Subject: Nursing Students

Policy

As a teaching institution, Children’s Hospital of Wisconsin is committed to providing educational opportunities to nursing students. Nursing students attain unique pediatric clinical knowledge and skill through working with children and families in a supervised clinical environment. The staff/clinic nurse remains primarily responsible for the patient’s care while the clinical educator/faculty remains primarily responsible for the nursing student’s education. Collaboration among the hospital/clinic staff, clinical educator, and nursing student will assure that children and families continue to receive the best and safest care.

Table of Contents

 DEFINITIONS ................................................................................................................. 1
 PROCEDURE ................................................................................................................. 3
 I. STUDENT PLACEMENT ......................................................................................... 3
   A. CLINICAL GROUP ............................................................................................ 3
   B. PRECEPTED NURSING STUDENTS .............................................................. 3
 II. CLINICAL EDUCATOR/FACULTY ........................................................................ 3
   A. ORIENTATION ................................................................................................. 3
   B. CLINICAL GROUP GUIDELINES .................................................................... 4
   C. ALTERNATIVE LEARNING EXPERIENCE GUIDELINES .............................. 4
   D. PRECEPTED LEARNING EXPERIENCE GUIDELINES .................................. 5
 III. NURSING STUDENTS ......................................................................................... 5
   A. ORIENTATION ................................................................................................. 5
   B. GUIDELINES .................................................................................................. 5
   C. PRECEPTED LEARNING EXPERIENCES ...................................................... 6
   D. ALTERNATIVE LEARNING EXPERIENCE .................................................. 6

Definitions

School/Facility: An accredited college or school of nursing which has a current affiliation agreement with Children’s.

Nursing Student: An individual who is pursuing an academic nursing degree at an affiliated college or university.

Graduate Nursing Student: Registered nurse (RN) who is pursuing an advanced nursing degree at an accredited college or university.
RN Update Student: RN who is returning to pediatric practice and is attending a refresher course at an accredited school of nursing.

BSN completion Student: RN with a diploma or associate degree in nursing who is pursuing a bachelor of science in nursing degree.

Clinical Nursing Group: Group of senior level nursing students who are assigned to a specific unit/clinic and are under the supervision of a clinical educator from an affiliated school of nursing. The clinical educator will be in-house and available at all times.

Precepted Learning Experience: An extended number of clinical hours whereby senior-level or graduate level nursing students are linked with one or more pediatric preceptors to learn the role of the pediatric nurse (i.e.: “senior capstone”; “synthesis” or the last practicum course in an associate degree program).

Alternative Learning Experience: An experience off their defined nursing unit for nursing students who are already part of a clinical group. These experiences are optional and for a limited amount of time. During their experience, these students are under the supervision of a licensed clinical professional.

Licensed Clinical Professional (LCP): A Children’s employee or affiliate which may include, but not limited to registered nurses, physician assistants, advanced practice nurses or physicians.

Clinical Educator/Faculty: RN who is either employed by Children’s or school/facility that provides education and supervision for a group of nursing students assigned to a specific unit/clinic or department.

Preceptor Faculty: RN employed by a school/facility who is responsible for supervision and evaluation of their students placed in a precepted learning experience.

Preceptor: LCP who provides direct supervision and education for a nursing student in a clinical learning experience.

Department of Advance Practice Nursing (DAPN): The department within Patient Care Services that manages clinical education for nursing students for the Milwaukee’s campus. The roles within the department are responsible for the placement, coordination, education and management of nursing student education. The roles within the department are the Director of Advance Practice Clinical Practice and Nursing Student Education, the APN Clinical Educator/School of Nursing Clinical Liaison (APN/SON liaison) and the Student Placement Coordinator (SPC).

Nursing Student Website (NSW): The website contains updates, forms, checklists, unit descriptions, and orientation information developed for staff, nursing faculty and nursing students to aid in coordination, placement and education of the students. The website location: www.chw.org/students: http://www.chw.org/display/PPF/DocID/34290/Nav/1/router.asp
PROCEDURE

I. STUDENT PLACEMENT

A. CLINICAL GROUP
   1. The Department of Advance Practice Nursing (DAPN) is responsible for the placement of all nursing students within Children’s Hospital of Wisconsin as referred in the Administrative Policy and Procedure: Student Placement Program.
   2. Clinical group assignments must be requested using the Student Placement form located on the NSW. Assignment of clinical groups to nursing units is based on the following factors: date of request, course description, and match of unit experiences with course objectives, availability of units/clinics and match of clinical educator competencies to the unit/clinic.
   3. Clinical educators/Faculty must list a first and second choice of unit/department. Deadline due dates are located on the NSW.
   4. A copy of the course description, including objectives, must be submitted with the request for placement.
   5. The number of students on an acute care unit is limited to eight students. The number of students on a critical care unit is limited to six students. All clinical educators must have appropriate clinical care competency on the unit they are teaching.
   6. After placement has been determined, clinical educators are expected to review and returned a signed ‘clinical educator guidelines and expectations’ on the NSW to the DAPN. They are expected to contact unit/clinic leadership (patient care manager and/or unit-based CNS) to arrange for clinical educator orientation and discuss student-learning experiences.

B. PRECEPTED NURSING STUDENTS
   1. Undergraduate and graduate precepted learning experiences are requested using the Student Placement Form located on NSW. Placements are made on an individual basis each semester and schools are not allowed to substitute students once placement has been completed. Deadline due dates are located on the NSW
   a. A copy of the course description should accompany the request for placement. A student profile including the student information form, student contact information and student availability is required to facilitate efficient placements.

C. Children’s reserves the right to decline clinical educators or placement of students.

II. CLINICAL EDUCATOR/FACULTY

A. ORIENTATION
   1. Clinical educators are required to orient to the unit/department where they will be teaching students. Orientation is arranged through the UBCNS or Patient Care Manager/Department Manager and the number of hours required to orient will be determined among the clinical educator, the UBCNS and the APN/SON liaison.
   2. All clinical educators need to complete and annually update the ‘Clinical Educator: Orientation and Skills Checklist’ located on NSW and return the form to the DAPN. Clinical educators are expected to remain proficient with the skills appropriate for their unit placement.
a. Clinical educators who need to review of any of the necessary skills for the unit will contact the UBCNS for additional orientation prior to the beginning of the semester.
b. Clinical educators are responsible for maintaining competency and adhering to current policies and procedures prior to the delivery of patient care
c. Clinical educators who are validated in central line care and management may supervise students. Clinical educators/students cannot insert or remove a Huber needle from a port.

3. Clinical educators need to complete education to orient to the electronic health record as well as the automated medication dispensing system. After completion of education, they will be given temporary, limited access to these systems. Clinical Educator Update meetings are provided at the beginning of each semester and are mandatory for all clinical educators.

4. Clinical educators need to complete Point of Care Testing (POCT) annually.

5. For concerns or issues relating to nursing students or clinical educators the nurses are encouraged to communicate with their unit leadership as well as the clinical educator. If concerns or issues persist they should contact the APN/SON liaison.

B. CLINICAL GROUP GUIDELINES
1. Prior to making student assignments clinical educators should consult with the unit charge nurse. Clinical educators need to assure that subsequent charge nurses are aware of student assignments by having a list available.

2. Clinical educators need to remain on the clinical unit at all times during the clinical session except for brief break periods.

3. Clinical educators are not required to be present during prep time but need to provide the student a contact number to call for any questions/concerns that may occur.

4. Clinical educators are responsible to review and co-sign student documentation before the conclusion of the clinical session. In certain instances it may be appropriate for another licensed clinical professional to co-sign in lieu of the clinical educator.

5. Staff nurses should contact the clinical educator as soon as possible with any questions or concerns about an individual student or the care provided.

C. ALTERNATIVE LEARNING EXPERIENCE GUIDELINES
1. These are optional alternative experiences and are dependent on unit ability to accommodate these experiences. There may be clinical semesters that this is not an available opportunity for students.

2. Clinical Educators may request alternative learning experiences for their students by completing the Alternative Experience Request Form found on the NSW. Information will be available on the NSW when this is an available opportunity. The Alternative Experience request form must be completed 2-4 weeks prior to the experience.

3. Clinical educators are encouraged to schedule these learning experiences throughout the clinical semester. Units/departments may not be able to accommodate multiple requests at the end of a quarter/semester.

4. Clinical educators will require all students to have written learning objectives recorded on the Alternative Learning Experience Request Form and to prepare for the alternative learning experience (e.g. reading, reviewing procedures, and reviewing appropriate policies).

5. All units and departments reserve the right to decline a request as well as reserve the right to dismiss the student.

6. Clinical educators need to assure that staff has the contact information for the student and the clinical educator.
D. PRECEPTED LEARNING EXPERIENCE GUIDELINES

1. Precepted nursing students work under the direct supervision of a Children’s nursing preceptor.
2. Preceptor faculty is not required to be on-site during the student’s precepted learning experience but must provide accurate contact information to the student, the pediatric preceptor and the UBCNS.
3. School/Faculty should provide the following information to the appropriate unit/clinic leadership and the nurse preceptor:
   a. Learning objectives
   b. Student profiles, including student contact information
   c. Preceptor expectations
4. Preceptor faculty need to provide the student and the preceptor a contact number to call for any questions/concerns that may occur.
5. Children’s employees cannot sign school contracts or letters of agreement.
6. Children’s employees cannot accept additional payment for precepting nursing students.
7. Preceptor faculty should complete an onsite visit within the first week of the precepted experience and at least twice during the remaining precepted experience.

III. NURSING STUDENTS

A. ORIENTATION

1. Prior to a clinical experience at Children’s nursing students must have completed an in-hospital acute care clinical rotation.
2. Nursing students are required to have completed pediatric theory or be receiving this theory concurrently with the clinical practicum experience.
3. Nursing students are required to review the orientation information that is located on the NSW and return the form to the DAPN.
4. Nursing students are required to attend mandatory training for the electronic health record.

B. GUIDELINES

1. Undergraduate nursing students must wear their school uniform.
2. Nursing students must wear their school ID, and Children’s student ID while providing patient care.
3. Nursing students placed in areas that require specialized attire (i.e. surgery) must comply with that department/units attire requirement.
4. When students are on-site for their clinical prep time or are attending an educational event they may wear appropriate dress casual (no jeans) according to the Children’s dress code as well as a lab coat, their school ID and their Children’s student ID.
5. Students must follow the Children’s dress code policy as found on the NSW.
6. All documentation must be co-signed by the clinical educator or nursing staff/preceptor. When appropriate a licensed clinical professional may also co-sign. The co-signature indicates the clinical educator, nursing staff or licensed clinical professional has reviewed and discussed the documentation completed by the student.
7. Nursing students may administer medications within the restrictions described in the Patient Care Policy and Procedure: **Medication Administration**.

   Nursing students may not administer:
   a. IV push medications
   b. Chemotherapy
   c. Coagulation factors
   d. Experimental drugs
   e. Narcotics
   f. Vasopressors
   g. Vasodilators
   h. Inotropes
   i. Oral/IV KCL bolus

8. Students may not:
   a. Take verbal/telephone orders
   b. Acknowledge orders
   c. Obtain consent from patients/families
   d. Double check or administer blood and/or blood components
   e. Insert or remove a Huber needle from a port.


C **PRECEPTED LEARNING EXPERIENCES**

1. Precepted nursing students work under the supervision of a preceptor.
2. The nursing student must provide accurate contact information to the preceptor during the preceptorship.
3. Prior to their preceptorship the nursing student needs to complete the required orientation forms located on the **NSW** and return to the DAPN.
4. Precepted nursing students must contact their preceptor to arrange orientation and schedule.

D **ALTERNATIVE LEARNING EXPERIENCES**

1. All nursing students will have written learning objectives recorded on the Alternative Student Objectives and Evaluation Form as found on the **NSW** and to prepare for their alternative learning experience (e.g. reading, reviewing procedures, and reviewing appropriate policies).
2. All units and departments reserve the right to dismiss the student if the student does not appear motivated or prepared.

Approved by Joint Clinical Practice Council 05/2013