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INTRODUCTION

This document is a guide to introduce readers to the accredited Nurse-Midwifery education program housed at the University of Kansas School of Nursing. In 1999, KU School of Nursing received federal funding totaling $1.3 million to provide education for Certified Nurse Midwives who would serve in rural and underserved populations in Kansas and Western Missouri.

Upon completion of the core masters advanced practice courses, the midwifery educational program begins sequentially and continues on a full-time enrollment until completion at the end of the following spring. The first students began in the summer of 2000. In March of 2007, the KU Midwifery program submitted materials to the ACNM Division of Accreditation for a 10-year, renewed accreditation request. On-going accreditation was granted by the ACNM DOA.

Thank you for joining the KU Midwifery program as a clinical preceptor! The role of preceptor in the education of student nurse-midwives is a critical and valued component in the overall educational objectives in order to develop students as safe successful colleagues and practitioners. This manual will provide a description of the course sequences in the midwifery track, course objectives, clinical evaluation forms, and an educational module (see post-test on website) on the role and responsibilities of midwifery clinical preceptors.

The students are matched to appropriate clinical sites based on advancement of skills, personal residency, and on occasion, self-selection of students. As students advance in the program of study, placements often rotate around individual needs, and needs of classmates. However, we strive to provide an education rich in various clinical sites in order for students to experience cultural diversity as well as variations in midwifery practice models. Integration course experiences are personally designed to meet combined objectives of students and faculty advisors. When meeting the student for the first time, please review their CV and clinical experience to familiarize you with her/his past SNM and nursing experiences. Take time to visit and learn more about one another. Providing a tour of the facility, introduction to staff members, and any organizational requirements or introduction to medical charting, is helpful to expedite the role of a high functioning student in your setting.

With all student medical record documentation, a co-signature by the preceptor MUST be present. Interpretation regarding the CNM being in the exam room or delivery room, present with hands on assessment during student precepting is still being debated. Therefore we would urge you, especially if independently billing, to have some contact with patients the student examines and document your presence/participation during the visit. Overshadowing students is not our goal, but using your best judgment to know what is occurring at all times and that you were involved in delivery of care is essential.

After reading this booklet, please take time to complete a short post-test if you have not done so previously (pp. 14-15) to validate your skills and expertise as a clinical preceptor (retained as evidence for our accreditation). We need a copy of the post-test mailed/e-mailed back to us for our files.

We will provide frequent updates to you on the status of the students you work with, and strongly encourage frequent dialogue with KU faculty regarding issues of concern with a student at any time. Thank you again for your commitment and dedication to the growth of the Nurse Midwifery profession.
DOCUMENTS REQUIRED FOR ALL PRECEPTORS

Please use this list as a check-off to verify documents we are required to keep on file related to your precepting KU midwifery students. Completion of these requirements will also qualify you for University of Kansas Medical Center **adjunct faculty status**:

- Current CV
- Copy of ACNM/AMCB Certificate
- Copy of nursing license
- Copy of Advanced Practice Nurse license
- Copy of certificate of graduation from Midwifery education program
- Copy of highest university degree
- Description of teaching experiences (may include certification in childbirth education, previous CE on precepting or teaching from ACNM programs, previous teaching in universities, precepting of other students)
- Signed copy of post-test from preceptor module

BENEFITS FOR PRECEPTORS

The KU School of Nursing will recognize those who hold a master’s degree as Adjunct clinical faculty, if requested. Those CNM’s not holding a master’s degree cannot be conferred this title however will be designated as Volunteer Faculty Preceptors. Our commitment to thanking everyone involved in the clinical teaching of students will be equally recognized.

- Invited guest--present student lectures (enhance personal CV as desired)
- Certificate annually for involvement in program
- KUMC Library privileges (Must register through KU Faculty)

PRECEPTOR RESPONSIBILITIES

- Become familiar with the KUSON Nurse-Midwifery program curriculum
- Orient the students to clinical site
- Provide student opportunity to review practice agreements
- Discuss in advance with student your expectations and teaching style
- Request student present patient to you in an organized fashion
- Always teach to the management process – expect to hear comprehensive data collection, assessment and plan. Implementation should be conducted by the student as representative of the student's progression and experience.
- Allow alternative managements if not contraindicated by practice site limitations.
- Check all student assessments until you are confident of skill level.
- Try to find a private, quiet place to complete evaluations and discuss issues regarding patient care.
- Complete students’ clinical evaluation form. Specific comments should be directed toward clinical performance.
- Contact the KU midwifery faculty any time you feel necessary. We will establish communication lines as best for each preceptor, e-mail, phone, letters, however, call us at any time if an issue arises or you have questions.
- Try to protect the student from the internal politics of the setting if at all possible.

**CLINICAL EVALUATION FORMS**

Students also are required to complete formative and summative evaluations with preceptors and course faculty for each clinical course. Evaluation forms for the semester experience are given to the student to be completed by the student, preceptor, and course faculty.

**RESPONSIBILITY OF STUDENTS**

- Report to the clinical site on time. If the student is not going to be present, for whatever reason, s/he will notify the preceptor and arrange a time to make up the missed clinical.
- Establish best and **ALL** lines of contact with preceptor: cell phone, pager, calling each other informing status of where she will be, if not at the site and on call.
- Establish personal learning objectives based on course objectives for each clinical day and review with preceptor, if possible before the day begins. Discuss with preceptor abilities and experience to date.
- Establish awareness of clinical setting, by understanding charting forms, billing procedures, and responsibility of staff members.
- Appropriately dress and bring needed materials for clinical experience. Wear nametag at all times while in clinical settings.
- Write down appropriate phone numbers, pagers, and clinical setting addresses prior to beginning clinical in order to have communication links.
• Always identify self as a KUSON nurse midwifery student working with...Make sure the patient has agreed prior to your delivery of care to receive services from a student. Follow clinical protocol related to student involvement.
• Participate in on-going self-evaluation with feedback from faculty member and preceptor at mid-point of assignment and summative evaluation.
• Participate in evaluation of faculty and preceptor student-relationship.
• Contribute positively to the clinical environment by courteous professional demeanor at all times.
• Consult appropriately at all times for areas of knowledge deficit.
• Present all patients to preceptor in an organized and complete fashion. NEVER let a patient leave a clinical site without preceptor’s approval.
• THANK daily those who help you!

The One-Minute Teacher: Six Micro Skills for Clinical Teaching

1. Get a commitment: What do you think is going on? What would you like to accomplish on this visit?
2. Probe for supporting evidence: What led you to that conclusion? What else would you consider?
3. Teach general rules: When this happens, do this....
4. Reinforce what was right: Specifically, you did an excellent job of...
5. Correct mistakes: Next time this happens, try ...
6. Identify next Learning steps: What do we need to learn more about

HELPFUL HINT: A wonderful method to make sure the student is learning in the clinical setting

CLINICAL EVALUATIONS

Clinical evaluations are completed online, utilizing Typhon® software. You will complete the online evaluation at least every two weeks throughout the duration of the semester. You will be asked to rate the student’s performance on various aspects of clinical practice, as well as be offered space to contribute communication in addition to the pre-set questions. Your practice location will be given 1 sign-on code and password that you will utilize for the evaluation process. At the beginning of each semester, you should anticipate communication by email from nurse-midwifery faculty and/or a representative of KU School of Nursing Academic Affairs office regarding how to complete the evaluations. If you have any questions, please do not hesitate to contact the midwifery faculty.
PURPOSE OF THE NURSE-MIDWIFERY PROGRAM

The purpose of the University of Kansas Nurse-Midwifery Education Program is to prepare professional nurses to be safe and knowledgeable practitioners of Nurse-Midwifery who are competent in clinical practice, leadership, political action, and cultural sensitivity. (Revised, May 2002).

PHILOSOPHY OF THE NURSE-MIDWIFERY CONCENTRATION
The Nurse-Midwifery Faculty accepts and endorses the Philosophy of the American College of Nurse-Midwives. We believe that Nurse Midwifery focuses on health care of essentially healthy women during the childbearing years and on women’s health care needs throughout life. Assisting clients to maintain optimal health through self-care practices is central to Nurse-Midwifery practice. Client education, support, and advocacy are fundamental means through which clients can achieve self-determination and healthy lifestyles.

We believe that Nurse-Midwifery should be based on a professional nursing background that involves caring for people during situations of human responses to normal life changes or to actual or potential health problems. In its focus on the care of essentially healthy individuals, Nurse-Midwifery has the opportunity to promote client adaptation to normal life events and to identify and reduce factors that inhibit adaptive processes.

We believe in the right to safe, sensitive, and satisfying health care with client choice in the selection and utilization of health resources. A system that provides for collaboration with and referral to other health care providers enhances the safety and continuity of care that Nurse-Midwives offer to their clients.

The practice of Nurse-Midwifery requires synthesis of knowledge from nursing, midwifery, medicine and other disciplines. We believe that Nurse-Midwives should remain committed to the development of Nurse-Midwifery knowledge through research participation. The professional commitment of Nurse-Midwives to society mandates safe, competent health care according to the Standards of Practice as established by the American College of Nurse-Midwives.

As adult learners and professional nurses, Nurse-Midwifery students possess varied knowledge bases and experiential background. Flexibility in meeting learning needs are enhanced through a modular curriculum, opportunities for distance learning, use of technological resources and planned clinical experiences that are individualized to each student’s needs. These educational methods promote the development of critical thinking and encourage students to be self-directed, self-evaluative, and self-corrective learners throughout life. (Reaffirmed, October 2007)

OBJECTIVES OF THE NURSE-MIDWIFERY CONCENTRATION

1. Integrate theories from nursing, Nurse-Midwifery, medicine and other disciplines to guide clinical practice in Nurse-Midwifery and to influence health policy decisions.

2. Demonstrate proficiency in the ability to critically test evidence-based theory interventions in Nurse-Midwifery practice and to participate in studies that advance Nurse-Midwifery practice and expand knowledge.
3. Manage the care of women throughout their life span and their newborns in accordance with the Nurse-Midwifery management process.

4. Function independently within a collaborative interdisciplinary framework to provide Nurse-Midwifery care that is sensitive to the socio-cultural and ethical needs of a culturally diverse population.

5. Develop a Nurse-Midwifery leadership role in collaboration with professional colleagues to maintain, reformulate, or refine systems of health care that are effective, efficient, and responsive to the needs of individuals and families with emphasis on women and children.

6. Demonstrate a strong professional identity as a Nurse-Midwife characterized by a commitment to continued learning, ethical decision making, scholarly work, and the capacity to effect desirable change through leadership. (Reaffirmed, October 2007)

**ACCREDITATION**

The Accreditation Commission for Midwifery Education (ACME) accredits programs of midwifery education. The KU Nurse-Midwifery Education Program was re-accredited in 2007 for 10 years. The ACME is located at: 8403 Colesville Road, Suite 1550, Silver Springs MD 20910-6374. Their phone number is: 240-485-1800.
**CURRICULUM**

These two courses are taught simultaneously as the first nurse-midwifery courses (First Spring Semester).

NRSG 835 Primary Women’s Health Care Across the Life Span (3)
Psychological, sociological and physiological issues of health and human functioning of the female client system across the life span are explored. Theory and research-based therapeutic management of acute, episodic and chronic conditions that occur in community-based women and their families will be planned. Professional values including standards of practice, certification, cultural, legal and ethical issues and professional roles will be addressed. The health care delivery system will be analyzed for cost effectiveness and sensitivity to women. COREQUISITES: NRSG 815, NRSG 817, or consent of instructor.

Upon completion of this course the student will be able to:
1. Describe health and human functioning in the female client system.
2. Assess individual and family health of women across the life span.
4. Examine the impact of standards of practice, certification, legal and ethical issues on professional roles in women's health.
5. Analyze the health care delivery system for cost effectiveness and sensitivity to women's psychological, physiological, economic and cultural needs.

NRSG 838 Primary Care of Women through the Life Span Practicum (1-2)
This practicum centers on clinical competencies for the advanced practice nurse providing primary care and gynecologic management of women throughout the life span. Health promotion, complementary therapies and evidence based models of health care delivery are incorporated in the care of women. Clinical management experiences in the advanced practice role include but are not limited to: family planning, gynecologic health and primary care for women from adolescence through menopause. Clinical experiences will include collaboration, co-management and/or referral when medically necessary. PREREQUISITES/COREQUISITES: NRSG 835 or consent of instructor.

Upon completion of this course, students will be able to:
1. Assess, manage and care for women for common primary care and gynecologic health issues.
2. Assess physiologic, psychosocial and cultural environmental influences on the health of women.
3. Manage primary care health needs of women within standards of practice for advanced practice nurses.
4. Recognize deviations from normal in common primary care and gynecologic health of women and consult, co-manage or refer as medically necessary.

These two courses are taught simultaneously in the second nurse-midwifery semester (Summer Semester).

NRSG 830 Care of Women in the Antepartal Period (2)
Care during the antepartal period in healthy pregnant women is presented and analyzed. Strategies focusing on risk reduction and early identification of deviation from normal in this client system are examined. Complementary practice models demonstrating various management theories are described. Biopsychosocial and cultural aspects of pregnancy within the family structure environment are applied. Concepts of research, ethics, legal and political issues, nutrition,
pharmacotherapeutics, health promotion and selected high-risk deviation from normal are included. PREREQUISITE(S): NRSG 809, NRSG 810, NRSG 812, NRSG 813, or consent of instructor. COREQUISITE(S): NRSG 831.

Upon completion of this course, students will be able to:
1. Synthesize theories and concepts from health science, biopsychosocial and cultural domains in the management of women and their families during pregnancy.
2. Differentiate normal from pathologic maternal, fetal and family systems during pregnancy.
3. Examine evidence-based practices when evaluating indications and techniques for applications of therapeutics during the antepartal period.

NRSG 831 Care of Women in the Antepartal Period Practicum (2)
This clinical practicum centers on competencies for management of pregnant women and family client systems in various environments. Health promotion and risk reductions in pregnant women are emphasized. Management experiences in the advanced practice role include antepartal risk-assessment, collaboration, co-management and referral when medically necessary. COREQUISITE(S): NRSG 830, or consent of instructor.

Upon completion of this course, students will be able to:
1. Assess, manage and care for essentially well women during pregnancy, in accordance with management philosophy and national standards of advanced nursing practice.
2. Identify diverse family client systems and educate families to be collaborators in their health care.
3. Recognize deviations from normal in the antepartal period and collaborate, consult, co-manage or refer as medically necessary.

These three courses are taught simultaneously in the third nurse-midwifery semester (Fall Semester).

NRSG 832 Nurse-Midwifery in the Neonatal Period & Practicum (1)
Synthesis of the nurse-midwifery philosophy for well neonates is conceptualized. Health maintenance models of care for infant client systems up to the first 28 days of life are included. Research, ethics, legal and political issues, nutrition, pharmacotherapeutics, health promotion and selected high-risk deviation from normal are included. Clinical competencies for nurse-midwifery management of well neonates up to first 28 days of life are developed. Management experiences include the nurse-midwifery role in collaboration, co-management and referral, as needed, during the early newborn period. PREREQUISITES/COREQUISITES: NRSG 830 or consent of instructor.

Upon completion of this course, students will be able to:
1. Synthesize nurse-midwifery principles that describe national standards of practice and core competencies in the care of neonates.
2. Apply nurse-midwifery core competencies to assess, manage and care for newborns in the immediate transition to extrauterine life.
3. Recognize deviations from normal in the neonatal period and collaborate, consult, co-manage or refer as medically necessary.

NRSG 836 Nurse-Midwifery in the Intrapartal and Post Partum Period (3)
Nurse-midwifery care of uncomplicated mother/infant client systems through the intrapartal, postpartal, and neonatal period are presented and analyzed. Intrapartal and postpartal complications and emergency events are addressed. Complementary practice models demonstrating various management modalities are described. Concepts of research, ethics, legal and political issues,
nutrition, pharmacotherapeutics, health promotion and selected high-risk deviation from normal are included. PREREQUISITES: NRSG 830 or consent of instructor. PREREQUISITE/COREQUISITE: NRSG 832.

Upon completion of this course, students will be able to:

1. Synthesize knowledge necessary to assess, manage and care for healthy women and infants throughout the intrapartal/postpartal and immediate newborn period.
2. Use clinical inquiry when examining evidence-based practice to implement and evaluate management of the mother/infant client system during labor and delivery, recovery and postpartum.
3. Examine nurse-midwifery core competencies and standards of practice specific to the mother/infant client system in the management of labor, birth, postpartum and neonatal periods.

NRSG 837 Nurse-Midwifery in the Intrapartal and Postpartal Period Practicum (2)
Competencies for nurse-midwifery management according to national standards of practice for low risk healthy women during labor, birth and postpartum are demonstrated. The development of a skill base for intrapartal emergencies is addressed. Nurse-midwifery management practice provides experience in the role of care provider during normal labor and delivery postpartum and in collaboration, co-management and referral when medically necessary. PREREQUISITES: NRSG 836 or consent of instructor.

Upon completion of this course, students will be able to:

1. Apply core competencies to assess, manage and care for healthy pregnant women and fetuses throughout the intrapartal/postpartal periods.
2. Assess physiologic, psychosocial, and cultural environmental influences on the process of labor, birth and postpartum on maternal and infant outcomes.
3. Manage normal laboring women client systems within the guidelines of national nurse-midwifery standards of practice.
4. Recognize deviations from normal in the intrapartal/postpartal period; collaborate, consult, co-manage or refer as medically necessary.

This course is the final integration semester (Second Spring Semester).

NRSG 840 Care of Women Integration Practicum (4)
The theoretical, clinical and role components of care as delivered by the advanced practice student are implemented through an intensive supervised clinical practicum. Advanced professional clinical skills and evidence-based practice in the assessment, management and care of women and newborns are applied. The client system for this experience includes well women, childbearing women and may include neonates in a variety of environments. Emphasis is on increased independence and decision making embracing the function and scope of advanced practice of nurse-midwifery. PREREQUISITES: Consent of instructor.

Upon completion of this course, students will be able to:

1. Apply evidence-based practice principles in a variety of experiences and environments.
2. Function in primary, collaborative, consultative, co-management and referral roles.
3. Manage the care of well women, childbearing women and families and neonates according to national professional standards of practice.
4. Articulate the role of the nurse-midwife to clients, colleague providers and the community by participation in local, regional and national health organizations.