

# UNDERGRADUATE NURSING PRECEPTOR/MENTOR HANDBOOK 2022-2023



Ours is a story of hope, compassion and joy, commitment, vision, and inspiration. We engage our minds and talents, and give from our hearts, to help and heal. We touch the lives of thousands, to serve those in need, here and around the world. And, through it all, we work to make lives better.

**Thank you for all you do to make our story remarkable.  
You're the reason we're able to write the next chapter.**

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## Preceptorship

Dear Esteemed Preceptor,

Thank you for agreeing to be a preceptor/mentor! In serving as a preceptor/mentor to a baccalaureate nursing student from UT Health San Antonio School of Nursing, you have the unique opportunity to make a profound professional impact. Your advanced knowledge, your skills and your attitude provide an important component to the developing competency in the professional nursing under your guidance.

Being a preceptor/mentor in the final semesters of a pre-licensure nursing program allows the student to integrate the knowledge and skills learned in the program with the actual experience of being a professional nurse. The most important characteristic of a preceptor/mentor is to allow a student to integrate the knowledge and skills learned in a registered nursing program with the actual experience of functioning as a registered nurse in a supervised environment.

As a preceptor/mentor, you will be allowing the student to work directly with you in the planning, providing, and evaluation of patient care under your supervision. While UT Health San Antonio nursing faculty member will not be with you on-site on a continual basis, you will work cooperatively with the faculty to determine student learning needs and appropriate assignments. A UT Health San Antonio nursing faculty member will meet with you and the student in order to monitor and evaluate the learning experience. The UT Health San Antonio nursing faculty will also monitor student progress through rounds, student clinical seminars, student-faculty-preceptor conferences and/or review of student clinical assignments.

You may call upon a nursing faculty member at any time you have questions or concerns. In the extremely rare event that potential issues arise related to safety, needlesticks or other exposures or professional misconduct, UT Health San Antonio School of Nursing has policies developed for appropriate actions to be followed. As soon as the nursing preceptor contacts the SON faculty member with concerns, the situation will be immediately addressed. Personal safety for all members involved is paramount.

Important aspects of precepting a nursing student include guiding, facilitating learning, supervising, and monitoring the student in achieving the clinical objectives and performing skills and other nursing activities to assure safe practice.

The provision of timely feedback is very beneficial to the learning of the student and can promote the nursing student's improvement, with the SON faculty member's assistance. Feedback is generally timely, professionally appropriate, and specific to the situation.

As a preceptor/mentor you will retain the ultimate responsibility for the care of clients. Therefore, we encourage you to develop and discuss with your preceptee/mentee clear and specific plans related to the various aspects of patient care for which the two of you will be responsible. It is imperative to communicate with your preceptee/mentee the sharing of responsibilities for safe patient care. The evaluation of preceptee/mentee performance with both positive and constructive feedback is expected to be a continuous daily occurrence.

Toward the end of the clinical experience, the preceptee/mentee will have the opportunity to evaluate the experience and complete a preceptor/mentor evaluation form. These are submitted directly to the UT Health San Antonio nursing faculty member who will share the results with you. A copy of the form the preceptee/mentee will use is included for your review in this handbook.

You will also be asked to complete a feedback form reflecting the preceptee/mentee progress during your preceptorship/mentorship. This too will be submitted directly to the UT Health San Antonio nursing faculty who will share it with the student. A copy of this form is included for your review.

In acknowledgement of your participation in our program and valuable contribution, you will be recognized with a Certificate of Appreciation in recognition of your endeavors in furthering the profession of nursing. Preceptors that provide two or more years of service are eligible for an appointment as Adjunct Faculty (see page 32 for information about the criteria for appointment as an Adjunct Faculty).

We are truly thankful for all you do to support student learning and integration of clinical reasoning!



Cynthia O'Neal, PhD, RN  
Associate Dean for Undergraduate Studies  
School of Nursing

## Introduction to the Preceptor/Mentor Handbook

Thank you for agreeing to be a preceptor for nursing students from the UT Health San Antonio School of Nursing. This handbook has been developed to assist you in this role.

The course faculty will provide you important information about the following:

1. An orientation to the philosophy, curricula, course, and clinical objectives of the nursing education program;
2. Student expectations;
3. Skills performance;
4. Student guidelines for performance of procedures;
5. Methods of evaluation; and
6. Preceptor expectations.

The information provided in this handbook will explain the responsibilities of the preceptor/mentor, nursing faculty and student related to the clinical experience. The Texas State Board of Nursing website is an excellent resource for precepted clinical learning experiences guidelines. See Appendix A for precepted clinical learning experiences guidelines.

For any questions, please feel free to call the UT Health San Antonio School of Nursing at 210-567-5810. After business hours you may contact the course faculty members using the contact phone numbers provided by your student at the beginning of the semester.

A copy of this handbook is posted on the following website:

<https://www.uthscsa.edu/academics/nursing/offices/academic-affairs/student-handbooks>

## Vision, Mission, and Values UT Health San Antonio School of Nursing

The UT Health San Antonio School of Nursing is at the forefront of nursing education. We lead excellence in nursing leadership through our innovative teaching, quality research, compassionate care and community service for our South Texas community and the world.

### Vision

We make lives better by promoting health as an act of social justice.

### Mission

We develop diverse nurse leaders to improve health and health care, through education, research, practice, and community engagement.

### Values

1. **Innovation**- We, the faculty, staff, and students of the UT Health School of Nursing, believe in delivering leading edge health care, education, research, and community service.
2. **Diversity and Inclusion**- We believe in fostering an inclusive environment as a foundation to make health care available to all.
3. **Ethics & Accountability**-We believe in honoring the dignity of others through the accountability of our actions.
4. **Advocacy**-We believe in promoting healthy lifestyles and access to health care for all populations.
5. **Synergy**-We believe in inter-professional cooperation to improve health outcomes for all.

## UT Health San Antonio School of Nursing Authority and Certification

The School of Nursing is an academic unit in the UT Health San Antonio. The School of Nursing adheres to all of the UT Health San Antonio mandates and guidelines to provide a safe and progressive university learning environment (<http://www.uthscsa.edu/>). The School of Nursing operates under the legal authority of and is fully approved by the Texas State Board of Nursing and is accredited by the Commission on Collegiate Nursing Education.

A clinical preceptor/mentor is an employee of a cooperating agency who role models nursing practice in a particular clinical area to facilitate student learning. He/she is willing to voluntarily dedicate time, attention, and expertise to the nursing student (preceptee/mentee); the relationship will be participative by both the preceptor/mentor and student. The preceptor/mentor will be with the student in the clinical area to facilitate achievement of the clinical objectives. The manner in which this process is implemented is defined in a written agreement between the agency and the School of Nursing.

Texas State Board of Nursing Rule 215.10 sets forth the requirements for use of clinical preceptors in professional pre-licensure nursing educational programs (diploma, associate degree, baccalaureate degree, or entry-level master's degree).

1. Clinical preceptors may be used to enhance clinical learning experiences after a student has received clinical and didactic instruction in all basic areas of nursing or within a course after a student has received clinical and didactic instruction in the basic areas of nursing for that course or specific learning experience (Texas State Board of Nursing, **§215.10.j.6**)
2. Clinical preceptors/mentors shall have the following qualifications:
  - (A) competence in designated areas of practice;
  - (B) philosophy of health care congruent with that of the nursing program; and
  - (C) current licensure or privilege to practice as a registered nurse in the State of Texas (Texas State Board of Nursing, **§215.10.j.6**)

## Nursing Preceptor Policy

The School of Nursing at the UT Health San Antonio defines preceptors/mentors as qualified registered nurses who work one on one with senior undergraduate nursing students in the clinical area to promote attainment of nursing course learning objectives.

Preceptors/mentors for undergraduate nursing students must be currently licensed registered nurses who have at least one year of nursing experience. Preceptors/mentors are not School of Nursing faculty members, do not need to meet Texas State Board of Nursing minimum requirements for nursing faculty members, and are responsible for working with only one nursing student at any given time. When possible, it is recommended that preceptors/mentors for undergraduate students have a minimum of a BSN. However, it is recognized that this is not always realistic and a registered nurse with experience in the clinical specialty area may qualify as a preceptor/mentor.

UT Health San Antonio nursing faculty members, working in tandem with the clinical agency, determine the appropriate preceptorship/mentorship experience for the students.

Preceptors/mentors are utilized in upper division nursing courses to serve as role models, preceptors and/or direct supervisors of students in the clinical area. Preceptors/mentors do not replace nursing faculty, but work closely with nursing faculty in facilitating student success. Nursing faculty members maintain the responsibility for the final evaluation of the student; however, will request specific input from the preceptor.

Nursing course faculty members are responsible for developing guidelines specific to the course for the preceptor to follow. Nursing faculty, preceptor and student responsibilities are discussed in the following pages.

### Roles and Responsibilities

In order to be consistent with the UT Health San Antonio School of Nursing course policies and the *TEXAS BOARD OF NURSING 3.8.3.a. EDUCATION GUIDELINE Precepted Clinical Learning Experiences Revised: 7/10/2020* and for clarification of roles, the following pages summarize the UT Health San Antonio nursing faculty, preceptor/mentor, agency and preceptee/mentee responsibilities:

### School and Nursing Faculty Responsibilities

1. Assist the Office of Academic Affairs in ensuring that preceptors/mentors meet qualifications in Texas State Board of Nursing [Rule 215.10](#).
2. Assist the Office of Academic Affairs in ensuring there are written agreements which delineate the functions and responsibilities of the affiliating agency, clinical preceptor/mentor and nursing program.
3. Ensure that clinical experiences using preceptors 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/mentor 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 the evaluation of the student.
9. Assist the Office of Academic affairs in ensuring student compliance with standards on immunization, screening, OSHA standards, CPR, and current liability insurance coverage, as appropriate.
10. Work cooperatively with the preceptor/mentor and the agency to determine student learning needs and appropriate assignments.
11. Assist the preceptor/mentor with making appropriate student assignments as necessary
12. Communicate assignments and other essential information to the agencies.
13. Meet with the clinical preceptor/mentor and the student in order to monitor and evaluate the learning experience.
14. Monitor student progress through rounds, student clinical seminars, student-faculty-preceptor conferences and/or review of student clinical assignments.
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 the preceptor's performance and the clinical learning experience.
18. Assist the Office of Academic Affairs in providing preceptor/mentor recognition

### **Preceptor/Mentor Responsibilities**

1. Participate collaboratively with faculty to become oriented to the course.
2. Function as a role model in the clinical setting.
3. Facilitate learning activities for no more than one student at a time.
4. Orient the preceptee/mentee(s) to the clinical agency.
5. Guide, facilitate, supervise, and monitor the preceptee/mentee(s) 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 preceptee/mentee(s) toward meeting clinical learning objectives.
7. Provide feedback to the preceptee/mentee(s) regarding clinical performance.
8. Contact the faculty if assistance is needed or if any problem with preceptee/mentee(s) performance occurs.
9. Collaborate with the preceptee/mentee and faculty to formulate a clinical schedule.
10. Discuss with faculty/student arrangements for appropriate supervision of the preceptee/mentee(s) should the preceptor be absent.
11. Give feedback to the nursing program regarding clinical experience for preceptee/mentee(s) 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. Communicate the preceptor program and expectations of preceptee/mentee(s) to other agency personnel who are not directly involved with preceptorship.

### **Preceptee/Mentee(s) Responsibilities**

1. Adhere to all clinical agency policies and procedures.
2. Adhere to all policies and procedures of the UT Health San Antonio, the School of Nursing, and Texas Board of Nursing.
3. Abide by the ANA Standards of Practice and the ANA Code of Ethics. Failure to exhibit integrity, ethical conduct, professional standards or any violation of the responsibilities listed within may result in a failing grade and/or dismissal from the nursing program and the University.

4. Complete clinical orientation, as required by the SON and the clinical agency, prior to the start of the clinical experience.
5. Dress in a professional manner as required by the SON and clinical agency dress code policy.
6. Maintain patient confidentiality and HIPAA guidelines. Under no circumstance may records be copied, or removed from the agency in any form (including photos).
7. Student conduct in the clinical setting must be in a manner which demonstrates safety, adherence to professional standards, and reflects positively upon the SON.
8. Be prepared to work the same shift and hours as the preceptor/mentor and as agreed upon between the student, the preceptor/mentor and the nursing faculty.
9. Establish with the course nursing faculty and preceptor a schedule of clinical experiences.
10. Attend all scheduled clinical days or notify the nursing faculty and the clinical preceptor/mentor if an absence is necessary. Arrange for make-up time.
11. Collaborate with the course nursing faculty and the clinical preceptor specific learning goals for the precepted clinical experience.
12. Maintain open communications with the preceptor/mentor and faculty.
13. Maintain accountability for own learning activities.
14. Prepare for each clinical experience as needed.
15. Be accountable for own nursing actions while in the clinical setting.
16. Demonstrate competency in performing each nursing skill to the preceptor/mentor prior to performing the skill independently.
17. Comply with the SON identified list of skills activities that may NOT be performed by a student.
18. Maintain the student role. At no time is the student to assume a staff nursing position.
19. Arrange appointments, either in person or electronically, with the course nursing faculty to discuss progress toward goal achievement.
20. Document and notify the nursing faculty **immediately** of any concerns regarding unprofessional behavior or breach of contract by the preceptor.
21. Maintain a record of clinical experiences according to the course objectives.
22. Participate in scheduled clinical conferences as designated by nursing faculty.
23. Complete all required forms and submit them to the nursing faculty at the end of the semester.
24. Give Feedback to the nursing program regarding the clinical experience (faculty, preceptor and agency).

## Frequently Asked Question about Precepting

### 1. Should the student work with only one Preceptor/Mentor?

Yes. Ideally, one preceptor/mentor should be assigned by the agency as the primary supervisor for the student. However, due to scheduling issues, a second preceptor/mentor may be assigned to the student. With approval from the nursing faculty, the primary preceptor/mentor may assign the student to other nurses during the clinical experience to achieve the course objectives in a timely manner.

### 2. How are clinical experiences chosen?

The course nursing faculty works closely with the healthcare agencies to place students in the appropriate clinical settings. The clinical healthcare agency identifies the appropriate preceptor/mentor with final approval from the course nursing faculty.

### 3. Can an individual who is not employed by the agency be a clinical Preceptor/Mentor in that agency?

No. For the preceptor/mentor to act effectively, she/he needs to be familiar with the agency and working with colleagues.

### 4. How much time will be required of the Preceptor/Mentor?

1. Time requirements will vary depending upon the progress of the student. The course nursing faculty will provide this specific information.
2. It is suggested that students meet at least weekly with the preceptor/mentor to discuss weekly goals/objectives and progress.

### 5. Is the Preceptor/Mentor responsible for being with the student every minute of their clinical experience?

For undergraduate nursing students, the primary preceptor/mentor is responsible for being with the student during their clinical rotation or to assure that the student is under the supervision of another qualified preceptor/mentor. Students may function independently after the preceptor/mentor has ascertained that the student can safely and competently provide nursing care.

**6. Must all undergraduate student Preceptors/Mentors have a BSN as the minimum criteria?**

If at all possible, it is recommended that preceptors/mentors have a BSN as the minimum requirement. The purpose of this is to facilitate professional role modeling. However, it is understood that BSN prepared nurses may not be available in all settings.

**7. Can students be precepted/mentored on evenings, nights and weekends?**

Yes. Students may be assigned clinical experiences during any day/shift with the exception of University Holidays.

**8. What sort of support will the School of Nursing provide to the Preceptor/Mentor?**

Course faculty will provide orientation information to the preceptors/mentors at the beginning of the semester. Faculty will be available to the preceptors either in person, by phone, pager and/or electronically 24/7. The nursing faculty will ensure that the preceptor/mentor is supplied the appropriate clinical paperwork.

**9. Why would an individual choose to be a Preceptor/Mentor?**

1. Preceptors/mentors are a critical component in implementing the nursing curriculum.
2. Preceptors/mentors are integral in the training and transition of their future colleagues.

**10. How much flexibility do the student and Preceptor/Mentor have in designing the clinical experience?**

Our goal is to provide the student with educational activities specific to their individual needs and career aspirations. The course has general outcomes which guide the preceptor/mentor in helping the student select experiences intended to meet these criteria. This process is the joint effort of the preceptor/mentor, the student and the faculty.

**11. Will there be a nursing faculty member on site during each student experience?**

No. Faculty members will be available by phone, or email 24/7. Faculty members will be present at the agency by request and as mutually agreed upon between the faculty member, the preceptor/mentor and the student.

## Student Health Policies

The UT Health San Antonio School of Nursing immunization requirement can be found at <https://wellness360.uthealthsa.org/services/employee-student-health/student-immunization-records/>. The healthcare agency will inform the student and nursing faculty of specific safety and professional requirements and documentation.

If an injury occurs during a clinical rotation experience, it is the responsibility of the preceptor/mentor and the student to alert the nursing faculty as quickly as possible. Appropriate care and documentation must be completed for the satisfaction of all parties involved.

### Student Health: Illness/Injury During Clinical

1. In a medical emergency or other clinical injury as defined by the clinical preceptor/mentor, the student should be seen in the UT Health San Antonio Student Health Center, or if after hours, sent to the nearest emergency room. The student will be responsible for any bills incurred for these events. The preceptor/mentor and student will immediately notify the nursing faculty of any such events.
2. In non-emergency situations, the student may verbally tell the nursing faculty that he/she elects to seek care from a private health care provider/clinic. Any costs incurred will be the responsibility of the student. The student's preceptor/mentor will notify the nursing faculty of any of these events as soon as possible.
3. Documentation of an injury requires the completion of an occurrence report. The student is responsible for completing the form and obtaining the comments of the preceptor or agency representative. The student is responsible for forwarding the completed form to the course nursing faculty as soon as possible following the incident. The nursing faculty will review the information, make appropriate recommendations. The Occurrence/Incident form can be found at [https://www.uthscsa.edu/sites/default/files/2018/2.6\\_student\\_incident\\_reporting.pdf](https://www.uthscsa.edu/sites/default/files/2018/2.6_student_incident_reporting.pdf)
4. Please note this updated COVID-19 policy for UT Health employees and students: [Home - Coronavirus \(uthscsa.edu\)](#).

### Student Health: Needlestick Injury and Other Exposures

In the event of a needlestick or other sharps injury, TB exposure or percutaneous injury/blood borne pathogen exposure, follow the guidelines contained in the following links:

1. [Needlestick Policy](https://wellness360.uthealthsa.org/wp-content/uploads/sites/116/2019/05/needlestickpolicy.pdf) <https://wellness360.uthealthsa.org/wp-content/uploads/sites/116/2019/05/needlestickpolicy.pdf>
2. [TB Exposure](https://uthealthsa.sharepoint.com/Facilities/EHS%20Documents/TB%20Exposure%20Control%20Plan.pdf) <https://uthealthsa.sharepoint.com/Facilities/EHS%20Documents/TB%20Exposure%20Control%20Plan.pdf>
3. [https://wellness360.uthealthsa.org/wp-content/uploads/sites/116/2019/05/Percutaneous\\_InjuryBloodBorne\\_BodyFluidExpForms.pdf](https://wellness360.uthealthsa.org/wp-content/uploads/sites/116/2019/05/Percutaneous_InjuryBloodBorne_BodyFluidExpForms.pdf)

Approved by Faculty Assembly 2/22/2013; Edited & Updated 8/24/22 by Office for Academic Affairs

### **Impaired Student Policy: Perception of Impairment**

Should the preceptor/mentor, nursing faculty or other nursing students perceive that a student is mentally or physically impaired, immediate action must be taken to relieve the student of his/her duties and place the student in a safe area away from the clinical setting. The immediate goal is to provide for the safety of patients, the public, other students and the student who is suspected of being impaired.

#### **Removing a Student Who is Suspected of Being Impaired From an Educational Setting**

If the student is perceived to have the odor of alcohol, or marijuana, or observed behaviors such as, **but not limited to**, slurred speech, unsteady gait, confusion, sharp mood swings/behavior lack of manual dexterity, excessive health problems, increased absenteeism, tardiness or irritability, severe weight loss, needle track marks especially in the inner elbow, carelessness in appearance and hygiene, or euphoria, which causes the preceptor to suspect the student could be impaired by a substance, the preceptor must:

1. Immediately inform the student as to why actions are being taken to relieve the student of his/her duties.
2. Immediately notify the UT Health San Antonio faculty for further action.
3. Do not send the student home or permit them to leave the building until the faculty arrives and arranges for safe transportation.
4. For additional information – see the UT Health San Antonio catalog

### **Course Specific Policies**

Before you get started, here are a few suggestions:

- Become familiar with the course syllabus and learning objectives.
- Review and clarify, if necessary, the required outcomes for the course.
- Establish a plan for communication with the course nursing faculty.
- Get to know your preceptee/mentee by learning how he/she learns best, reviewing his/her clinical learning objectives and learning about his/her strengths and areas for improvement.

Once the clinical experience has begun, you may want to:

- Introduce your preceptee/mentee to the unit staff and explain his/her role and your role.
- Orient the student to your unit and the clinical agency. Review and sign the clinical preceptor agreement.
- Develop a calendar of clinical days.

Because each clinical course has its own unique aspects, specific preceptor/mentor and preceptee/mentee policies may vary. To determine the requirements for the course you will be precepting, refer to the specific documentation and forms that will be provided at the beginning of the semester.

**Appendix A**  
**TEXAS BOARD OF NURSING 3.8.3.a.**  
**EDUCATION GUIDELINE**  
**Precepted Clinical Learning Experiences**  
**Revised: 07/10/2020**

As described in Rules 214.10(h) and 215.10(h) many nursing education programs use preceptors to enhance clinical learning experiences after a student has received clinical and didactic instructions in all basic areas of nursing content. This plan not only serves to provide a faculty extender but also allows the student to experience following a practicing nurse and to participate in patient care for a case load.

There are two preceptor models identified in the Board rules. One model allows the clinical group to be expanded to 12 students with two students rotated from their regular patient care to spend a shift with the identified preceptor. In the second model, the entire clinical group of up to 24 students is 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 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 short term (one or two days) basis with one or two students as described in the first model, or as a long-term (for the clinical rotation) mentor for no more than two 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 based upon information from their assessment (whether focused or comprehensive) and clinical reasoning.
- 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 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.

To assure a positive precepting experience, faculty develop written criteria for the selection of preceptors and establish written agreements that delineate the functions and responsibilities of the program, clinical preceptor and/or affiliating agency parties [Rules 214.10(i)(1-2) and 215.10(j)(1-2)].

**Approved by Faculty Assembly 2/22/2013; Edited & Updated 8/24/22 by Office for Academic Affairs**

Board rules state that:

- Even though the preceptor may supervise the students without the physical presence of the faculty member in the affiliating agency or clinical practice setting, faculty shall be readily available during the clinical learning experiences.
- The designated faculty shall meet periodically with the preceptors and students to monitor and evaluate the experience. ☐ Clinical preceptors shall have the following qualifications: ☐ Competence in designated areas of practice;
- Philosophy of health care congruent with that of the nursing program; and ☐ Current licensure or privilege to practice as a licensed nurse in the State of Texas. The license must be a registered nurse license for professional nursing education programs.

In 2013, a Board-appointed Task Force prepared the following suggestions for the responsibilities for the nursing education program, the preceptor, the agency, and the student:

**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 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 an orientation for the preceptor outlining 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. Collaborate with the preceptor to ensure student learning needs are met through appropriate student assignments and clinical experiences.
11. Communicate assignments and other essential information to the agencies.
12. Meet regularly with the clinical preceptor and the student in order to monitor and evaluate the learning experience.
13. Monitor student progress through rounds, student clinical seminars, student/faculty-preceptor conferences and review of student clinical assignments.
14. Be readily available, e.g., telephone, pager or email for consultation when students are in the clinical area.
15. Receive feedback from the preceptor regarding student performance.
16. Provide feedback to preceptor regarding performance as preceptor and the clinical learning experience.
17. Provide recognition to the preceptor for participation as a preceptor. Ex: adjunct faculty plaque, certificate.

**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 students during the clinical session.
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 experiences for students 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 the clinical experience.
9. Adhere to safety principles and legal standards in the performance of nursing care.

**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.
8. Current trends in health care delivery in the setting.
9. Appropriateness of the precepted experience for the level of educational preparation for the students.

Important: Please be aware that references to Rules 214 and 215 are not all inclusive

**Approved by Faculty Assembly 2/22/2013; Edited & Updated 8/24/22 by Office for Academic Affairs**

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**Appendix B – FORMS & GUIDELINES**

**Student Acknowledgement Course Requirements**

**Faculty Contact Information**

**Preceptor/Mentor Agreement**

**Clinical Experience Log**

**Preceptor/Mentor Feedback of UT Health San Antonio Student**

**UT Health San Antonio Student Feedback of Preceptor/Mentor**

**UT Health San Antonio Student Feedback of Agency**

**Preceptor/Mentor Feedback of Preceptorship Program**

**Guidelines Related to Skills Performance by Pre-licensed Students**

**Adjunct Faculty Appointment without Salary**

### UT Health San Antonio Faculty Contact Information for Preceptor/Mentor

Our course faculty will be contacting you during your work hours, to briefly discuss the student's progress and any concerns or feedback you may have. Please feel free to contact nursing faculty

Primary UT Health San Antonio Nursing Faculty Name:	
Course Name:	Date:
Work Number:	E-mail:
Pager:	
Cell phone:	
The best time to reach primary nursing faculty:	

at any time. If you are unable to reach the primary faculty, you may contact the course coordinator.

Course Coordinator UT Health San Antonio Nursing Faculty Name:	
Course Name:	Date:
Work Number:	E-mail:
Pager:	
Cell phone:	
The best time to reach the course coordinator:	

## UT Health San Antonio Preceptor Mentor Agreement

I have reviewed the attached Guidelines for Preceptored Clinical Experiences and I agree to complete the preceptor training and serve as a preceptor/mentor for the:

\_\_\_ **Spring**      \_\_\_ **Summer**      \_\_\_ **Fall**    **Semester of 20** \_\_\_

**Course:** \_\_\_\_\_

**Student name (s):** \_\_\_\_\_

**Agency/Hospital:** \_\_\_\_\_

**Preceptor/Mentor Name as shown on Texas Nursing License:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Preceptor Telephone contact:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**License:** State \_\_\_\_\_ **Expires:** \_\_\_\_\_

**Credentials:** Diploma      ADN      BSN      MSN      Other: \_\_\_\_\_

**State the number of years you have been licensed as a RN:** \_\_\_\_\_

Days of Week:
Time of Day/Shift:
Start Date:
Completion Date:

Name of Student Assigned:
Student's Contact Phone Number:
Student's UT Health San Antonio Email Address:
Best Time to Reach Student:

There are \_\_\_ clinical hours required by the student in order to have the opportunity to successfully demonstrate course objectives. The student must complete the entire direct patient care hours required for completion of the course.

If, for some reason, the clinical hours cannot be completed, a conference between the preceptor, nursing faculty, and student will occur in order to successfully resolve any discrepancies. Documentation of clinical hours is the responsibility of the student, with the preceptor verifying the time by signature.

The preceptor and the student will complete this form and maintain a copy. The original shall be submitted to the nursing faculty within 1 week of the start of the preceptorship.

### UT Health San Antonio Preceptor/Student Clinical Experience Log

Student Name (signature): \_\_\_\_\_

Student Name (print): \_\_\_\_\_

Initials: \_\_\_\_\_

Faculty of Record: \_\_\_\_\_

Preceptor Name (printed): \_\_\_\_\_

Initials: \_\_\_\_\_

Preceptor Signature: \_\_\_\_\_

*If you have a different preceptor for any reason, they must print and sign their name in box for Preceptor Initials.*

*You may "sign in" no earlier than 15 minutes prior to your scheduled shift unless your preceptor requests you to arrive earlier. There is 30 minutes that are for lunch that do not count in total hours "worked".*

UNIT	DATE m/d/y	Time In	Time Out	STUDENT Initials	Preceptor Initials

UNIT	DATE m/d/y	Time In	Time Out	STUDENT Initials	Preceptor Initials

Note: Signature on this form is verification that the above information accurately documents the number of scheduled clinical hours completed under RN supervision during this clinical preceptorship. More copies may be needed to document all of the clinical hours.

It is acknowledged that completion of clinical hours does not assure a passing grade for the course.

Student: Please return the completed form to your Clinical Faculty at the end of the semester.

### Preceptor/Mentor Feedback of UT Health San Antonio Student

Student Name: \_\_\_\_\_ Agency: \_\_\_\_\_

Preceptor Name: \_\_\_\_\_ Preceptor Signature: \_\_\_\_\_

Date(s) worked: \_\_\_\_\_

Mid-term evaluation \_\_\_\_\_ Final evaluation \_\_\_\_\_

**Instructions:** The staff nurse/Preceptor's feedback of the student in this course is very important to the faculty members and the nursing program. Circle either midterm or final Feedback. Please mark the selected response using the scale below and return to faculty member (or to student if desired).

<b>5</b> = Exceeds expectations	<b>4</b> = Acts independently	<b>3</b> = Consistent; minimal prompting	<b>2</b> = Developing independence; occasional prompting	<b>1</b> = Inconsistent; needs frequent prompting	<b>0</b> = Needs constant prompting and supervision
<b>Goal 1: Incorporates knowledge, skills, and attitude from the liberal arts and sciences into professional practice.</b>					<b>5 4 3 2 1 0</b>
<ul style="list-style-type: none"> <li>Used in the nursing practice</li> <li>Demonstrated intra- and inter-personal collaboration</li> </ul>					
<b>Goal 2: Applied knowledge and skills of organizational and leadership, quality improvement, and patient safety.</b>					<b>5 4 3 2 1 0</b>
<ul style="list-style-type: none"> <li>Promotes safe, high quality care for diverse patients across healthcare systems and environments.</li> </ul>					
<b>Goal 3: Analyzed and applied evidence from research and other credible information sources as a basis for nursing practice.</b>					<b>5 4 3 2 1 0</b>
<ul style="list-style-type: none"> <li>Identified clinical problems and applied knowledge of research and inquiry to analyze best practice recommendations.</li> <li>Collaborates with clinical partners to identify clinical problems, make appropriate recommendations and promote safe, quality patient care.</li> </ul>					
<b>Goal 4: Incorporated knowledge and skills in using information systems and a range of patient care technologies to facilitate delivery of quality patient care.</b>					<b>5 4 3 2 1 0</b>
<ul style="list-style-type: none"> <li>Uses electronic medical records or medication delivery systems</li> <li>Use of technology within the clinical environment</li> </ul>					
<b>Goal 5: Advocates for financial and regulatory healthcare policies, processes, and environments that improve the nature and functioning of the healthcare delivery system and nursing practice.</b>					<b>5 4 3 2 1 0</b>
<ul style="list-style-type: none"> <li>Identified and interpreted healthcare policies that impact patient care.</li> <li>Incorporated an understanding of individuals and family needs associated with financial and healthcare concerns into the delivery of care.</li> </ul>					

<b>5</b> = Exceeds expectations	<b>4</b> = Acts independently	<b>3</b> = Consistent; minimal prompting	<b>2</b> = Developing independence; occasional prompting	<b>1</b> = Inconsistent; needs frequent prompting	<b>0</b> = Needs constant prompting and supervision
<b>Goal 6: Collaborated and communicated effectively with healthcare professionals to promote positive working relationships, improve patient health outcomes, and deliver high quality, safe patient care.</b>					<b>5 4 3 2 1 0</b>
<ul style="list-style-type: none"> <li>Communicates effectively with health care team members to relay information on patient status and need for assistance</li> </ul>					
<b>Goal 7: Promoted individual and population health by assessing factors which influence individual and population health and applying principles and culturally appropriate health promotion and disease prevention strategies.</b>					<b>5 4 3 2 1 0</b>
<ul style="list-style-type: none"> <li>Taught health promotion and disease prevention strategies to patients and families from diverse populations.</li> </ul>					
<b>Goal 8: Demonstrate consistent application of the core values of the discipline of nursing and the professional standards of moral, ethical, and legal conduct.</b>					<b>5 4 3 2 1 0</b>
<ul style="list-style-type: none"> <li>Provides care in a manner consistent with professional, moral, ethical, and legal standards.</li> <li>Exhibits professional behavior and attitude.</li> <li>Adheres to professional codes of conduct and standards in providing care.</li> </ul>					
<b>Goal 9: Integrate the knowledge, skills, and attitudes expected of a baccalaureate prepared nurse by providing professional nursing care to diverse patients and populations across the lifespan, healthcare settings, and healthcare environments.</b>					<b>5 4 3 2 1 0</b>
<ul style="list-style-type: none"> <li>Provided compassionate, patient-centered care, reflecting knowledge of best practices and evidence, with respect for patient and family preferences.</li> <li>Facilitated patient-centered transitions of care.</li> <li>Demonstrated ability to manage multiple functional problems affecting patients across the lifespan.</li> <li>Applied appropriate clinical judgment and reasoning in prioritizing and managing multiple delivery of care needs.</li> <li>Incorporated knowledge of professional nursing practice standards when delegating to and supervising members of a healthcare team.</li> </ul>					
<b>Comments:</b>					

**Student: Please return the completed form to your UT Health San Antonio nursing faculty.**

\_\_\_\_\_  
Student signature/date

\_\_\_\_\_  
Preceptor signature/date

**Thank you for your participation!!**

**Approved by Faculty Assembly 2/22/2013; Edited & Updated 8/24/22 by Office for Academic Affairs**

### UT Health San Antonio Student Feedback of Preceptor/Mentor

Preceptor Name:	Semester:
Agency:	Student Name:

Please circle the most appropriate response (1 = strongly disagree, 3= neutral, 5 = strongly agree):

1. My preceptor facilitated my learning in the clinical area.	1	2	3	4	5
2. My preceptor assisted me in meeting my clinical objectives.	1	2	3	4	5
3. My preceptor oriented me to the facility.	1	2	3	4	5
4. My preceptor included me in staff meetings and activities.	1	2	3	4	5
5. My preceptor fully explained her/his role as preceptor and her/his job description.	1	2	3	4	5
6. My preceptor was a role model for professional behaviors and skills.	1	2	3	4	5
7. My preceptor created an environment of open communication, trust, support and guidance.	1	2	3	4	5
8. I would recommend this preceptor for future students.	1	2	3	4	5
<b>9. Optional feedback:</b>					
What about the preceptor's style helped you to learn?					
What things could be changed to help you learn?					
Other comments:					

## UT Health San Antonio Student Feedback of Agency

Agency: \_\_\_\_\_

Semester/year: \_\_\_\_\_

Please complete this form to help us evaluate your clinical learning and submit this form to your UT Health San Antonio nursing faculty at the end of the course. The response is numbered from 1 to 7. Number 1 corresponds to the response word to the left of the numbers. Number 7 corresponds to the response to the right of the numbers. Numbers 2-6 correspond to levels between the responses 1 and 7.

Circle the number that best describes your experience. Explain any answers in the space provided.

### LEARNING OPPORTUNITIES

### COMMENTS

<p>1. I had the opportunity to apply theory from classes to clinical experience:</p> <p><b>Rarely</b>   1   2   3   4   5   6   7   <b>Every Clinical.</b></p>	
<p>2. I was able to have many different learning experiences:</p> <p><b>Very Few</b>   1   2   3   4   5   6   7   <b>Many</b></p>	
<p>3. The experience improved my understanding of holistic nursing</p> <p><b>Not at all</b>   1   2   3   4   5   6   7   <b>Very Much</b></p>	

STAFF	COMMENTS
4. The staff contributed to my learning:  <b>Not at all</b> 1   2   3   4   5   6   7 <b>A great deal</b>	
5. The staff was supportive of my learning:  <b>Not at all</b> 1   2   3   4   5   6   7 <b>Very Supportive</b>	
6. From my perspective, the <u>majority</u> of the professional staff were excellent role models:  <b>Poor</b> 1   2   3   4   5   6   7 <b>Excellent</b>	

We would appreciate your comments on the above questions and the following (use additional paper as needed):

1. What was the most challenging part of the clinical experience?
  
2. Overall, what is the most important issue that the nursing faculty needs to be aware of regarding this clinical experience?
  
3. Please share any other thoughts you have about the clinical experience or things that you think would make this learning experience more beneficial.

### Preceptor/Mentor Feedback of UT Health San Antonio Preceptorship Program

Please complete the Preceptor Evaluation at the end of the clinical experience. The preceptor may return this form to the nursing faculty, or fax it to the SON: 210-567-1719. Be sure to include the nursing faculty's name in the subject line. Thank you for your comments and feedback.

**Date:**

Agency:	
Preceptor Name (Optional):	
In terms of your experience as a preceptor for the UT Health San Antonio PRECEPTOR PROGRAM:	<p>What about the program is working?</p> <p>What about the program needs changing?</p>
In terms of your experience as a preceptor for the UT Health San Antonio senior NURSING STUDENT:	<p>Is the student prepared for the clinical experience?</p> <p>Is there something that could assist the student to be more prepared for the clinical experience?</p>
In terms of your experience as a preceptor with the NURSING FACULTY:	<p>What worked in your interactions with the nursing faculty?</p> <p>How could the interactions with the nursing faculty be improved?</p>
Additional Comments: (May use back of form)	

### Guidelines Related to Skills Performance by Pre-licensed Students

#### **RN PRECEPTOR SUPERVISION IS REQUIRED FOR THE FOLLOWING PROCEDURES UNTIL COMPETENCY IS VERIFIED BY THE RN PRECEPTOR:**

*If your patient requires nursing care, which you are unable to do without supervision, and your preceptor is unable to supervise you, the staff nurse assigned to the patient is required to deliver the nursing care.*

1. Calculations, administration, and documentation of oral, enteral, parenteral, intermittent needle therapy (e.g. saline lock), flushes, and IV secondary medication administration only after the student has reviewed each of the medications for compatibility and rate of administration with the RN
2. Dressing changes
3. Changing IV solution bags or tubing
4. Urethral catheterization
5. Tube feedings/irrigations
6. Venipuncture and initiation of IV therapy
7. Any new procedure or one with which the student is uncertain or unfamiliar

#### **RN PRECEPTOR SUPERVISION IS REQUIRED THROUGHOUT THE CLINICAL ROTATION FOR ANY OF THE FOLLOWING PROCEDURES:**

1. IV push medications
2. Checking and hanging TPN
3. Drawing blood from a central line or PICC
4. Invasive monitoring, e.g. arterial lines, pulmonary artery pressure monitoring
5. Patient transfers, e.g. from ICU to floor
6. Removing controlled substances from locked storage
7. Administration of any high-risk medication
8. Any therapy related to central, PICC, arterial lines including but not limited to flushing, medications, dressing and tubing changes, and removal
9. **ALL documentation in the patient's medical record (computer or paper chart)**

**PROCEDURES NOT ALLOWED UNDER ANY CIRCUMSTANCES:**

**The following procedures may not be done by students under any circumstances:**

1. Transcribing orders
2. Documentation of waste of a controlled substance
3. Administration of blood products
4. Arterial blood draws directly from the artery
5. Defibrillation or cardioversion
6. Administration of chemotherapeutic agents
7. Accepting verbal or telephone orders from a physician. (The student may call a provider, but a licensed RN must take any orders.)
8. Administer procedural sedation
9. All invasive monitoring calibrations
10. Count controlled substances at change of shift
11. Mediastinal or pleural chest tube removal
12. Sheath removal post cardiac catheterization

**PLEASE NOTE THAT AGENCY POLICIES SUPERSEDES GUIDELINES RELATED TO SKILLS PERFORMANCE BY PRE-LICENSED STUDENTS**

## **Adjunct Faculty Appointment without Salary**

### Philosophy and Purpose

The faculty of the UT Health San Antonio School of Nursing draw upon qualified members of the community to assist in providing quality education for the students. Adjunct Faculty without salary is one mechanism for recognizing and utilizing the outstanding contributions of these individuals. We believe that Adjunct Faculty contribute to our program by adding both breadth and depth to the school faculty, helping to bridge the gap between nursing education and nursing service, and providing interdisciplinary exchange among health care professionals.

Areas of contributions by the Adjunct Faculty to the nursing program could include: increasing the breadth or depth of the theoretical component of any portion of the curriculum, increasing the breadth or depth in clinical practice or conduct, serving as a role model, or serving as a preceptor. Some specific examples include but are not limited to: presentation of lectures to faculty, residents and/or students; Masters' prepared preceptors; clinical teaching activities to residents and/or students (non HSC related patients); research and/or teaching activities with faculty, residents and/or students.

Adjunct Faculty are non-voting members of the Faculty of The UT Health San Antonio School of Nursing, and are invited to participate in Faculty Assembly meetings.

### Qualifications

#### Adjunct Faculty without Salary

(Official title –Adjunct Assistant Professor, Adjunct Associate Professor, Adjunct Professor)

1. A professional who is actively engaged in advancing the mission of the School of Nursing.
2. Academically qualified (at least at the Assistant Professor level) or meets other comparable academic requirements for appointment to the faculty of UT Health San Antonio School of Nursing.
3. Has made or has the potential to make outstanding contributions to the School of Nursing.

### Term of Appointment

Adjunct Faculty without salary will be appointed for a term of one year, conforming to the academic year of the University, with opportunity for reappointment every year.

### Rank

Academic rank will be recommended by the Vice Dean for Faculty Excellence accordance with the criteria for appointment and advancement of UT Health San Antonio School of Nursing.

### Parking/ID Cards/Library Privileges

Adjunct Faculty without salary are eligible for free parking, ID card, and library privileges. Deposits are required for the ID cards. The Office of Faculty Affairs and Diversity personnel will send a letter to the individual. The individual is responsible for taking their appointment letter to UT Police to get a parking permit and ID card (permits are for one year), and to the library for library privileges.

### Mechanism for Appointment

Faculty members who desire to recommend someone for an appointment as an Adjunct Faculty without salary will complete the online Recommendation for Adjunct Faculty without Salary form and submit to the appropriate Vice Dean for Faculty Excellence. Recommended appointments are reviewed and approved by the Vice Dean for Faculty Excellence and processed in accordance with the HSC Handbook of Operating Procedures. Documentation required for the appointment includes official transcripts sent directly to the Faculty Process Support Specialist at the Office for Faculty Excellence from the faculty member's academic institution, Biographical Data Sheet, Security/Background Check, Curriculum Vitae, and name Affidavit. This documentation and any other that might be required to complete the appointment process will be requested by the Office for Faculty Excellence staff member.

### Mechanism for Reappointment

The Vice Dean for Faculty Excellence makes a recommendation based on documented contributions made to the SON. The Vice Dean for Faculty Excellence may consult with faculty to determine recommendation for reappointment. If recommended for reappointment, the Office for Faculty Excellence will complete the reappointment process.

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