

Document Owner: Senior Educator / Nurse Clinician	Reviewed By: Clinical Site Prep Committee	Approved By: MGH Director Team
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SCOPE

All units at Maple Grove Hospital hosting Student Nurses.

PURPOSE

Minnesota Statute, section 148.271, provides that students enrolled in a Board of Registered Nurses approved pre-licensure nursing program may practice nursing in Minnesota under the supervision of an instructor. Minnesota Rule 6301.0100 subpart 11 defines faculty as the director and other individuals designated by the controlling body as having ongoing responsibility for teaching or evaluating student learning in the program. Additionally, Minnesota Rule 6301.1700 subpart 1 specifies that whenever a program uses a clinical setting to meet requirements, registered professional nurse faculty members must be responsible for determining clinical learning activities and for guiding and evaluating students in that setting.

The purpose of this policy is to define the scope of practice for Student Nurse as established by Maple Grove Hospital according to clinical affiliation agreement between Maple Grove Hospital and education institution, maintain optimal customer safety, adequate student supervision, clinical staff support to provide student supervision, and provide clear communication with the education institution contracting with Maple Grove Hospital for the affiliation experience.

POLICY

Student Responsibilities

1. A current, authorized Clinical Affiliation Agreement between Maple Grove Hospital and the education institution must be in place prior to the establishment/implementation of any student clinical rotation/placement. A Program Letter of Agreement (PLA) must be signed with each educational institution.
2. Must hold current certification in American Heart Association Basic Life Support (BLS) and be able to apply BLS knowledge in an emergency as needed.
3. Students and faculty shall comply with all Maple Grove Hospital established policies and procedures at all times.
4. All required training must be completed and submitted via TCCP passport or to the Maple Grove Hospital education office prior to the first clinical day. Students may not participate in clinical experiences until all requirements are complete.
5. School uniform must be worn (including Student ID Badge) at all times while on Maple Grove Hospital property, unless surgical scrubs have been issued by the department (e.g. Labor and Delivery, Operating Room).
6. Maintain customer confidentiality standards according to HIPAA regulations. Students may not remotely access, photocopy, or print from the electronic health record any customer specific information. Students may not remove any identifiable customer specific information from Maple Grove Hospital
7. Act in a professional manner when preparing for and/or providing customer care.

8. The education facility is responsible for assuring that students are prepared to carry out assigned responsibilities commensurate with their course objectives. The education institution is also responsible for verifying competence by evaluation in a skills lab or comparable setting before assigning such responsibilities in the Maple Grove Hospital clinical setting.
9. During a clinical rotation, students practice under the supervision and direction of the clinical faculty identified by the education institution and with the co-assigned Maple Grove Hospital RN team member. During a preceptorship or Dedicated Education Unit Rotation, the student functions under the direction and supervision of the co-assigned Maple Grove Hospital RN team member.
10. Must introduce self to customer indicating you are a student working with RN staff to provide care.
11. Complete required documentation for customer assignments. Review initial documentation into the electronic medical record with either clinical faculty or co-assigned Maple Grove Hospital RN team member. Co-assigned Maple Grove Hospital RN team member must complete own separate documentation or write a comment that their assessment was identical to the student nurse assessment.
12. Immediately report customer change to the co-assigned Maple Grove Hospital RN or department customer care facilitator (PCF) if change in customer condition, or if any problem occurs with the customer, family, a Maple Grove Hospital team member, or equipment.
13. Must report off to the co-assigned Maple Grove Hospital RN team member or PCF RN when leaving the unit for any reason, and at the end of the shift.
14. Must immediately report to unit PCF or co-assigned Maple Grove Hospital RN team member medication error or other adverse event.
15. Comply with Maple Grove Hospital Electronic Event Reporting System process by collaborating with cosign RN to complete safety-first report as needed
16. If a student is injured during the clinical experience, clinical faculty must be notified and student should report to the Emergency Care Center immediately.
17. Maple Grove Hospital education department is responsible for maintaining information regarding current nursing school affiliations.
18. Maple Grove Hospital education will coordinate the placement of nursing student faculty-led groups and placement of students 1:1 with a Maple Grove Hospital RN team member.
19. Maple Grove Education will maintain student records of required onboarding documentation.

Limitations to Student Nurse Scope of Practice

Student practice limitations are based on school/semester policy, Maple Grove Hospital policy, Maple Grove Hospital departmental standards, and the Board of Registered Nursing regulations. Additional restrictions may apply from a clinical unit or specialty area for the safety and well-being of the customer.

DEFINITIONS

Student Nurse: A nurse student is an individual enrolled in an academic nursing program with a clinical affiliation agreement and signed PLA with Maple Grove Hospital

Clinical Experience: A clinical experience takes place within a defined period of time.

Direct Supervision: The clinical faculty or co-assigned Maple Grove Hospital RN team member is physically present in the room to supervise the activity of the student nurse. The Student nurse will administer medications as per Student Nurse Scope of Practice Guidelines under direct supervision of the co-assigned Maple Grove Hospital RN or clinical faculty. The Maple Grove Hospital RN or clinical faculty will be responsible for accurate documentation of the medication administration.

Indirect Supervision: The clinical faculty is not physically present in the room to supervise the activity of the student nurse, but is available/physically present within the clinical unit of practice. It is understood by Maple Grove Hospital that each student has been observed by the clinical faculty for competency prior to an activity being performed with indirect supervision.

RN Mentorship: One-on-one time with Maple Grove Hospital RN mentor. Typically occurs in senior year of nursing school. School faculty not present daily. Maple Grove Hospital RN serves as the mentor.

Skill Guidelines for RN Student Clinical Experiences

Clinical Skill	May NOT be Performed	May be performed under Direct RN Supervision	May be performed under Indirect RN Supervision
Medication Administration			
1. Adult and Pediatric PO non-narcotic medication administration		F/M	
2. Adult and Pediatric medication administration by IM, SQ, SL, enteral, inhaled, vaginal, rectal, and/or topical routes		F/M	
3. Adult and Pediatric medication administration that require Special monitoring (see <i>Medication Administration</i> policy)	F/M		
4. Chemotherapeutic agents, IV cardiac altering agents, IV insulin, blood/blood products, IV Bolus, IV anticoagulants, and sedation medication	F/M		
5. IV Bolus	F	M	
6. IV Controlled Substances and IV Push	F	M	
7. Administration of TPN/Lipids/Hyperalimnia	F/M		
8. Anticoagulants SQ (including Heparin, Lovenox)	F	M	
9. Administration of intrathecal medication	F/M		
Central Lines (Triple Lumen Caths, PICC, Midline, etc.)			
1. Hang Initial Solution	F/M		
2. Administer IVPB into currently infusing Central Line	F/M		
3. Change Central Line dressing	F/M		
4. Flush Central Line	F/M		
5. Blood Draws	F/M		
6. Change Tubing	F/M		
7. Discontinue Central Lines	F/M		
Implanted Vascular Devices (e.g. Mediports)			
1. Access vascular device with Huber needle	F/M		
2. De-access vascular device with Huber needle	F/M		
3. Hang Initial Solution	F/M		
4. Administer IVPB into currently infusing IV line	F/M		
5. Flush line	F/M		
6. Blood Draw	F/M		
7. Change tubing	F/M		
Dialysis Catheter/AV Fistula			
1. Access vascular device	F/M		
2. Flush line	F/M		
3. Assess patency of AV fistula (thrills, bruits)			F/M

Skill Guidelines for RN Student Clinical Experiences (continued)

Clinical Skill	May NOT be Performed	May be performed under Direct RN Supervision	May be performed under Indirect RN Supervision
Peripheral IV's			
1. Hang Solution	F	M	
2. Change rate	F	M	
3. Change Dressing	F	M	
4. Initial Flush line	F	M	
a. Subsequent Flushes	F	M	
5. Change Tubing	F	M	
6. Start Adult IV	F	M	
7. Remove IV			F/M
PCA/Epidural Pumps			
1. Change medication cassette	F/M		
2. Program, manage or verify pump settings	F/M		
Utilize Therapeutic Principles of Nutrition			
1. Administer Enteral Feedings	F/M		
2. Weight and body measurements/documentation		F/M	
Blood/Blood Product Transfusion			
1. Set up tubing	F/M		
2. Co-sign/Second RN signature	F/M		
3. Spike Blood/Blood product	F/M		
4. Assess and monitor per protocol including vital signs		F/M	
Physician Orders			
1. Receive verbal orders	F/M		
2. Receive telephone orders	F/M		
3. Initiate Order Set	F/M		
4. Verify/Release orders in EMR	F/M		
Wound and Skin Care			
1. Perform initial admission head to toe assessment		F/M	
2. Perform non-sterile dressing changes		F/M	
3. Measure wounds and document in EMR		F/M	
4. Remove any type of Wound Drain (Penrose, JP, Duval, etc.)		F/M	

Skill Guidelines for RN Student Clinical Experiences (continued)

Clinical Skill	May NOT be Performed	May be performed under Direct RN Supervision	May be performed under Indirect RN Supervision
Perform Therapeutic Respiratory Procedures			
1. Perform nasopharyngeal suctioning	F	M	
2. Perform tracheostomy suctioning	F	M	
3. Introduce oropharyngeal airway	F	M	
4. Care of chest tubes	F	M	
5. Assessment of secretions			F/M
6. Perform tracheostomy dressing change and site care		F/M	
7. Supervise coughing/deep breathing exercises			F/M
8. Initiate/titrate/discontinue oxygen therapy		F/M	
Utilize Therapeutic Principles of Elimination			
1. Insert, irrigate, first removal of indwelling catheters	F/M		
2. Insert, irrigate, remove rectal catheters	F/M		
3. Perform continuous and intermittent bladder irrigations	F/M		
4. Perform ostomy cares		F/M	
5. Administer enema		F/M	
6. Perform bladder scan			F/M
Maintain Immobilization and Support			
1. Casts	F	M	
2. Traction	F	M	
3. Splints	F	M	
4. Slings		F/M	
5. Binders		F/M	
6. Anti-embolism stockings		F/M	
7. Sequential Compression System		F/M	
Mobility			
1. Ambulate customer with and without assistive devices			F/M
2. Passive and active range of motion			F/M
3. Transfers to and from bed, stretcher, wheelchair, chair			F/M
Monitoring			
1. Interpret EKG or fetal monitoring	F/M		
2. Discontinue/remove EKG or fetal monitoring	F	M	

Skill Guidelines for RN Student Clinical Experiences (continued)

Clinical Skill	May NOT be Performed	May be performed under Direct RN Supervision	May be performed under Indirect RN Supervision
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Point of Care Testing

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| 1. Obtain Whole Blood Glucose | F/M |
| 2. Perform pH testing with nitrazine paper | F/M |
| 3. Perform Hemochrom | F/M |
| 4. Perform urine dipstick | F/M |

EMR Documentation (All pending documentation is to be reviewed by clinical faculty at end of every clinical rotation)

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|---|-----|-----|
| 1. Documentation of administration of medications | F/M | |
| 2. Fluid Balance (intake & output) | | F/M |
| 3. Customer Assessments | | F/M |
| 4. PEEP Rounds minimally every 2 hours (even hours) | | F/M |
| 5. Vital Signs | | F/M |
| 6. Customer Education | | F/M |
| 7. Customer Belongings | F/M | |

Care and Treatment

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|---|-----|-----|-----|
| 1. Respond to call lights | | | F/M |
| 2. Toileting/bathing/pericare | | | F/M |
| 3. Reposition customers | | | F/M |
| 4. Update Whiteboard | | | F/M |
| 5. Advance Plan of Care | F/M | | |
| 6. Initial Fall risk assessment and implementation of fall prevention Precautions | | F/M | |
| a. Ongoing assessment of fall prevention precautions | | | F/M |
| 7. Order supplies | F/M | | |
| 8. Complete linen change | | | F/M |
| 9. Post mortem care | | F/M | |

Communication

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|--|---|-----|-----|
| 1. Collaboration with physician on customer needs | | | F/M |
| 2. Collaborate with unlicensed assistive personnel | | | F/M |
| 3. Provide admission report | F | M | |
| 4. Provide hand off and change of shift report | | F/M | |
| 5. Transport: Complete ticket to ride | F | M | |
| 6. Report to requesting facility | F | M | |

