Nursing Student Clinical Guidelines

Nursing curriculum design is to have students engage primarily in the classroom and laboratory learning in the earlier semesters (e.g., the first year) with more clinical experiences in their second or third year. Nursing students depend on the clinical experience to apply theory and concepts learned in the classroom to the actual practice of professional nursing.

- Your goal is not to ‘orient them to become independently competent’ – but rather to identify opportunities for them to safely practice and refine nursing skills they have learned up to this time - under the safety of your supervision. They have had education and training in basic and some higher-level skills, but they have not had the clinical experience or time to develop proficiency in the skills.

- The RN Preceptor/Mentor must retain the accountability for assessment, supervision and evaluation of the patient for each skill performed.
  - Some tasks have a higher degree of risk. When the RN is present during the skill performance and something goes wrong, the RN can intervene quickly without untoward effect to the patient.

What are the different education levels of nursing students?

- Junior nursing students – the majority of nursing programs in Minnesota admit nursing students in their junior year. Therefore, clinical groups of junior nursing students are at the beginning stages of their nursing education. Nursing skills and knowledge are at a beginner’s level.

- Senior nursing students – Some senior students have clinical experiences in clinical groups with the instructor on site. Senior students in their final experience prior to graduation will be in a preceptorship or capstone experience.

  - MANE students from METRO State may have an RN license. Even if licensed, they are undergraduate baccalaureate students. They cannot perform any tasks that require licensure. They will be treated as a student not an RN.

What are the differences between Clinical Groups and Preceptorships?

- Clinical Groups – Groups of eight or less nursing students have a clinical experience with an on-site clinical instructor. The students may be junior or senior level nursing students. Therefore, the skills they perform will vary greatly. The clinical instructor should provide the unit with a list of skills/tasks the nursing students will be focusing on for each clinical experience. The clinical instructor will observe/supervise students completing meds and skills, especially for each student’s first time. The clinical instructor is not always available to observe all students performing skills or administering medications. As the RN assigned to the patient with a nursing student, you may be asked to observe/assist/supervise the student performing a skill or administer a medication. You may refuse to assist, however, you, as the RN assigned to the patient, will be required to perform the skill or administer the medication if the instructor is unavailable.

- Preceptorships – as an RN, you frequently will be asked to serve as a preceptor for a nursing student. Nursing students can perform any skill or task you permit under your supervision. Exception: tasks listed below that require licensure for completion. You, as the licensed RN, must retain evaluation of the patient’s condition, and therefore, must be present and supervising all nursing interventions. You may delegate nursing assistant functions to the nursing student, as these do not require direct supervision. If you agree to be a preceptor for a nursing student, PLEASE FREQUENTLY CHECK YOUR ALLINA EMAIL FOR MESSAGES FROM UPCOMING STUDENTS.
Delegation and Supervision of Nursing Activities

The registered nurse who is (supervising) delegating is responsible to:
- Use a thoughtful decision-making process in determining what the student may perform (see box below).
- Provide clear and specific directions.
- Coach on the method of performance, expected results and parameters.
- Supervise the activity using the level of supervision determined necessary (at the elbow vs. down the hall)
- Individualize the plan of care to meet patient needs.
- Evaluate patient outcomes.

The (student) person receiving (supervision) delegation is responsible to:
- Provide cares / treatments only as directed and supervised by the registered nurse preceptor/mentor.
- Follow directions from the registered nurse preceptor/mentor.
- Ask questions if directions are not understood.
- Follow established protocols and guidelines.
- Communicate concerns promptly to the registered nurse preceptor/mentor.
- Report observations and activities to the (supervising) delegating registered nurse.

Supervision versus Delegation

As a Student Preceptor/Mentor, you are supervising – rather than delegating:
- Identify which cares are safe for the student to perform under your supervision
- Determine the level of supervision (“at the elbow, in the room, or down the hall”)
- Use the same criteria you would for delegation in terms of: Potential for harm, complexity of task, problem solving required, unpredictability of outcome, level of patient interaction needed.

How does the RN retain the assessment, supervision and evaluation of a patient?

<table>
<thead>
<tr>
<th>Think Before Delegating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assesses skill strengths &amp; weaknesses of student</td>
</tr>
<tr>
<td>Knows job responsibilities and boundaries of practice of student</td>
</tr>
<tr>
<td>Assesses the patient situation for degree of risk, predictability of outcome related to task &amp; complexity in completing task</td>
</tr>
<tr>
<td>Keeps communication to student clear &amp; complete</td>
</tr>
<tr>
<td>Communication of task to be performed by student contains task expectations</td>
</tr>
<tr>
<td>• Complete instructions</td>
</tr>
<tr>
<td>• Potential problems</td>
</tr>
<tr>
<td>• Parameters to report with rationale</td>
</tr>
<tr>
<td>• Validation of understanding and any clarification if needed</td>
</tr>
<tr>
<td>Determines level of supervision required:</td>
</tr>
<tr>
<td>• At the elbow’ or ‘in the room’ are the ONLY two options for any task that cannot be delegated to a Nursing Assistant.</td>
</tr>
<tr>
<td>Evaluates if task completed and the outcome / condition of patient</td>
</tr>
</tbody>
</table>
What Skills/Tasks are the nursing students allowed to perform?

The list below are tasks a nursing student CANNOT perform. The tasks requires a licensed professional (also applies to MANE students):

- Administer Controlled Substances
- Administer Blood
- Program a PCA pump
- Manage Epidural Infusion, Tubing or Pump Settings
- Do EKG or Fetal Monitoring Interpretation
- Take Verbal or Telephone Orders
- Verify Informed Consent
- Advance the plan of care (must be licensed professional)
- Blood Glucose Monitoring (student would require education and competency verification)
- Double check medications when two RNs are required.

Always refer to site/unit policy and procedures. All other tasks and skills are at the discretion of the clinical instructor or the preceptor assigned to work with the nursing students.

All nursing programs have different curricula for teaching basic nursing skills. Use your own judgment to determine a nursing student’s readiness to perform a new skill by asking if the skill has been practiced in a lab setting and reviewing the students cognitive understanding of the intervention with rationale.

Observation of Restricted Activities: Added Value

Keep in mind that nursing students can learn a great deal by observing experienced RNs carry out the restricted activities list above. Students can enhance learning by following up their observations in a variety of ways such as reviewing the agency policies and procedures related to the activity, reviewing the risks associated with the activity, asking questions to clarify why the activity was carried out in a particular manner, etc.

If you are unclear about the activities that the student nurse may perform – please check with their instructor for guidelines.

If the preceptor is required to float to another unit, should the student follow the preceptor?

This decision requires the judgment call of the preceptor:
- How comfortable/competent does the RN feel on new unit?
- Is there another available preceptor on the home unit that could work with the student for the shift?

The preceptor and charge nurse should ultimately make the decision together based on the above criteria.

What if something adverse happens?

The MN Board of Nursing will ask how the RN retained the assessment, the supervision of care, treatment or task, and the evaluation of the patient for whatever was authorized to be performed by the student.

Follow site procedures for reporting any safety issues or concerns.

What if the student or faculty is injured?

A PATIENT VISITOR SAFETY REPORT should be filled out. Appropriate medical care should be obtained. Students and onsite faculty are not covered under employee health for care. The cost of this care will be billed to the individual’s personal insurance or the school. This applies to any clinical students, including employees of Allina.
Social Networking

Students must be extremely careful what they post on social networking sites. A general rule of thumb is that students NEVER post any information regarding their clinical experience.

Students need to remember to treat all social networking sites as public domain.

• Do not discuss patient information
• Do not post any pictures of patients
• Do not discuss patient cases with classmates
• Do not badmouth classmates
• Do not badmouth healthcare facilities or employees

If you see a posting of unacceptable information on a social networking site by a student, please print a copy of the posting and send to the site Academic Coordinator. The Academic Coordinator will dismiss the student from their clinical experience immediately. The school may request a copy of the posting from the site – this would be used to support the schools’ decision regarding the student’s future academic career.

Cell Phones

• Cell phones are strictly prohibited from being used in the clinical area, except by faculty for student management or in Home Care Services.
• Smart phones may not be used for reference material during the clinical shift.
• Absolutely NO PHOTOGRAPHS may be taken on Allina Health campuses, including selfies.
• No Excellian screen-shots may be utilized even if they are blank and contain no patient information.
• Absolutely NO RECORDING conversations that occur with patients.
• Failure to comply with the above guidelines is a violation of HIPAA and Allina Health policy.
• If a student is found in violation of the policy, disciplinary action and possible legal action may be taken.

See Excellian Documentation Guidelines for documentation

Excellian documentation access issues, call the IS Help Desk as 612-262-1900. Omnicell access issues, call your pharmacy department.

Thank you for sharing your time and expertise with nursing students. Not only is precepting a nursing student rewarding but it helps fill our commitment to the nursing profession in mentoring and developing new nurses.