**UNIVERSITY OF SOUTHERN INDIANA NURSING PROGRAM**

**UNDERGRADUATE NURSING**

**GUIDELINES FOR CLINICAL PRECEPTORS AND STUDENTS**

**Schedules**

Student schedules will be determined by either 1) the student contacting the preceptor to determine a clinical schedule, or 2) USI clinical faculty establishing the clinical schedule. Students will need to complete clinical hours as determined by the course. Students should work no more than 40 hours per week, with days scheduled in sequence whenever possible to maximize continuity of experiences.

**Clinical Objectives**

The anticipated learning needs and clinical objectives will be provided by course faculty.

**Alternate Preceptor**

As the preceptor, if you are unable to attend work on a day previously scheduled with a student please identify an alternate nursing preceptor who will agree to assume responsibility in your absence. Please discuss the clinical expectations. If you are floated to another unit, the student should accompany you for the new assignment. In accordance with Indiana’s State Board of Nursing, preceptors and alternates preceptors must have 3 years of nursing experience.

**Orientation**

Most students will be assigned to units in which they are familiar; however, some students may need an orientation period. The orientation will be individualized and require Preceptor/Clinical Faculty/Student collaboration. Students are expected to assume the patient assignment as determined by the course.

**Direct Supervision**

Students will need direct preceptor supervision with specific nursing tasks until they have proven proficiency. Nursing task are determined by the nursing course and level of student. Please refer to the clinical objectives to determine the nursing tasks and student expectations.

**Regardless of the student course or level, all medications must be directly supervised by a registered nurse**. Students must know the: actions and indications, classification, safe dosage range, route of administration, required assessment if indicated, and safety monitoring of all administered medications. If the student is unable to articulate the medication information, they shall not administer the medicine. Students must follow the medication administration policy of the facility. The preceptor is expected to assess student’s knowledge on all medications prior to administration.

The following should serve as guidelines. If the preceptor is in doubt, consult with the clinical faculty.

**Student Activity RN Requirements**

Perform shift assessment RN co-signature or validation statement required.

Nursing procedures RN must directly supervise until proficient. (Invasive procedures such as IV insertion, central line dressing change, drawing blood from central line, trach change, etc **MUST** always be supervised)

Charting/documentation RN to co-sign as determined by facility.

Medications RN must directly supervise and co-sign.

Administer narcotics RN must directly supervise and co-sign documentation as directed by facility.

Medication Verification Any medication requiring two RN’s to verify must be verified by two RN’s (the student cannot be the second).

Perform central line dressing changes RN must directly supervise and co-sign

**Procedures or Tasks Students May NOT Do**

According to USI policy, students are **not permitted** to:

* enter physician/provider orders
* witness consent forms
* witness or hang blood or blood component products
* administer chemotherapy
* remove central lines.

If the facility requires special training for a procedure or task, the student may not complete the procedure or task but should observe. Students may perform bedside glucose monitoring **only** if allowed by the facility. Preceptors should use prudent nursing judgment and facility guidelines in deciding whether to allow students to perform select nursing procedures independently.

**Concerns About Student’s Clinical Performance**

USI faculty will make rounds but are always available to come to the unit when needed.

There will always be an assigned USI clinical faculty accessible by phone and/or available to come to the unit/facility. In the event the student’s performance is questioned or an incident occurs that needs immediate attention, please contact the clinical faculty as soon as possible.

If at any time the preceptor feels the student’s performance is unsafe, the preceptor should intervene directly, and immediately stop the student from engaging in the behavior or giving client care. The USI clinical faculty should be notified as soon as possible. Depending on the situation, the clinical faculty will come to the unit to directly evaluate the student or terminate the experience.

The USI clinical faculty can be contacted at any time if either the preceptor or student has questions.

There are some instances when a USI Faculty must be contacted to evaluate the student and/or situation and complete appropriate documentation.

1. Student illness or injury

Examples:

* Student passes out and hits head on IV pump.
* Student trips and gets a gash in his leg that may require stitches.

2. Patient injury involving a student

Examples:

* Patient falls when student transferring him to the chair.
* Student inadvertently dislodges a central line when changing the dressing.

3. Medication errors

Examples:

* Student administers the wrong dose of a medication.
* Student incorrectly administers an IV med (wrong rate).

4. Student is exposed to biohazard materials.

Examples:

* Contents of a JP bulb splash into a student’s eye.
* Student acquires a needle stick from a contaminated needle.

**For student exposure to biohazardous materials, certain forms must be completed by the faculty. The patient will be asked to consent to testing as directed by facility policy and the student will be advised to seek appropriate medical care.**

**Feedback**

Preceptors will provide feedback regarding student performance. The USI Clinical Faculty will determine whether the student has achieved a "Pass" in all clinical objectives.

Thank you for participating as a preceptor for the USI nursing program.