TSHMC Patient Care Area Expectations of Nursing Instructors and Students (Clinical and Observation) (04-2019)

Instructor Responsibilities	
	ocumentation and instructor and student orientation leeann.hanna@hcahealthcare.com
М	leet with Nurse Manager PRIOR to start of clinical rotation to discuss the following:
S	chedules
•	Dates
	Times (hours)
Α	ssignments (Observation students should be assigned to specific staff members.)
•	Clinical year of nursing students (AD – first or second and BS – third or fourth)
	Number of nursing students
	Names of nursing students
•	Objectives
•	Tasks students may perform independently, with supervision or not at all
•	How assignments are made (acuity, medication administration and discharges)
•	How assignments are posted on the patient care unit (planned and unplanned)
•	Student Medication Administration Process
N	lote : It is the expectation instructors will have the patient assignments made for students the
	ight before their clinical rotation.
С	ommunication:
•	Clinical Instructor contact information
•	Patient care unit contact information
•	Schedule changes
•	Confidentiality
•	Assignments (communicate to Charge/Staff in writing and regularly throughout the shift)
•	Report (oncoming and outgoing)
•	Problem resolution (Chain – of – Command)
•	Required paperwork on file in the Education Department
	eview mission and philosophy (organizational and/or departmental)
	eview HEART values and Evidence Based Care Tactics
R	eview patient population
D	epartmental expectations
•	Clinical Instructor is knowledgably about patient population
•	Clinical Instructor is able to educate students concerning use of Meditech and BCMA (eMAR)
•	Comply with departmental shift reporting processes (bedside report).
•	Clinical Instructor remains on the patient care unit at all times with nursing students
•	Clinical Instructor_remains_actively <u>engaged</u> and seeks out other learning opportunities during
	ne clinical hours on the unit. Minimal time spent sitting in the conference areas working on
	atient care plans. No time spent sitting in the conference areas working on other school work.
•	Follow the Student Medication Administration Process Checklist
•	Use of Vitals Now to take and record all vital signs and LOC (drives the MEWS score)
•	Communicate concerns or issues directly with Nurse Manager
•	Dressed appropriately at all times (professional) Use of personal communication devices in patient care areas and during "work time" is
· n	rohibited.
P	Personal effects (bags, books and refreshments) put away during clinical hours
	Departmental Specific Patient Care Expectations
	Pharmaceutical Waste Program
	linical Instructor expectations
•	Communicate concerns or issues directly with Clinical Instructor
	Expectations of nursing staff
	our of department and Safety Scavenger Hunt
	Computers nursing students may use to obtain information for clinical assignments
	Location students may sit to work on clinical assignments
	Location of are and post conference

Location of pre and post conference

Contact Nurse Manager **PRIOR** to finish of clinical rotation to discuss the following: Evaluation Clinical Instructor Nursing Student Clinical site **Student Responsibilities (facilitated by clinical instructor)** Meet with Clinical Instructor and Nurse Manager PRIOR to start of clinical rotation to discuss the Review mission and philosophy (organizational and/or departmental) Review HEART values and Evidence Based Care Tactics Departmental expectations Student expectations Communicate concerns or issues directly with Clinical Instructor Comply with departmental shift reporting processes. The students remain actively engaged and seek out other learning opportunities during the clinical hours on the unit. Minimal time spent sitting in the conference areas working on patient care plans. No time spent sitting in the conference areas working on other school work. Follow the Student Medication Administration Process Checklist Function as a member of the patient care team (asking other members if they need help) No printing or copying of the medical record for any reason other than nursing task list. Nursing task list must be discarded appropriately **BEFORE** leaving the medial center. Dressed appropriately at all times (professional) Use of personal communication devices in patient care areas and during "work time" is prohibited. Personal effects (bags, books and refreshments) put away during clinical hours Assignments Objectives Tasks students may perform independently, with supervision or not at all How assignments are made (acuity, medication administration and discharges) How assignments are posted on the patient care unit (planned and unplanned) Communication: Instructor contact information Patient care unit contact information Schedule changes Confidentiality Report (oncoming and outgoing) Problem resolution (Chain – of – Command) Tour of department Computers nursing students may use to obtain information for clinical assignments

Nursing Students MAY NOT DO THE FOLLOWING:

Location of pre and post conference

- Administer Blood And Blood Products
- Have Access To Narcotic Kevs
- Take Physician Telephone Or Verbal Orders
- Change central line dressings and/or discontinue central lines (includes instructors)

Location students may sit to work on clinical assignments

Observation Nursing Students MAY DO THE FOLLOWING:

- Take vital signs
- Provide nursing care specific to activities of daily living (ADLs)

Observation Nursing Students MAY NOT DO THE FOLLOWING:

- Administer Medications
- Provide Treatments

Safety Scavenger Hunt

Environment of Care:

- Emergency Code Response: Report to charge nurse and/or instructor
- Evacuation Routes from your work area
- Eyewash stations closest to your work area
- ☐ Electrical Boxes and Medical Gas Boxes (nothing within 3 feet)
- ☐ Fire Pull Boxes and Extinguishers nearest your work area (nothing within 3 feet)
- □ Safety Data Sheets access information
- □ Path of Egress (Location of lighted EXIT signs)

Infection Prevention

- □ Use of Sani Cloths
- ☐ Clean supply areas, equipment storage areas, procedural areas, nutritional areas
- □ Dirty supply areas, equipment storage areas, procedural areas, nutritional areas
- ☐ Linen covered (flap down)



DISINFECTING: To disinfect nonfood contact surfaces only: Use a wipe to remove heavy soil. Unfold a clean wipe and thoroughly wet surface. Treated surface must remain visibly wet for a full two (2) minutes. Use additional wipe(s) if needed to assure continuous two (2) minute wet wear gloves when you use this contact time. Let air dry.

PERSONAL SAFETY: Please product.