Checklist for Nursing Instructors – Capstone/Leadership Experience – December 2016

The following checklist is to assist you in preparation for sending pre-licensure nursing students to North Memorial for clinical experience.

Prior to Student Arrival – Please ensure the below listed items have been done prior to sending students to North Memorial for clinical experience:

- **Background Clearance** – Students have obtained background clearance and are eligible to have direct contact with customers/patients. Fingerprints and a photograph are now required to obtain Minnesota background clearance. Contact North Memorial Human Resources with questions 763-581-2970.

- **Health Requirements – Immunizations** – Students are in compliance with North Memorial health policies (see page 5 of this document for policies).

- **Orientation for Students to North Memorial** – Students have reviewed North Memorial orientation materials. The Power Point presentation of North Memorial orientation materials is available on the TCCP website - See Student/Faculty Prep.

- **Student Nurse Standard Work - Signed Acknowledgement Form** has been submitted to Lou Ann Setter, Professional Practice, Development and Education Department Louann.setter@northmemorial.com. The Acknowledgement Form is located on the final page of the Student Nurse Standard Work document.

  The Form should be signed only after all Scope of Practice documents – job description, policy, standard work and guidelines have been read by the student. All Scope of Practice documents are available on the TCCP website – See Student/Faculty Prep.

- **Epic access has been requested for students** - 3 Weeks Prior to Student Arrival or sooner

  There are 3 parts to request Epic access for students
  1) A Service-now request is submitted to North Memorial IT by the school
  2) The student reviews the Epic training materials and takes a test
  3) Student’s test score is placed on the IT Acknowledgement and Consent Form and the form is faxed to North Memorial’s IT Department

  (See instructions on page 3)
Student information, as listed below, has been provided to ID Badge Office & Lou Ann Setter in Professional Practice, Development and Education - **3 Weeks Prior to Student Arrival or sooner**

- List of student names
- Faculty/Instructor name
- Contact person @ school (person who can answer questions/provide clarification)
- School name
- Start and end date of clinical rotation
- Nursing unit for clinical rotation
- Graduation date for each student

**Louann.Setter@northmemorial.com** - #763-581-4745 - Professional Practice, Development and Education

**IDBadgeRequests@northmemorial.com** - #763-581-2289 - ID Badge Office, Carole Olson

Contact has been made with North Memorial Nurse Manager – see TCCP website for contact list – **Student/Faculty Prep**

**Note:** The Nurse Manager will select a mentor for your student. It is important to make contact with the Nurse Manager a few weeks prior to the start of the clinical experience to ensure all details/questions are addressed.

**See Additional Information and Directions on the Following Pages:**

Page 3 – Requesting Epic Access

Page 4– What Students and Faculty Need to Know Prior to First Day of Clinical Experience

Page 5 – Health Policies

Page 6 – Unit Safety Orientation Checklist for Students and On-Site Faculty
**REQUESTING EPIC ACCESS**

3 Weeks Prior to Student Arrival (or sooner)

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**Epic Access**

**Epic Training Materials**

_____ Students have reviewed Epic training materials

**Note:** In June 2016, your program was sent updated Epic training materials, an Epic assessment/test, answer key, and the IT Acknowledgment and Consent form. If you do not have these materials, contact the Professional Practice, Development and Education Department at 763-581-4745.

_____ Students have tested out on materials

**IT Acknowledgement and Consent Form**

_____ The following has been done:

- Student’s Epic test score has been placed on the IT Acknowledgment and Consent Form
- Student has signed the form
- The student’s full name has been printed in large letters at the top of the form prior to faxing. **Note:** This is important as some faxed forms received by the IT department are difficult to read.
- The form has been faxed to 763-520-4322.

- **Note:** It is helpful to the IT Department if you indicate on the form if the student has previously had Epic access at North Memorial.

**Service-now Request**

_____ A Service-now request has been submitted to North Memorial. The Service-now request provides information enabling the IT Department to set up student(s) with Epic access – [https://northmemorial.service-now.com/](https://northmemorial.service-now.com/)

See directions for using Service-now on the TCCP website – Faculty Prep.

**Note:** Even after the IT Department has set up a student with Epic access, access will not be “activated” until the IT Acknowledgement and Consent form has been faxed. IT must be able to read the student’s name on the form.

**Student Epic Access # (S#) and Login Information**

_____ The student has been given his/her S# (Epic ID #)

The individual at the school responsible for submitting the Service-now request will receive the student’s Epic access number and Epic login information from the IT Department. The Service-now requester will receive the following e-mail notification:

“Your North Memorial Service Request for RITM000000 is complete”.

Go into the completed Service-now request where you will see the student’s assigned S#.

**Note:** It is critical to give each student his/her personal Epic access number (S#) and login information prior to the start of the clinical experience.

**First time login to Epic:**

See instructions posted on the TCCP website – Faculty Prep or page 3 of this document
What Students Need to Know Prior to the First Day of Clinical Experience:

Epic Access ID Number – S# number has been provided to student
The IT Service Desk is not able to provide login information to students.
The temporary password that should be provided to students is:
S# + last name + first initial of first name (in lower case) e.g. S00000doej

North Memorial Student ID Badge Requirement -- Students have been informed a North Memorial student ID badge is required and that ID badges must be turned into the ID Badge Office at the completion of the clinical rotation.

ID Badge Office Hours:
Call to confirm office hours prior to coming in for the ID Badge

ID Badge Office #:
763-581-2289

Parking Information – Students have been given parking information
Students should park at the Terrace Mall and take the shuttle bus up to the hospital. Students can wait in the glass bus shelter located in the parking lot or, if the weather is bad, students may wish to wait inside the entrance of the North Memorial Outpatient Center. Shuttle bus pick-up times are every 15 minutes between 5:15 a.m. and 5:15 p.m. Students should not park in spaces designed as customer/patient parking only.

Send with Student the first day of clinical rotation:

Unit Safety Checklist for Students and On-Site Faculty
The assigned North Memorial mentor will review the checklist with the student once the student is on-site – please ask the student to bring the checklist on the first day of clinical rotation.
(See Unit Safety Checklist on last page of this document)
North Memorial Health Policies for Student and Faculty

Health requirements for faculty and students who provide direct care or interact with staff in customer/patient areas:

- rubella and rubeola immunity
- negative tuberculin test (mantoux) within the last 12 months or if history of positive mantoux, a negative chest x-ray within the last 12 months. (Should a student convert to a positive mantoux during his/her clinical experience, the college/university must immediately report test result to North Memorial's Team Member Health Center).
- inoculation for tetanus within the last ten years
- annual influenza vaccine administered during the CDC identified flu season which runs October 1 – March 31 (written declination signed by a medical doctor accepted only in cases of medical contraindications)
- completed Hepatitis B series (or written declination)
- history of chicken pox (varicella) after the student's first birthday
Please return this completed document to: Professional Practice, Development and Education Department

**UNIT SAFETY ORIENTATION CHECKLIST FOR STUDENTS AND ON-SITE FACULTY**

| S#: ____________________________ |
| NAME: __________________________ |
| SCHOOL: ________________________ |
| ACADEMIC PROGRAM: ______________ |
| UNIT: __________________________ |

I have reviewed the following required North Memorial Student Orientation materials:
North Memorial Orientation: Student Faculty Clinical Experiences Power Point

- Student  □  On-Site Faculty  □  Sign and Date: __________________________

The below checklist was designed to assist students and their department managers (or designees) or a practicing faculty member on site in reviewing important department information, safety expectations, and unit specific routines.

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<thead>
<tr>
<th>WORK IN TEAMS FOR SAFETY AND REMARKABLE PATIENT CARE</th>
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</thead>
<tbody>
<tr>
<td>1. Socialization to the Unit/Department</td>
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<tr>
<td>• Introductions and work assignments</td>
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<tr>
<td>• Breaks</td>
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<tr>
<td>• Personal Appearance</td>
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<tr>
<td>2. Expectations for collaboration and team work</td>
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<td>3. Work assignment process</td>
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<thead>
<tr>
<th>COMMUNICATE EFFECTIVELY FOR SAFETY AND REMARKABLE PATIENT CARE</th>
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<tr>
<td>1. Handoff process</td>
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<table>
<thead>
<tr>
<th>MANAGE SAFETY RISKS FOR REMARKABLE PATIENT CARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Emergency Management</td>
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<tr>
<td>• Location of emergency equipment (e.g. crash cart)</td>
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<tr>
<td>2. Life Safety</td>
</tr>
<tr>
<td>• Location of fire extinguishers</td>
</tr>
<tr>
<td>• Location of pull stations</td>
</tr>
<tr>
<td>• Annunciator panel (Indicates which room’s smoke detector has been activated. Annunciator panels are located on some main hospital nursing units, not on Atrium units)</td>
</tr>
<tr>
<td>• Equipment for evacuation</td>
</tr>
<tr>
<td>3. Infection Control Issues</td>
</tr>
<tr>
<td>• Importance of hand washing</td>
</tr>
<tr>
<td>• Cleaning of equipment</td>
</tr>
<tr>
<td>• Contact precautions</td>
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<tr>
<td>4. Ergonomic issues</td>
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<tr>
<td>• Special equipment (e.g. lift equipment)</td>
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<tr>
<td>5. Hazardous Substances/Waste specific to the department</td>
</tr>
<tr>
<td>6. Role in reducing security risks</td>
</tr>
<tr>
<td>• Management of patient valuables</td>
</tr>
<tr>
<td>• Storage of personal valuables in the department/unit (e.g. purse)</td>
</tr>
<tr>
<td>7. Patient/Customer Identification Process 2 IDs (name and date of birth)</td>
</tr>
<tr>
<td>8. Preventing Patient/Customer Harm (e.g. fall prevention, etc.)</td>
</tr>
</tbody>
</table>

All of the above items have been reviewed:

Manager/Supervisor or Designee Signature: __________________________

- Student  □  On-Site Faculty  □  Sign and Date: __________________________