.PLO<br>2 & 9<br><br>DNP.PLO<br>1 & 5        |
| 12. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).                                                                                                                                                                            | 4 | 4 | 4 | 4-5 | MSN.PLO<br>2 & 9<br><br>DNP.PLO<br>1            |
| 13. Arrives at correct diagnosis based on clinical data.                                                                                                                                                                                                                           | 3 | 4 | 4 | 4-5 | MSN.PLO<br>2 & 9<br><br>DNP.PLO<br>1            |
| 14. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. <i>Considers functional status and polypharmacy when developing treatment plan.</i> | 3 | 4 | 4 | 4-5 | MSN.PLO<br>2, 4, 8, & 9<br><br>DNP.PLO<br>1 & 3 |
| 15. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.                                                                                                                                      | 3 | 4 | 4 | 4-5 | MSN.PLO<br>3, 7, & 8<br><br>DNP.PLO<br>3 & 4    |
| 16. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.                                                                                                                 | 3 | 4 | 4 | 4-5 | MSN.PLO<br>3, 7, & 8<br><br>DNP.PLO<br>3        |
| 17. Chooses appropriate medication and therapeutic dosage.                                                                                                                                                                                                                         | 3 | 4 | 4 | 4-5 | MSN.PLO<br>2 & 9<br><br>DNP.PLO<br>1            |

|                                                                                                                                                                                |           |           |           |             |                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|-------------|----------------------------------------------|
| 18. Determines healthcare maintenance and screening needs utilizing USPSTF recommendations.                                                                                    | 3         | 4         | 4         | 4-5         | MSN.PLO<br>4, 8, & 9<br><br>DNP.PLO<br>1 & 5 |
| 19. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.                                          | 4         | 4         | 4         | 4-5         | MSN.PLO<br>2, 5, & 7<br><br>DNP.PLO<br>5     |
| 20. Presents patients to preceptor in a thorough, concise, and organized manner.                                                                                               | 4         | 4         | 4         | 4-5         | MSN.PLO<br>6 & 7<br><br>DNP.PLO<br>4         |
| 21. Identify patients whose health needs require urgent or emergent care.                                                                                                      | 4         | 4         | 4         | 4-5         | MSN.PLO<br>2, 3, & 9<br><br>DNP.PLO<br>3     |
| 22. Completes patient encounter in a timely manner. New patient or complete exam (45 minutes); Chronic or complex visit (30-45 minutes); Acute episodic visit (15-30 minutes). | 3-4       | 4         | 4         | 4-5         | MSN.PLO<br>2 & 6<br><br>DNP.PLO<br>2 & 3     |
| 23. Incorporates cost in decision-making.                                                                                                                                      | 4         | 4         | 4         | 4-5         | MSN.PLO<br>2 & 6<br><br>DNP.PLO<br>2 & 3     |
| 24. Correctly uses ICD coding for diagnosis documentation.                                                                                                                     | 4         | 4         | 4         | 4-5         | MSN.PLO<br>2 & 5<br><br>DNP.PLO<br>2 & 5     |
| <b>Nursing 790 (150 hours)</b>                                                                                                                                                 | Weeks 1-3 | Weeks 4-6 | Weeks 7-9 | Weeks 10-15 | Learning Outcomes                            |
| 1. Completes facility orientation and reviews relevant policies and procedures.                                                                                                |           |           |           |             |                                              |
| 2. Communicates effectively with office staff, nurses, and other professionals.                                                                                                |           |           |           |             |                                              |
| 3. Maintains professional standards including dress, timeliness, and language.                                                                                                 |           |           |           |             |                                              |

|                                                                                                                                                                                                                                                                                                                                                                                                                                             |     |     |   |   |                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|---|---|---------------------------------------|
| 4. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                                                                                                                                                                                  |     |     |   |   |                                       |
| 5. <i>Student will see 10-12 patients in an 8-hour clinical day. Specialty rotations limited to 6-7 patients and expectation level 3-4</i>                                                                                                                                                                                                                                                                                                  |     |     |   |   |                                       |
| 6. Has references and uses them effectively and efficiently in the clinical setting.                                                                                                                                                                                                                                                                                                                                                        | 5   | 5   | 5 | 5 | MSN.PLO 4 & 9;<br>DNP.PLO 1           |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                                                                                                        | 5   | 5   | 5 | 5 | MSN.PLO 2 & 9;<br>DNP.PLO 5           |
| 8. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues. <i>Evaluates and incorporates communication challenges (speech, vision, and hearing deficits).</i>                                                                                                                                                                       | 5   | 5   | 5 | 5 | MSN.PLO 3, 6, 7, & 8<br>DNP.PLO 3 & 4 |
| 9. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. <i>Considers co-morbidities and chronic illness when obtaining data.</i> | 4-5 | 4-5 | 5 | 5 | MSN.PLO 1 & 9<br>DNP.PLO 1            |
| 10. Performs appropriate and accurate physical examination on <b>adult, pediatric, and geriatric patients</b> (specific components) for the presenting problem using correct techniques and equipment.                                                                                                                                                                                                                                      | 4-5 | 4-5 | 5 | 5 | MSN.PLO 9<br>DNP.PLO 1                |
| 11. Identifies appropriate diagnostic testing as appropriate.                                                                                                                                                                                                                                                                                                                                                                               | 4-5 | 4-5 | 5 | 5 | MSN.PLO 2 & 9<br>DNP.PLO 1 & 5        |
| 12. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).                                                                                                                                                                                                                                                                                                                                     | 5   | 5   | 5 | 5 | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 13. Arrives at correct diagnosis based on clinical data.                                                                                                                                                                                                                                                                                                                                                                                    | 5   | 5   | 5 | 5 | MSN.PLO 2 & 9                         |

|                                                                                                                                                                                                                                                                                    |     |     |   |   |                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|---|---|-------------------------------------------------|
|                                                                                                                                                                                                                                                                                    |     |     |   |   | DNP.PLO<br>1                                    |
| 14. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. <i>Considers functional status and polypharmacy when developing treatment plan.</i> | 4-5 | 4-5 | 5 | 5 | MSN.PLO<br>2, 4, 8, & 9<br><br>DNP.PLO<br>1 & 3 |
| 15. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.                                                                                                                                      | 4-5 | 4-5 | 5 | 5 | MSN.PLO<br>3, 7, & 8<br><br>DNP.PLO<br>3 & 4    |
| 16. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.                                                                                                                 | 4-5 | 4-5 | 5 | 5 | MSN.PLO<br>3, 7, & 8<br><br>DNP.PLO<br>3        |
| 17. Chooses appropriate medication and therapeutic dosage.                                                                                                                                                                                                                         | 4-5 | 4-5 | 5 | 5 | MSN.PLO<br>2 & 9<br><br>DNP.PLO<br>1            |
| 18. Determines healthcare maintenance and screening needs utilizing USPSTF recommendations.                                                                                                                                                                                        | 4-5 | 4-5 | 5 | 5 | MSN.PLO<br>4, 8, & 9<br><br>DNP.PLO<br>1 & 5    |
| 19. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.                                                                                                                                              | 4-5 | 5   | 5 | 5 | MSN.PLO<br>2, 5, & 7<br><br>DNP.PLO<br>5        |
| 20. Presents patients to preceptor in a thorough, concise, and organized manner.                                                                                                                                                                                                   | 5   | 5   | 5 | 5 | MSN.PLO<br>6 & 7<br><br>DNP.PLO<br>4            |
| 21. Identify patients whose health needs require urgent or emergent care.                                                                                                                                                                                                          | 5   | 5   | 5 | 5 | MSN.PLO<br>2, 3, & 9<br><br>DNP.PLO<br>3        |
| 22. Completes patient encounter in a timely manner. New patient or complete exam (45 minutes); Chronic or                                                                                                                                                                          | 4-5 | 4-5 | 5 | 5 | MSN.PLO<br>2 & 6                                |

|                                                                |     |     |   |   |                                          |
|----------------------------------------------------------------|-----|-----|---|---|------------------------------------------|
| complex visit (30 minutes); Acute episodic visit (15 minutes). |     |     |   |   | DNP.PLO<br>2 & 3                         |
| 23. Incorporates cost in decision-making.                      | 4-5 | 4-5 | 5 | 5 | MSN.PLO<br>2 & 6<br><br>DNP.PLO<br>2 & 3 |
| 24. Correctly uses ICD coding for diagnosis documentation.     | 4-5 | 4-5 | 5 | 5 | MSN.PLO<br>2 & 5<br><br>DNP.PLO<br>2 & 5 |

### Levels of independence

|                                                                                |                                                                       |
|--------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| 1. Observation only                                                            |                                                                       |
| 2. Performance and decision making done with preceptor present                 | *Requires detailed assistance                                         |
| 3. Performance and decision making done in collaboration with preceptor        | *Requires moderate assistance                                         |
| 4. Performance and decision making done with minimal assistance from preceptor | *Requires minimal assistance                                          |
| 5. Performance and decision making done independent of preceptor               | *Requires no assistance; ALL cases reviewed and approved by preceptor |

Adapted from:

Pearson, T., Garrett, L., Hossler, S., McConnell, P, & Walls, J. (2012). A progressive nurse practitioner student evaluation tool. *Journal of the American Academy of Nurse Practitioners*, 24 (6).

Based on:

National Organization of Nurse Practitioner Faculties (2013). Population-Focused Nurse Practitioner Competencies. Washington, DC: Author.

National Organization of Nurse Practitioner Faculties (2021). Nurse Practitioner Role Competencies. Washington, DC: Author.

## Appendix E: Adult Gero Primary Care Nurse Practitioner Progressive Clinical Expectations

### Progressive Clinical Expectations AGPCNP

| Nursing 701 (150 hours)                                                                                                                                                                                                                                                                                                                                            | Weeks<br>1-3 | Weeks<br>4-6 | Weeks<br>7-9 | Weeks<br>10-12 | Learning<br>Outcomes                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------|--------------|----------------|---------------------------------------|
| 1. Completes facility orientation and reviews relevant policies and procedures.                                                                                                                                                                                                                                                                                    |              |              |              |                |                                       |
| 2. Communicates effectively with office staff, nurses, and other professionals.                                                                                                                                                                                                                                                                                    |              |              |              |                |                                       |
| 3. Maintains professional standards including dress, timeliness, and language.                                                                                                                                                                                                                                                                                     |              |              |              |                |                                       |
| 4. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                                                                                                         |              |              |              |                |                                       |
| 5. <i>Student will see at least 4 through midterm and no more than 6 (after midterm) adult patients in an 8–10-hour clinical day.</i>                                                                                                                                                                                                                              |              |              |              |                |                                       |
| 6. Has references and uses them effectively and efficiently in the clinical setting.                                                                                                                                                                                                                                                                               | 1            | 2            | 2            | 3              | MSN.PLO 4 & 9;<br>DNP.PLO 1           |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                               | 1            | 2            | 2            | 3              | MSN.PLO 2 & 9;<br>DNP.PLO 5           |
| 8. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues.                                                                                                                                                                                                 | 1            | 2            | 2            | 3              | MSN.PLO 3, 6, 7, & 8<br>DNP.PLO 3 & 4 |
| 9. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. | 1            | 2            | 2            | 3              | MSN.PLO 1 & 9<br>DNP.PLO 1            |
| 9. Performs appropriate and accurate physical examination on the <b>adult patient (18+)</b> for the presenting problem using correct techniques and equipment.                                                                                                                                                                                                     | 1            | 2            | 2            | 3              | MSN.PLO 9<br>DNP.PLO 1                |
| 10. Identifies appropriate diagnostic testing as appropriate.                                                                                                                                                                                                                                                                                                      | 1            | 2            | 2            | 3              | MSN.PLO 2 & 9<br>DNP.PLO              |

|                                                                                                                                                                                                |   |   |   |     |                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|-----|---------------------------------------|
|                                                                                                                                                                                                |   |   |   |     | 1 & 5                                 |
| 11. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).                                                                                        | 1 | 2 | 2 | 3   | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 12. Arrives at correct diagnosis based on clinical data.                                                                                                                                       | 1 | 2 | 2 | 3   | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 13. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. | 1 | 2 | 2 | 3   | MSN.PLO 2, 4, 8, & 9<br>DNP.PLO 1 & 3 |
| 14. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.                                                  | 1 | 2 | 2 | 3   | MSN.PLO 3, 7, & 8<br>DNP.PLO 3 & 4    |
| 15. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.                             | 1 | 2 | 2 | 3   | MSN.PLO 3, 7, & 8<br>DNP.PLO 3        |
| 16. Chooses appropriate medication and therapeutic dosage.                                                                                                                                     | 1 | 2 | 2 | 3   | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 17. Determines healthcare maintenance and screening needs utilizing USPSTF recommendations.                                                                                                    | 1 | 2 | 2 | 3-4 | MSN.PLO 4, 8, & 9<br>DNP.PLO 1 & 5    |
| 18. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.                                                          | 1 | 2 | 2 | 3-4 | MSN.PLO 2, 5, & 7<br>DNP.PLO 5        |
| 19. Presents patients to preceptor in a thorough, concise, and organized manner.                                                                                                               | 1 | 2 | 2 | 3-4 | MSN.PLO 6 & 7<br>DNP.PLO 4            |
| 20. Identify patients whose health needs require urgent or emergent care.                                                                                                                      | 1 | 2 | 2 | 3-4 | MSN.PLO 2, 3, & 9<br>DNP.PLO 3        |

|                                                                                                                                                                                                                                                                             |              |              |              |                |                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------|--------------|----------------|-------------------------------------------------|
| 21. Completes patient encounter in a timely manner.<br>New patient or complete exam (90 minutes);<br>Chronic or complex visit (60 minutes); Acute<br>episodic visit (45 minutes).                                                                                           | 1            | 2            | 2            | 3-4            | MSN.PLO 2<br>& 6<br><br>DNP.PLO 2<br>& 3        |
| 22. Incorporates cost in decision-making.                                                                                                                                                                                                                                   | 1            | 2            | 2            | 3              | MSN.PLO 2<br>& 6<br><br>DNP.PLO 2<br>& 3        |
| 23. Correctly uses ICD coding for diagnosis documentation.                                                                                                                                                                                                                  | 1            | 2            | 2            | 3              | MSN.PLO 2<br>& 5<br><br>DNP.PLO 2<br>& 5        |
| <b>Nursing 702 (150 hours)</b>                                                                                                                                                                                                                                              | Weeks<br>1-3 | Weeks<br>4-6 | Weeks<br>7-9 | Weeks<br>10-15 | Learning<br>Outcomes                            |
| 1. Completes facility orientation and reviews relevant<br>policies and procedures.                                                                                                                                                                                          |              |              |              |                |                                                 |
| 2. Communicates effectively with office staff, nurses, and<br>other professionals.                                                                                                                                                                                          |              |              |              |                |                                                 |
| 3. Maintains professional standards including dress,<br>timeliness, and language.                                                                                                                                                                                           |              |              |              |                |                                                 |
| 4. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                  |              |              |              |                |                                                 |
| 5. <i>Student will see 6 through midterm and no more than 8<br/>(after midterm) adult and adolescent patients in an 8–<br/>10-hour clinical day.</i>                                                                                                                        |              |              |              |                |                                                 |
| 6. Has references and uses them effectively and efficiently<br>in the clinical setting.                                                                                                                                                                                     | 3            | 3            | 3            | 3              | MSN.PLO 4<br>& 9;<br>DNP.PLO 1                  |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                        | 3            | 3            | 3            | 3              | MSN.PLO 2<br>& 9;<br>DNP.PLO 5                  |
| 8. Demonstrates effective communication with patients<br>and their families including ability to recognize<br>cultural nuances and manage sensitive or emotional<br>issues. <i>Communication incorporates knowledge of<br/>adolescent growth and development.</i>           | 3            | 3            | 3            | 3              | MSN.PLO 3,<br>6, 7, & 8<br><br>DNP.PLO 3<br>& 4 |
| 9. Obtains subjective assessment date: history of<br>present illness (HPI), review of systems (ROS), past<br>medical history (PMH), medications, family history<br>(FH), and relevant social history (SH) for patients<br>presenting for complete physical examinations and | 3            | 3            | 3            | 3              | MSN.PLO 1<br>& 9<br><br>DNP.PLO 1               |

|                                                                                                                                                                                                                                                                                   |   |   |     |     |                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|-----|-----|---------------------------------------|
| episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data.                                                                                                                                                                                |   |   |     |     |                                       |
| 10. Performs appropriate and accurate physical examination on <b>adult and adolescent patients (13-17 only)</b> for the presenting problem using correct techniques and equipment. <i>Performs examination considering the patient's age and stage of development.</i>            | 3 | 3 | 3   | 3   | MSN.PLO 9<br>DNP.PLO 1                |
| 11. Identifies appropriate diagnostic testing as appropriate.                                                                                                                                                                                                                     | 3 | 3 | 3   | 4   | MSN.PLO 2 & 9<br>DNP.PLO 1 & 5        |
| 12. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).                                                                                                                                                                           | 3 | 3 | 3   | 4   | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 13. Arrives at correct diagnosis based on clinical data.                                                                                                                                                                                                                          | 3 | 3 | 3   | 4   | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 14. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. <i>Incorporates knowledge of growth, development, and aging in treatment plan.</i> | 3 | 3 | 3-4 | 4   | MSN.PLO 2, 4, 8, & 9<br>DNP.PLO 1 & 3 |
| 15. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.                                                                                                                                     | 3 | 3 | 3-4 | 4   | MSN.PLO 3, 7, & 8<br>DNP.PLO 3 & 4    |
| 16. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.                                                                                                                | 3 | 3 | 3-4 | 3-4 | MSN.PLO 3, 7, & 8<br>DNP.PLO 3        |
| 17. Chooses appropriate medication and therapeutic dosage. <i>Can calculate medication dosage for patient population.</i>                                                                                                                                                         | 3 | 3 | 3-4 | 4   | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 18. Determines healthcare maintenance and screening needs for adult and adolescent patients utilizing USPSTF                                                                                                                                                                      | 3 | 3 | 3-4 | 3-4 | MSN.PLO 4, 8, & 9<br>DNP.PLO 1        |

|                                                                                                                                                                                   |           |             |           |             |                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------|-----------|-------------|--------------------------------|
| recommendations.                                                                                                                                                                  |           |             |           |             | & 5                            |
| 19. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.                                             | 3         | 3           | 3         | 3-4         | MSN.PLO 2, 5, & 7<br>DNP.PLO 5 |
| 20. Presents patients to preceptor in a thorough, concise, and organized manner.                                                                                                  | 3         | 3           | 3         | 3-4         | MSN.PLO 6 & 7<br>DNP.PLO 4     |
| 21. Identify patients whose health needs require urgent or emergent care.                                                                                                         | 3         | 3           | 3         | 3-4         | MSN.PLO 2, 3, & 9<br>DNP.PLO 3 |
| 22. Completes patient encounter in a timely manner.<br>New patient or complete exam (60 minutes);<br>Chronic or complex visit (45 minutes); Acute<br>episodic visit (30 minutes). | 3         | 3           | 3         | 3-4         | MSN.PLO 2 & 6<br>DNP.PLO 2 & 3 |
| 23. Incorporates cost in decision-making.                                                                                                                                         | 3         | 3           | 3         | 3-4         | MSN.PLO 2 & 6<br>DNP.PLO 2 & 3 |
| 24. Correctly uses ICD coding for diagnosis documentation.                                                                                                                        | 3         | 3           | 3         | 3-4         | MSN.PLO 2 & 5<br>DNP.PLO 2 & 5 |
| <b>Nursing 710 (150 hours)</b>                                                                                                                                                    | Weeks 1-3 | Weeks 10-15 | Weeks 7-9 | Weeks 10-15 | Learning Outcomes              |
| 1. Completes facility orientation and reviews relevant policies and procedures.                                                                                                   |           |             |           |             |                                |
| 2. Communicates effectively with office staff, nurses, and other professionals.                                                                                                   |           |             |           |             |                                |
| 3. Maintains professional standards including dress, timeliness, and language.                                                                                                    |           |             |           |             |                                |
| 4. Demonstrates interest and takes initiative in learning.                                                                                                                        |           |             |           |             |                                |
| 5. <i>Student will see 8-10 adult, pediatric, and geriatric patients in an 8-hour clinical day. Primary focus woman and men's health, adolescents 13-17, and older adult</i>      |           |             |           |             |                                |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |        |     |   |   |                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----|---|---|-------------------------------------------|
| 6. Has references and uses them effectively and efficiently in the clinical setting.                                                                                                                                                                                                                                                                                                                                                                                                              | 5      | 5   | 5 | 5 | MSN.PLO 4 & 9;<br>DNP.PLO 1               |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 5      | 5   | 5 | 5 | MSN.PLO 2 & 9;<br>DNP.PLO 5               |
| 8. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues. <i>Evaluates and incorporates communication challenges (vision and hearing deficits).</i>                                                                                                                                                                                                                                      | 5      | 5   | 5 | 5 | MSN.PLO 3, 6, 7, & 8<br><br>DNP.PLO 3 & 4 |
| 9. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. <i>Considers co-morbidities and chronic illness when obtaining data. Student will see 8-10 adult, pediatric, and geriatric</i> | 5      | 5   | 5 | 5 | MSN.PLO 1 & 9<br><br>DNP.PLO 1            |
| 10. Performs appropriate and accurate physical examination on <b>patients across the life span</b> for the presenting problem using correct techniques and equipment.                                                                                                                                                                                                                                                                                                                             | 3      | 4-5 | 5 | 5 | MSN.PLO 9<br><br>DNP.PLO 1                |
| 11. Identifies appropriate diagnostic testing as appropriate.                                                                                                                                                                                                                                                                                                                                                                                                                                     | 3<br>3 | 4-5 | 5 | 5 | MSN.PLO 2 & 9<br><br>DNP.PLO 1 & 5        |
| 12. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).                                                                                                                                                                                                                                                                                                                                                                                           | 4      | 4-5 | 5 | 5 | MSN.PLO 2 & 9<br><br>DNP.PLO 1            |
| 13. Arrives at correct diagnosis based on clinical data.                                                                                                                                                                                                                                                                                                                                                                                                                                          | 3      | 4-5 | 5 | 5 | MSN.PLO 2 & 9<br><br>DNP.PLO 1            |
| 14. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. <i>Considers functional status and polypharmacy when developing treatment plan.</i>                                                                                                                                                                                                                | 3      | 4-5 | 5 | 5 | MSN.PLO 2, 4, 8, & 9<br><br>DNP.PLO 1 & 3 |

|                                                                                                                                                                                |     |     |   |   |                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|---|---|------------------------------------|
| 15. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.                                  | 3   | 4-5 | 5 | 5 | MSN.PLO 3, 7, & 8<br>DNP.PLO 3 & 4 |
| 16. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.             | 3   | 4-5 | 5 | 5 | MSN.PLO 3, 7, & 8<br>DNP.PLO 3     |
| 17. Chooses appropriate medication and therapeutic dosage.                                                                                                                     | 3   | 4-5 | 5 | 5 | MSN.PLO 2 & 9<br>DNP.PLO 1         |
| 18. Determines healthcare maintenance and screening needs utilizing USPSTF recommendations.                                                                                    | 3   | 4-5 | 5 | 5 | MSN.PLO 4, 8, & 9<br>DNP.PLO 1 & 5 |
| 19. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.                                          | 4   | 4-5 | 5 | 5 | MSN.PLO 2, 5, & 7<br>DNP.PLO 5     |
| 20. Presents patients to preceptor in a thorough, concise, and organized manner.                                                                                               | 4   | 4-5 | 5 | 5 | MSN.PLO 6 & 7<br>DNP.PLO 4         |
| 21. Identify patients whose health needs require urgent or emergent care.                                                                                                      | 4   | 4-5 | 5 | 5 | MSN.PLO 2, 3, & 9<br>DNP.PLO 3     |
| 22. Completes patient encounter in a timely manner. New patient or complete exam (45 minutes); Chronic or complex visit (30-45 minutes); Acute episodic visit (15-30 minutes). | 3-4 | 4-5 | 5 | 5 | MSN.PLO 2 & 6<br>DNP.PLO 2 & 3     |
| 23. Incorporates cost in decision-making.                                                                                                                                      | 4   | 4-5 | 5 | 5 | MSN.PLO 2 & 6<br>DNP.PLO 2 & 3     |
| 24. Correctly uses ICD coding for diagnosis documentation.                                                                                                                     | 4   | 4-5 | 5 | 5 | MSN.PLO 2 & 5<br>DNP.PLO 2 & 5     |

| Nursing 791 (150 hours)                                                                                                                                                                                                                                                                                                                                                                                                                     | Weeks 1-3 | Weeks 4-6 | Weeks 7-9 | Weeks 10-15 | Learning Outcomes                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|-------------|---------------------------------------|
| 1. Completes facility orientation and reviews relevant policies and procedures.                                                                                                                                                                                                                                                                                                                                                             |           |           |           |             |                                       |
| 2. Communicates effectively with office staff, nurses, and other professionals.                                                                                                                                                                                                                                                                                                                                                             |           |           |           |             |                                       |
| 3. Maintains professional standards including dress, timeliness, and language.                                                                                                                                                                                                                                                                                                                                                              |           |           |           |             |                                       |
| 4. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                                                                                                                                                                                  |           |           |           |             |                                       |
| <i>Student will see 10-12 patients in an 8-hour clinical day.</i>                                                                                                                                                                                                                                                                                                                                                                           |           |           |           |             |                                       |
| 5. <i>Specialty rotations limited to 6-7 patients and expectation level 3-4</i>                                                                                                                                                                                                                                                                                                                                                             |           |           |           |             |                                       |
| 6. Has references and uses them effectively and efficiently in the clinical setting.                                                                                                                                                                                                                                                                                                                                                        | 5         | 5         | 5         | 5           | MSN.PLO 4 & 9;<br>DNP.PLO 1           |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                                                                                                        | 5         | 5         | 5         | 5           | MSN.PLO 2 & 9;<br>DNP.PLO 5           |
| 8. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues. <i>Evaluates and incorporates communication challenges (speech, vision, and hearing deficits).</i>                                                                                                                                                                       | 5         | 5         | 5         | 5           | MSN.PLO 3, 6, 7, & 8<br>DNP.PLO 3 & 4 |
| 9. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. <i>Considers co-morbidities and chronic illness when obtaining data.</i> | 4-5       | 4-5       | 5         | 5           | MSN.PLO 1 & 9<br>DNP.PLO 1            |
| 10. Performs appropriate and accurate physical examination on <b>adult, pediatric, and geriatric patients</b> (specific components) for the presenting problem using correct techniques and equipment.                                                                                                                                                                                                                                      | 4-5       | 4-5       | 5         | 5           | MSN.PLO 9<br>DNP.PLO 1                |
| 11. Identifies appropriate diagnostic testing as appropriate.                                                                                                                                                                                                                                                                                                                                                                               | 4-5       | 4-5       | 5         | 5           | MSN.PLO 2 & 9<br>DNP.PLO              |

|                                                                                                                                                                                                                                                                                    |     |     |   |   |                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|---|---|---------------------------------------|
|                                                                                                                                                                                                                                                                                    |     |     |   |   | 1 & 5                                 |
| 12. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).                                                                                                                                                                            | 5   | 5   | 5 | 5 | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 13. Arrives at correct diagnosis based on clinical data.                                                                                                                                                                                                                           | 5   | 5   | 5 | 5 | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 14. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. <i>Considers functional status and polypharmacy when developing treatment plan.</i> | 4-5 | 4-5 | 5 | 5 | MSN.PLO 2, 4, 8, & 9<br>DNP.PLO 1 & 3 |
| 15. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.                                                                                                                                      | 4-5 | 4-5 | 5 | 5 | MSN.PLO 3, 7, & 8<br>DNP.PLO 3 & 4    |
| 16. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.                                                                                                                 | 4-5 | 4-5 | 5 | 5 | MSN.PLO 3, 7, & 8<br>DNP.PLO 3        |
| 17. Chooses appropriate medication and therapeutic dosage.                                                                                                                                                                                                                         | 4-5 | 4-5 | 5 | 5 | MSN.PLO 2 & 9<br>DNP.PLO 1            |
| 18. Determines healthcare maintenance and screening needs utilizing USPSTF recommendations.                                                                                                                                                                                        | 4-5 | 4-5 | 5 | 5 | MSN.PLO 4, 8, & 9<br>DNP.PLO 1 & 5    |
| 19. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.                                                                                                                                              | 4-5 | 5   | 5 | 5 | MSN.PLO 2, 5, & 7<br>DNP.PLO 5        |
| 20. Presents patients to preceptor in a thorough, concise, and organized manner.                                                                                                                                                                                                   | 5   | 5   | 5 | 5 | MSN.PLO 6 & 7<br>DNP.PLO 4            |
| 21. Identify patients whose health needs require urgent or emergent care.                                                                                                                                                                                                          | 5   | 5   | 5 | 5 | MSN.PLO 2, 3, & 9<br>DNP.PLO 3        |

|                                                                                                                                                                          |     |     |   |   |                                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|---|---|--------------------------------|
| 22. Completes patient encounter in a timely manner. New patient or complete exam (45 minutes); Chronic or complex visit (30 minutes); Acute episodic visit (15 minutes). | 4-5 | 4-5 | 5 | 5 | MSN.PLO 2 & 6<br>DNP.PLO 2 & 3 |
| 23. Incorporates cost in decision-making.                                                                                                                                | 4-5 | 4-5 | 5 | 5 | MSN.PLO 2 & 6<br>DNP.PLO 2 & 3 |
| 24. Correctly uses ICD coding for diagnosis documentation.                                                                                                               | 4-5 | 4-5 | 5 | 5 | MSN.PLO 2 & 5<br>DNP.PLO 2 & 5 |

### Levels of independence

|                                                                                |                                                                       |
|--------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| 1. Observation only                                                            |                                                                       |
| 2. Performance and decision making done with preceptor present                 | *Requires detailed assistance                                         |
| 3. Performance and decision making done in collaboration with preceptor        | *Requires moderate assistance                                         |
| 4. Performance and decision making done with minimal assistance from preceptor | *Requires minimal assistance                                          |
| 5. Performance and decision making done independent of preceptor               | *Requires no assistance; ALL cases reviewed and approved by preceptor |

Adapted from:

Pearson, T., Garrett, L., Hossler, S., McConnell, P, & Walls, J. (2012). A progressive nurse practitioner student evaluation tool. *Journal of the American Academy of Nurse Practitioners*, 24 (6).

Based on:

National Organization of Nurse Practitioner Faculties (2013). Population-Focused Nurse Practitioner Competencies. Washington, DC: Author.

National Organization of Nurse Practitioner Faculties (2021). Nurse Practitioner Role Competencies. Washington, DC: Author.

## Appendix F: Psychiatric Mental Health Nurse Practitioner Clinical Requirements

### PMHNP Clinical Requirements

This chart represents the recommended minimum requirements for clinical hours, visits, and procedures for completion of the PMHNP Clinical Competencies

| Population                  | Total Hours<br>(Recommended) | Minimum Number of<br>Visits<br>(Required) | Procedures/Visits<br>(Recommended)                                   | Percent of<br>Time | Course Focus                |
|-----------------------------|------------------------------|-------------------------------------------|----------------------------------------------------------------------|--------------------|-----------------------------|
| Child/Adolescent            | 75-150 hours                 | 75 visits required                        | Intake encounters, follow-up encounters, family and group encounters | 12.5-25%           | NURS 732C, 733C, 734C, 793C |
|                             |                              |                                           |                                                                      |                    |                             |
| Adult 18-65                 | 300 hours                    | 300 visits required                       | Intake encounters, follow-up encounters, family and group encounters | 50%                | NURS 732C, 733C, 734C, 793C |
| Geriatric 66+               | 75-150 hours                 | 75 visits required                        | Intake encounters, follow-up encounters, family and group encounters | 12.5-25%           | NURS 732C, 733C, 734C, 793C |
|                             |                              |                                           |                                                                      |                    |                             |
| Therapy across the lifespan | 75-150 hours                 | 75 visits required                        | Intake encounters, follow-up encounters, family and group encounters | 12.5-25%           | NURS 732C, 733C, 734C, 793C |

Potential sites include Psychiatric inpatient, partial hospitalization programs, residential treatment facilities, outpatient psychiatry or therapy practice, long term care facilities, inpatient and outpatient recovery programs, group therapy setting involving professional psychotherapies, and other settings that are appropriate for the course and content.

Up to 150 hours of telehealth can be approved by the Program Chair/Lead Faculty upon request. It is recommended that these hours be completed during the last term in order to ensure that clinical placement is not delayed due to lack of ability to find an in-person preceptor.

Students are required to complete only 75 hours of therapy and any additional hours must be approved as a special request but cannot exceed 150 hours total. Therapy hours must be with a licensed therapist and cannot be completed with a medication management provider.

## Appendix G: Psychiatric Mental Health Nurse Practitioner Preceptor Evaluation of Student

**NOTE: This information is collected via EXXAT at the midterm and final points in the semester. The criteria for evaluation are as follows:**

- 1 = Unacceptable**
- 2 = Poor**
- 3 = Fair**
- 4 = Good**
- 5 = Excellent**

1. The student obtains a problem-focused health history from the patient, including chief complaint, history of present illness, past medical history, appropriate family and social history, and review of systems. The student performs an appropriate assessment and is able to distinguish between normal and abnormal changes, and variations of normal, across the lifespan. (AACN Domain 1, ILO 1, ILO5, MSN.PMH1, MSN.PMH4, MSN.PMH9).\*
2. The student formulates appropriate diagnoses and includes comprehensive differential diagnoses while considering epidemiology, life stage development and environmental and community characteristics for each patient. (AACN Domain 2, ILO 3, ILO5, MSN.PMH8, MSN.PMH9).\*
3. The student effectively demonstrates cultural competence in providing care to diverse population by actively listening, respecting diverse beliefs and practices, and adapting care to meet each patient's cultural needs. The student communicates effectively with patients, using appropriate terminology, and considers available resources and socioeconomic factors. (AACN Domain 3, ILO 3, MSN.PMH2, MSN.PMH3, MSN.PMH8).\*
4. The student formulates a plan that is appropriate for the diagnosis and accurately addresses the problem identified. The student articulates how to effectively evaluate the plan, including appropriate follow-up. The plan is based on scientific rationale, evidence-based standards of care and practice guidelines. AACN Domain 4, ILO2, MSN.PMH4, MSN.PMH9).\*
5. The student utilizes evidence-based practice to inform and improve nursing care and can recognize the relationship between economics and delivery of quality patient care (AACN Domain 5, ILO3, ILO4, MSN.PMH2, MSN.PMH7).\*
6. The student engages in interprofessional partnerships in the clinical setting, demonstrating effective teamwork and communication skills while integrating evidence-based practice and research findings into clinical decision-making processes (AACN Essential 6, ILO1, MSN.PMH7).\*
7. The student effectively works within the complex systems of healthcare, has an understanding of interprofessional roles, and seeks ways to improve health outcomes through collaboration (AACN Domain 7, ILO2, MSN.PMH2).\*
8. The student integrates healthcare informatics and patient care technology in the context of patient care, and effectively utilizes data, information systems, and technology to support safe, high-quality patient care and clinical decision-making (AACN Essential 8, MSN.PMH5, MSN.PMH6).\*

9. The student communicates effectively with patients, using appropriate terminology, and provides appropriate patient education that includes follow up. The student treats the patient with respect and coaches the patient in an empathetic manner by encouraging healthy behavior changes with a non-judgmental approach. (AACN Essential 9, ILO1, ILO6, MSN.PMH7).\*
10. The student effectively integrates interprofessional collaboration and leadership principles into the clinical care of patients, while including patient advocacy, and ethical decision-making (AACN Essential 10, ILO1, MSN.PMH2).\*
11. Are there areas where you feel that the student excels in the clinical setting? \*
12. Are there areas of opportunity? \*
13. Would you be interested in being a preceptor for another Franklin University student? \*

## Appendix H: Psychiatric Mental Health Nurse Practitioner Progressive Clinical Expectations

| <b>150 Clinical Hours - NURS 732C/ CL</b>                                                                                                                                                                                                                                                                                                                                                                          | Weeks<br>1 - 3 |   | Weeks<br>4 - 6 |  | Weeks<br>7 - 9 |   | Weeks<br>10 - 12 |  | Learning<br>Outcomes                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---|----------------|--|----------------|---|------------------|--|---------------------------------------------|
| 1. In an 8-hour clinical day the student will see at least <b>3 patients through midterm</b> and no more than <b>5 patients after midterm</b>                                                                                                                                                                                                                                                                      |                |   |                |  |                |   |                  |  |                                             |
| 2. Completes facility orientation; reviews relevant policies and procedures.                                                                                                                                                                                                                                                                                                                                       | 2              |   | 2              |  |                |   |                  |  |                                             |
| 3. Communicate effectively with office staff and other professionals.                                                                                                                                                                                                                                                                                                                                              | 3              |   | 3              |  | 3              |   | 3                |  | D 6 & 9; ILO 2; MSN PLO 7; DNP PLO 4        |
| 4. Maintains professional standards including dress, timeliness, and language.                                                                                                                                                                                                                                                                                                                                     | 4              |   | 4              |  | 5              |   | 5                |  | D 9; ILO 4; PLO 6; DNP PLO 1                |
| 5. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                                                                                                                                                         | 4              |   | 4              |  | 5              |   | 5                |  | D 9; ILO 4 & 5; MSN PLO 6; DNP PLO 1        |
| 6. Uses references effectively and efficiently in clinical settings.                                                                                                                                                                                                                                                                                                                                               | 1              | 2 | 2              |  | 3              |   | 3                |  | D 1; ILO 2; MSN PLO 9; DNP PLO 1            |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                                                                               | 1              | 2 | 2              |  | 3              |   | 3                |  | D 1; ILO 2; MSN PLO 1; DNP PLO 5            |
| 8. Demonstrates <i>person-centered care</i> and <i>cultural competence</i> in providing care to diverse populations by actively listening, respecting diverse beliefs and practices, and adapting care to meet each patient's cultural needs. <i>Communicates</i> effectively with patients, using appropriate terminology, and considers available resources and socioeconomic factors.                           | 1              | 2 | 2              |  | 3              |   | 3                |  | D 2 & 3, ILO 3, MSN PLO 2, 3 & 8; DNP PLO 1 |
| 9. Obtains a <i>comprehensive and problem-focused health history</i> from the patient, including chief complaint, history of present illness, past medical history, appropriate family and social history, and review of systems. Demonstrates logical systematic methodology in obtaining subjective patient data. Distinguishes between normal and abnormal findings, and normal variations across the lifespan. | 1              | 2 | 2              |  | 2              | 3 | 3                |  | D1, ILO 1 & 5, MSN PLO 1, 4 & 9; DNP PLO 1  |
| 10. Selects and utilizes appropriate evidence-based screening and assessment tools to support <i>measurement-based care</i> , ensuring alignment with                                                                                                                                                                                                                                                              | 1              | 2 | 2              |  | 2              | 3 | 3                |  | D 1 & 5, ILO 2 & 5; MSN PLO 1,              |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |   |   |   |   |   |   |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|-----------------------------------------------------|
| the patient's clinical presentation, diagnosis, developmental stage, and cultural context. Interpret results to inform differential diagnosis, treatment planning, and ongoing evaluation of therapeutic outcomes.                                                                                                                                                                                                                                                                                                                     |   |   |   |   |   |   | 4, 9; DNP PLO 5                                     |
| 11. Formulates appropriate <b>case formulations and diagnoses</b> including comprehensive differential diagnoses while considering epidemiology, life stage development and environmental and community characteristics for each patient. Arrives at the correct diagnoses based on clinical data and formulates at least three (3) diagnoses for most patients.                                                                                                                                                                       | 1 | 2 | 2 | 2 |   | 3 | D 2; ILO 3 & 5; MSN PLO 8 & 9; DNP PLO 1 & 5        |
| 12. Formulates a <b>treatment plan</b> that is appropriate for the diagnosis and accurately addresses the identified problems. The plan is based on shared decision making, scientific knowledge, evidence-based standards of care and practice guidelines.                                                                                                                                                                                                                                                                            | 1 | 2 | 2 | 2 |   | 3 | D 1 & 4, ILO 2; MSN PLO 4 & 9; DNP PLO 1 & 5        |
| 13. <b>Evidence-based treatment plans</b> include psychotherapeutic interventions, pharmacological and non-pharmacological modalities as appropriate and consider developmental stage, cognitive ability, risk assessment, prognosis, expected outcomes, possible referrals, appropriate drug monitoring, and plans for follow-up evaluation.                                                                                                                                                                                          | 1 | 2 | 2 | 2 |   | 3 | D 3 & 4, ILO 3; MSN PLO 2, 3 & 8; DNP PLO 1 & 5     |
| 14. Integrates evidence-based <b>psychotherapeutic modalities</b> in the delivery of individual, group, and family therapy. Utilizes skills to establish therapeutic alliance, select appropriate psychotherapy approaches, facilitate goal-oriented sessions, and adapts interventions to meet the unique needs of diverse populations to promote psychological well-being and support recovery across settings. Demonstrates proficiency in at least <b>two psychotherapeutic treatment modalities</b> .                             | 1 | 2 | 2 | 2 |   | 2 | D 1 & 2; ILO 1 & 5; MSN PLO 1, 4 & 7; DNP PLO 1 & 5 |
| 15. <b>Documents</b> patient encounters using the SOAP format, ensuring clarity, organization, and the accurate use of medical and psychiatric terminology. Effectively integrates assessment findings, diagnostic impressions, treatment plans, and therapeutic interventions to support continuity of care, legal standards, and interprofessional collaboration. Maintains documentation that reflects clinical reasoning, adherence to ethical and regulatory guidelines, and responsiveness to patient needs across the lifespan. | 1 | 2 | 2 | 2 | 3 | 3 | D 9, ILO 1 & 6; MSN PLO 7; DNP PLO 1 & 5            |
| 16. Accurately applies diagnostic coding, including ICD-10, CPT and DSM-5TR, based on                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1 | 2 | 2 | 2 | 3 | 3 | D 5; ILO 4; MSN PLO 9;                              |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |   |   |   |   |   |   |                                                     |
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| comprehensive assessment data, clinical reasoning, and established diagnostic criteria, ensuring alignment with regulatory standards and ethical practice.                                                                                                                                                                                                                                                                                                                                                      |   |   |   |   |   |   | DNP PLO 1 & 5                                       |
| 17. Communicates effectively with patients providing appropriate <b>patient education</b> including a detailed and clinically sound follow-up plan that addresses relevant and cardinal symptoms requiring follow up treatment. Provides anticipatory guidance, teaching, counseling, and specific information about each diagnosis. Provides written information to patients when appropriate.                                                                                                                 | 1 | 2 | 2 | 2 | 2 | 2 | D 1 & 2; ILO 1 & 5; MSN PLO 7, 8 & 9; DNP PLO 1 & 5 |
| 18. <b>Evaluates the effectiveness of treatment plans</b> through ongoing assessment of patient progress, clinical outcomes, and therapeutic response. Utilizes evidence-based guidelines, patient feedback, standardized measurement tools, clinical reasoning and collaboration in adjusting care plans to optimize mental health outcomes and support recovery for clients across the lifespan.                                                                                                              | 1 | 2 | 2 | 2 | 2 | 2 | D 4, ILO 2, MSN PLO 4 & 9; DNP PLO 1 & 5            |
| 19. Utilizes evidence-based practice to inform and improve <b>quality and safety</b> of advanced psychiatric nursing care. Recognizes the relationship between economics and delivery of <b>quality</b> patient care.                                                                                                                                                                                                                                                                                           | 1 |   | 2 | 2 | 2 | 2 | D 5, ILO 3 & 4, MSN PLO 2 & 7; DNP PLO 1 & 5        |
| 20. Engages in <b>interprofessional partnerships</b> in the clinical setting, demonstrating effective teamwork and communication skills while integrating evidence-based practice and research findings into clinical decision-making processes.                                                                                                                                                                                                                                                                | 1 |   | 1 | 2 | 2 | 2 | D 6; ILO 1; MSN PLO 7; DNP PLO 4                    |
| 21. Apply principles of <b>population health</b> to psychiatric mental health practice by identifying social determinants of health, health disparities, and community-level risk factors that impact mental well-being. Utilizes epidemiological data, evidence-based interventions, and collaborative strategies to promote mental health equity, advance <b>health promotion</b> , prevent psychiatric and comorbid disorders, and improve outcomes across the lifespan in diverse populations and settings. | 1 |   | 1 | 1 | 2 | 2 | D 3; ILO 3 & 5; MSN PLO 1, 8 & 9; DNP PLO 2 & 5     |
| 22. Effectively engages in <b>systems-based practice</b> by navigating complex healthcare systems, demonstrating an understanding of interprofessional roles, and optimizing health outcomes through strategic collaboration, resource coordination, and continuous quality improvement.                                                                                                                                                                                                                        | 1 |   | 1 | 1 | 2 | 2 | D 7; ILO 2; MSN PLO 2; DNP PLO 2 & 4                |

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| 23. Integrates <i>healthcare informatics</i> and patient care technology in the context of patient care, and effectively utilizes data, information systems, and technology to support safe, high-quality patient care and clinical decision-making                                                                                                                                                                                                       | 1             | 1              | 1              | 2                | D 8, ILO 2 & 3; MSN PLO 5 & 6; DNP PLO & 5 |
| 24. Demonstrates respect and empathy in patient interactions by utilizing <i>therapeutic communication</i> strategies, including motivational interviewing, to collaboratively explore and support health behavior change. Maintains a non-judgmental stance while fostering patient autonomy and readiness for change.                                                                                                                                   | 2             | 2              | 2              | 3                | D 9; ILO 1 & 6; MSN PLO 7; DNP PLO 1 & 5   |
| 25. Effectively integrates <i>interprofessional collaboration</i> and <i>leadership</i> principles into the clinical care of patients, while including patient advocacy, and ethical decision-making                                                                                                                                                                                                                                                      | 1             | 1              | 1              | 2                | D 10; ILO 1; MSN PLO 2; DNP PLO 4          |
| 26. Accurately identifies patients whose mental health needs require <i>urgent or emergent intervention</i> by conducting thorough risk assessments, recognizing signs of acute psychiatric distress, and applying clinical judgment informed by evidence-based guidelines. Demonstrates the ability to prioritize safety, initiate appropriate referrals, and coordinate care in crisis situations across diverse clinical settings across the lifespan. | 1             | 1              | 1              | 2                | D 5, ILO 2 & 5; MSN PLO 3 & 9; DNP PLO 5   |
| <b>150 Clinical Hours – 733C / CL</b>                                                                                                                                                                                                                                                                                                                                                                                                                     | Weeks<br>1 -3 | Weeks<br>4 - 6 | Weeks<br>7 - 9 | Weeks<br>10 - 12 | Learning<br>Outcomes                       |
| 1. In an 8-hour clinical day the student will see at least 6 <b>patients through midterm</b> and no more than 8 <b>patients after midterm</b>                                                                                                                                                                                                                                                                                                             |               |                |                |                  |                                            |
| 2. Completes facility orientation; reviews relevant policies and procedures.                                                                                                                                                                                                                                                                                                                                                                              | 2             |                |                |                  |                                            |
| 3. Communicate effectively with office staff and other professionals.                                                                                                                                                                                                                                                                                                                                                                                     | 4             | 4              | 4              | 4                | D 6 & 9; ILO 2; MSN PLO 7; DNP PLO 4       |
| 4. Maintains professional standards including dress, timeliness, and language.                                                                                                                                                                                                                                                                                                                                                                            | 5             | 5              | 5              | 5                | D 9; ILO 4; PLO 6; DNP PLO 1               |
| 5. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                                                                                                                                                                                                | 5             | 5              | 5              | 5                | D 9; ILO 4 & 5; MSN PLO 6; DNP PLO 1       |
| 6. Uses references effectively and efficiently in clinical settings.                                                                                                                                                                                                                                                                                                                                                                                      | 3             | 3              | 3              | 3                | D 1; ILO 2; MSN PLO 9; DNP PLO 1           |

|                                                                                                                                                                                                                                                                                                                                                                                                                    |   |   |   |   |                                                 |
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| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                                                                               | 3 | 3 | 3 | 3 | D 1; ILO 2; MSN PLO 1; DNP PLO 5                |
| 8. Demonstrates <i>person-centered care</i> and <i>cultural competence</i> in providing care to diverse populations by actively listening, respecting diverse beliefs and practices, and adapting care to meet each patient's cultural needs. <i>Communicates</i> effectively with patients, using appropriate terminology, and considers available resources and socioeconomic factors.                           | 3 | 3 | 4 | 4 | D 2 & 3, ILO 3, MSN PLO 2, 3 & 8; DNP PLO 1     |
| 9. Obtains a <i>comprehensive and problem-focused health history</i> from the patient, including chief complaint, history of present illness, past medical history, appropriate family and social history, and review of systems. Demonstrates logical systematic methodology in obtaining subjective patient data. Distinguishes between normal and abnormal findings, and normal variations across the lifespan. | 3 | 3 | 3 | 3 | D1, ILO 1 & 5, MSN PLO 1, 4 & 9; DNP PLO 1      |
| 10. Selects and utilizes appropriate evidence-based screening and assessment tools to support <i>measurement-based care</i> , ensuring alignment with the patient's clinical presentation, diagnosis, developmental stage, and cultural context. Interpret results to inform differential diagnosis, treatment planning, and ongoing evaluation of therapeutic outcomes.                                           | 3 | 3 | 3 | 3 | D 1 & 5, ILO 2 & 5; MSN PLO 1, 4, 9; DNP PLO 5  |
| 11. Formulates appropriate <i>case formulations and diagnoses</i> including comprehensive differential diagnoses while considering epidemiology, life stage development and environmental and community characteristics for each patient. Arrives at the correct diagnoses based on clinical data and formulates at least three (3) diagnoses for most patients.                                                   | 3 | 3 | 3 | 3 | D 2; ILO 3 & 5; MSN PLO 8 & 9; DNP PLO 1 & 5    |
| 12. Formulates a <i>treatment plan</i> that is appropriate for the diagnosis and accurately addresses the identified problems. The plan is based on shared decision making, scientific knowledge, evidence-based standards of care and practice guidelines.                                                                                                                                                        | 3 | 3 | 3 | 3 | D 1 & 4, ILO 2; MSN PLO 4 & 9; DNP PLO 1 & 5    |
| 13. <i>Evidence-based treatment plans</i> include psychotherapeutic interventions, pharmacological and non-pharmacological modalities as appropriate and consider developmental stage, cognitive ability, risk assessment, prognosis, expected outcomes, possible referrals, appropriate drug monitoring, and plans for follow-up evaluation.                                                                      | 3 | 3 | 3 | 3 | D 3 & 4, ILO 3; MSN PLO 2, 3 & 8; DNP PLO 1 & 5 |

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| 14. Integrates evidence-based <b>psychotherapeutic modalities</b> in the delivery of individual, group, and family therapy. Utilizes skills to establish therapeutic alliance, select appropriate psychotherapy approaches, facilitate goal-oriented sessions, and adapts interventions to meet the unique needs of diverse populations to promote psychological well-being and support recovery across settings. Demonstrates proficiency in at least <b>two psychotherapeutic treatment modalities</b> .                             | 2 | 2 | 3 | 3 | D 1 & 2; ILO 1 & 5; MSN PLO 1, 4 & 7; DNP PLO 1 & 5 |
| 15. <b>Documents</b> patient encounters using the SOAP format, ensuring clarity, organization, and the accurate use of medical and psychiatric terminology. Effectively integrates assessment findings, diagnostic impressions, treatment plans, and therapeutic interventions to support continuity of care, legal standards, and interprofessional collaboration. Maintains documentation that reflects clinical reasoning, adherence to ethical and regulatory guidelines, and responsiveness to patient needs across the lifespan. | 3 | 3 | 3 | 3 | D 9, ILO 1 & 6; MSN PLO 7; DNP PLO 1 & 5            |
| 16. Accurately applies diagnostic coding, including ICD-10, CPT and DSM-5TR, based on comprehensive assessment data, clinical reasoning, and established diagnostic criteria, ensuring alignment with regulatory standards and ethical practice.                                                                                                                                                                                                                                                                                       | 3 | 3 | 3 | 3 | D 5; ILO 4; MSN PLO 9; DNP PLO 1 & 5                |
| 17. Communicates effectively with patients providing appropriate <b>patient education</b> including a detailed and clinically sound follow-up plan that addresses relevant and cardinal symptoms requiring follow up treatment. Provides anticipatory guidance, teaching, counseling, and specific information about each diagnosis. Provides written information to patients when appropriate.                                                                                                                                        | 2 | 3 | 3 | 3 | D 1 & 2; ILO 1 & 5; MSN PLO 7, 8 & 9; DNP PLO 1 & 5 |
| 18. <b>Evaluates the effectiveness of treatment plans</b> through ongoing assessment of patient progress, clinical outcomes, and therapeutic response. Utilizes evidence-based guidelines, patient feedback, standardized measurement tools, clinical reasoning and collaboration in adjusting care plans to optimize mental health outcomes and support recovery for clients across the lifespan.                                                                                                                                     | 2 | 3 | 3 | 3 | D 4, ILO 2, MSN PLO 4 & 9; DNP PLO 1 & 5            |
| 19. Utilizes evidence-based practice to inform and improve <b>quality and safety</b> of advanced psychiatric nursing care. Recognizes the relationship between economics and delivery of <b>quality</b> patient care.                                                                                                                                                                                                                                                                                                                  | 2 | 2 | 3 | 3 | D 5, ILO 3 & 4, MSN PLO 2 & 7; DNP PLO 1 & 5        |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |   |   |   |   |                                                 |
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| 20. Engages in <b>interprofessional partnerships</b> in the clinical setting, demonstrating effective teamwork and communication skills while integrating evidence-based practice and research findings into clinical decision-making processes.                                                                                                                                                                                                                                                                | 2 | 3 | 3 | 3 | D 6; ILO 1; MSN PLO 7; DNP PLO 4                |
| 21. Apply principles of <b>population health</b> to psychiatric mental health practice by identifying social determinants of health, health disparities, and community-level risk factors that impact mental well-being. Utilizes epidemiological data, evidence-based interventions, and collaborative strategies to promote mental health equity, advance <b>health promotion</b> , prevent psychiatric and comorbid disorders, and improve outcomes across the lifespan in diverse populations and settings. | 2 | 2 | 3 | 3 | D 3; ILO 3 & 5; MSN PLO 1, 8 & 9; DNP PLO 2 & 5 |
| 22. Effectively engages in <b>systems-based practice</b> by navigating complex healthcare systems, demonstrating an understanding of interprofessional roles, and optimizing health outcomes through strategic collaboration, resource coordination, and continuous quality improvement.                                                                                                                                                                                                                        | 2 | 2 | 2 | 3 | D 7; ILO 2; MSN PLO 2; DNP PLO 2 & 4            |
| 23. Integrates <b>healthcare informatics</b> and patient care technology in the context of patient care, and effectively utilizes data, information systems, and technology to support safe, high-quality patient care and clinical decision-making                                                                                                                                                                                                                                                             | 2 | 2 | 2 | 3 | D 8, ILO 2 & 3; MSN PLO 5 & 6; DNP PLO & 5      |
| 24. Demonstrates respect and empathy in patient interactions by utilizing <b>therapeutic communication</b> strategies, including motivational interviewing, to collaboratively explore and support health behavior change. Maintains a non-judgmental stance while fostering patient autonomy and readiness for change.                                                                                                                                                                                         | 3 | 3 | 3 | 4 | D 9; ILO 1 & 6; MSN PLO 7; DNP PLO 1 & 5        |
| 25. Effectively integrates <b>interprofessional collaboration</b> and <b>leadership</b> principles into the clinical care of patients, while including patient advocacy, and ethical decision-making                                                                                                                                                                                                                                                                                                            | 2 | 2 | 3 | 3 | D 10; ILO 1; MSN PLO 2; DNP PLO 4               |
| 26. Accurately identifies patients whose mental health needs require <b>urgent or emergent intervention</b> by conducting thorough risk assessments, recognizing signs of acute psychiatric distress, and applying clinical judgment informed by evidence-based guidelines. Demonstrates the ability to prioritize safety, initiate appropriate referrals, and coordinate care in crisis situations across diverse clinical settings across the lifespan.                                                       | 2 | 2 | 2 | 2 | D 5, ILO 2 & 5; MSN PLO 3 & 9; DNP PLO 5        |

| 150 Clinical Hours - 734C / CL                                                                                                                                                                                                                                                                                                                                                                                     | Weeks<br>1 -3 | Weeks<br>4 - 6 | Weeks<br>7 - 9 | Weeks<br>10 - 12 | Learning<br>Outcomes                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------|----------------|------------------|------------------------------------------------|
| 1. In an 8-hour clinical day the student will see <b>8 – 10 patients</b> ( <i>up to 1 hours / patient encounter</i> )                                                                                                                                                                                                                                                                                              |               |                |                |                  |                                                |
| 2. Completes facility orientation; reviews relevant policies and procedures.                                                                                                                                                                                                                                                                                                                                       | 3             |                |                |                  |                                                |
| 3. Communicate effectively with office staff and other professionals.                                                                                                                                                                                                                                                                                                                                              | 4             | 4              | 4              | 4                | D 6 & 9; ILO 2; MSN PLO 7; DNP PLO 4           |
| 4. Maintains professional standards including dress, timeliness, and language.                                                                                                                                                                                                                                                                                                                                     | 5             | 5              | 5              | 5                | D 9; ILO 4; PLO 6; DNP PLO 1                   |
| 5. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                                                                                                                                                         | 5             | 5              | 5              | 5                | D 9; ILO 4 & 5; MSN PLO 6; DNP PLO 1           |
| 6. Uses references effectively and efficiently in clinical settings.                                                                                                                                                                                                                                                                                                                                               | 5             | 5              | 5              | 5                | D 1; ILO 2; MSN PLO 9; DNP PLO 1               |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                                                                               | 5             | 5              | 5              | 5                | D 1; ILO 2; MSN PLO 1; DNP PLO 5               |
| 8. Demonstrates <i>person-centered care</i> and <i>cultural competence</i> in providing care to diverse populations by actively listening, respecting diverse beliefs and practices, and adapting care to meet each patient's cultural needs. <i>Communicates</i> effectively with patients, using appropriate terminology, and considers available resources and socioeconomic factors.                           | 4             | 4              | 4              | 4                | D 2 & 3, ILO 3, MSN PLO 2, 3 & 8; DNP PLO 1    |
| 9. Obtains a <i>comprehensive and problem-focused health history</i> from the patient, including chief complaint, history of present illness, past medical history, appropriate family and social history, and review of systems. Demonstrates logical systematic methodology in obtaining subjective patient data. Distinguishes between normal and abnormal findings, and normal variations across the lifespan. | 4             | 4              | 4              | 4                | D1, ILO 1 & 5, MSN PLO 1, 4 & 9; DNP PLO 1     |
| 10. Selects and utilizes appropriate evidence-based screening and assessment tools to support <i>measurement-based care</i> , ensuring alignment with the patient's clinical presentation, diagnosis, developmental stage, and cultural context. Interpret results to inform differential diagnosis, treatment planning, and ongoing evaluation of therapeutic outcomes.                                           | 4             | 4              | 4              | 4                | D 1 & 5, ILO 2 & 5; MSN PLO 1, 4, 9; DNP PLO 5 |

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| 11. Formulates appropriate <b>case formulations and diagnoses</b> including comprehensive differential diagnoses while considering epidemiology, life stage development and environmental and community characteristics for each patient. Arrives at the correct diagnoses based on clinical data and formulates at least three (3) diagnoses for most patients.                                                                                                                                                                       | 4 | 4 | 4 | 4 | D 2; ILO 3 & 5; MSN PLO 8 & 9; DNP PLO 1 & 5        |
| 12. Formulates a <b>treatment plan</b> that is appropriate for the diagnosis and accurately addresses the identified problems. The plan is based on shared decision making, scientific knowledge, evidence-based standards of care and practice guidelines.                                                                                                                                                                                                                                                                            | 4 | 4 | 4 | 4 | D 1 & 4, ILO 2; MSN PLO 4 & 9; DNP PLO 1 & 5        |
| 13. <b>Evidence-based treatment plans</b> include psychotherapeutic interventions, pharmacological and non-pharmacological modalities as appropriate and consider developmental stage, cognitive ability, risk assessment, prognosis, expected outcomes, possible referrals, appropriate drug monitoring, and plans for follow-up evaluation.                                                                                                                                                                                          | 4 | 4 | 4 | 4 | D 3 & 4, ILO 3; MSN PLO 2, 3 & 8; DNP PLO 1 & 5     |
| 14. Integrates evidence-based <b>psychotherapeutic modalities</b> in the delivery of individual, group, and family therapy. Utilizes skills to establish therapeutic alliance, select appropriate psychotherapy approaches, facilitate goal-oriented sessions, and adapts interventions to meet the unique needs of diverse populations to promote psychological well-being and support recovery across settings. Demonstrates proficiency in at least <b>two psychotherapeutic treatment modalities</b> .                             | 3 | 3 | 3 | 3 | D 1 & 2; ILO 1 & 5; MSN PLO 1, 4 & 7; DNP PLO 1 & 5 |
| 15. <b>Documents</b> patient encounters using the SOAP format, ensuring clarity, organization, and the accurate use of medical and psychiatric terminology. Effectively integrates assessment findings, diagnostic impressions, treatment plans, and therapeutic interventions to support continuity of care, legal standards, and interprofessional collaboration. Maintains documentation that reflects clinical reasoning, adherence to ethical and regulatory guidelines, and responsiveness to patient needs across the lifespan. | 4 | 4 | 4 | 4 | D 9, ILO 1 & 6; MSN PLO 7; DNP PLO 1 & 5            |
| 16. Accurately applies diagnostic coding, including ICD-10, CPT and DSM-5TR, based on comprehensive assessment data, clinical reasoning, and established diagnostic criteria, ensuring alignment with regulatory standards and ethical practice.                                                                                                                                                                                                                                                                                       | 4 | 4 | 4 | 4 | D 5; ILO 4; MSN PLO 9; DNP PLO 1 & 5                |

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| 17. Communicates effectively with patients providing appropriate <b>patient education</b> including a detailed and clinically sound follow-up plan that addresses relevant and cardinal symptoms requiring follow up treatment. Provides anticipatory guidance, teaching, counseling, and specific information about each diagnosis. Provides written information to patients when appropriate.                                                                                                                 | 3 | 4 | 4 | 4 | D 1 & 2; ILO 1 & 5; MSN PLO 7, 8 & 9; DNP PLO 1 & 5 |
| 18. <b>Evaluates the effectiveness of treatment plans</b> through ongoing assessment of patient progress, clinical outcomes, and therapeutic response. Utilizes evidence-based guidelines, patient feedback, standardized measurement tools, clinical reasoning and collaboration in adjusting care plans to optimize mental health outcomes and support recovery for clients across the lifespan.                                                                                                              | 3 | 3 | 4 | 4 | D 4, ILO 2, MSN PLO 4 & 9; DNP PLO 1 & 5            |
| 19. Utilizes evidence-based practice to inform and improve <b>quality and safety</b> of advanced psychiatric nursing care. Recognizes the relationship between economics and delivery of <b>quality</b> patient care.                                                                                                                                                                                                                                                                                           | 3 | 3 | 4 | 4 | D 5, ILO 3 & 4, MSN PLO 2 & 7; DNP PLO 1 & 5        |
| 20. Engages in <b>interprofessional partnerships</b> in the clinical setting, demonstrating effective teamwork and communication skills while integrating evidence-based practice and research findings into clinical decision-making processes.                                                                                                                                                                                                                                                                | 3 | 3 | 4 | 4 | D 6; ILO 1; MSN PLO 7; DNP PLO 4                    |
| 21. Apply principles of <b>population health</b> to psychiatric mental health practice by identifying social determinants of health, health disparities, and community-level risk factors that impact mental well-being. Utilizes epidemiological data, evidence-based interventions, and collaborative strategies to promote mental health equity, advance <b>health promotion</b> , prevent psychiatric and comorbid disorders, and improve outcomes across the lifespan in diverse populations and settings. | 3 | 3 | 3 | 4 | D 3; ILO 3 & 5; MSN PLO 1, 8 & 9; DNP PLO 2 & 5     |
| 22. Effectively engages in <b>systems-based practice</b> by navigating complex healthcare systems, demonstrating an understanding of interprofessional roles, and optimizing health outcomes through strategic collaboration, resource coordination, and continuous quality improvement.                                                                                                                                                                                                                        | 3 | 3 | 3 | 4 | D 7; ILO 2; MSN PLO 2; DNP PLO 2 & 4                |
| 23. Integrates <b>healthcare informatics</b> and patient care technology in the context of patient care, and effectively utilizes data, information systems, and technology to support safe, high-quality patient care and clinical decision-making                                                                                                                                                                                                                                                             | 3 | 3 | 3 | 4 | D 8, ILO 2 & 3; MSN PLO 5 & 6; DNP PLO & 5          |

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| 24. Demonstrates respect and empathy in patient interactions by utilizing <b>therapeutic communication</b> strategies, including motivational interviewing, to collaboratively explore and support health behavior change. Maintains a non-judgmental stance while fostering patient autonomy and readiness for change.                                                                                                                                   | 4          | 4           | 4           | 4             | D 9; ILO 1 & 6; MSN PLO 7; DNP PLO 1 & 5    |
| 25. Effectively integrates <b>interprofessional collaboration</b> and <b>leadership</b> principles into the clinical care of patients, while including patient advocacy, and ethical decision-making                                                                                                                                                                                                                                                      | 3          | 3           | 3           | 4             | D 10; ILO 1; MSN PLO 2; DNP PLO 4           |
| 26. Accurately identifies patients whose mental health needs require <b>urgent or emergent intervention</b> by conducting thorough risk assessments, recognizing signs of acute psychiatric distress, and applying clinical judgment informed by evidence-based guidelines. Demonstrates the ability to prioritize safety, initiate appropriate referrals, and coordinate care in crisis situations across diverse clinical settings across the lifespan. | 3          | 3           | 3           | 4             | D 5, ILO 2 & 5; MSN PLO 3 & 9; DNP PLO 5    |
| <b>150 Clinical Hours - NURS 793 C / CL</b>                                                                                                                                                                                                                                                                                                                                                                                                               | Weeks 1 -3 | Weeks 4 - 6 | Weeks 7 - 9 | Weeks 10 - 12 | Learning Outcomes                           |
| 1. In an 8-hour clinical day the student will see <b>8 – 10 patients</b> ( <i>up to 1 hours / patient encounter</i> )                                                                                                                                                                                                                                                                                                                                     |            |             |             |               |                                             |
| 2. Completes facility orientation; reviews relevant policies and procedures.                                                                                                                                                                                                                                                                                                                                                                              | 3          |             |             |               |                                             |
| 3. Communicate effectively with office staff and other professionals.                                                                                                                                                                                                                                                                                                                                                                                     | 5          | 5           | 5           | 5             | D 6 & 9; ILO 2; MSN PLO 7; DNP PLO 4        |
| 4. Maintains professional standards including dress, timeliness, and language.                                                                                                                                                                                                                                                                                                                                                                            | 5          | 5           | 5           | 5             | D 9; ILO 4; PLO 6; DNP PLO 1                |
| 5. Demonstrates interest and takes initiative in learning.                                                                                                                                                                                                                                                                                                                                                                                                | 5          | 5           | 5           | 5             | D 9; ILO 4 & 5; MSN PLO 6; DNP PLO 1        |
| 6. Uses references effectively and efficiently in clinical settings.                                                                                                                                                                                                                                                                                                                                                                                      | 5          | 5           | 5           | 5             | D 1; ILO 2; MSN PLO 9; DNP PLO 1            |
| 7. Reviews chart prior to encounter.                                                                                                                                                                                                                                                                                                                                                                                                                      | 5          | 5           | 5           | 5             | D 1; ILO 2; MSN PLO 1; DNP PLO 5            |
| 8. Demonstrates <b>person-centered care</b> and <b>cultural competence</b> in providing care to diverse populations by actively listening, respecting diverse beliefs and practices, and adapting care to meet                                                                                                                                                                                                                                            | 5          | 5           | 5           | 5             | D 2 & 3, ILO 3, MSN PLO 2, 3 & 8; DNP PLO 1 |

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| each patient's cultural needs. <b>Communicates</b> effectively with patients, using appropriate terminology, and considers available resources and socioeconomic factors.                                                                                                                                                                                                                                          |   |   |   |   |                                                     |
| 9. Obtains a <b>comprehensive and problem-focused health history</b> from the patient, including chief complaint, history of present illness, past medical history, appropriate family and social history, and review of systems. Demonstrates logical systematic methodology in obtaining subjective patient data. Distinguishes between normal and abnormal findings, and normal variations across the lifespan. | 5 | 5 | 5 | 5 | D1, ILO 1 & 5, MSN PLO 1, 4 & 9; DNP PLO 1          |
| 10. Selects and utilizes appropriate evidence-based screening and assessment tools to support <b>measurement-based care</b> , ensuring alignment with the patient's clinical presentation, diagnosis, developmental stage, and cultural context. Interpret results to inform differential diagnosis, treatment planning, and ongoing evaluation of therapeutic outcomes.                                           | 5 | 5 | 5 | 5 | D 1 & 5, ILO 2 & 5; MSN PLO 1, 4, 9; DNP PLO 5      |
| 11. Formulates appropriate <b>case formulations and diagnoses</b> including comprehensive differential diagnoses while considering epidemiology, life stage development and environmental and community characteristics for each patient. Arrives at the correct diagnoses based on clinical data and formulates at least three (3) diagnoses for most patients.                                                   | 5 | 5 | 5 | 5 | D 2; ILO 3 & 5; MSN PLO 8 & 9; DNP PLO 1 & 5        |
| 12. Formulates a <b>treatment plan</b> that is appropriate for the diagnosis and accurately addresses the identified problems. The plan is based on shared decision making, scientific knowledge, evidence-based standards of care and practice guidelines.                                                                                                                                                        | 5 | 5 | 5 | 5 | D 1 & 4, ILO 2; MSN PLO 4 & 9; DNP PLO 1 & 5        |
| 13. <b>Evidence-based treatment plans</b> include psychotherapeutic interventions, pharmacological and non-pharmacological modalities as appropriate and consider developmental stage, cognitive ability, risk assessment, prognosis, expected outcomes, possible referrals, appropriate drug monitoring, and plans for follow-up evaluation.                                                                      | 5 | 5 | 5 | 5 | D 3 & 4, ILO 3; MSN PLO 2, 3 & 8; DNP PLO 1 & 5     |
| 14. Integrates evidence-based <b>psychotherapeutic modalities</b> in the delivery of individual, group, and family therapy. Utilizes skills to establish therapeutic alliance, select appropriate psychotherapy approaches, facilitate goal-oriented sessions, and adapts interventions to meet the unique needs of diverse populations to promote                                                                 | 4 | 4 | 5 | 5 | D 1 & 2; ILO 1 & 5; MSN PLO 1, 4 & 7; DNP PLO 1 & 5 |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |   |   |   |   |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|-----------------------------------------------------|
| psychological well-being and support recovery across settings. Demonstrates proficiency in at least <b>two psychotherapeutic treatment modalities</b> .                                                                                                                                                                                                                                                                                                                                                                                |   |   |   |   |                                                     |
| 15. <b>Documents</b> patient encounters using the SOAP format, ensuring clarity, organization, and the accurate use of medical and psychiatric terminology. Effectively integrates assessment findings, diagnostic impressions, treatment plans, and therapeutic interventions to support continuity of care, legal standards, and interprofessional collaboration. Maintains documentation that reflects clinical reasoning, adherence to ethical and regulatory guidelines, and responsiveness to patient needs across the lifespan. | 5 | 5 | 5 | 5 | D 9, ILO1 & 6; MSN PLO 7; DNP PLO 1 & 5             |
| 16. Accurately applies diagnostic coding, including ICD-10, CPT and DSM-5TR, based on comprehensive assessment data, clinical reasoning, and established diagnostic criteria, ensuring alignment with regulatory standards and ethical practice.                                                                                                                                                                                                                                                                                       | 5 | 5 | 5 | 5 | D 5; ILO 4; MSN PLO 9; DNP PLO 1 & 5                |
| 17. Communicates effectively with patients providing appropriate <b>patient education</b> including a detailed and clinically sound follow-up plan that addresses relevant and cardinal symptoms requiring follow up treatment. Provides anticipatory guidance, teaching, counseling, and specific information about each diagnosis. Provides written information to patients when appropriate.                                                                                                                                        | 4 | 5 | 5 | 5 | D 1 & 2; ILO 1 & 5; MSN PLO 7, 8 & 9; DNP PLO 1 & 5 |
| 18. <b>Evaluates the effectiveness of treatment plans</b> through ongoing assessment of patient progress, clinical outcomes, and therapeutic response. Utilizes evidence-based guidelines, patient feedback, standardized measurement tools, clinical reasoning and collaboration in adjusting care plans to optimize mental health outcomes and support recovery for clients across the lifespan.                                                                                                                                     | 4 | 5 | 5 | 5 | D 4, ILO 2, MSN PLO 4 & 9; DNP PLO 1 & 5            |
| 19. Utilizes evidence-based practice to inform and improve <b>quality and safety</b> of advanced psychiatric nursing care. Recognizes the relationship between economics and delivery of <b>quality</b> patient care.                                                                                                                                                                                                                                                                                                                  | 4 | 5 | 5 | 5 | D 5, ILO 3 & 4, MSN PLO 2 & 7; DNP PLO 1 & 5        |
| 20. Engages in <b>interprofessional partnerships</b> in the clinical setting, demonstrating effective teamwork and communication skills while integrating evidence-based practice and research findings into clinical decision-making processes.                                                                                                                                                                                                                                                                                       | 4 | 5 | 5 | 5 | D 6; ILO 1; MSN PLO 7; DNP PLO 4                    |
| 21. Apply principles of <b>population health</b> to psychiatric mental health practice by identifying                                                                                                                                                                                                                                                                                                                                                                                                                                  | 4 | 4 | 5 | 5 | D 3; ILO 3 & 5; MSN PLO                             |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |   |   |   |                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|--------------------------------------------|
| social determinants of health, health disparities, and community-level risk factors that impact mental well-being. Utilizes epidemiological data, evidence-based interventions, and collaborative strategies to promote mental health equity, advance <b>health promotion</b> , prevent psychiatric and comorbid disorders, and improve outcomes across the lifespan in diverse populations and settings.                                                 |   |   |   |   | 1, 8 & 9;<br>DNP PLO 2 & 5                 |
| 22. Effectively engages in <b>systems-based practice</b> by navigating complex healthcare systems, demonstrating an understanding of interprofessional roles, and optimizing health outcomes through strategic collaboration, resource coordination, and continuous quality improvement.                                                                                                                                                                  | 4 | 4 | 5 | 5 | D 7; ILO 2;<br>MSN PLO 2;<br>DNP PLO 2 & 4 |
| 23. Integrates <b>healthcare informatics</b> and patient care technology in the context of patient care, and effectively utilizes data, information systems, and technology to support safe, high-quality patient care and clinical decision-making                                                                                                                                                                                                       | 4 | 4 | 5 | 5 | D 8, ILO 2 & 3; MSN PLO 5 & 6; DNP PLO & 5 |
| 24. Demonstrates respect and empathy in patient interactions by utilizing <b>therapeutic communication</b> strategies, including motivational interviewing, to collaboratively explore and support health behavior change. Maintains a non-judgmental stance while fostering patient autonomy and readiness for change.                                                                                                                                   | 5 | 5 | 5 | 5 | D 9; ILO 1 & 6; MSN PLO 7; DNP PLO 1 & 5   |
| 25. Effectively integrates <b>interprofessional collaboration</b> and <b>leadership</b> principles into the clinical care of patients, while including patient advocacy, and ethical decision-making                                                                                                                                                                                                                                                      | 4 | 4 | 5 | 5 | D 10; ILO 1;<br>MSN PLO 2;<br>DNP PLO 4    |
| 26. Accurately identifies patients whose mental health needs require <b>urgent or emergent intervention</b> by conducting thorough risk assessments, recognizing signs of acute psychiatric distress, and applying clinical judgment informed by evidence-based guidelines. Demonstrates the ability to prioritize safety, initiate appropriate referrals, and coordinate care in crisis situations across diverse clinical settings across the lifespan. | 4 | 4 | 5 | 5 | D 5, ILO 2 & 5; MSN PLO 3 & 9; DNP PLO 5   |

### Levels of independence

|                                                                                |                                                                       |
|--------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| 1. Observation only                                                            |                                                                       |
| 2. Performance and decision making done <b>with preceptor present</b>          | *Requires <b>detailed assistance</b>                                  |
| 3. Performance and decision making done in <b>collaboration with preceptor</b> | *Requires <b>moderate assistance</b>                                  |
| 4. Performance and decision making done with minimal assistance from preceptor | *Requires <b>minimal assistance</b>                                   |
| 5. Performance and decision making done <b>independent</b> of preceptor        | *Requires no assistance; ALL cases reviewed and approved by preceptor |

### Resources:

1. American Association of Colleges of Nursing (2021). The Essentials: Core Competencies of Professional nursing Education. Author
2. National Organization of Nurse Practitioner Faculties (2013). Population-Focused Nurse Practitioner Competencies. Author.
3. National Organization of Nurse Practitioner Faculties (2022). Nurse Practitioner Core Competencies. Author.
4. American Nurses Association. (2022). Psychiatric-mental health nursing: Scope and standards of practice (3<sup>rd</sup> ed.). Author.
5. Franklin University Institutional Learning Outcomes and MSN Program Learning Outcomes.

### Mapping Key

- **D** AACN 2021 Domains
- **ILO** Franklin University Institutional Learning Outcomes
- **PLO** MSN Program Learning Outcomes

(Appendix H: Revised 9/2025)