#### **Forensic Graduate Nursing Program**

#### For NURS 8300 Care of the Perpetrators:

### **Clinical Agency Suggestions:**

Penal system

Jail

Prison

District Attorney

Mandated programs for batterers

Child Abuse Agencies dealing with perpetrator rehabilitation

Drug and Alcohol Counseling Program for Young Offenders

## **Preceptor qualifications:**

Preceptor ideally should be an APRN, Psychologist, or MD.

However, some of the agencies do not have nurses, psychologists or MDs on staff, so a minimum of Bachelor's prepared with some type of specialized training or certification that makes them an expert in their field is required. The credentials of the preceptor in these cases will have to be approved by the instructor. Student will be required to forward CV of preceptor to instructor/FSU to be approved prior to pursuing permission for clinical placement.

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# **Procedure:**

- 1. Email Preceptor resume to instructor, to obtain 'approval' for the Preceptor and the Clinical Agency.
- 2. Email signed and dated Preceptor Contract, Preceptor resume, preceptor title, email address and phone number to Deborah Gifford. Deborah will obtain instructor's signature.
- 3. Email Deborah Gifford the following information for the Clinical Contract:
  - Clinical agency name, address, phone number
  - Contact person (at agency) name, title, email address and phone number
- 4. It can take 4 12 + weeks to process the Clinical Agency Contacts.
- 5. You may <u>not</u> start your clinical experience until both FSU and the Clinical Agency administration have signed the Clinical Agency Contract.

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The contact person at FSU who is in charge of facilitation of the Clinical Agency Contracts is:

Deborah Gifford

dgiffor1@fitchburgstate.edu

Telephone Number: 978-665-3023

Fax number: 978-665-4501

If student sends a fax - please also send an email to <a href="mailto:dgifforl@fitchburgstate.edu">dgifforl@fitchburgstate.edu</a> indicating that a fax was just sent.

The fax or email regarding the clinical placement should contain:

Student name

Student phone or email address

Course number, semester and instructor's name