A Week By Week Guide for Students in Preceptorship 2

It is difficult to suggest a sequence of experiences that will be useful in all focus of practice areas because of the variety of these areas [high acuity, medical/surgical/perinatal, neonatal, paediatrics, perioperative, nephrology, mental health, emergency and community (home health and prevention)]. This following weekly schedule is a guide only. *Modify the schedule as seems best for you, the preceptor, and the area.*

If your preceptor has questions about what the schedule might look like in your area, please discuss the ideas with your instructor.

Schedule

Week1	Day 1	 You need to become familiar with the physical setup of the unit and the delivery of care. You should: Know the location of fire and emergency equipment, and procedures for their use. Other safety issues like workplace violence and nurse safety should be discussed with your preceptor. Locate resource materials (policies, pathways, orientation manuals, seek and find forms, the library, on-line programs, etc.). Know the location of allied services (for hospitals-laboratories, dietary, social services, x-ray, etc. and for community agencies- dietician, community resources, pharmacies, etc.). Identify methods of obtaining supplies and equipment (linen, drugs, sterile supplies, pamphlets, teaching aids, etc.). Identify the method of organizing nursing care. Identify established channels of communication (reporting,
Week 1	Day 2	documentation, communication books, intranet, etc.). Identify established care pathways. You will identify the nursing skills/experiences you need. A list of these skills/experiences could be posted so that other staff is informed of your learning needs. You should introduce yourself to other staff on the unit. Inform them of the student and preceptor role while on the focus of practice unit. On the first shift you should "buddy" with the preceptor to obtain a sense of routines, kinds of clients, etc. On the second day, you should be assigned 1 or 2 clients; this will depend on your focus of practice. The assignment will increase gradually as your preceptor and you become comfortable working together. In community start to get familiar with the various programs offered. You should begin documenting care given and participating in end of shift report.
		3. The preceptor should start giving feedback to you about the care

	given. If not ask for feedback.
	4. At the end of the first or second shift you should create a
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	preceptorship 2 learning plan and submit it to your instructor and
	share it with your preceptor.
Week 2	1. Your preceptor will gradually increase your assignment so that you
	are providing holistic care to more clients. You should be:
	 Starting to anticipate care based on assessments, establishing
	priorities and developing and revising plans of care.
	Incorporating family into care (when appropriate) and
	describing your nursing agency to them. This means
	explaining how nursing care affected the outcome of their
	problem (Buresh & Gordon, 2006)
	 Communicating professionally with health care workers.
Weeks 3-4	Your preceptor will continue to increase the number and complexity
	of assignments. In hospitals this means 50-75% of a full workload
	depending on the acuity and degree of specialty on the unit.
	2. You need to identify the knowledge and skills required to organize
	care for an increased number of clients or the increased complexity of
	clients. In hospitals, this should include the following:
	 Doing quick initial assessments of patients at the beginning
	of each shift and setting priorities based on the assessment.
	 Doing complete assessments regularly throughout the shift
	to identify changes.
	 Checking charts frequently to ensure awareness of new
	orders.
	 Front loading care and grouping tasks to utilize time
	effectively.
	 Anticipating and planning for the unexpected.
	 Communicating frequently with your preceptor to ensure
	priority care is completed and the preceptor is kept
	informed.
	In community nursing, this might include the following:
	Checking intake records to identify priority clients.
	Anticipating and planning for the unexpected.
	 Collaborating with other health professionals about care and
	making appropriate referrals.
	 Communicating frequently with your preceptor.
	 Making independent visits/managing clients in clinic (as
	student experience and unit policy allows).
	4. You should start teaching clients as needed. You should identify
	client's learning needs, implement incidental and planned teaching
	and evaluate the teaching.
	5. You should gain an understanding of the general functioning of the
	focus of practice unit and how the work is facilitated. These activities
	may include:
	 Becoming familiar with methods by which people are
	categorized (severity of illness, amount of care required, and
	type of problem).
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	 Reviewing the job descriptions of the various nursing personnel on the unit/in community. Becoming familiar with the follow-up for physician orders, child abuse, CDC, community clinics, etc. Becoming familiar with methods of requisitioning and /or arranging for diagnostic tests, therapies, referrals, discharges and transfers. During week 4, you should complete the midterm clinical evaluation and give it to your preceptor for feedback. The BCIT instructor will meet with you and the preceptor to review the evaluation.
Weeks 5-8	 You should begin to develop leadership skills like networking to facilitate care, collaborating with health professionals, sharing expertise, being advocates for clients and identifying opportunities for change and growth. You should be participating in multidisciplinary rounds, community meetings, etc. whenever possible. You should become increasingly aware of your preceptor's total workload/responsibilities. Your preceptor and you should have a discussion about the part of the preceptor's workload that you have yet to assume. You should be gradually adding more of your preceptor's responsibilities to your role so that your ability to manage increases with each week or set of shifts. In community you should schedule, in consultation with your preceptor, participation in all appropriate identified programs.
	 After midterm, within the context of focus of practice, you should be assuming the expected patient/client assignment, identifying when you require your preceptor's assistance and then assigning back to your preceptor appropriately. During week 8, you should complete your final clinical evaluation and give it to your preceptor for comments. During week 8, your BCIT instructor will review the final evaluation with you and the preceptor and will recommend a grade for the course.