

## **PRECEPTOR QUALIFICATIONS AND RESPONSIBILITIES**

Each provider designated as a "Preceptor" must be a licensed provider who agrees to assume the responsibilities of clinical instruction of a PA, DNP-FNP, a PMHNP or a DNP-PA trainee in compliance with applicable: laws, accreditation requirements and affiliation agreement provisions. The Preceptor must be trained and actively practicing and be in good standing with the respective licensing board and the community.

### **Specific Preceptor Responsibilities:**

#### **Logistics**

1. Orient the trainee to the work environment including site safety and evacuation plans.
2. Honor the trainee role by not utilizing the trainee to replace clinical or administrative staff during rotation.
3. Outline expectations of the trainee during the rotation (daily schedule, dress, responsibilities, etc.).
4. Provide the appropriate number of hours or shifts per week applicable to the particular program needs, but no more than 60 hours a week including on-call hours. Set the hours and schedule with the trainee as appropriate. This commitment may be shared among two or more qualified Preceptors.
5. Facilitate opportunities for trainees to be supervised by designated licensed and credentialed providers that are a part of your practice or specialty group in your absence.
6. Notify the applicable School of Nursing Program Director of any questions or concerns regarding the trainee.

#### **Support Trainee Learning:**

1. Facilitate trainee's learning of your specialty through supervised patient interactions and providing feedback.
2. Challenge the trainee to identify gaps in knowledge to promote learning.
3. As appropriate, share resources (books, journal articles, etc.), assign readings or other pertinent assignments, and include trainee in professional learning opportunities (grand rounds, team meetings, etc.)
4. Provide hands-on learning under direct supervision (see the specific program's Preceptor Handbook for quick reference guidelines of trainee capabilities). Ensure informed patient consent is received verbally or in writing.
5. Audit and co-sign charts in order to evaluate the trainee's ability to write appropriate and complete progress notes, histories, physical examinations, assessments, and treatment plans.
6. Complete an online evaluation sent via email of trainee performance on: Clinical Skills, Professional Attributes, and General Comments of Overall Performance
7. Should any problem arise that would prevent the Preceptor from accomplishing the above items or would diminish the training experience for the trainee, Preceptor should notify Affiliate and School representatives. It is the School's intention to have a completely open faculty-colleague relationship with the Preceptor. Should problems arise, early notification of the Affiliate and School will result in early problem solving without diminishing the training experience for the trainee and without putting an onerous burden on the Preceptor.

#### **Additional Requirements Specific to the DNP-PA Program only:**

The Preceptor must be a licensed Certified Registered Nurse Anesthetist ("CRNA") or physician anesthesiologist provider who agrees to assume the responsibilities of clinical instruction of the trainee. Clinical supervision of trainees must not exceed 2 trainees assigned to 1 CRNA or 2 trainees assigned to 1 physician anesthesiologist if no CRNA is involved.