Thank you for your support of the student’s transition through this community clinical.

- The semester is divided into 2 sessions, each 5 weeks in length. We will be starting fall, 2012 on Wednesday 9/5. Clinical days are Monday, Wednesday, or Friday.
- Fall, 2012 dates: 1st session 9/5 – 10/9; 2nd session 10/10 – 11/13
- The student must acquire 30 clinical hours in the five weeks. This is very doable. Some RNs only work 5-6 hr. days so the student may need to schedule another day – this must be approved by the clinical faculty.
- The student must also work the assigned day – this has been coordinated with the other specialty clinical. The student should not be changing their day unless they receive an approval from clinical faculty. You must know when the students are in the field.
- Your cell phone numbers will be given to the student. They should contact you for any issues, concerns, changes, illnesses, absences.
- Contact clinical coordinator if there are any concerns with student activity or responses.
- Students must take timesheet with them every clinical day and have it signed by the RN. Occasionally, the RN will be changed and the student will not receive credit for unsigned hours.
- Each student has requested 3 community choices. Matches are based on student’s previous ATI, M/S grade, and specialty grades, so not all requests can be met. The student is matched to one community clinical site to work with 1 RN. At times, due to extenuating circumstances, the RN must be changed by the agency so there are times that the student has more than 1 RN.
- The students will receive information regarding their clinical the week before the semester begins. The student is expected to contact the RN and schedule the first day, time, and location to meet. This is a change for the students since they usually work in groups and travel together - at times, the students don’t contact the RN until late. They must be reminded to make the connection. Those students who are in home care will call the RN the day before and those starting on Monday will call on Friday. The reason for this is that the RNs receive numerous calls and we have found that the connection works better on the day before (they also have an idea of the next day’s patient load).
- The students will travel to their site on the first clinical day. Some may work between a couple of locations. Home care students meet the RN at a designated site (usually the main building) and travel with the RN. During this travel, they learn a lot about the clients, home care, and community nurse role. Students in home care should not travel by themselves especially considering some of the community areas that are visited. Some of the Rochester City School District schools are in city neighborhoods. The student should ask the RN about security options, such as entrance to building, buddy to care, etc. Please inform clinical coordinator of any issues.
- You will have access to BB NURS 421 for student and course information. There will be a clinical section and community information will be located there.
Some of the clinical sites request documentation and paperwork before the student can start. That information is located in BB for the student to download. Check BB for the clinical sites that require documentation. The clinical coordinator will need this information before the student starts clinical. VA requires hard copy paperwork that I will send to the student and fingerprinting—hopefully the students can complete in time— if not no students will be assigned to VA during 1st session.

Each clinical faculty has been assigned students at different clinical sites and in different agencies. One clinical group includes 12 students.

Clinical faculty will contact the community RN after first student visit to discuss expectations/issues/concerns.

Faculty is expected to visit each student on-site at a minimum once during the five week clinical rotation for a review of the student’s experience and discussion of clinical issues. **This visit must be completed half way through the clinical rotation** in order to identify any problems/issues/concerns.

Unannounced visits can also be made during the student’s scheduled clinical days if an issue or concern has been raised.

For those students in home care settings, the clinical faculty must schedule a student meeting on campus to meet the visit criteria. **This meeting must be completed half way through the clinical rotation.**

Faculty is responsible for the establishment of productive relationships with RNs and other essential organization personnel. A productive relationship is characterized by ongoing communication that facilitates the achievement of the course and student personal learning objectives.

With the RN and student, faculty can assist with the identification of individual learning needs and objectives to be achieved throughout the clinical experience. Ongoing feedback is expected at midterm, and formal feedback (student evaluation) is necessary at the end of the clinical course. Faculty serves as a mentor through the student’s transition from the student nurse role to the graduate nurse role.

Clinical faculty are expected to review article summaries, personal learning goals, complete site or on-campus visits, read and grade final paper, and complete student final evaluation. Student grades and evaluations are forwarded to clinical coordinator for course input.

Prior to the start of community clinical, clinical faculty will contact the students in their group and discuss (email or phone call) the parameters for contacting faculty with problems, questions, schedule changes, or other issues with each student. Faculty will be accessible to all students and preceptors whenever a student is scheduled for clinical time.

Faculty will also explain clinical and documentation expectations with the students to meet clinical requirements including:

1. Prior to clinical start, identification of 2 research articles pertinent to community organization and 1 paragraph summary of each article – sent to clinical faculty before clinical start. There are no guidelines for this other than to read the articles and write a summary – this must be completed before clinical starts or at the latest the first week.
2. Student notification to clinical faculty for scheduled day(s) and times of clinical by week 1.
3. Student development of personal learning outcomes, in discussion with RN, at the first visit – these outcomes must be emailed to clinical faculty by week 2
4. Weekly time sheet entry with RN signature – timesheet is due at final conference
5. Student notification to clinical faculty for any illnesses, absences, issues/concerns – change of location, changed of RN as examples. You must know when they are in the field for insurance purposes. You are also expected to be available during the clinical day to respond to questions/issues and possibly make a visit.
6. Student requirement to attend 2 hr. final conference during week 5. The clinical faculty must attend one of the final conferences.
7. Student completion of final community paper – submission to clinical faculty either email or hard copy (your preference) – due at final conference. The clinical faculty reads and grades the papers. Grades are due to clinical coordinator by end of semester. Any questions regarding paper grading can be referred to clinical coordinator.
8. Student completion of community RN evaluation– due by final conference – evaluation link located on BB under clinical. Currently this is hard copy, but it may be available in Qualtrics – a link would be provided in BB.

THANKS AGAIN. I could not do this without your support!!