THE CHILDREN'S MERCY HOSPITAL
PATIENT CARE SERVICES
ADMINISTRATION MANUAL

TITLE: Clinical Affiliation with Schools of Nursing Standards
EFFECTIVE: 03/88
REVISION DATE: 10/90, 8/94, 9/96, 1/99, 07/05, 07/08, 07/09, 02/12, 03/16
REVIEWED WITH NO CHANGES:
RETIRED:

PURPOSE: To outline the standards applicable to schools of nursing who affiliate with The Children’s Mercy Hospital (CMH).

LOCATION/SCOPE: All (The Children’s Mercy Hospital and all of its affiliates)

CLINICAL DESIGNATION TO WHICH THIS APPLIES: Nursing

DEPARTMENT RESPONSIBLE FOR POLICY MANAGEMENT & EXECUTION:
Patient Care Services

POLICY:
I. Contract
   A. A contract using the Children’s Mercy Hospital model student affiliation contract will exist between The Children’s Mercy Hospital and affiliated nursing schools whose students receive clinical experience at CMH. Negotiation of contract content should take place prior to the start of the fiscal year and new contracts should be signed or renewed by June 30th.
   B. Contracts for Joint Appointments define the terms and conditions for the participation of CMH nurses who provide instruction for nursing students in clinical rotations at CMH. The contractor (School) agrees to pay the subcontractor (CMH) for teaching obligations at CMH. This contract is submitted to the Nursing School Clinical Manager for negotiation, to the Executive Vice President/Co-CEO for approval, to the President, Chief Executive Officer and the Vice President/General Counsel for signature.
   C. CMH reserves the right to deny student placements to schools that do not comply with CMH policies.
   D. Affiliating schools of nursing must submit proof of malpractice insurance/coverage for instructors and students to the Nursing School Clinical Manager.
   E. All students of affiliating schools will have criminal background checks/mental health checks (schools responsibility).
II. Licensure and Certification:
   A. All affiliated nursing instructors will have a current Missouri or Kansas professional nursing license (or temporary work permit).
B. Instructors will ensure that all RN and LPN nursing students who affiliate with CMH for clinical experience are in compliance with CMH licensure requirements. See Nursing License Policy.

C. All affiliating nursing school instructors and students must possess a current American Heart Association Basic Life Support Healthcare Provider card. Verification of affirmation will be maintained by the affiliating school of nursing.

D. Students who have their clinical rotation at Children's Mercy Home Care will have a valid driver's license and car insurance.

E. Schools which sign an addendum to their contract will maintain documentation of licensure and health history. Documentation will be made available upon request. All other schools will submit voided copies of professional licenses, copies of BLS affirmation cards and completed Faculty/Student Health History Records.

III. Students participating in patient care areas must have documentation of:

A. TB Screen - IGRA TB blood test (e.g. Quantiferon Gold or T-spot) within 90 days prior to affiliation or two tuberculin skin tests within the last 12 months with the most recent test no greater than 90 days prior to affiliation. The most recent screening must be completed no more than one year prior to the last day of the clinical rotation.

B. Measles (rubeola)/mumps/rubella - Two MMR vaccinations or positive laboratory titers

C. Varicella (Chickenpox) - two vaccinations or a positive laboratory varicella titer.

D. Hepatitis B (immunization and/or titer is recommended by the CDC; can waive, if documented).

E. Tetanus-diphtheria, acellular pertussis (Tdap)-vaccine received after 2005. Influenza — proof of current season influenza vaccine per annual CDC announced dates.

IV. Students will be tested for color blindness if performing POC testing. Status will be documented and maintained on file by the affiliating school of nursing.

V. If the instructor or student has a blood or high risk body fluid exposure, refer to Occupational Health Policy Evaluation and Referral After Occupational Exposure to Blood or Body Fluids.

VI. If the instructor or student suffers an injury, the injury is reported to the department or unit supervisor. The instructor must complete an Injury/Illness report and deliver it to the Occupational Health Office as soon as possible. An Incident Report must be completed and forwarded to Legal Affairs. An injury to an instructor or student is not compensable by CMH Worker’s Compensation and the instructor or student will be responsible for the cost of any care or lost work time.

VII. Students and instructors must review and be responsible for understanding the content in the Clinical Orientation Manual (http://mokan.system32.com). Verification will be documented and maintained by the affiliating school of nursing. Students must also be oriented to CMH hospital specific procedures such as: Documentation processes, Emergency Procedures Dress Code Safety Procedure.

VIII. Undergraduate Placement

A. The hospital will negotiate with each school for clinical assignments on an annual basis.

B. The following guidelines will be used in negotiating placement:

2. The MOKAN Placement website includes student unit capacities for inpatient and outpatient units. The unit capacities are defined as the maximum number of students the unit can accommodate at any given time. These unit capacities will be used for planning and requesting clinical experiences. The quota for each unit will not be exceeded without permission of the Unit Director/Education Coordinator.

3. Students should spend at least two clinical weeks in the same inpatient area and rotate to no more than two different units during a 6-8 week period.

C. Once clinical schedules are finalized, changes will not be made unless a request is submitted and approved via MOKAN.

D. The clinical coordinator/instructor will submit the Nursing Student Roster form for cohort and capstone students at least 2 weeks prior to the start date of the clinical experience to the Nursing School Clinical Manager.

IX. Graduate Students, Undergraduate Leadership/Management Students, Capstone Students

A. Placement of Leadership/Management Students and Capstone Students will be coordinated between the instructor, the Unit Director/Unit Education Coordinator and the Nursing School Clinical Manager.

B. Clinical goals and objectives will be reviewed with the preceptor prior to the clinical experience.

C. Capstone students will be expected to follow the guidelines set forth by their school. CMH permits Capstone students to perform procedures under the direction/supervision of their preceptor with the exception of: narcotic verification and counts, independent acceptance of orders from a physician/APRN/PA, and independent administration of blood products or blood verification. Determination of the student’s ability to perform procedures, not listed above, will be based on the preceptor’s discretion of readiness.

D. Graduate students will submit a completed Graduate Nursing Student Placement Request to the Nursing School Clinical Manager 3-4 months prior to the clinical experience start date.

X. Instructor Orientation

A. Orientation classes will be scheduled at the beginning of the fall semesters.

1. Clinical instructors will be expected to complete annual competencies, content of which to be determined by the Nursing School Clinical Manager.

2. All new instructors, not employed by the hospital, will take the Medication Calculation Test. A score of 100% is considered the minimum level of competency. The instructor who does not score 100% will have two additional opportunities to score 100%. Until the instructor achieves the minimum competency level, he/she will not be authorized to supervise students administering medications.

B. Clinical orientation is required prior to supervising clinical undergraduate students on a unit. The instructor should contact the Unit Director/Education Coordinator to arrange clinical orientation hours.
1. The instructor will be required to give at least eight (8) hours of patient care with a unit preceptor. It will be determined by the Unit Director/Education Coordinator, with input from both the CMH preceptor and the instructor, whether additional clinical orientation hours are needed.

2. Instructors who work in patient care units at Children’s Mercy Hospital will have their clinical orientation needs evaluated on a case-by-case basis.

3. The Clinical Instructor Orientation Competency Validation tool must be completed prior to the rotation start date. Instructors who plan to supervise skills that require competency validation at CMH must be validated at CMH or provide acceptable certification/verification before their students may perform the procedure.

4. Instructors are oriented to the electronic health record during orientation. Instructor and student user names will be provided.

C. Instructors who do not need clinical orientation (i.e. instructor has supervised students at CMH within past year) will contact the Unit Director/Education Coordinator of their assigned unit(s) to review changes in documentation requirements, patient care needs, policies/procedures, etc. prior to the start date of the clinical experience.

D. Instructors who have students assigned to Children’s Mercy Hospital preceptors or as observation only do not need clinical or orientation. Instructors should meet with each preceptor/Nurse Manager to discuss student goals and objectives, unit orientation, etc. prior to the start date of the clinical experience.

XI. Instructor Responsibilities

A. The instructor will consult with the Charge Nurse before making patient assignments.

1. Assignments should be made before the clinical experience to provide adequate student preparation. Assignments will be approved by the Charge Nurse and written on the unit’s student assignment sheet.

2. The number and type of patients available to students at any given time may vary and limit the number of student assignments available.

B. The clinical instructor will be in the hospital and readily available to students during clinical time. (Exception: students assigned to a CMH preceptor.)

1. The instructor will inform the Charge Nurse when he/she will be off the unit and how he/she can be contacted.

2. While the instructor is off the unit, the student will not be permitted to administer medications or perform procedures.

3. If an instructor is not present in the hospital, students may be withdrawn until instructor supervision is available.

C. A maximum of seven (7) students will be supervised at a given time. (Exception: this number does not include observation experiences and students assigned to CMH preceptors.)

D. Instructors will orient students to their assigned unit and assure their preparation for practice at the beginning of each clinical day.

E. Instructors will attend inpatient unit report or obtain report from the Charge Nurse or designee on patients assigned to students.
F. Instructors or CMH preceptors will directly supervise students performing procedures or administering medications, unless delegation of this task has been pre-arranged between the instructor and the RN, and the instructor is on the unit. (Exceptions: activities of daily living and vital signs.)
   1. The staff nurse assigned to the patient will be informed at the start of each clinical day which procedures will or will not be performed by the student and which medications will or will not be administered by the student.

G. The instructor will notify the clinical area when a student will be absent.

H. When a student needs to be reached in case of an emergency, the CMH Staffing Office or Patient Care Services will contact the student’s instructor. The instructor will be responsible for contacting the student.

I. Instructors will evaluate their experiences at CMH at the end of each clinical rotation or semester.

XII. Student Responsibilities
   A. Students will be encouraged to ask questions of their instructor/CMH preceptor so that their learning needs can be met.
   B. The student will research the patient’s medical record and plan patient care prior to the inpatient clinical experience.
      1. Students may come to the unit to obtain assignments during hours determined by the unit’s Unit Director/Education Coordinator.
      2. Patient records, cannot be photocopied; computer records cannot be printed.
      3. The unit conference room should be used for reviewing charts - avoid the main desk area.
   C. Students will wear a lab coat, uniform or scrubs with a school/name identification when in patient care areas. Dress will comply with the Personal Appearance Policy.
   D. An Incident Report will be completed for any incident involving a patient assigned to a student. It may be completed by the student, the instructor or the staff nurse assigned to the patient. The incident will be discussed with the unit’s Charge Nurse or the staff nurse assigned to the patient before the Incident Report is completed and before the student documents the facts related to the incident in the patient’s medical record.
   E. If a student will be absent he/she should notify their instructor.
   F. Students will evaluate their experiences at CMH at the end of their clinical rotation.
   G. Students are expected to follow the guidelines outlined in the Technology Position Statement.

XIII. Staff Responsibilities
   A. The Charge Nurse will assist the instructor in assigning patients to students.
   B. Staff nurses will monitor patients assigned to students.
      1. The student and the staff nurse assigned to the patient will assess the patient. If the student’s assessment is incomplete, the staff nurse will discuss this with the student and the instructor.
      2. The staff nurse should not share their electronic sign-on with students. The students should receive a sign-on from their instructor.
C. Staff nurse are encouraged to talk directly to the students about unprofessional, behavior, as they are serving as their role models. If this behavior continues the staff nurse should address the issue with the instructor. If staff has safety issue concerns related to the student or instructor, it should be addressed with their Unit Director/Education Coordinator. If necessary the Nursing School Clinical Manager should be notified.

D. Staff nurses will communicate with the instructor about the strengths and weaknesses of the students with whom they work.

E. Staff nurses will evaluate instructors/students at the end of each clinical rotation.

F. CMH retains the right to have students and faculty members withdrawn from the Hospital if withdrawal is felt to be in the best interest of the Hospital.

DEFINITIONS:

REQUESTS FOR DEVIATION FROM POLICY: Requests for deviation from this policy will be directed to the Administrative Council Sponsor for this policy or the Administrator on Call.

RELATED POLICIES:
- Guidelines for Educational Participation at CMH
- Nursing License Policy
- Exposure Control Plan
- Personal Appearance Policy
- Corporate Compliance Plan
- Confidentiality
- Release of Information
- Patient Rights – Our Promise to You
- Patient Responsibilities and Responsibilities

RELATED FORMS:

REFERENCES:

REGULATIONS:

KEYWORD SEARCH: School of Nursing, Clinical Affiliation, Nursing Student, Nursing School, Clinical Instructor, Nursing Instructor

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REVIEW PERIOD:
3 years

COMMITTEE REVIEW & APPROVAL:
Nursing Practice Council: 03/88, 10/90, 08/94, 09/96, 01/99, 01/02, 07/05, 07/08, 07/09, 02/12, 10/15

FINAL APPROVAL:

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Senior Vice President for Patient Care Services / Chief Nursing Officer