

Guidelines for Clinical Education and Simulation Laboratory Education in Practical Nursing Education (PNE) Programs

I. Overarching Purpose of Practical Nursing Education (PNE) Programs

All registered programs leading to licensure as a Licensed Practical Nurse (LPN) must prepare students for safe, effective, entry-level LPN practice.

II. Acceptable PNE Program Education Methods

Didactic Education: Classroom and/or online learning experiences (including online simulation) provided by PNE program faculty. Didactic Education may be co-taught by PNE program faculty and licensed health care professionals with expertise in the subject matter being taught.

Simulation Laboratory Education: Clinical practice experiences taught by PNE program faculty in a nursing skills or simulation laboratory, which requires students to practice nursing skills and decision-making. Simulation Laboratory Education may be co-taught by PNE program faculty and educators with expertise in clinical simulation instruction.

Clinical Education. PNE program faculty planned clinical learning experiences that require students to be actively engaged in practicing nursing skills and nursing judgement under the supervision of a nurse (and as described in the PNE program curriculum). There are three types of Clinical Education:

1. Faculty Supervised Patient Care Education (FSPCE): PNE program faculty supervised direct patient care education in a hospital, nursing home, or other setting in which patients receive care from nurses. PNE program faculty are responsible for personally guiding and evaluating student clinical learning and must be in the clinical setting and immediately available while students are learning. Faculty ensure students are actively engaged in the actual practice of nursing skills roughly three quarters of the time spent in the setting, and may assign students to participate in clinical conferences, patient care observations, and similar clinical learning experiences in the health care setting for remainder of the time. PNE program faculty to student ratio shall not exceed 1:8, and shall be lower when necessary to assure patient, staff, student, and faculty safety.
2. Practicum Education: PNE faculty supervised practical education in settings in which nurses do not commonly practice, such as child day care centers or homeless shelters, which enables each student to practice nursing related skills and judgement.
3. Preceptor Supervised Patient Care Education (PSPCE): PNE programs may offer PSPCE, provided that PNE program faculty first verify each PN student has successfully completed FSPCE in all basic areas of nursing and is prepared to provide patient care safely under the preceptor supervision as described in the

PNE program curriculum. A preceptor is a licensed RN, NP, CNS, or LPN who guides clinical learning and personally supervises patient care provided by up to two (2) PN students at a time. Preceptors are employed by the host clinical facility and ensure that PN students provide patient care safely. PNE program faculty remain responsible for planning, monitoring, and evaluating student clinical learning and should be available to communicate with students and preceptors during clinical learning experiences. The PNE program is responsible for ensuring that each preceptor is academically and experientially qualified to offer clinical learning experiences to PN students consistent with the PNE program curriculum.

Faculty guided observational learning experiences in the classroom, skills-laboratory, and clinical settings are essential sub-components of didactic, simulation laboratory, and clinical education methods. Related to clinical education, the core measure of instructional time and credit is the actual practice of nursing skills and judgement as described above.

III. Threshold Expectations for Clinical Education in PNE Programs

The following threshold expectations for clinical education will apply to new program registrations and will serve as a benchmark from which to consider requests for curriculum changes to existing programs as set forth in section IV. Existing programs that are in compliance with all relevant program re-registration standards and have successful student outcomes are not required to meet these threshold expectations if curriculum changes are not being sought. For existing programs that are not in compliance with all program re-registration standards or that do not have successful students outcomes, these threshold expectations will be used, where applicable, as a continuous improvement goal for programs to move toward.

The threshold expectation for clinical education in PNE programs is **300 clock-hours** of FSCPE, which ensures that each PN student provides nursing care to each of the following patient populations/settings:

- ┌ Adult patients in a hospital, residential health care facility, and possibly in additional settings in which nurses provide care to adult patients.
- ┌ Pediatric patients in settings in which nurses provide care to pediatric patients.
- ┌ Patients receiving treatment for acute and chronic psychiatric, behavioral, and/or cognitive conditions in settings in which nurses provide mental health/psychiatric nursing care to patients.
- ┌ Maternal/newborn, postpartum and/or pregnant patients in settings in which nurses provide care to this population.

To meet the threshold expectations, PNE programs are expected to provide students with substantive supervised in-person patient care experiences with each of these patient populations/settings. However, there is no requirement for a set number of hours in each population/setting.

In addition, it is expected that PNE program faculty will personally evaluate student clinical practice as an element of ensuring that each student has demonstrated competencies necessary for safe, effective entry level LPN practice to each of the four patient populations described above.

IV. Curriculum Changes to Currently Registered PNE Programs

Existing PNE programs should continue to offer Clinical Education, Didactic Education, and Simulation Laboratory Education in accordance with their NYSED approved PNE program curricula.

For currently registered PNE programs that seek curricular changes to clinical education, the following application and review processes apply:

- PNE programs in good standing seeking approval to modify Clinical Education and/or Simulation Laboratory Education hours in a PNE program curriculum will be eligible for a streamlined approval process, provided that the proposed change maintains at least the threshold expectations for clinical education set forth in Section III. For example:
 - a program in good standing that currently requires 500 clinical education hours and proposes to replace 200 clinical education hours with a combination of laboratory and online simulation, while still maintaining 300 hours of Faculty Supervised Patient Care Education as set forth in Section III, will be eligible for a streamlined approval process.
- Previously approved PNE programs that do not meet threshold expectations may submit proposals to change hours of Clinical Education and/or Simulation Laboratory Education. These proposals will be reviewed on a case-by-case basis. However, approvals will only be granted in cases where programs can sufficiently demonstrate that they meet standards that are comparable to the threshold standards, as determined by the department.