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**Keywords:** clinical experience, clinical group, clinical instructor, clinical instructors, nursing school, nursing student, school of nursing, students


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## **I. INDICATIONS FOR USE**

- A. This policy is used for all nursing students doing clinical group experiences in the JHH Department of Nursing. The Department of Nursing retains ultimate authority and responsibility for patient care and reserves the right to request that a given student experience or project be rejected or withdrawn with due cause.
- B. This policy is used as a reference for orientation and training for Clinical Instructors working with clinical group experiences.

## **II. RESPONSIBILITY**


- A. JHH Department of Nursing Student Coordinator
  1. Work with schools and nurse managers to find clinical placements for students.
  2. Manage affiliation agreements between schools and JHH.
  3. Assure needed documentation is obtained and stored for all students within clinical groups, as well as clinical instructors from the school (i.e via coordinator or designee assigned to clinical compliance).
  4. Acts as liaison to schools in the event of issue or reportable concern presented by student, unit staff or by clinical instructor.
- B. Nurse Manager or Designee
  1. Coordinate with JHH Nursing student coordinator and approved nursing programs to accommodate requested clinical group experiences for students on their unit.
  2. Maintain oversight of quality of patient care provided on unit, and quality of supervision provided students by Clinical Instructor.
  3. Assist in providing needed orientation for clinical instructor.
- C. Nursing School Clinical Instructor

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1. Ensure all required documentation for their student group has been submitted by school coordinator to JHH Nursing Coordinator
  2. Complete Clinical instructor orientation documents (Clinical Instructor Manual, Share-day, Unit Orientation checklist (appendix E), and submit documentation.
  3. Teach, guide, and **directly** supervise care provided by students, utilizing all applicable JHH Nursing policy and educational resources.
  4. Completes Nursing Student Clinical Assignment form before the start of report for each clinical shift. (Appendix H).
  5. Obtains thorough hand-off report from Charge Nurse, or JHH Bedside Nurse assigned to their student's patient assignment. Hand off to occur at the beginning of shift, before breaks and at the end of each clinical shift, or per unit routine.
  6. Ensures high level of communication with nursing student and JHH bedside nurse.
- D. Nursing Student
1. Abide by the clinical practice and student expectations set forth in this policy.
  2. Maintain confidentiality with regard to all patient/staff information gained during the clinical experience.
- E. JHH Bedside Nurse
1. Provide report hand-off to student and/or clinical instructor at start of clinical shift, as well as any changes to orders or plan of care per unit routine.
  2. Collaboratively works with clinical instructor and student to ensure the patient's plan of care is followed, medication is administered in a timely way, and that documentation is complete.

### III. PROCEDURE

- A. Medication administration by students under the direct supervision of a school of nursing faculty or a hospital nurse preceptor is a delegated activity (personal communication, MBON, 2010). Therefore, preceptors functioning in this capacity are held to the standards and accountabilities outlined in the Nurse Practice Act and Regulations for delegated functions (COMAR). [10.27.11.00 Delegation of Nursing Functions Office of the Secretary of State.](#)
1. [10.27.11.03.B. Criteria for Delegation.](#)
    - a. "The delegating nurse retains the accountability for the nursing task.
    - b. A nursing task delegated by the nurse shall be:
      - i. Within the area of responsibility of the nurse delegating the act;
      - ii. Such that, in the judgment of the nurse, it can be properly and safely performed by the unlicensed individual.
      - iii. A task that a reasonable and prudent nurse would find is within the scope of sound nursing judgment
    - c. When delegating a nursing task to an unlicensed individual, certified nursing assistant, or medication technician the nurse shall:
      - i. Make an assessment of the patient's nursing care needs before delegating the task
      - ii. Either instruct the unlicensed individual, certified nursing assistant, or medication technician in the delegated task or verify the unlicensed individual's, certified nursing assistant's, or medication technician's competency to perform the nursing task;
      - iii. Supervise the performance of the delegated nursing task in accordance with Regulation .04 of this chapter
      - iv. Be accountable and responsible for the delegated task
      - v. Evaluate the performance of the delegated nursing task; and
      - vi. Be responsible for assuring accurate documentation of outcomes on the nursing record
  2. [10.27.11.04. A Supervision.](#)
    - a. The nurse shall determine the required degree of supervision after an evaluation of appropriate factors including, but not limited to the:
      - i. Stability of the condition of the client;
      - ii. Training of the individual to whom the nursing task is being delegated;

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- iii. Nature of the nursing task being delegated;
- iv. Orientation of the unlicensed individual, certified nursing assistant, or medication technician to the specific patient environment;
- v. Ability of the unlicensed individual, certified nursing assistant, or medication technician to perform the delegated nursing task in a safe and competent manner; and
- vi. Reevaluation of the client's health status.

**B. Submittal and approval of requests**


1. Requests for clinical experiences (groups) will be made by the academic partner through the [Castle Branch Bridges Request Site](#).
2. The maximum number of students per clinical instructor are:
  - a. Adult units – 6-8 students
  - b. Pediatric units – 6 students
3. Requests are prioritized by Partner status outlined in [Castle Branch Bridges](#).
  - a. Senior Partner (JH SON) can make requests at any time.
  - b. Full Partners (In-state, BSN Nursing programs) make requests based upon the schedule:
    - i. October 15 (or following day if falls on Saturday/Sunday) for Spring/Summer requests.
    - ii. March 15 (or following day if falls on Saturday/Sunday) for Fall/Winter requests.
  - c. Associate Partners (In-state Associate degree, RN programs; out-of-state programs) make requests based upon the schedule:
    - i. November 1 (or following day if falls on Saturday/Sunday) for Spring/Summer requests.
    - ii. April 1 (or following day if falls on Saturday/Sunday) for Fall/Winter requests.
4. Responses to requests depend on availability of clinical units and approval of the nurse manager/designee.
  - a. If two or more schools of nursing make the same or overlapping requests, Johns Hopkins University (JH SON) will be given first priority; alternative placements will be offered to other school(s), if possible.
5. Only requests for clinical experiences at JHH will be coordinated by the JHH coordinator. Requests for student experiences in JHU settings will be referred to the appropriate administrator.

**C. Disposition of Requests**


1. If the request is declined, but alternatives are offered and/or the request is rejected, this information will be delivered to the appropriate school of nursing official as soon as possible by the JHH Nursing Student Coordinator.
2. If the request is approved and there is no continuous agreement in effect, an affiliation agreement will be sent to appropriate officials of the School of nursing for signature.
3. If approval is granted, the clinical instructor, or coordinator/designee of the school of nursing will complete the Nursing Student and Faculty Information Form (Appendix A) and return to the JHH coordinator at least 1 week prior to the experience.
  - a. If there are any changes in the information supplied on Appendix A, (e.g., students' names, dates or times of experience), those changes must be submitted to the JHH coordinator prior to the first day of the experience.

**D. ID badges**


1. A temporary JHH photo identification badge is required for clinical instructors. The clinical instructor may obtain form for photo ID from the JHH coordinator. Photo ID is obtained from the JHH ID office.
2. Students must wear their school ID to gain entry to the Hospital and at all times while in the Hospital.
3. Temporary JHH ID badges may be provided for students doing experiences on off-shifts or weekends, or so that they may access free parking in hospital garages during those times.
4. The following information regarding each student and clinical instructor must be forwarded at least one(1) week prior to the beginning of the clinical experience:
  - a. Nursing Student and Faculty Information Form/Clinical Information Systems (Appendix A)
  - b. Confidentiality Agreement for Students (Appendix G).

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- c. Verification of training completion including Epic training and review of Infection Control for Nursing Students.
  - d. Completion of Clinical Waiver and Release (Appendix C)
  - e. Copy of TB Status (negative PPD upon admission to program, or negative CXR). May be asked for updated screening if indicated.
  - f. Proof of hepatitis B vaccination or signed declination form.
  - g. Proof of bloodborne pathogen safety and HIPAA training
  - h. Proof of MMR vaccination and demonstration of varicella immunization/vaccination
  - i. Proof of Flu vaccine by December 1 of each year.
  - j. A copy of or written verification from school of nursing official of a certificate of liability insurance.
  - k. Current Maryland license number and expiration date for faculty members.
  - l. Background check within past 12 months
  - m. Drug Screen (min 9 panel) within past 12 mos.
5. Parking for students and clinical instructors:
- a. Students and faculty assume full responsibility for parking fees.
  - b. No provision is made for reduced rate parking for students/faculty, other than as mentioned in item 3 (above).
6. Full Student Compliance documents and requirements are also located on [Student Clinical Placements Webpage](#)
- E. Affiliation agreement
1. The following requirements are essential in any agreement between The JHH and a school of nursing and must be stated in the written contract.
    - a. Personnel of JHH retain ultimate authority and responsibility for patient care.
    - b. The visiting agency will abide by existing policies, regulations, procedures and standards of practice of JHH.
    - c. Students will be tested for cause if there is evidence of substance abuse according to JHH policy and procedure.
    - d. Students will have bloodborne pathogen and HIPAA training in accordance with federal regulations.
    - e. Students will have received hepatitis B vaccination or signed declination form.
    - f. Students will show demonstration of varicella immunization/vaccination.
    - g. All students and clinical faculty must show demonstration of annual flu vaccine.
  2. The contract must be signed by a representative of the legal department or the Vice President for Nursing at JHH, and the school official responsible for clinical affiliations.
  3. A renewal of the written agreement between JHH and each school of nursing is required every 5 years. This renewal may be done via written letter from the school of nursing.
- F. Clinical Instructor orientation includes:
1. Completion of Initial Competency for Clinical Instructors (to be completed first time teaching at JHH, or if returning after an absence of 1 year or more (Appendix D).
    - a. Complete the course entitled JHH Clinical Instructor Orientation Manual.
    - b. Meet with unit nurse manager, educator or unit designee, to discuss expectations, unit standards and routines (Review Appendix H)
    - c. Share a shift with an RN on the nursing unit.
      - i. New Instructors (new to JHH) complete 4-8 hours share-time at minimum, or more if recommended by unit.
      - ii. JHH RN, or returning instructors who are returning to unit after absence of one year or more, complete 2-4 hours at minimum, or more if recommended by unit.
    - d. Complete the Ongoing Unit-based Competency for Clinical Instructors (Appendix E) (Annual Requirement)
    - e. Complete other required training (e.g., Inpatient RN Epic Course, HIPAA, BBP training)
- G. Clinical practice and expectations for Clinical Instructors and Students:

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1. The Clinical Instructor responsible for the instruction and supervision of the students will consult with the nurse manager, charge RN or unit designee of the clinical unit prior to planning the student's experience/patient assignments.
2. Clinical Instructors will create student assignment each clinical day using standardized Nursing Student Clinical Assignment (Appendix B) and leave at designated area on clinical unit (nurses station, charge RN etc.) for storage with RN assignment per hospital procedure.
3. JHH reserves the right to cancel student experiences if students are not accompanied by an instructor or if the Clinical Instructor supervision is deemed inadequate.
4. Students and Clinical Instructors will maintain confidentiality with regard to all patient/staff information gained during the experience.
5. Role Clarification: Clinical Instructors who are also current JHH RN's will need to ensure high levels of role clarification when on unit with nursing students as they are representatives/employees of the designated school, not JHH. They are expected to follow guidelines outlined in this policy and in the JHH Clinical Instructor Manual to ensure to practice within the scope of a Clinical instructor and not within the scope of their RN position for JHH.
6. Undergraduate/Pre-licensure Nursing Students MAY:
  1. Medications:
    - a. Clinical Groups with Clinical Instructors: Medications may be given by undergraduate/Pre-licensure nursing students in a clinical group setting **ONLY** when an on-site nursing Clinical Instructor directly supervises (is at the elbow of) the student performing each step of the medication administration process. The Clinical Instructor can only directly supervise administration of medications in accordance with the scope and competency for that Clinical Instructor.
      - i. Clinical Instructors and clinical group students may administer all medications **except**:
        - IV push medications ([see PAT030 Intravenous Push \(IV PUSH\) Medications, Adult](#))
        - Antineoplastics (may administer those exempt from [MDU001 Chemotherapy Prescribing, Dispensing and Administering](#))
        - Initiate, titrate/wean PCAs
        - Initiate, titrate/wean continuous IV medication infusions
    - b. The student documents medication administration in Epic and the Clinical Instructor will cosign the students' signature for each medication administered
    - c. The Clinical Instructor will be assigned a temporary Pyxis password each day. The Clinical Instructor can sign the controlled substance out of Pyxis and directly supervise the student administering it.
    - d. May act on verbal orders.
      - i. On Pyxis Complete units, the Clinical Instructor or will withdraw all medications for the student to administer.
  2. General Expectations and Cares
    - a. Document nursing care, including assessments, notes, flow sheets, medication administration records. Documentation must be reviewed for accuracy and cosigned by Clinical Instructor prior to the students leaving the nursing unit.
    - b. Documentation is to be complete in Epic by a within a pre-determined timeframe communicated by Clinical Instructor and per unit standards. ([CNDPI00- Nursing Documentation Process Standards](#)).
  3. The student and/or Clinical Instructor must give a verbal report to the responsible nurse prior to leaving the nursing unit, including any and all breaks, and at end of shift.
  4. Perform point of care testing, including blood glucose monitoring, under the direct supervision of the clinical instructor who has been trained and who has passed the JHH test/skills validation.
  5. Clinical groups of students and instructors must limit involvement in code or Rapid response situations on units. Please do not allow more than 1 student to observe in the room(if applicable), and please provide students to observe at a safe distance.

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6. Nursing students in a clinical group setting are **not** permitted to: (please also refer to each unit and/or department if there are any other exclusions specific to the department not included on the list below).
- Take verbal orders.
  - Initiate/implement restraints.
  - Scrub in during surgical procedures.
  - Administer blood Products and component
  - Perform central line care (dressing changes, tubing change, clave changes). May administer medications through central lines.
  - Interpret Telemetry strips and act on findings

#### **IV. REPORTABLE CONDITIONS**

- Any positive drug screen results of students who are not JHH employees will be reported to their school of nursing.
- JHH reserves the right to cancel student experiences (Clinical group) if students are not accompanied by an instructor or if clinical instructor supervision is deemed inadequate.

#### **V. SUPPORTIVE INFORMATION**

**Sponsor:**

- Core Routine Workgroup - Practice

**Developers:**

- JHH Dept of Nursing, Nursing Student Placements Coordinator
- JHH Dept of Nursing, Program Director, Nursing Education
- Clinical Representatives from all departments within Nursing, Participants in Nursing Student policy revision community.

#### **VI. SIGNATURE**

<b>Electronic Signature(s)</b>	<b>Date</b>
Deborah Baker Vice President of Nursing and Patient Care Services, The Johns Hopkins Hospital	11/18/2019