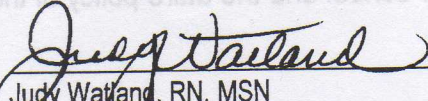


**O'CONNOR HOSPITAL  
NURSING DIVISION POLICY/PROCEDURE**

**Title: Nursing School Affiliations - Clinical Expectations**

**Approved:**

  
Judy Watland, RN, MSN  
Sr. Vice President Patient Care / Chief Nursing Officer

**Effective Date:** 11/81

**Revised Date:** 06/05, 04/08, 06/11

**Originating Department:** Nursing Services

**Distribution:** All Nursing Units

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**POLICY STATEMENT**

To enhance transition from the academic setting to the clinical setting, the Nursing Division will support utilization of patient care units for learning by nursing school students. Recognizing the schools are functioning within the rules and regulations of State Boards, the utilization will be as equitable as possible for all schools. Changes in utilization will be cleared through the Nursing Education Liaison with the understanding that the changes are approved by all schools involved and the Chief Nurse Executive. The responsibility of overall patient care remains with O'Connor Hospital.

**POLICY INTERPRETATION**

**1. Faculty**

- A. Nursing Service reserves the right to ask to have an instructor replaced if he/she is not functioning within the policies and procedures of the hospital.
- B. In the event of faculty illness, substitution will be provided by the school or the clinical experience will be canceled.
- C. There will be an instructor present whenever there are students, and the ratio required by the State Board must be maintained; usually 1 instructor to 10 students but ratio may be less in specialty areas, per the Board of Registered Nursing and Board of Vocational Nursing.
- D. The school is responsible for the instructional program of the student nurses in the clinical area.
- E. Direct supervision of all medications, treatments and charting of the students is the responsibility of the instructor.
- F. O'Connor Hospital retains the responsibility for supervision of patient care.
- G. Faculty will receive comparable Hospital and Nursing Orientation in order to provide correct information to their students.
- H. Faculty will provide general hospital and unit orientation to O'Connor Hospital to their students prior to clinical unit utilization.
- I. Faculty will provide Nursing Education Liaison a copy of student roster, copy of clinical course objectives, and scope of clinical practice/limitations of students prior to start of the clinical experience.
- J. Faculty will arrange for pre and post conference rooms with Nursing Education Liaison.
- K. Faculty will carry copies of all students' health requirements/immunization completion, CPR and malpractice insurance criteria while at clinical site.



**2. Students****A. Attire:**

1. Uniform must comply with the attire policy of their particular school and the attire policy of the Nursing Division:
  - a. The uniform of the particular school is acceptable.
  - b. Students must wear lab coats or appropriate professional attire on the unit for observation periods.
  - c. Students must wear nametags.
2. Lockers for students are not available. Therefore, students and faculty assume all responsibilities for their valuables.

**B. Communication:**

1. Students will report changes in patient's condition immediately to the staff member assigned to the care of the patient and to the instructor and chart in a timely manner. Student charting is not required to have a co-signature.
2. No orders may be taken by any students including refresher RNs unless an O'Connor RN precept is on the other line and able to verify and co-sign the order. No verbal orders will be taken.
3. Students should, at all times, report on and off the unit to the Charge Nurse or the staff member assigned to the care of their patient(s).
4. Charts may not be removed from pods/unit/hospital.
5. No Xeroxing of patient records is allowed.
6. No patient roster should be distributed to the students.

**C. Attendance:**

1. Absence and tardiness:
  - a. Students are to notify their instructor if they will be late or absent.
  - b. Students and instructors should report to the unit prior to the shift report.
2. Illness on duty:
  - a. Students becoming ill on the unit are to notify the instructor and Charge Nurse/Primary Nurse.
3. Insurance/Contagious Disease:
  - a. Students or schools have their own health insurance or provisions for medical care.
  - b. If emergency care is required at the hospital, such will be rendered and the hospital will direct the bill to the student.
  - c. Students should not come to the hospital if they feel ill or suspect they have a contagious disease.



4. Student nurse injury:

- a. Report injury to nursing school instructor, Charge Nurse, Nurse Manager and to employee health. Student must be given the option to go to ED if needed.
- b. Refer to Employee Health Service Policy and Procedure Manual: Occupational Injury/Illness if needed.

**D. Guidelines for student management experience:**

1. The indispensable factor in the student's nursing care management experience is the RN or LVN who is the primary nurse and who will act as his/her resource person each day.
  - a. The primary nurse will:
    1. Allow the student to lead
    2. Will be ultimately responsible for the patient's nursing care
    3. Will be at hand for assistance in decision making, problem solving and in those areas where the student is not fully able to function.
2. The patient care experience may vary dependent upon patient acuity.
3. Patient care is the responsibility of O'Connor Hospital.

**E. Medications:**

1. General
  - a. Supervision for administration of medications/IV fluids by students will be the primary responsibility of the instructor, and/or specified O'Connor Hospital preceptor. In those instances where special knowledge for drug administration is required, the student will not administer those medications.
  - b. IV Push medications may be given if the student is trained in the procedure and has the knowledge to administer the medication. The instructor MUST be present throughout the entire procedure and appropriate follow-up.
  - c. Instructors will be responsible for identifying patients for whom students are administering medications/IV fluids by verbal communication and written patient assignments.
2. Any medication errors will be reported immediately to the nursing school instructor and the primary nurse. The primary nurse will complete an online incident report in Risk Pro and notify the physician. Student may be pulled from clinical at that time if needed for the well-being of the student.

**F. Special Procedures by department:**

1. Students are not allowed to do any procedure that requires certification (e.g. ABG from an arterial stick, invasive fetal monitoring, etc.).
2. ICU
  - a. Students will be allowed to draw lab work from an arterial or CVP line with primary nurse supervision at all times. Cardiac output measurement may be performed after one on one instruction from the instructor or primary nurse.
3. L&D
  - a. Students are allowed to hook up external monitoring devices and do vaginal exams with one on one instruction by their instructor or primary nurse.
  - b. Students cannot attach scalp electrodes.



### G. Preceptorship

1. Definition of preceptor: an RN who has met criteria for selection. The preceptor serves as role model, mentor, and supervisor to a student in the final quarter or semester of a nursing program.
  - a. Criteria for selection:
    - b. Expresses a wish to work as a preceptor.
    - c. Active California RN license.
    - d. Employed in the institution and specific area for a minimum of one year.
    - e. Scheduled to work a minimum of 24 hours per week.
    - f. Communicates effectively as an important component of the health care team.
    - g. Documented expertise in the delivery of patient care (by supervisor recommendation).
    - h. Does not work as Charge Nurse while taking a student.
    - i. Completed a Preceptor Class.
2. Clinical Nurse Managers will make the final decision on any clinical preceptorships in their areas.
3. During clinical preceptorship, the student works directly with the selected nurse preceptor. The nursing instructor may not be present; however, can be contacted.
4. Precepting students must obtain O'Connor badges identifying them as "nursing student." Their badge must be returned to the Nursing Education Liaison at the end of his/her rotation. The Nursing Education Liaison will then return the badges to the security administrator responsible for badges.
5. Students will arrange their schedule with their individual preceptor. Students are to notify their preceptor if they will be late or absent.
6. IV Push medications may be given if the student is trained in the procedure and has the knowledge to administer the medication. The primary nurse MUST be present throughout the entire procedure and appropriate follow-up.

### REFERENCES

O'Connor Hospital Human Resources and Employee Health Policies

Board of Registered Nursing Guidelines for Clinical Experiences.

O'Neill, P. Preceptorship Workshop, De Anza College