

**Student Nurses**

**SCOPE:** This Guideline applies to all CHRISTUS Santa Rosa Health System (CSRHS) Hospitals (Medical Center, New Braunfels, Westover Hills, The Children’s Hospital of San Antonio, and Alamo Heights and departments classified as Hospital Owned Patient Departments and Clinics).

**OBJECTIVE:**

To delineate the relationship between the nursing student, clinical instructor and CHRISTUS Santa Rosa Health System staff

**CORE VALUES and ETHICAL RELIGIOUS DIRECTIVES:**

While all CSRHS policies reflect CHRISTUS Health’s Core Values and its mission “to extend the healing ministry of Jesus Christ”, this Guideline primarily addresses the Core Value of excellence as it addresses the practice guidelines relative to caring for patients receiving parenteral nutrition.

With regards to the ERDs for Catholic Health Care Services, CHRISTUS Santa Rosa affirms the organization’s commitment to health care ministry and upholds the organization’s distinctive Catholic identity. This guideline has been reviewed for ERD applicability. As this policy addresses the Professional-Patient Relationship, it directly impacts the knowledge of the healthcare provider to pursue the goals of healing and maintaining health.

**POLICY STATEMENT:**

**NOTE:** This guideline reflects evidence-based practices derived from contemporary literature review. Individual patient assessment and other clinical situations may influence specific courses of action.

1. The respective schools of nursing will provide qualified instructors for student supervision. Instructors are responsible for assigning, supervising and guiding students during their clinical practice rotations. Instructors and CSR staff will collaborate to provide the student with learning opportunities while maintaining standards of care. Nursing instructors will be responsible for evaluating and counseling students on performance issues.
2. The clinical instructor must be readily available either on-site or by telephonic communication in the event the student is enrolled in an on-line program.
3. CSR will designate a representative who will facilitate the selection of units/departments where students will be assigned. This representative will maintain a database of the schools utilizing CSR as a clinical site, unit assignments and numbers of students utilizing the facility. This representative will facilitate placement of students in traditional programs but also those attending on-line or off-site

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programs. Precepted experienced for Master's level nursing students will also be facilitated through this designee.

4. Students and instructors will be responsible to practice in accordance with CSR policies. Access to policies and procedures will be provided along with an appropriate orientation to the organization.
5. Students may perform only those procedures which have been previously studied, practiced and validated in their curriculum. The instructor is responsible for providing direct clinical supervision for procedures not yet mastered by the student or for collaborating with CSR staff who may directly supervise that experience. School policy will determine the scope and breadth of procedures/medication administration that may be completed by the student.
6. The student will complete appropriate documentation of skills/procedures provided.
7. The student nurse may administer medications under the supervision of the instructor and/or staff nurse. The student must have documented skill completion for the medication/route per nursing school policy. Such documentation will be made available if requested. The following constitute exceptions for administration by student nurses:
  - A. The nursing student may not mix, hang or manipulate the rate of inotropes or vasoactive medications (e.g. pressors/dilators)
  - B. The nursing student may not administer:
    - Emergency medications
    - Paralyzing medications
    - Chemotherapy medications
    - Experimental/research medications
    - Therapeutic heparin
    - Insulin drip
    - Total parenteral nutrition (TPN)
8. Upon arrival to the nursing unit, the student will participate in bedside shift report with the staff nurse assigned to the patient(s). To ensure patient safety, the staff nurse will clarify and communicate at that time which activities, procedures, medications, etc., the student may be responsible for during that clinical period.
9. The instructor and nursing manager/director will resolve concerns regarding the designated responsibilities.
10. Individual responsibilities:
  - A. Responsibility for the patient care provided by the nursing student resides with that student.
  - B. The instructor is responsible for providing adequate supervision of the student during clinical practice.
  - C. The staff nurse is ultimately responsible for the patient and is informed of the patient's status throughout the student's clinical experience and intervenes if warranted by the patient's condition.

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11. While medication administration and nursing notes written by the student will not be co-signed by CSR staff, additional notes may be written by the nurse to indicate concurrence, clarify discrepancies or ensure complete documentation.
12. Should a student be injured on the job the nurse manager/director will be notified and the injury will be treated as a visitor injury. The responsible nursing instructor will provide the appropriate care for the student based on school policy.

**DEFINITIONS:**

**Student nurse:** Individual enrolled in a formal course of study at an accredited institution of higher learning in pursuit of a degree in nursing

**Instructor:** Representative from a university or college-based nursing program who provides oversight to the nursing student while in the clinical area

**RELATED POLICIES/PROCEDURES/GUIDELINES:**

Administration and Handling of Medications, CO-MM-01-01

**STANDARDS/RULES AND REGULATIONS/LAWS:**

Texas Administrative Code Title 22, Part 11, Chapter 215, Rule 215.10, Clinical Learning Experience

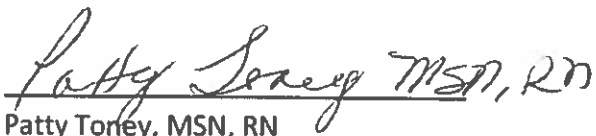
**HISTORY:** Effective date 12/91. Reviewed and revised in 8/09 and 5/12 to reflect collaborative relationships with instructors in on-line programs and the on-site preceptor. Policy revised in 5/16 to reflect changes in supervision of medication administration.

**REVISED:** 8/09, 5/12, 5/16

**REVIEWED:** 1/18

**OFFICE of PRIMARY RESPONSIBILITY**

Chief Nursing Officers

**APPROVED BY:**

Patty Torrey, MSN, RN

Chief Nurse Executive