McAuley School of Nursing

Graduate
Clinical Handbook
APRN Students
2019-2020
The McAuley School of Nursing Graduate Clinical Handbook provides the policies and procedures specific to the clinical experiences in the graduate program. This handbook should be used in conjunction with the MSON graduate handbook and the University of Detroit Mercy Graduate Catalog which provides detailed information regarding programs of study, course descriptions, and University Graduate Program policies and procedures.
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(313) 993-1030
http://udmercy.bncollege.com/

Financial Aid
(313) 993-3350/993-3354

IDS/Blackboard
(313) 578-0580

IT
(313) 993-1500

Library
(313) 993-1071

Public Safety
(313) 993-1252

Registrar
(313) 993-3313

Student Accounting Office
(313) 993-1420

Writing Center
(313) 993-1082
http://liberalarts.udmercy.edu/
PROFESSIONAL DECORUM POLICY

The graduate nursing student is a representative of the nursing profession and MSON. The maintenance of a professional appearance and demeanor facilitates the acceptance of the profession and the individual by patients and other health professionals.

It is expected that students will assume responsibility for observing the following guidelines on professional attire and demeanor:

While attending classes or laboratory sessions on the University of Detroit Mercy campus, students may express their personal choice in dress. Choices should be tasteful and neat.

While participating in any program activity outside of the University of Detroit Mercy campus, such as the clinical office areas, hospitals, colleges or universities, or care settings, students should present a professional, business casual, appearance. The program identification/name tag **MUST** be worn while on campus as well as at any clinical or practicum site.

The hospital or institution may issue an identification badge that must also be worn at all times while on those sites. **(ADDITIONALLY, STUDENTS MUST BE CLEARLY AND CONTINUOUSLY IDENTIFIED AS GRADUATE STUDENTS DURING CLINICAL EXPERIENCES.)**

All students should dress in a professional manner. Jeans, sweat pants and shirts, sandals and casual accessories are not considered appropriate in these settings. Lab coats should be worn at all clinical sites as appropriate. Lab coats should be ¾ length, white, and are the student’s responsibility to purchase and maintain.

**Policy for Break/Lunch Periods**

The MSON supports restorative time for all graduate level students in clinical rotations in the form of short breaks and/or lunch period. Students should negotiate break times with their preceptor that correspond to the needs of the unit/environment.

**Policy for Length of Time between Student’s Job and Clinical**

Students who work before a set clinical time are required to have at least six hours between work and clinical. This will minimize fatigue and improve patient safety. Failure to follow this policy may result in placement on academic probation, failure in the course, and/or dismissal from the program.
GUIDELINES FOR CLINICAL CONDUCT

As the graduate nursing programs offer new clinical challenges, the developing professional bears the responsibility of representing the profession to patients, the public, and other members of the health care team. The following guidelines should be observed in representing the nursing profession:

Consistently demonstrate your concern for the welfare of the patient. Be thoughtful and professional when obtaining the history and performing the physical exam. Treat patients with respect and dignity, both in your interactions with them, and in your patient-related discussions with other professionals. Demonstrate your concern not only for the medical problem but for the total patient.

When working with a health care team or clinical agency, consistently demonstrate your understanding of working with and as part of a team. All interactions should demonstrate a professional approach with respect and dignity for all team members. Students who become intimately involved with projects that support agency goals and initiatives should treat all interactions with utmost confidence.

Conscientiously respect the rights of your colleagues. Characterize all of your professional encounters with cooperation and consideration. Strive to assume an appropriate and equitable share of patient care duties or other appropriate clinical activities.

Approach your responsibilities with dedication. Be truthful in all professional communications. When meeting multiple demands, establish patient-centered priorities to guide you in completion of such work.

At all times, graduate nursing students will uphold the Code of Ethics for Nurses (ANA). http://nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthics.aspx

Title Identification/Representation: Role and title confusion are common problems encountered in dealing with patients. Students should be aware of this problem and avoid misrepresentations by politely explaining their role and position.

1. In professional interactions with patients and others, a student should introduce himself or herself as a "nurse practitioner" or "clinical nurse specialist" student.

2. For nurse practitioner and CNS students, students should use the designation, NP-S (NP Student) or CNS-S (CNS student) following all notations in charts, records, and other medical forms. For example: "Mary Jones, RN, NP-S" or "Mary Jones, RN, CNS-S"

3. In all professional communications, including paging or beepers, a student should introduce him/herself as a nurse practitioner or clinical nurse specialist graduate student.
4. No nurse practitioner or CNS student should casually accept the “page” of a supervising clinician.

Students may be subject to sanctions within their program for failure to observe the practicum guidelines. See policy on professional and ethical conduct.

All data gathered about the patient and his/her illness, including all items within a patient’s medical history is privileged information.

1. Students should not discuss or present a patient’s records in a manner or situation that would violate the confidential nature of that record (HIPAA).

2. Charts or contents, e.g., lab reports, etc., are not to be removed from the hospital or clinical setting (HIPAA).

**Patient Records Preceptor Review and Countersignature:** On each clinical rotation, it is the student’s responsibility to insure that ALL patients seen by the student are also seen by the supervising clinician. The supervisor should also review all student notes written in medical records and countersign these documents.

Countersignature by a licensed supervisor/preceptor is required before any trainee order may be executed. Under no circumstances should a student initiate orders for any patient on any rotation without immediate consultation and countersignature of the clinical supervisor.

In addition, **UNDER NO CIRCUMSTANCES SHOULD A STUDENT SIGN PRESCRIPTIONS.**

The only signature which should appear on a prescription is that of the clinical supervisor.

Under no circumstances may a student attend clinical without a supervising preceptor on site.

These guidelines must be strictly adhered to for the student’s protection and the protection of the patients seen by students.

Each facility has its own protocols with regards to a student’s access to and ability to document in their electronic health record. Students will be expected to adhere to the individual institutions policies, and may be required to attend additional classes/orientation sessions.
HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 mandates Federal privacy protection for individually identifiable health information. Standards have been set for health care providers (who transmit health care transactions electronically. While in clinical practice, most of the health care providers you will come in contact with will be under the HIPAA guidelines and requirements. In your studies, and during your clinical practice, you need to be aware of these requirements, and additionally, the health care provider will often train you on their HIPAA policies and practices.

Some of the pertinent requirements of HIPAA are:

- Notifying patients about their privacy rights and how their information is used
- Adopting and implementing privacy procedures for the practice or hospital
- Training employees so that they understand the policies
- Designating an individual as a Privacy Officer, who is responsible for seeing that the privacy procedures are followed
- Securing patient records containing individually identifiable health information so that they are not readily available to those that do not need them

While participating in clinical practice, you will be expected to comply with HIPAA requirements, and you need to conduct yourself in the following manner during your clinical practicum:

- Use safeguards to prevent the use or disclosure of Protected Health Information (PHI) other than for your direct performance of services
- Notify your supervisor or faculty member of any use of disclosure of PHI that is contrary to your service and its purposes
- Ensure that fellow students do the same
- Cooperate and abide by with the training, policies and procedures of the health care provider
- The graduate programs utilize only those clinical training sites which comply with HIPAA standards and reserves the right to limit or curtail a student’s clinical opportunities in the event that proof of program annual mandatory training is not completed in ACEMAPP.
PROFESSIONAL AND ETHICAL CONDUCT POLICY

The Graduate Nursing Program has established standards for determining the professional and ethical conduct of students. All students enrolled in this program are expected to adhere to a standard of behavior consistent with the high standards of their profession. Compliance with all institutional rules and regulations, city, state and federal law is expected.

**Concern for the welfare of patients** (real or mock) as evidenced by: thoughtful and professional attitude in obtaining history and physical examination or other activities related to clinical. Avoidance of offensive language, offensive gestures, inappropriate remarks, or remarks with sexual overtones; treatment of patients and colleagues with respect and dignity both in their presence and in discussions with peers; manifestation of concern for the total patient and/or total health care team.

**Concern for the rights of others** shown by: dealing with class peers, professional and staff personnel, and with all other members of the health team in a considerate manner and with a spirit of cooperation; acting with an egalitarian spirit towards all persons encountered in a classroom setting or a professional capacity regardless of race, religion, gender, sexual orientation or disability; assuming an appropriate and equitable share of duties among peers.

**Responsibility to duty**, which involves: effectively undertaking duties with alacrity and persevering until complete, or notifying responsible persons of problems; punctual attendance at rounds, conferences and other clinical duties, or offering appropriate explanation when unable to be present; notifying course instructor and supervising preceptors of absence or inability to carry out duties; seeing patients regularly and assuming responsibility for their care with appropriate supervision; identifying emergencies and responding appropriately; insuring that he/she can be located when on duty by faculty or staff personnel.

**Trustworthiness**, that is: being truthful and intellectually honest in communication with others; acceptance of responsibility for meeting multiple demands by establishing proper priorities and by completing work; discerning accurately when supervision or advice is needed before acting; maintaining confidentiality of information concerning patients, health care systems.

**Professional demeanor**, which means: neat and clean appearance in attire that is acceptable as professional to the patient population; maintaining equilibrium under pressures of fatigue, professional stress, or personal problems; avoidance of the effects of alcohol or of drugs while on duty or while attending class.

It is not possible to enumerate all forms of inappropriate behavior that would raise serious questions concerning a student's status as a health professional in training.

The following, however, are examples of behavior that would constitute a violation of professional standards:

- Harassment, harm, abuse, damage, or theft to or of any person or property including copying of copy written materials and software on the University of Detroit Mercy
grounds or property owned by any hospital/clinic, affiliated institution/organization, or individual to which the student may be assigned

- Entering or using the University of Detroit Mercy or affiliated hospital/clinic facilities without authorization or disrupting teaching, research, administrative, or student functions of the University

- Falsifying clinical hours, clinical records, or clinical experiences

- Conviction of a felony

- Participating in academic or clinical endeavors of the University of Detroit Mercy or its affiliated institutions while under the influence of alcohol, a controlled substance, or illicit drugs. Unlawful use, possession, or distribution of illegal drugs and alcohol

- Placing a patient in needless jeopardy or unethical disclosure of privileged information

- Behavior or grooming which elicits a lack of respect and confidence from a patient, faculty, and colleagues

- Abusive or disrespectful conduct toward members of the faculty, administrative or professional staff, employees, students, patients, or visitors to the University of Detroit Mercy and/or its affiliated institutions

- Violation of any other established rules and regulations of the University of Detroit Mercy, hospital, or any affiliated institution (as used in the above example). The University of Detroit Mercy premises and property shall include the premises and property of any affiliated institution where University of Detroit Mercy students pursue activities for academic credit.
PROFESSIONAL DISCIPLINARY SANCTIONS

Students who fail to meet the standards specified in the graduate nursing program’s policy on attendance, professional decorum, clinical conduct or professional ethics are subject to sanctions including, but are not limited to, warning, reprimand, probation and dismissal. The Academic Progression Committee (APC) is the recommending body for graduate nursing student misconduct for those receiving a dismissal. The Office of the Associate Dean of the McAuley School of Nursing will adjudicate all matters involving dismissal for professional misconduct.

Warning: A warning is a written letter to a student for misconduct that is found to be an isolated, promptly correctable, incident and does not violate specific Program, University policy or jurisdictional law. A warning may be issued by any faculty member, adjunct or instructor, or any representative of the University of Detroit Mercy. Warnings are reported to the Associate Dean for informational purposes. Temporary entry is made into the student record and made permanent if further action is required. Warning letter(s) is/are removed upon successful completion of education.

Reprimand: A reprimand is a written letter to a student for misconduct that is found to be more serious than the above, but is still felt to be isolated, promptly correctable, and does not violate specific Program, University policy or jurisdictional law. Reprimand may be issued by any faculty member through the Associate Dean. Reprimands are reported to the Dean of the College of Health Professions for informational purposes. A copy is placed in the student's record.

Probation: In a more serious breach of professional standards, a student may be placed on disciplinary probation. Provisions included in probation will be decided by the office of the Associate Dean. Such provisions may include a requirement that the student obtain medical (including psychiatric) consultation and treatment or other requirements that will remedy the misconduct and prevent its recurrence. The duration and condition of any probation will be determined on an individual basis by the Office of the Associate Dean.

Students may be allowed to continue classes while on probation, but may not be allowed to continue patient care or other activities in a clinical rotation. Repeated professional probation can result in dismissal as described below.

Dismissal: Dismissal is a permanent separation from the program. Dismissal may be recommended by the APC and forwarded to the office of the Associate Dean for academic reasons. Dismissal may be imposed with or without the right to reapply for admission to University of Detroit Mercy at a later date. A student may be immediately dismissed for a serious breach of professional conduct.

Consultation: When medical or psychiatric consultation is required or recommended, all parties will respect patient/provider confidentiality. However, documentation or enrollment and/or completion may be required as a condition for reinstatement.
Requirements for Clinical Participation

The ability to participate in clinical rotations requires that students meet several conditions. Students must successfully complete a criminal background check which includes a urine drug screen. Students must have evidence of current CPR certification and meet all health requirements related to preventable disease. In addition, FNP students are required to carry additional liability insurance (nurse practitioner student plan).

The MSON utilizes the ACEMAPP (Alliance for Clinical Education Matching and Placement Program). [www.acemapp.org] ACEMAPP is a secure, online, clinical rotation matching, student on-boarding, and document storage solution for clinical sites, schools and consortia. ACEMAPP is a system to certify educational and healthcare institutions that students have completed certain requirements prior to the start of their clinical placement. This is a web-based online learning system and provides the vehicle for centralized record keeping of the HIPPA, OSHA, and Blood Borne Pathogens requirements that all of the health systems in Southeast Michigan require. The ACE MAPP System is also a centralized record keeping system for the student’s demographic information and student’s immunization, CPR, and TB results. All competencies must be maintained and up to date in ACEMAPP in order to participate in the clinical setting.

Students will be required to register and pay for the ACEMAPP System once a year. Students will receive an email from ACEMAPP which will enable the student to register, upload required documents and complete the mandatory exams. All students will complete all ACEMAPP requirements prior to clinical site approval/attendance and maintain current compliance while in clinical courses, mandatory exams are completed annually. Dates for completion will be announced each fall and failure to complete these mandatory requirements prior to the designated date by which students have been notified will result in the administrative withdrawal from the course by the Office of the Associate Dean.

Student Health Policy Related To Vaccine and Other Preventable Disease

On the basis of documented nosocomial transmission, health care personnel (HCP) are considered to be at significant risk for acquiring or transmitting influenza, hepatitis B, measles, mumps and rubella and varicella. All of these diseases are vaccine preventable. The MSON requires all incoming students to demonstrate immunity to or vaccination for these diseases. The MSON and our clinical partners reserve the right to withdraw a student who does not demonstrate compliance with vaccine and other health requirements. Students with a documented allergy or adverse event are responsible for providing the appropriate documentation to the clinical agency for review. The clinical agency may or may not allow the student to participate in clinical activities at their site. In the event a student fails to submit proper documentation by the specified date, a registration hold may be placed on the account of or the student may be withdrawn from the clinical course and not allowed to progress.

The following summarizes the health requirements related to vaccine-preventable disease and nosocomial infection.
Measles, Mumps, Rubella and Varicella
The MSON requires that each student ensure that they are immune to the usual childhood illnesses; particularly measles (rubeola), mumps and rubella as well as varicella.

Tetanus and Diphtheria
Healthcare workers under 65 who have direct patient contact in hospitals or clinics must get a dose of Tdap. There is no minimum interval for tetanus. All adult health care providers should get a booster dose of Td every 10 years.

Hepatitis B
The MSON’s policy on Hepatitis B is consistent with the current CDC guidelines.
All students have at least begun the Hepatitis B vaccination prior to the beginning of the program. Post vaccination testing for antibody to Hepatitis B surface antigen (Anti-HBs) response is required, and should be done 1-2 months following the last dose. If the student has documentation that he or she received the Hepatitis B vaccine in the past, but did not have post vaccination testing for the presence of anti-HBs response, that student does not need to show proof of immunity. In the event that a student chooses not to obtain the Hepatitis B vaccination and proof of immunity, a signed declination must be received prior to the beginning of training. Students who are known to be Hepatitis B Virus-infected are subject to the CDC guidelines for the management of Hepatitis B-Virus infected health-care providers and students http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6103a1.htm?s_cid=rr6103a1_e

Tuberculosis Status
Students must have documentation of current TB status, and will be annually required to update this screening. More frequent screening may be required by some clinical sites where exposure is more likely. Students may be required to obtain X-ray examinations every three years if medically indicated.

Influenza
As of January 2007, the Joint Commission on Accreditation of Healthcare Organizations issued a standard for accredited organizations requiring influenza vaccine for their staff, volunteers, and licensed independent practitioners who have patient contact. All students must receive annual influenza vaccine by October 31st of each year.

OSHA
The Program and the University observe and enforce all applicable OSHA standards for blood borne pathogens. The UDM College of Health Professions requires annual education regarding these pathogens and the risks of exposure. The Program utilizes only those clinical training sites which comply with OSHA standards for availability of protective equipment against exposure; the University reserves the right to limit or curtail a student’s clinical opportunities in the event that proof of completion of the annual education on blood borne pathogens is not
available, and required records of students' health are not submitted and/or maintained. The ACEMAPP system provides the web-based educational program for OSHA standards and bloodborne pathogens.

**BLS Requirements**

Prior to the start of clinical rotations, all students are required to present evidence of current certification for BLS Healthcare Provider Course. The certification card must indicate you completed the **BLS Provider Course**. If the American Red Cross issues the card; it must indicate you completed the BLS for the **Provider**. **BLS certification must remain current while the student is in clinical rotations during their program.**

BLS courses are available through several agencies, including the American Red Cross and The American Heart Association. In addition, some local hospitals may permit students to enroll in the BLS classes offered through their staff development departments. Certification either on campus or through another provider is at the expense of the student.

**ACLS & PALS Requirements**

Prior to the start of clinical rotations for **ENP students only**, it is required to present evidence of current certifications for ACLS & PALS. The certification card must indicate you completed the **ACLS Course and skills checkoff and PALS Course**. **ACLS & PALS certification must remain current while the student is in clinical rotations during their program.**

ACLS & PALS courses are available through several agencies, including the American Red Cross and The American Heart Association. In addition, some local hospitals may permit students to enroll in the ACLS & PALS classes offered through their staff development departments. Certification either on campus or through another provider is at the expense of the student.

**Liability Insurance**

Effective fall 2014, **all family nurse practitioner students** are **required** to purchase professional liability insurance (highly recommended for CNS students). This is a result of several of our clinical partners requiring coverage that is broader in scope and greater than that covered by UDM’s liability policy. A copy of the malpractice insurance must be submitted to the compliance office. Minimum amount of coverage allowed is $2,000,000 per incident and $4,000,000 aggregate. The policy should be an occurrence-type policy. The liability policy must cover you while you are in clinical courses.

In addition to a student’s own professional liability policy, all students, including registered nurse students, are covered by professional liability insurance through University of Detroit Mercy while they are enrolled in clinical nursing courses. The nurse practitioner, clinical nurse specialist, clinical nurse leader, doctorate of nursing practice, or health systems management student is covered by the University of Detroit Mercy malpractice insurance **only** in clinical practicums that are a part of the educational program of the MSON.
Health Insurance
It is required that all students carry health insurance coverage for the duration of the program experience. Students assume responsibility for their own medical care. In their capacity as students, students cannot access employee health care services free of charge at program clinical sites. Limited services are available through the Student Health Service (http://www.udmercy.edu/slo/wellness/index.htm).

Students are responsible for any health care costs, even those that arise from clinical or laboratory assignments. The university assumes no responsibility for a student’s medical care.

College of Health Professions Policy for Criminal Background Checks
Michigan Public Act 303 of 2002 requires that any individual who regularly provides direct services to patients or residents of nursing homes, county medical care facilities, hospital long-term care units, homes for the aged and adult foster care homes must submit to a criminal background check in order to obtain and maintain clinical privileges. Additionally, many clinical sites affiliated with the University for educational purposes have adopted this requirement. The clinical programs of University of Detroit Mercy’s College of Health Professions (CHP) require students to participate in the care of patients in various health care settings. Students in the clinical programs are, therefore, subject to this legislation. A student’s past criminal history may affect his/her admission to a program, limit or disallow the number of suitable practice placement sites and/or affect ability to obtain licensure as a registered health care provider.

The student has a continual obligation to report any criminal conviction that may impact upon the student’s continued ability to participate in the clinical program to the Compliance Officer of the College of Health Professions within 30 days of its occurrence. Failure to do so, or to comply with any other aspect of this policy, will result in immediate dismissal from the program.

College of Health Professions Policy for Drug Screening
The purpose of this policy is to provide a safe working and learning environment for patients, students, clinical and institutional staff and property in the clinical programs of University of Detroit Mercy’s College of Health Professions (CHP). Healthcare accreditation organizations mandate that hospitals and other health care agencies require students who participate in the care of patients be subject to the same standards as their employees. Accordingly, submitting a negative urine drug screen is a condition for participation in the clinical component of the graduate nursing program.

The policy and procedure for the criminal background check and urine drug screen are available on the program web site and can be accessed online at https://healthprofessions.udmercy.edu/about/pph.php. Students are responsible for reading the instructions for the criminal background check and urine drug screen (https://healthprofessions.udmercy.edu/about/pph.php).
Clinical Preceptors for FNP and CNS Students

Students are responsible for finding appropriate clinical preceptors, although the MSON has some resources to assist you in this process. For the FNP program, preceptors may be Certified Nurse Practitioners, Certified Physician Assistants, or Board Certified Physicians (MD or DO) in the state of Michigan and should practice in a primary care role.

For the CNS program, preceptors should be nationally certified CNSs in Adult, Gerontology or Adult-Gerontology. When CNSs are not available or additional expertise is deemed essential for the student’s education, other professionals (e.g., master’s or doctorally prepared nurse practitioners, physicians, nutritionists, social workers, psychologists, nurses, or other health professionals with advanced preparation and specialized expertise) may precept CNS students for circumscribed experiences. The majority of clinical hours in the program must be with a CNS-prepared advanced practice nurse.

Please review the guidelines for choosing a preceptor. All clinical sites must be approved by the clinical or program coordinator and a clinical agency affiliation agreement and/or a memo of understanding must be on file. Preceptor credentials in the form of a current CV and unencumbered license to practice must be submitted. Students are to complete an evaluation of the experience after each rotation.

Guidelines for Choosing a Preceptor

The role of the Preceptor is to facilitate the learning experience of the graduate nursing student in the selected area. The Preceptor employs communication, direct supervision, guidance and other teaching strategies to augment the learning process. Ongoing evaluation and evaluation of the student at the completion of the practicum experience is an integral part of the Preceptor’s role.

Students must have the opportunity to actually actively participate in all aspects of the patient encounter. They should have the opportunity to complete comprehensive and episodic histories and physical examinations, present the patients to the preceptor, discuss the options for diagnostic management including pharmacology and follow-up. To some degree, students participate in the decision-making process. It is also important that students have the opportunity to understand processes for recording patient information (although students do not always have access to the EHR) and have some understanding of the practice environment. Students should take care to choose preceptors who will assist in their role development and transition. Most of your preceptors should be working in primary care (for the FNP program) and move fluidly across the three spheres of influence, patients, nurses and systems (for the CNS program).

A preceptor should be willing to do the following:

1. Serve as a role model and be willing to mentor and coach the student.
2. Orient the student to the practicum setting and all policies.
3. Assure that all staff members at the practice setting understand the role of the student.
4. Plan learning activities with the graduate student to meet course objectives.
5. Provide the student with consultation and constructive feedback as needed.
6. Maintain communication with the student and MSON Faculty. If the student’s performance is below expectations, the preceptor should notify the faculty of record for the course immediately.

7. Provide the faculty with signed performance evaluations at midterm and end of the practicum (for CNS program) and end of the practicum only (for FNP program).

8. Meet with the clinical faculty at mid-term (virtually for CNS program) and/or the end of the term (FNP program) to discuss student performance.

**Attendance at Clinical Practicum**

Students schedule clinical time consistent with preceptor availability and are expected to attend clinical as scheduled. If a student must be absent for a scheduled clinical day, the preceptor is to be notified prior to the beginning of that day. It is the student’s responsibility to identify the procedure for contacting the preceptor in the case of emergency or absence. The student must also notify the faculty and/or clinical coordinator of the absence. The student should negotiate with the preceptor regarding make up time. A student who is not attending clinical or misses clinical without proper notification is subject to disciplinary action which may result in program dismissal.

**Professional Dress at Clinical Practicum**

Students are expected to dress professionally and appropriately at all times during clinical rotations. Dress may be dependent upon office/clinical agency practices. For example, some practices wear lab coats whiles others do not. Sweat pants, jeans or other casual wear is not acceptable. In addition, students should act professionally at all times. Student UDM identification badges must be worn. Some agencies will require additional identification as well.