Many nursing education programs use preceptors in the clinical instruction since it allows the student to experience working more closely with employed nurses and to gain from their expertise.

There are two (2) preceptor models identified in the Board rules. One model allows the clinical group to be expanded to twelve (12) students with two (2) students being rotated off to spend a day with the identified preceptor. In the second model, the entire clinical group of up to twenty-four (24) students is being precepted by assigned preceptors. In both models, the faculty is responsible for the clinical experience and for the final evaluation of students.

Rules 214 and 215 define a clinical preceptor as a licensed nurse (for vocational nursing programs and a registered nurse for professional nursing programs) who meets the minimum requirements in the rule, who is not employed as a faculty member by the nursing program, and who directly supervises clinical learning experiences for no more than two (2) students. A clinical preceptor assists in the evaluation of the student during the experiences and in acclimating the student to the role of the nurse. A clinical preceptor facilitates student learning in a manner prescribed by a signed written agreement between the educational institution, preceptor, and affiliating agency (as applicable).

A preceptor is a licensed nurse who has agreed to serve in this role either in a one-day capacity with no more than two (2) students as described in the first model, or as a long-term mentor for no more than two (2) students as described in the second model. There are differences in the students’ clinical assignments when the faculty is supervising the total experience and when preceptors are used:

- When no preceptors are being used, a student may be assigned to a patient or a group of patients under the supervision of the faculty member and in collaboration with the patient or patients’ assigned primary (staff) nurse. The student nurse is learning to provide competent, safe care for the assigned patients focusing on their diagnoses and total assessment.

- When the student is assigned to a preceptor, the student is learning the nurse’s role in providing all aspects of nursing care to one (1) or more patients. The faculty member is accountable for the learning experience but the preceptor collaborates in the supervision and evaluation of the student’s clinical performance.

Clinical affiliating agencies may select nurses to serve as preceptors for nursing students and may provide an orientation for nurses serving as preceptors. Nursing programs who use preceptors should also provide a preceptor orientation to familiarize the preceptor with the program objectives and curriculum, as well as the program’s expectations of the preceptor.

Rule 214.10 sets forth the requirements for use of clinical preceptors in vocational nursing education programs. Rule 215.10 sets forth the requirements for use of clinical preceptors in professional pre-licensure nursing education programs (diploma, associate degree, baccalaureate degree, or entry-level master’s degree).
Rule 214.10(i) related to \textit{Clinical Learning Experiences} requires, in pertinent part, that "When faculty use clinical preceptors to enhance clinical learning experiences and to assist faculty in the clinical supervision of students, the following applies: (1) Faculty shall develop written criteria for the selection of clinical preceptors. (2) When clinical preceptors are used, written agreements between the vocational nursing education program, clinical preceptor, and the affiliating agency, when applicable, shall delineate the functions and responsibilities of the parties involved. . ." 

Rule 215.10(j) related to \textit{Clinical Learning Experiences} requires, in pertinent part, that "When faculty use clinical preceptors or clinical teaching assistants to enhance clinical learning experiences and to assist faculty in the clinical supervision of students the following applies: (1) Faculty shall develop written criteria for the selection of clinical preceptors and clinical teaching assistants. (2) When clinical preceptors or clinical teaching assistants are used, written agreements between the professional nursing education program, clinical preceptor or clinical teaching assistant, and the affiliating agency, when applicable, shall delineate the functions and responsibilities of the parties involved. . ."

The following are suggested items to be included in a written agreement between program, clinical preceptor and/or affiliating agency, and student, indicating delineation of functions and responsibilities, as appropriate. An actual written agreement should include areas for appropriate signatures and dates.

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

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

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

**Student Responsibilities:**
1. Coordinate personal schedule with the preceptor's work schedule to avoid any conflicts.
2. Maintain open communications with the preceptor and faculty.
3. Maintain accountability for own learning activities.
4. Prepare for each clinical experience as needed.
5. Be accountable for own nursing actions while in the clinical setting.
6. Arrange for preceptor's supervision when performing procedures, as appropriate.
7. Contact faculty by telephone, pager or email if faculty assistance is necessary.
8. Respect the confidential nature of all information obtained during clinical experience.

**Some Factors to be Considered in Selecting Precepted Experiences:**
1. The preceptor's nursing responsibilities that might impact his/her teaching time with the students.
2. The location and accessibility of the facility for the student.
3. Safety measures taken into account.
4. The diversity of population served.
5. Willingness to accommodate nursing students.
6. Number of other programs/students using the same setting.
7. The interdisciplinary nature of the setting.
9. Appropriateness of the precepted experience for the level of educational preparation for the students.

**Important:** Please be aware that references to Rule 214 and Rule 215 are not all inclusive.