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Policy Area: *Student Affiliations*

Entities: *Northwest Community Healthcare, Northwest Community Hospital*

Applicability: *NCH Policy Manual*

Part of NorthShore

Student Nurse Policy

Brief Summary of Policy

It is the policy of Northwest Community Healthcare, including all of its subsidiaries and entities (NCH), that the following guidelines must be followed for student nurse experiences at NCH.

Our Mission

We exist to improve the health of the communities we serve and to meet individuals' healthcare needs.

Our Vision

Northwest Community Healthcare will be an Integrated System of Care that delivers innovative, exceptional and coordinated care while creating value for the communities and populations we serve.

Policy

A. PURPOSE

To define the scope of practice of an undergraduate student nurse caring for patients at any Northwest Community Healthcare facility.

B. SCOPE

This policy applies to Northwest Community Healthcare, and any entity or facility owned and controlled by Northwest Community Healthcare.

C. POLICY

1. A current affiliation agreement between the educational institution and Northwest Community Healthcare must be in place prior to any student nurse experience in an NCH facility.
2. The registered nurse caring for the patient has responsibility for patient care and is not responsible for actions by the student.
3. The instructor/preceptor for the patient must provide direct supervision if the student has not attained clinical competency in a procedure or technical skill. The instructor/preceptor will provide guidance about which skills may be performed independently.
4. Student nurses may not carry out clinical procedures that are considered out of scope for their role. Clinical procedures that are out of scope include the following:
 - a. Administration of blood products

- b. Acknowledging medical orders
- c. Administration of chemotherapy
- d. Independent Verification of High Risk Medications
- e. Obtaining informed consent
- f. Accepting verbal or telephone orders from a physician or their designee
- g. Administration of emergency drugs
- h. Interpretation of cardiac rhythms
 - i. Programming of PCA pumps or epidural infusions
 - j. Patients in airborne precautions
 - k. Any clinical procedure that is identified as out of scope by the clinical site
5. Student nurses in the Behavioral Health department may not administer medications and/or document in the EMR.
6. All students and instructors are required to follow department and hospital policies and procedures.
7. All students and instructors will meet organization's standards for immunization communicable diseases, drug screening and background checks.
8. If the student is rotating to a department that is not the primary clinical area, it will be for observation only, no care will be provided so therefore, no documentation should occur.
9. In cases where an Northwest Community Healthcare RN employed is assigned a formal 1:1 preceptor through an academic partner, the RN will then be responsible for co-signing.

D. PROCEDURE

1. Clinical Placement Procedures
 - a. Orientation materials must be reviewed by instructors and students at the start of each new clinical rotation. Failure to do so will require the academic liaison/clinical development specialist to remove the faculty/students from the unit until regulatory requirements are met.
 - b. Students may have limited access to select patients or experiences dependent upon site needs.
 - c. Patients may request care to exclude student experiences.
 - d. Department managers/unit leadership will communicate any limitations regarding patient assignments to the clinical instructors.
2. Student Documentation Guidelines
 - a. Instructors and students will adhere to guidelines for documentation per policy.
 - b. Students can access only the records of patients involved in their care experience and are required to strictly adhere to patient confidentiality and protect the security of patient records and patient data.
 - c. All student documentation must be reviewed and co-signed by their instructor or preceptor.
 - d. Under rare circumstances, i.e. outpatient or procedural areas, the RN taking care of the patient may be asked to review and co-sign student nurse documentation.
 - e. At NCH the instructor will review all documentation and co-sign.
3. Medication Administration Guidelines

- a. Safe medication practice includes knowledge of the rights for medication administration including medication action, safe dosages for adults, seniors, or children, side effects and special considerations for administration. Students are expected to follow NCH policies regarding medication administration that includes the use of bar code technology where available.
 - b. Access codes for medication rooms and unit-based cabinets will only be issued to instructors.
 - c. Instructors or preceptors will check ALL medications prior to student administration. Students must verify the patient's identification according to policy and verify medications against the electronic medication record.
 - d. All intravenous medications are to be prepared and administered under the direct supervision of the instructor or preceptor. Intravenous medication preparation includes reconstitution, aspirating medication from vials, confirming premixed pharmacy doses and all infusions. Volume and rate changes are made to the IV pump while under the direct supervision of the instructor or preceptor.
 - e. The RN caring for the patient will administer or program any Patient Controlled Analgesia or Epidural infusions. Students may monitor a patient with this type of analgesia according to policy.
 - f. All medications will be co-signed by instructor or preceptor.
4. Students caring for patients receiving blood products are allowed to monitor vital signs during the transfusion but cannot be the second person to verify blood components.
- a. Resolution of Clinical Related Issues:
 - i. Team members having any concerns with a student's performance should report these to the instructor.
 - ii. **Team members having concerns about the instructor's performance should report these to the Nursing Professional Development Specialist.**

Definitions (if needed)

Co-Sign: A function in the **Electronic Health Record (EHR)** that denotes that the instructor/preceptor has reviewed the student documentation and agrees that it is accurate.

Direct supervision: The instructor/preceptor/RN must be in attendance in the room during the performance of the procedure.

Preceptorship: Clinical placement that consists of one student practicing under the direction of an employed Registered Nurse (RN).

Student Nurse: An undergraduate student that provides direct patient care during a semester clinical rotation and is currently enrolled in a Nursing program. This definition may refer to a clinical group of students under the direction of an instructor, or a precepted experience.

References (i.e., Laws, Standards, if applicable)

Related Policies or Procedures

Academic Affiliations Policy

Staff orientation, Education, and Training Policy

Identification of Employees, Medical Staff, Students, Volunteers and Temporary/Contract Staff Policy
NCH Health and Immunizations Requirements policy
Parking Facilities and Regulations Policy
Acceptable use of Computing Devices Policy
Use of Authorizations Forms Policy
Data Confidentiality and Security Policy
Confidentiality Policy
Release of Patient Information Policy
Epic Training Requirements for New, Returning and Cross-Trained Staff
Appearance Standards
NCH CARES Service Standards Commitment

Attachments

No Attachments

Approval Signatures

Step Description	Approver	Date
Executive Review	Eileen Gillespie: Exec VP Patient Services & CNO	8/17/2021
Policy Review Committee	Policy Committee Chair: policy_committee	8/17/2021
Director Review	Teresa Kisch: Dir Professional Practice & Magnet Program	8/11/2021
Policy Lead	Jean Alanna Ackerson: Clinical Practice Specialist	8/10/2021

Applicability

Northwest Community Healthcare