

# Children’s Hospital and Health System Patient Care Policy and Procedure

This policy applies to the following entity(s):

Children’s Hospital and Health System

## **SUBJECT: Nursing Students**

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### DEFINITIONS

Academic Institution: An accredited college or school of nursing which has a current affiliation agreement with Children’s Wisconsin.

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

Graduate Nursing Student: Registered nurse (“RN”) who is pursuing an advanced nursing degree at an accredited college or university

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 (For Milwaukee only): Group of senior level nursing students who are assigned to a specific unit/clinic and are under the supervision of a clinical educator/faculty from an accredited school of nursing. The clinical educator/faculty must be in-house and available at all times.

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Precepted Learning Experience: An extended number of clinical hours whereby senior-level or graduate level nursing students are linked with preceptor(s) to learn the role of the pediatric nurse. Alternately, a student taking a community health class may be matched with a preceptor to learn more about the role of a community health nurse.

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 (“CE/F”): RN who is either employed by Children’s or an academic institution that provides education and supervision for a group of nursing students assigned to a specific unit/clinic or department.

Preceptee Faculty: RN employed by an academic institution 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.

Schools of Nursing (“SON”) Department The department that manages clinical education for nursing students. 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 Nursing Student Education, the APN Clinical Educator/School of Nursing Clinical Liaison (“APN/SON” liaison) and the Student Placement Coordinator (“SPC”). **(For Milwaukee only)**

Nursing Student Website (“NSW”): The website contains updates, forms, checklists, unit descriptions, and orientation information for staff, nursing faculty and nursing students to aid in coordination, placement and education. The website location: <https://childrenswi.org/medical-professionals/careers/students/nursing-education>

## **POLICY**

Education is included in the Children’s Wisconsin mission: CARE- Caregiving, Advocacy, Research, Education. As a teaching institution, Children’s Wisconsin is committed to providing educational opportunities for nursing students. Nursing students attain unique pediatric knowledge and skill through working with children and families in a supervised clinical environment. Nursing students and CE/F must adhere to the Children’s Policy and Procedures in the delivery of patient care. The procedures outlined in this P&P for clinical groups and preceptorships are required to maintain a consistent standard of practice. 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/faculty, and nursing student will assure that children and

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families continue to receive the best and safest care.

## **PROCEDURE**

### **I. STUDENT PLACEMENT**

#### **A. CLINICAL GROUP (For Milwaukee only)**

1. The SON Department is responsible for the placement of nursing students within Children's Wisconsin.
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, match of unit experiences with course objectives, clinical hours (minimum of 48 hours), availability of units/clinics and match of clinical educator competencies to the unit/clinic.
3. The school must submit 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 CE/F must have clinical care competency on the unit they are teaching and complete the orientation check list found on the NSW and return it to the SON department by the first week of clinical.

#### **B. PRECEPTED NURSING STUDENTS**

1. Undergraduate and graduate precepted learning experiences are requested using the Student Placement Form. Placements are made on an individual basis each semester and schools are not allowed to substitute students once placement has been completed.
  - a. A student profile including the student information form, student contact information and student availability (minimum of 48 hours) is required to facilitate efficient placements.

#### **C. Children's reserves the right to decline clinical educators/faculty or placement of students.**

### **II. CLINICAL EDUCATOR/FACULTY**

#### **A. ORIENTATION (For Milwaukee only)**

1. CE/F are required to orient to the unit/department where they will be teaching students. Orientation on the unit is arranged through the Unit Based Clinical Nurse Specialist ("UBCNS") or Patient Care Manager/Department Manager. The number of hours required to orient will be determined among the CE/F, the UBCNS and the APN/SON liaison. CE/F are also expected to orient with the APN/SON liaison prior to starting their clinical.
2. CE/F need to complete and annually update the Clinical Educator by doing the following:
  - a. Completing the Children's Clinical Educator Agreement located on NSW and

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- return the form to the APN/SON clinical liaison. This is done on an annual basis.
- b. CE/F are expected to remain proficient with the skills necessary for their unit placement.
  - c. CE/F who need to review any necessary skills for the unit will contact the UBCNS or APN/SON for additional orientation prior to the beginning of the semester,
  - d. CE/F are responsible for adhering to current policies and procedures.
3. CE/F need to complete education 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.
  4. Attend the Clinical Educator Update meetings held at the beginning of the semester. These meetings are mandatory for all CE/F.
  5. For concerns or issues relating to nursing students or CE/F staff is encouraged to communicate with their unit leadership as well as the CE/F. If concerns or issues persist they should contact the APN/SON liaison.
- B. CLINICAL GROUPS (For Milwaukee only)**
1. CE/F should consult with the unit charge nurse prior to making student assignments. The CE/F also needs to assure that subsequent charge nurses are aware of student assignments by having a list available.
  2. CE/F need to remain on the clinical unit at all times during the clinical session except for brief break periods.
  3. CE/F 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 CE/F.
  4. Staff nurses should contact the CE/F as soon as possible with any questions or concerns about an individual student or the care provided.
  5. In the event that a Safety Event occurs, communication with the staff nurse is required and a Safety Event report completed with notification of unit leadership and the APN/SON liaison.
  6. Only in the event of unit low census and/or increased number of unit orientees, the instructor may identify learning opportunities within their own units or on units that may not have clinical groups on that given day. Examples of these opportunities are:
    - a. (first option) - Unique unit staff roles (inpatient case manager, charge nurse, etc.)
    - b. (second option) - Shadow staff nurse on alternate unit
    - c. (lastly) - Shadow specialty nurse role (g-tube clinician, wound/skin specialist, etc).
  7. Students are able to sit on the unit after completing the sitter orientation in-service.
- C. PRECEPTED LEARNING EXPERIENCE (Milwaukee, Fox Valley, SGM, Community Health School Nurse Program)**
1. 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
    - d. For Community Health School Nurse Program, a signed copy of the Memorandum of Understanding with Milwaukee Public Schools must be

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provided.

2. The staff nurse/preceptor provides the supervision for the nursing student.
3. Preceptor faculty is not required to be on-site during the student's precepted learning experience but must provide accurate contact information (including phone contact) to the student, preceptor and the unit leadership.
4. Children's employees cannot sign any school contracts, letters of agreement, evaluation forms or school documents, however, they can provide verbal feedback to CE/F for evaluation purposes.
5. Children's employees cannot accept additional payment for precepting nursing students.
6. Ongoing communication by the clinical faculty with the preceptor is strongly recommended throughout the clinical practicum.
7. For concerns regarding student placement or issues the preceptor should contact their unit leadership and clinical faculty from the School of Nursing. In Milwaukee information will also be shared with the APN/SON liaison.

### **III. NURSING STUDENTS**

#### **A. ORIENTATION**

1. Senior level nursing students (final two semesters) are required to have completed pediatric theory or be receiving this theory concurrently with the clinical practicum experience.
2. For placement with the School Health Nurse, students may be enrolled in a community health course with concurrent practicum experience.
3. Nursing students are required to complete the orientation information that is located on the NSW and return the student orientation checklist to the APN/SON Nursing students are required to attend training for the electronic health record.

#### **B. CLINICAL GROUPS AND PRECEPTORSHIPS**

1. Undergraduate nursing students must wear their school uniform and CHW ID.
2. Graduate level nursing students must wear their CHW student ID and/or school ID.
3. Students must follow the Children's personal appearance policy as found on the NSW.
4. All documentation must be co-signed by the CE/F or nursing staff/preceptor. When appropriate a licensed clinical professional may also co-sign. The co-sign indicates that the documentation completed by the student has been discussed and is accurate.
5. Prior to their clinical experience the nursing student must complete the required orientation and return the student orientation checklist located on the NSW to the APN/SON
6. Precepted nursing students must contact their preceptor to arrange orientation and schedule for preceptor hours.
7. The nursing student must provide accurate contact information to the preceptor during the preceptor ship
8. Precepted nursing students work under the supervision of a preceptor.

#### **C. Medications:**

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1. Within the restrictions described in the Patient Care Policy and Procedure: Medication Management nursing students **MAY ADMINISTER CERTAIN MEDICATIONS under direct supervision of the staff nurse and/or clinical instructor.**
  2. Within the restrictions described in the Patient Care Policy and Procedure: Medication Management Patient Care Policy and Procedure: Medication Management, **NURSING STUDENTS MAY NOT:**
    - a. Administer:
      - IV push medications (exception: saline)
      - Chemotherapy
      - Coagulation factors
      - Investigational drugs
      - Vasopressors/Inotropes
      - Enteral/IV KCL bolus
    - b. Double check any medications requiring a double check/verification
- D. Blood or blood components
1. **NURSING STUDENTS MAY NOT:**
    - a. Administer blood components
    - b. Double check blood products requiring a double check/verification
- E. Other interventions:
1. **NURSING STUDENTS MAY NOT:**
    - a. Take verbal/telephone orders
    - b. Acknowledge orders
    - c. Obtain consent from patients/families
    - d. Transport patients without hospital staff, with the exception of discharged patients.
    - e. Perform Point of Care Testing (**Fox Valley**)

#### **IV. GRADUATE NURSING STUDENTS**

- A. Graduate nursing students seeking organizational support for projects required to complete their degree, such as capstone projects, shall consider the following:
  1. The proposed project should be vetted with the student's school advisor to ensure that the project meets the course objectives.
  2. The mentor should review the project should consider the following factors:
    - a. Is the scope of the project realistic and relevant, considering unit/department circumstances, the timeline the student has to complete the project?
    - b. Does the project address a unit and/or organizational need?
    - c. Is the project sustainable?
  3. If the student and mentor feel the project is feasible and could be conducted in the unit:
    - a. The project needs to be presented to operational leaders for approval. This approval should be documented, either via an email or within meeting minutes. If operational leaders agree that the mentor has the authority to approve the project, this can be stated in the email documentation.
    - b. Evaluate whether the project is Evidence-based Practice (EBP) or Quality Improvement (QI).

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- i. If EBP:
  - 1. [A Human Subjects Research Determination Form](#) (on Children's Connect) needs to be completed and sent to the Institutional Review Board.
  - 2. Submit to the Evidence-Based Practice Specialist (Department of Nursing Research & EBP) for review.
- ii. If QI: Submit to the Director, Quality & Performance Improvement for review.
- iii. If the student is involving staff with a survey or another type of evaluation, it needs to be reviewed by the Director, Human Resources, who will collaborate with the Chief Nursing Officer for approval.
- c. It is recommended that the mentor, the student, and the student's faculty advisor meet. During the meeting, discuss each individual's role.
  - i. Determine whether the school has an outline of expectations for student mentors.
  - ii. Determine the student's faculty advisor's role, including:
    - 1. Evaluation of how the project is progressing.
    - 2. Whether the student meets with the faculty advisor on a regular basis for mentoring.
    - 3. Clarity around expectations for the mentor's time.
- 4. Upon completion of the project, it is recommended that the student disseminate key findings/next steps to unit leadership and the unit.

#### **RELATED POLICIES AND PROCEDURES**

Blood and Blood Components: Verification Procedure, Administration and Monitoring

[Cytotoxic Agents - Antineoplastic Agents - Chemotherapeutic Agents](#)

[Medication - Controlled Substances](#)

[Medication Management](#)

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