



Judge McRae School of Nursing

Pre-licensure Simulation/Clinical/Lab

Student Handbook

2022-2023



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Welcome from Simulation/Lab/Clinical Coordinator

Undergraduate nursing students are provided with educational opportunities to develop and enhance clinical skills and clinical reasoning. This is accomplished by incorporating a variety of interactive, experiential learning techniques, including standardized patients, screen-based computer programs (realistic physiology, pharmacology, and/or a combination of both incorporated into a clinical scenario), task trainers (models for intravenous catheter insertion, urinary catheterization, gastric catheter insertion, neonatal models), and high fidelity manikins designed to incorporate the benefits of computer-based physiology modeling with life-sized, interactive manikins that breathe, have pulses, produce an electrocardiogram, and respond to medications. These learning experiences occur in a clinical setting, a skills laboratory, a simulation laboratory with a simulated clinical environment (e.g., medical-surgical patient room, intensive care unit, Labor & Delivery Room), and debriefing rooms. The common factor in all these learning experiences is participation in activities where the learner can systematically and purposefully learn tasks and/or thought processes associated with clinically relevant objectives. Faculty who participate in simulated learning experiences provide students with constructive feedback regarding individual and team performance through debriefing sessions and empower students with the ability to self-analyze their performance during the reflective process.

General Information

The Clinical Simulation Center (CSC) is a state-of-the-art facility located on the second floor of the Ferguson Health Sciences Center on the Mars Hill University campus and utilized by all levels of nursing students. The CSC incorporates a clinical skills lab as well as a simulated hospital setting and is fully equipped for students to practice clinical skills at all levels of nursing practice. The CSC utilizes the CAE LearningSpace® platform for center management, video and audio recording, and debriefing. This cutting-edge technology in nursing simulation education allows students, as well as faculty, to review the scenario and reflect on individual and team performance. The CAE LearningSpace® platform integrates with the high-fidelity CAE manikins utilized in the Clinical Simulation Lab.

- **Clinical Skill Lab:** The Clinical Skill Lab is equipped with 6 advanced care bed units, a general procedural stretcher, 4 family practice exam tables, a nursing station, a medication room, as well as a variety of practice models and manikins. Students utilize this area to learn and practice basic nursing skills such as skin care, mobility, transferring/positioning, vital signs, medication administration, intravenous line insertion, intramuscular and subcutaneous injections, and urinary catheterization, among many other skills. Each bed site is equipped with wall connections for oxygen administration and suctioning as well as network connections for computers. There are ceiling-mounted video cameras above five of the 10 patient care areas in the lab for the recording of student clinical-based experiences. Debriefing sessions take place in the smart-board-equipped debriefing conference located adjacent to the lab.

- **Clinical Simulation Lab:** The Clinical Simulation Lab is comprised of four individual patient care rooms and an isolation room with an anteroom for entry into the setting. Each room contains a high-fidelity simulation mannequin. Two rooms designed to replicate a delivery room with an Affinity Birthing Bed each contain a CAE Fidelis™ Lucina maternal fetal simulator. Two rooms replicate a medical-surgical patient care room containing a CAE Metiman®. The remaining room can be equipped to simulate an isolation room with an adjoining anteroom, an emergency room, or critical care unit and contains a CAE PediaSIM®. The Clinical Simulation Lab contains two control rooms to run and record the simulation scenarios. Each control room has a one-way mirror to provide direct observation of the learners as well as two ceiling-mounted video cameras with audio equipment to record the scenario for reflective debriefing.

Simulation

What is Simulation?

Simulation is an attempt at replicating reality. In nursing education, simulation tries to replicate most, if not all, of the essential aspects of a clinical situation so that the student more readily recognizes, understands, and is capable of managing a similar situation when it occurs in actual clinical practice. Simulation serves as a bridge between classroom learning and real-life clinical experiences. Simulation is a teaching method to help assess a student's skill acquisition. Simulating real-life experiences for students in a safe, simulated environment is conducive to developing psychomotor skill acquisition as well as critical thinking, clinical reasoning, and clinical judgment skills.

Simulation Scenarios

Simulating case scenarios in the CSC involves the active participation of all students. All students and faculty will adhere to the CSC rules. Manikins are respected and treated the same as live patients. Students involved in simulated scenarios should have everyone's respect and attention. Situations simulated in the lab are used as a learning tool and no discussion of the actions of fellow students should take place outside of the lab. A debriefing session after each simulation session facilitates reflection and learning.

Debriefing

Debriefing involves a reflective, critical thinking analysis of a simulation exercise. It is an active process, driven by faculty and students, involving identifying and sharing the facts and emotions associated with a simulated experience. The nursing faculty and/or the Coordinator will facilitate a debriefing session immediately after a simulated experience, and this session should foster an intense post-conference discussion with active participation from all participants. The focus of the debriefing should be a positive experience that encourages students to critically think about what was done, what was not done, and what could be done differently in the future.

Pre-Clinical Requirements Policy

Upon acceptance into the pre-licensure BSN program, the following items must be uploaded into your CastleBranch account (instructions on account creation will be given):

- Listed as NA I in North Carolina
- Current BLS card from American Heart Association
- Copy of MHU Medical form
- Copy of Current Immunizations
- MHU Background Check OR Proof of Employment within the healthcare field

The following items must be completed (no earlier than 60 days) before going to a clinical site through CastleBranch (instructions and PIN will be given):

- Criminal Background Check (statewide criminal NC; residency history)
- 12- Panel Drug Test
- Nationwide Database with Sex Offender Index

Acceptable background checks are required for clinical experiences. Information for obtaining the checks will be provided to all students by the first semester of the program. Students must be able to attend clinical experiences in all agencies designated by the pre-licensure BSN program. If for any reason, a student is unable to fulfill clinical requirements in a designated facility (results of background checks, previous work-related incidents, etc.), they may be unable to continue in the program.

A background check is required by Mars Hill University for general college admission. Students should be aware that an additional background check and drug screen will be required by the personnel department at your future clinical location. Students will receive a PIN from the nursing department to request these items. Failure to provide this information to a clinical site in a timely fashion could result in a cancellation of your clinical site arrangements.

Basic Life Support (BLS) Certification

Each student must have a current Healthcare Provider BLS Card upon admission to the program and for the duration of the MHU Nursing Program. American Heart Association is the preferred issuing organization as some clinical agencies only recognize this organization. Copies of the BLS Certification must be submitted to the Judge-McRae School of Nursing on or before the first day of class and cards must not be allowed to expire.

Nurse Aide (NA) Requirement

Before program admission, students are required to be listed as a Nurse Aide I (NAI). After successful completion of the first semester of the JMSON program, students are eligible to be listed as Nurse Aide II. The following are specific guidelines that refer to NA I and NAII listing.

NA I

- Must complete an NC state-approved NAI Training Program or an abbreviated course with proof of uninterrupted full-time employment as an NAI for six months.
- Must be listed on the Health Care Personnel Registry (www.ncnar.org) before program admission
- Must maintain NA I listing with no allegations of abuse, neglect, or misappropriations of property.

NA II

- Must pass all portions of NUR 311 and NUR 312 (class, lab, and clinical) to be eligible for listing
- Must hold current NAI listing to be eligible
- Effective December 2011, NAII applications for initial listing and renewal must be submitted online. The process includes the following:
 - BSN Director sends verification to NCBON (includes students' first, middle, last name & DOB)
 - Student accesses the NCBON website, www.ncbon.com
 - Students must apply within 30 business days after verification is submitted.

Students will be eligible for listing as an NAII at the end of the spring semester of their junior year. To be eligible, students must keep their NAI current.

Physical (Health) Form

Physical Form

A medical form will be provided to each student and must be completed and signed by a medical doctor, a nurse practitioner, or a physician's assistant. The statement at the bottom of the medical form verifying physical, emotional, and mental capacity/capability for safe client care and success in the program must be signed by a medical doctor, a nurse practitioner, or a physician's assistant. This document will be uploaded into CastleBranch before the first day of classes. Refer to the technical standards for examples of essential functions students must meet.

If a student is under treatment or counseling during their time in the JMSON program, a written recommendation for remaining in the class should be obtained from the attending physician or counselor. Examples of conditions requiring this recommendation include, but are not limited to, pregnancy and surgery.

If a student develops a physical or emotional problem that does not respond to appropriate treatment or counseling within a reasonable period, the situation will be reviewed on an individual basis but can lead to dismissal from the program.

Immunizations

Students in the school of nursing, both pre-and post-licensure, must provide documentation of current immunizations before their first practicum contract with the community. Immunizations must include the following:

- Measles, Mumps, Rubella (MMR) – two vaccine doses required or positive antibody titer for each.
- Tetanus-Diphtheria-Pertussis (Td or Tdap) – If the last dose of Td (tetanus/diphtheria) is greater than two years before the date you enter practicums. Tdap is recommended.
- Varicella (Chicken Pox) – two vaccine doses or positive titer showing immunity. Report of having had the disease is no longer acceptable documentation.
- Hepatitis B – documented series of three shots.
- Influenza – required annually.
- Meningitis
- Tuberculosis screening –Students must complete the initial one-step PPD test. Thereafter yearly screenings are required. If the student has a positive result, a chest x-ray no more than 3-months before the first practicum experience is required.
- Note that clinical agencies may have additional requirements.

Compliance Tracker (CastleBranch) Guidelines

The JMSON utilizes A Web-Based Compliance Tracking system that requires students to submit all immunization documentation, medical forms, CPR Cards, and NAI documentation for review and approval. The current third-party provider is CastleBranch. Students will be assigned a PIN and instructions to complete the process. Students will have access to these documents after they graduate.

Documents to be uploaded to CastleBranch include the following:

- Physical/Health Form
- Immunization Records
- NAI
- BLS/CPR Certification
- COVID Vaccination Card

Background check and drug screen will be completed as indicated based on the clinical facility timeframes. Additional information will be given to the student as indicated.

Technical Standards Guidelines:

The education of a nurse requires assimilation of knowledge, acquisition of skills, and development of nursing care judgment to make appropriate decisions required in practice. Physical, cognitive, psychomotor, affective, and social abilities are required in unique combinations to provide safe and effective nursing care. Therefore, the JMSON Program requires that the applicant/student be able to meet the essential functions of the program with or without reasonable accommodations throughout the program of learning.

Admission, progression, and graduation are contingent upon one's ability to demonstrate the essential functions with or without reasonable accommodations. Admission or progression may be denied if a student is unable to demonstrate the essential functions delineated by the JMSON Program with or without reasonable accommodations.

If a nursing student or applicant believes that he or she cannot meet one or more of the standards without accommodations or modifications, the college must determine, on an individual basis, whether or not the necessary accommodations or modifications can be reasonably made. Requests for accommodations should be directed to the Disability Services Coordinator at MHU.

JMSON Technical Standards Essential to Safe Nursing Practice

Functional Ability	Standard	Examples of Required Activities
Gross Motor Skills	Gross motor skills are sufficient to provide the full range of safe and effective patient care activities.	<ul style="list-style-type: none">• Move within confined spaces such as treatment or operating rooms.• Assist with turning/ lifting patients.• Administer CPR
Fine Motor Skills	Fine motor skills sufficient to perform manual psychomotor skills	<ul style="list-style-type: none">• Possess manual dexterity to safely grasp and manipulate small objects with fingers• Manipulate small equipment and containers such as syringes, vials, ampules, and medications
Physical Endurance	Physical stamina is sufficient to remain continuously on task for up to a 12-hour clinical shift to perform patient care activities.	<ul style="list-style-type: none">• Walk, stand, move, lift and bend for extended periods.• Manually resuscitate patients in emergency situations.• Perform physical activities requiring energy without jeopardizing the safety of the client, self, or others
Physical Strength	Physical strength sufficient to perform a full range of required patient care activities.	<ul style="list-style-type: none">• Push and pull 250 pounds.• Lift/move heavy objects from 35-50 pounds.

Functional Ability	Standard	Examples of Required Activities
Mobility	Physical ability sufficient to move from room to room and maneuver in small spaces; manual and finger dexterity; and hand-eye coordination to perform nursing activities.	<ul style="list-style-type: none"> • Ability to safely bend, lift, squat, and twist to assist the client in moving • Reach above shoulders and below the waist and move quickly • Safely control the fall of a patient by slowly lowering the patient • Perform cardiopulmonary resuscitation
Hearing	Auditory ability sufficient for physical monitoring and assessment of patient health care needs	<ul style="list-style-type: none"> • Hear normal speaking level sounds • Hear auscultatory sounds • Hear auditory alarms (monitors, fire alarms, call bells) • Hear cries for help
Visual	Normal or corrected visual ability sufficient for accurate observation and performance of nursing care	<ul style="list-style-type: none"> • Observe client responses at a distance and close at hand • Visual acuity to read calibrations on syringes • Visual acuity to read numbers on equipment and fluid collection devices • Assess skin color (cyanosis, pallor)
Tactile	Tactile ability sufficient for physical monitoring and assessment of health care needs	<ul style="list-style-type: none"> • Feel vibrations (pulses) • Detect temperature changes • Palpate veins for cannulation • Detect anatomical abnormalities, such as subcutaneous crepitus, edema, or infiltrates
Smell	Olfactory ability sufficient to detect significant environmental and patient odors	<ul style="list-style-type: none"> • Detect odors from a patient (foul smelling drainage, alcohol breath) • Detect smoke • Detect gases or noxious smells
Emotional/ Behavioral	Emotional stability and appropriate behavior sufficient to assume responsibility/accountability for actions	<ul style="list-style-type: none"> • Demonstrate emotional skills to remain calm and maintain professional decorum in an emergency/stressful situation • Adapt rapidly to changing environment/stress • Exhibit ethical behaviors and exercise good judgment • Focus attention on tasks while performing patient care • Anticipate and intervene in situations that may compromise safety • Able to reason morally and to care for clients in an ethical manner
Professional Attitudes and Interpersonal Skills	<p>Present professional appearance and demeanor; demonstrate the ability to communicate with patients, supervisors, and co-workers to achieve a positive and safe work environment.</p> <p>Follow instructions and safety protocols</p> <p>Display Honesty and integrity</p>	<ul style="list-style-type: none"> • Convey a caring, respectful, sensitive, tactful, compassionate, empathetic, and tolerant attitude toward others • Demonstrate a mentally healthy attitude that is age appropriate in relation to the client and environment • Establish rapport with patients, instructors, and colleagues.

Functional Ability	Standard	Examples of Required Activities
		<ul style="list-style-type: none"> ● Respect and care for persons whose appearance, condition, beliefs, and values may conflict with their own ● Deliver nursing care regardless of patient's race, ethnicity, age, gender, religion, sexual orientation, or diagnosis ● Accept responsibility, accountability, and ownership of one's actions ● Conduct themselves in a composed, respectful manner in all situations and with all persons ● Work with teams and workgroups ● Establish and maintain therapeutic boundaries ● Demonstrate prompt and safe completion of all patient care responsibilities ● Display correct judgment in seeking supervision and consultation in a timely manner
Communication	Oral communication skills sufficient to communicate in English with accuracy, clarity, and efficiency with patients, their families, and other members of the health care team, including non-verbal communication, such as interpretation of facial expressions, affect, and body language	<ul style="list-style-type: none"> ● Engage in two-way communication and interact effectively with others, both verbally and in writing ● Express ideas and feelings clearly and be willing to give and receive feedback ● Gather information appropriately and listen effectively ● Discern and interpret nonverbal communication ● Document relevant patient information (manual or via computer) ● Recognize and report critical patient information to other caregivers
Cognitive/ Quantitative Abilities	Reading comprehension skills and mathematical ability sufficient to understand written documents in English and solve problems involving measurement, calculation, reasoning, analysis, and synthesis	<ul style="list-style-type: none"> ● Calculate appropriate medication dosage given specific patient parameters ● Analyze and synthesize data and develop an appropriate plan of care ● Collect data, prioritize needs, and anticipate reactions ● Transfer knowledge from one situation to another ● Accurately process the information on medication containers, physicians' orders, and monitor and equipment calibrations, printed documents, flow sheets, graphic sheets, medication administration records, other medical records, and policy, and procedure manuals
Conceptual/Spatial Abilities	Conceptual/spatial ability sufficient to comprehend three-dimensional and spatial relationships	<ul style="list-style-type: none"> ● Possess analytical skills that allow you to grasp complex ideas and create solutions to difficult problems ● Ability to think rationally and approach issues critically ● Ability to think in abstract terms and construct meaningful concepts

Functional Ability	Standard	Examples of Required Activities
		<ul style="list-style-type: none"> • Ability to problem solve from different perspectives • Ability to understand and recall relationships between objects
Clinical Reasoning	Ability to reason across time about a patient's changing condition and/or changes in the clinician's understanding	<ul style="list-style-type: none"> • Evaluate patient or instrument responses, synthesize data, draw sound conclusions • Ability to collect, analyze, and integrate information and knowledge to make informed clinical judgments
Flexibility	Adapt to JMSON course scheduling policies and changes.	<ul style="list-style-type: none"> • Ability to adapt to a changing schedule or environment • Available to work the hours of an assigned schedule which could include any shift and day of the week

I have read and agree that I can meet all of these technical standards as required for the safe care of patients. If at any time during the course of my program I cannot meet these standards, I agree to inform the Director of Nursing.

Student's Full Name (Please Print) _____

Student's Signature _____

MHU ID Number _____

Date _____

Witness _____

Simulation Policy

Students are required to attend all simulation and lab sessions. Students are required to attend and actively participate in all nursing laboratories. If the student is absent on a simulation or lab day, she/he will be required to make up the lab experience at the discretion of the instructor (e.g. different lab days, individual lab experience with the coordinator).

- All students will adhere to the Clinical Simulation Center (CSC) guidelines (reviewed first lab day)
- Students will report to the CSC prepared for active participation in all learning experiences. Professional conduct and communication are always expected.
- Students are never to discuss events or scenarios occurring in the simulation lab except in debriefing sessions. This is considered a clinical environment and confidentiality regarding all aspects of scenarios are required and expected. There is zero tolerance for academic dishonesty.
- Students are to dress for simulation and skill lab as if attending clinical. Uniforms, name badges, and uniform policies are enforced.
- Universal Precautions are always to be followed as are all safety guidelines used in the clinical setting. Sharps and syringes are to be disposed of in appropriate containers. Anyone sustaining an injury must notify their instructor immediately and report to the Wellness Center.
- All manikins and equipment are treated with proper care and respect as if they were real, human clients.
- Manikins are always to remain on the beds unless otherwise directed by faculty. No equipment is to leave the labs unless permission and approval obtained from the Simulation/ Lab/ Clinical Coordinator. The skill and simulation labs are only used for practicing clinical skills when supervised by faculty or staff.
- Students will maintain a respectful and safe learning environment for colleagues while participating and observing in simulated learning experiences.
- Students may be digitally recorded during scenarios. Viewing of videos recorded during training is only permitted with faculty members. The videos are the property of the nursing department and students may not possess simulation lab videos or recordings.
- Coats, backpacks, and other personal belongings are not permitted in the skill or simulation lab and should be secured before entering the lab area in the provided lockers.
- Electronic devices (iPad, laptop, etc.) are permitted only when utilized within the scenario for access or charting when approved by the faculty.
- Cell phones must be off or on silent and are not used in the skill or simulation lab.
- The camera/video function on any personal electronic device is never used in the skill or simulation lab.
- After a simulation lab experience, take your personal belongings with you (i.e. papers, pencils, stethoscopes, pen lights, etc.).
- Food, drink, and ink pens/markers are prohibited in the labs. **Only pencils** are allowed in the skill and simulation lab.
- If you have a latex allergy, inform your instructor before beginning any skill and simulation lab exercise.

Adapted from Anderson University's School of Nursing Student Handbook
General Clinical Simulation Center Guidelines

Orientation to the Clinical Simulation Center

All users of the Clinical Simulation Center (CSC), including faculty, staff, and students, are required to complete an orientation before utilizing any of the CSC resources. Information to be included in the orientation will include a tour of the center, and demonstrations of the proper use of equipment. The Skill/ Simulation/ Clinical Coordinator maintains responsibility for ensuring that this orientation is provided and completed by all users of the CSC.

Clinical Simulation Center Code of Conduct/ Behavior

The following guidelines are the expectations and requirements for use of the Clinical Simulation Center. Following these guidelines maintains functioning equipment for everyone's use.

1. All faculty and students will adhere to the Clinical Simulation Center (CSC) guidelines.
2. All policies in the JMSON Student Handbook regarding clinical expectations apply to the CSC.
3. All faculty, staff, and students will complete a CSC orientation **before** using the equipment.
4. Students will report to the CSC prepared for active participation in all learning experiences. Professional conduct and communication are expected at all times.
5. Infection control measures utilized in actual client care environments are in effect and used in simulated care areas. Natural oils found on hands can destroy the mannequin's "skin." Hands washed before and after all client contact. Gloves are utilized as they are utilized in the actual clinical setting.
6. All manikins and equipment are treated with proper care and respect as if they were real, human clients.
7. Manikins are to remain on the beds at all times. No equipment is to leave the labs unless permission and approval are obtained from the Simulation/ Lab/ Clinical Coordinator.
8. Equipment and supplies returned to their appropriate location upon completion of simulated exercises. Beds are made and left in their lowest position after each use. Bed rails are lowered when unoccupied by manikins. Gowns are properly placed back on the mannequin after each use.
9. Damaged, missing, or malfunctioning equipment reported immediately to the Simulation/ Lab/ Clinical Coordinator or nursing faculty.
10. Ink pens, felt-tipped markers, iodine, betadine, or KY jelly will not be used on or near the manikins. These items permanently stain task trainers and mannequin skins.
11. Students and faculty will maintain a respectful and safe learning environment for colleagues while participating and observing simulated learning experiences.
12. Simulated learning experiences are used for learning purposes only and no discussion of the scenarios or the actions of fellow students should take place outside of the lab.

Confidentiality and Audio/ Video Recordings

Students are expected to uphold all requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal or state laws requiring confidentiality. To preserve the realism of scenarios used in the CSC and to provide an equitable learning

experience for each student, all persons utilizing the CSC are required to sign a confidentiality agreement and consent to videos. Students are expected to protect information of the actions of peers and are expected to keep these experiences within the clinical group for learning purposes only. Students agree to report any violations to the Simulation/ Lab/ Clinical Coordinator or nursing faculty.

All CSC simulated experiences have the option to be recorded (audio and video). The purpose of recording activities will be for the faculty to debrief the learners immediately following and extend the education process even further. These recordings reside on the Learning Space™ server with individual user security. Instructors and learners may be provided with an individual log-in to the Learning Space™ system to review simulation experiences in which they have participated. All logins are unique and are not to be shared. Consent to video recordings is obtained during new student orientation including a release to allow other students that participate in a joint simulation experience to also view the video. The CSC may photograph simulation experiences for use in public relations. Any sharing of recording or shared recordings of CSC activities, such as on YouTube, is inappropriate and will result in disciplinary action.

Dress Code

Uniforms following the dress code requirements as provided in the JMSON Student Handbook are worn in the skill and simulation laboratory settings. Students may wear the uniform to class on those days when both class and clinical, simulation, or lab experiences occur.

Equipment Use

1. All students and faculty wanting to use the simulation or skills lab must have the proper orientation to the equipment.
2. The doors of the skills and simulation labs are locked whenever the labs are not in use.
3. When working with the manikins, students must wash their hands and wear gloves.
4. Supplies and equipment must not be taken out of the lab unless requested by an instructor.
5. Equipment should be disposed of appropriately (sharp's containers, biohazard trash containers).
6. Students will have the proper orientation to the crash cart and the defibrillator before use.

Communication

All telephones in the skill and simulation labs are to be used for lab purposes only. All electronics are prohibited during any lab experiences unless specifically approved by the faculty member for use during the learning experience for educational purposes. All classes in the CSC are scheduled with the Simulation/ Lab/ Clinical Coordinator before the beginning of the semester.

Inventory and Supplies

Personal clinical supplies such as stethoscopes, and penlights are the responsibility of the student once received in their nursing bag. Students also will receive supplies for skills and simulation experiences in their nursing bags. All supplies are to be kept in the assigned locker that each student will receive at the beginning of the semester. Supplies except for your stethoscope and penlight must remain in the Ferguson Health Sciences Center at all times and should never be

taken home. Most of your supplies are reusable and should be returned to their wrapper and replaced in your nursing bag in your locker when not being used. In the skill and simulation labs, all linens are kept in the supply room and should be refolded and placed back on the shelf unless soiled when experiences are completed. All soiled linens should be placed in the linen hamper for cleaning. Many supplies will have expiration dates and are intended for practice, but all students should check for expiration dates on their supplies.

Clean Up

All users of the CSC have the responsibility for maintaining the CSC in proper working condition. The center should be left in the manner in which it was found so that those who follow will have a positive lab experience. All trash should be disposed of appropriately and reusable supplies and resources should be returned to their designated locations. Beds should be remade and left in the lowest position with the bed rails down (if unoccupied by manikins) or up (if occupied by manikins). Curtains should be placed back against the wall and overbed tables should be placed at the foot of the bed. Bedpans, urinals, and/or basins need to be washed, dried, and placed in the bedside drawers. Soiled linen is placed in covered linen hampers that may be temporarily located in the skills or simulation lab during linen changes and then returned to their storage location. Linen hamper bags should only be filled to $\frac{3}{4}$ capacity, tied securely, and left in the soiled utility room. Soiled linen is washed and dried by the CSC staff utilizing the washer and dryer housed in the 1st-floor laundry room. Reusable supplies should be restocked when not being used. All faculty members and CSC staff are responsible for replacing sharps containers when they become $\frac{2}{3}$ of the way full, but the Simulation/ Lab/ Clinical Coordinator maintains responsibility for disposing of filled containers appropriately. Lights should be turned off upon leaving the lab area.

Any spray used for lubrication of the manikins needs to be used sparingly. Manikins and task trainers in the skills lab are to be cleaned with mild soap and water, rinsed, and dried after every use. All tubes, catheters, dressings, tape, etc. must be removed and the area cleaned appropriately upon completion of simulated exercises. Manikins are to be left in the bed and are not moved unless directed by the Simulation/ Lab/ Clinical Coordinator. All injection pads need to be squeezed of any fluid and left to dry. All drainage bags must be emptied, disposed of, or cleaned appropriately for later use.

Faculty Preparation before Scenario Simulation

It is expected that the faculty will review the scenarios thoroughly before class and work with the Simulation/ Lab/ Clinical Coordinator to obtain props and equipment. Faculty must schedule time with the Simulation/ Lab/ Clinical Coordinator a week before reviewing any scenario being presented. Reviewing scenarios is very important before presenting because it allows the instructor time to become familiar with the equipment being used, the scenario itself, learning objectives, and any discussion questions for debriefing.

Safety Guidelines

Infection Control

Participants in simulated experiences need to be mindful of all standard precautions and transmission-specific precautions (contact, droplet, airborne). Any piece of equipment that comes in contact with simulated patient body fluids is considered contaminated and needs to be handled appropriately. Gloves will be worn with all manikin interactions and non-sterile gloves should be disposed of in non-biohazard trash cans. If a sharps container is full, please inform the Simulation/ Lab/ Clinical Coordinator or a faculty member so that it may be replaced.

Latex Warning

Students, staff, and faculty must be aware that some of the equipment and supplies in the CSC contain latex. Those with a known sensitivity/allergy to latex should contact the Simulation/ Lab/ Clinical Coordinator. Every effort is made to replace equipment with latex-free substitutions. All users who suffer from a latex sensitivity/allergy should take precautions while using or handling latex parts by wearing non-latex gloves.

“Clean” Needle Stick Guidelines

In accordance with the Center for Disease Control (CDC) all sharps are to be handled safely and disposed of properly. In the event of a “clean” needle stick, the faculty should be notified immediately, and the student is directed to the MHU Wellness Center. The Simulation/ Lab/ Clinical Coordinator should be notified so that an incident report form can be filled out. Complications from a “clean” needle stick may include tenderness, minor bleeding or bruising, and infection.

Security and Emergencies

All faculty members are to ensure that lab rooms are secure and safe when using the rooms. Doors should be locked when the skill or simulation lab is not in use. The Department of Safety and Security should be notified if the skill or simulation rooms will be in use on off-hours (evenings and weekends). The Safety and Security office can be contacted at 689-1230 in the event of a security emergency. In the case of a medical emergency, call #911 immediately and request medical care. It is the responsibility of the faculty and students to be aware of the location of emergency exits on each floor of the Ferguson Health Science Building. In case of a fire, all persons will evacuate the building and call Emergency Services at #911 immediately. Fire extinguishers are located throughout each hallway and near the stairwells of each floor please be familiar with their locations.

Physical Safety

All students are instructed on safe handling, repositioning, and transfer techniques before practicing on manikins and each other. All users should use caution when practicing lifting skills and should not lift a manikin or heavy object without assistance. Proper body mechanics are required during all simulated practice and clinical experiences. The wheels of all equipment (beds, wheelchairs, stretchers, etc.) should remain locked. Any accident or injury needs to be reported immediately to faculty and/or the Simulation/ Lab/ Clinical Coordinator. The Simulation/ Lab/ Clinical Coordinator will complete and maintain all incident reports related to incidents in the CSC.

Skills Lab Policy

Laboratory opportunities allow the student to apply the didactic knowledge from the classroom component of a course. Laboratory involves skills, clinical judgment, and critical thinking. There will be competencies within each laboratory component that must be met to pass the course and progress in the program.

Students will come to competency assessments prepared to be successful on the first attempt. Competencies are graded as Satisfactory or Unsatisfactory.

Each skill has a specific number of steps that must be performed correctly for the student to pass the skill. All critical steps are listed in **bold**. If the student misses any step that is listed in **bold**, they will automatically fail that skill.

A grade of “S” means the student:

- Demonstrates a complete return demonstration and/ or competency validation for all required steps (**bolded**).
- Demonstrate all steps correctly for that skill/competency validation.

A grade of “U” means the student:

- Demonstrates an inability to complete a return demonstration and/ or competency validation for all required steps (**bolded**)

Reattempts:

Immediate reattempt opportunity during return demonstration:

- If the student recognizes that they have missed a step or incorrectly performed some part of a skill, they can correct themselves by stopping, verbally stating what they need to correct, performing correctly that portion/step they feel was done incorrectly, and proceed to complete the skill. If the student corrects more than two steps, they will not pass that skill.

Additional Retake Opportunities beyond Initial Return Demonstration:

ALL REMEDIATION AND RETAKES OCCUR OUTSIDE OF REGULARLY SCHEDULED CLASS TIME.

- First Unsuccessful Attempt Retake of laboratory return demonstration:
 - The student must meet with the laboratory instructor outside of regular class time to create a remediation plan and schedule additional practice.
 - Retake of the return demonstration and/ or competency validation must be scheduled with the laboratory instructor.
 - Completion of all remediation and additional practice must be completed within one week of receiving an unsatisfactory skill grade.
- Second Unsuccessful Attempt Retake of Laboratory return demonstration:
 - The student must meet with the laboratory instructor outside of regular class time to create a more in-depth remediation plan and schedule additional practice.
 - Retake of the return demonstration and/ or competency validation must be scheduled with the laboratory instructor.

- Completion of all remediation and additional practice must be completed within one week of receiving the second unsatisfactory skill grade.

If the student receives an unsatisfactory grade after three attempts, no further attempts will be given and a grade of unsatisfactory for the laboratory will be given, which also results in a grade of “F” for the course resulting in failure to progress in the program.

Clinical Policy

1. Students are expected to report to all clinical/lab assignments **on time**.
Note: A “No Call, No Show” to clinical, skills lab, or simulation lab will result in immediate dismissal from the JMSON Program.
2. Students are expected to be neat, well groomed, and properly attired during the clinical experiences. For the nursing skills lab and simulation lab, students **MUST** wear scrubs and their clinical name badge. For clinical, students **MUST** wear their student uniform, white hosiery/socks, white shoes, and clinical name badge as appropriate for the setting.
3. Hair and facial hair must be neat, clean, trimmed, controlled, and styled conservatively. Hair must be off the collar when in scrubs or uniform with no visible adornment (hair bows, barrettes, clips, etc.). Long hair (at shoulder length or below) must be pulled back or worn in a ponytail. Hair color is to be within the spectrum of **natural hair colors**. Although highlights or lowlights may be appropriate as long as within the spectrum of normal hair colors, students are not allowed to have one section dyed a different color that would stand out.
4. Makeup should be conservative and used in moderation. Perfumes, scented soaps, lotions, or sanitizers are **NOT** be used; however, students should be free of body odor. Students will be sent home from clinical if not professionally dressed and free of body odor. If sent home, a student must make an appointment with the Clinical Coordinator to discuss the matter and to determine what form of disciplinary action will be taken.
5. Fingernails must be clean and shall **NOT** extend over the ends of the fingertips. Artificial, acrylic, or gel nails/tips are **NOT** allowed in clinical settings due to infection control guidelines. Polish shall **NOT** be worn in the clinical area. Decorated nails shall **NOT** be allowed in the clinical setting.
6. Jewelry that interferes with patient care or personal safety must **NOT** be worn. A traditional wedding ring (band) may be worn. Rings with protruding gemstones should **NOT** be worn. Body piercings such as tongue rings, belly rings, etc. are **NOT** allowed in the clinical setting, whether visible or not. One (1) pair of small post earrings may be worn in the ear lobe area **only**. Loop/hoop earrings are **NOT** allowed.
7. Tattoos **cannot** be visible in the clinical/lab setting. Tattoos must always be covered by clothing or bandage. **If a student comes to clinical with visible body jewelry/body art, the student will be sent home from clinical and given an unsatisfactory performance for the day.**
8. Students are expected to dress neatly and appropriately for any clinical affiliated activity (orientations, workshops, etc.). Inappropriate attire includes strapless/spaghetti-strap tops or dresses, low-cut blouses, shorts above mid-thigh level, denim, t-shirts, extreme form-fitting clothing (leggings), pajama-type pants, open-toed shoes or sandals, and capris type pants or any other clothing that allows body art to be visible.

9. Cell phones are **NOT** to be used in the clinical setting. Students must leave cell phones in their clinical bags. Students may access their cell phones during break and lunch periods but **NOT** in patient care areas.
10. Students are expected to complete the required clinical orientations by the assigned deadlines to attend clinical as scheduled.
11. Students are always expected to deliver patient care safely and competently.
12. Students are always expected to demonstrate professional conduct and to communicate appropriately with clinical agency staff, physicians, instructors, and classmates. Use of profanity or displays of uncivil behaviors will **NOT** be tolerated at any time and will be subject to disciplinary action.
13. Students **MUST** refrain from discussing any clinical information outside of post-conference and/or the classroom setting. HIPAA violations will result in severe disciplinary action and could be subject to HIPAA fines. Students are to refrain from posting clinical information or pictures on any social media site, such as Facebook, Instagram, Snapchat, etc.
14. Students are **NOT** allowed to remove copies of a patient's record from the clinical site under any circumstance. Students may make notes from the patient's record as needed to aid in the completion of their clinical assignments.
15. Students are to report to the post-clinical conference **on time** and are expected to actively participate. Failure to attend post-conference will result in a clinical absence for the day.
16. Students are expected to complete and submit **all clinical assignments** by the due dates. **LATE WORK WILL NOT BE ACCEPTED.**
17. Students are **NOT** allowed to leave the clinical facility until the completion of the scheduled experience without prior approval of the instructor.
18. Smoking, substance abuse, and/or alcohol use will **NOT** be allowed during the hours of clinical experiences. Most clinical sites have smoke-free campuses. Students who report to clinical with the smell of tobacco and/or alcohol on their breath will be sent home resulting in an absence. An appointment with the Clinical Coordinator will be scheduled to discuss the issue and appropriate disciplinary action will be taken.
19. Clinical experiences will be in various clinical agencies in the area. Students are responsible for their transportation to the assigned clinical agency. Clinical assignments will periodically require travel out of the student's county or state of residence.
20. **Students who do not abide by the clinical regulations will be subject to disciplinary action, ranging from a verbal warning to dismissal.**

CLINICAL SAFETY POLICY

Per the law, which controls nursing in North Carolina, a nursing program has a LEGAL obligation to graduate individuals who demonstrate intellectual skills and abilities and who possess physical and emotional characteristics requisite to SAFE PRACTICE of nursing. Therefore, at any time a student "presents physical or emotional problems or demonstrates behavior which conflicts with safety essential to nursing practice" the faculty will require the student to leave that class/clinical. See also: Chapter 36-Board of Nursing; 21 NCAC 36.0320 STUDENTS (d) 1 and 2, (NCBON, 2009).

If a student is dismissed from clinical for "unsafe" behavior, the student action will:

1. Be followed up with counseling and remediation.
2. Result in an unsatisfactory for that day.
3. Be reflected in their clinical evaluation.

The severity of the "unsafe" behavior will be evaluated and may result in dismissal from the JMSON program. Multiple episodes of "unsafe" behavior will result in dismissal from the JMSON program.

As indicated in the dismissal policy, a student may be removed from clinical if he or she:

1. Demonstrates behavior that conflicts with safety essential to nursing practice
2. Demonstrates physical or emotional impediments that conflict with safety essential to nursing practice and do not respond to appropriate treatment or counseling within a reasonable period
3. Engages in conduct, which violates the North Carolina Nursing Practice Act
4. Engages in conduct, which violates the Code of Ethics for Nurses of the American Nurses Association.
5. Engages in nursing practice for which the student has not been authorized or for which the student has not been educated at the time of the incident.
6. Engages in conduct that threatens or has the potential to threaten the physical, emotional, mental, or environmental health or safety of a client, a client's family member or substitute familial person, another student, a faculty member, another healthcare provider, general public, or the student himself or herself.
7. Through verbal or written word compromises the integrity and/or reputation of the programs of the School of Nursing, the profession, or its affiliates
8. Fails to participate in or complete clinical work for any reason or fails to perform clinical work which is consistent with professional nursing practice, including the satisfactory performance of all critical behaviors specified on the evaluation tool for each course
9. Fails to adhere to College, School, and clinical site policies and procedures.
10. Engages in the use or possession of alcohol and/or illegal drugs on the University campus or in the clinical settings.

Accommodations in Clinical Settings

Certain accommodations that are acceptable for the classroom setting may not be appropriate in a clinical setting. Students must meet all JMSON Technical Standards and policies along with the clinical site institutional standards and policies related to any patient care settings to maintain safety and uphold clinical site agreements.

Dress Code for Simulation/Lab/Clinical

A clinical placement dress code has been established in recognition of the fact that the mode of dress does affect the establishment of a rapport and working relationships with patients, families, and other care providers.

Uniforms are worn by students providing nursing care in clinical, simulation, and laboratory settings. Uniforms must be clean and smoothly pressed and in good repair. The uniform is to be worn only in clinical, simulation, and laboratory settings, however, an exception will be made on days when both class and clinical, simulation, or lab experiences occur. A student may wear the uniform all day or may change into their uniform before starting clinical, simulation, or lab.

JMSON Clinical/ Simulation/ Laboratory Uniform:

- Grey scrub top and navy scrub pants with JMSON patches
- Lab Coat with JMSON insignia
- Long sleeve undergarment (navy or white) optional
- White, Navy, or Black Leather or Leather-type Shoes (closed heels and toes) - No Shoestrings or Clogs.
- Watch with Second Hand (must be able to count a pulse for one full minute)
- Nursing Tote from MHU with Supplies and Equipment
- JMSON student nurse name badge

Nursing students are expected to wear student uniforms when providing care in alternative settings. These settings may include mental health units, outpatient settings, community health settings, and other settings as determined by faculty.

JMSON Uniform for Alternate Sites:

- Black or navy dress style pants
- Black or navy belt (if applicable)
- Blue or white (not see-through fabric) Blouse/ Shirt
 - Men: Button dress shirt/ Polo style shirt
 - Women: Button dress shirt/ dress style blouse/ turtleneck shirt/ sweater
- Black or navy shoes
- Black or navy socks or stockings (knee-high hose are acceptable)
- Lab coat as indicated per clinical facility
- Navy uniform may be worn if acceptable by the clinical facility

Applicable to all lab and clinical sites:

Personal cleanliness is a prerequisite for client care. Regular bathing, hair washing, and use of deodorant are part of personal cleanliness and are expected to be maintained in such a way that promotes an absence of body odor. All attire, accessories, etc. must be appropriately laundered and in good repair. Appropriate undergarments should be worn at all times.

Hair must always be neat. Long hair must be pulled back or neatly restrained so that it does not touch the shoulders and will not interfere with nursing activities. Final determination of the appropriate appearance of hair for any given clinical experience will be made by the faculty member responsible for each course, consistent with clinical agency policies, consistent with Infection Control Practices, and consistent with Quality and Safety Standards. Beards and mustaches should be kept trim and neat.

Nails should be kept clean and short enough to avoid scratching the patient. They should be even with the end of the fingers. No artificial nails, acrylic nails, or gel nails are allowed. Any/all tattoos are to be covered.

One pair of pierced small stud style earrings - silver, gold, or white – may be worn. Only one earring per ear should be worn and the size should not exceed 8mm. No dangle or loop earrings with stones may be worn. No other visible piercings are permitted.

Only wedding bands without stones are worn in labs and clinical.

Electronic devices are not to be used or turned on in class, lab, or clinical unless directed by faculty.

Faculty Responsibility for Lab/Simulation/Clinical

Faculty Responsibilities for Lab

- One week before the scheduled lab experience, the faculty member must submit the Lab Activity form to the Simulation/Lab/Clinical Coordinator.
- Faculty members are responsible for supervising all students brought to the lab for training.
- Faculty members are responsible for providing a skill demonstration to students and all faculty participating in lab so that students are held to the same standard.
- Faculty members are responsible for participating in the lab hours as scheduled.

Course and Type of Lab Activity Form

Date and Time

Objectives:

Lab Topics:

Assigned Student Preparation:

Locations for the activity:

Set-up:

Supplies for the lab experience:

Skill Competency Sheets

Practice Skill Stations:

Practice Stations (August 24, 2017)

Competency stations (August 31, 2017)

Faculty in lab

Regroup and discuss questions from the lab exercise. Clean up & break down the lab.

Faculty Responsibilities for Simulation

- All faculty and students will adhere to the Clinical Simulation Center (CSC) guidelines (reviewed first lab day)
- Students and faculty will maintain a respectful and safe learning environment for colleagues while participating and observing in simulated learning experiences.
- One week before the scheduled lab experience, the faculty member must submit the Simulation Activity Form to the Simulation/Lab/Clinical Coordinator.

Course and Type of Clinical Simulation Activity Form

Date and Time

Student Level:

Objectives:

Simulation Topics/Description:

Assigned Student Preparation before simulation:

Skill equipment needed for simulation activity:

Expected simulation run time:

Report students receive before simulation:

Scenario progression outline:

Debriefing/Guided reflection questions for simulation:

Faculty in lab

Regroup and discuss questions from the lab exercise. Clean up & break down the lab.

Faculty Responsibilities for Clinical

1. Follow the guidelines for clinical experiences in the syllabus.
2. Faculty are expected to be at the clinical site at least 30 minutes before students are expected to arrive.
3. Remain at the clinical site until the time identified in the faculty contract.
4. Clinical assignment sheets are to be completed for each day of clinical. A copy will be posted on the unit and a copy will be kept for clinical records. All assignment sheets will be included with the end-of-course documents.
5. Supervise all student/patient activities, including patient assessments, the performance of skills, and medication administration.
6. Coordinate with students to allow for a 15-minute break in the morning and afternoon as patient care allows.
7. Coordinate with students to allow for a 30-minute lunch break.
8. Assist with the completion of the student clinical evaluations.
9. The faculty are to monitor and grade clinical assignments using the appropriate rubrics as indicated. Graded assignments are to be included in the end-of-course documents.
10. Send an email notification to the Director and the Clinical Coordinator if you are unable to attend a clinical day.
11. Send an email notification to the Clinical Coordinator if a student is absent.
12. Complete agency orientations before clinical which may include:
 - Mandatory learning modules
 - Computer training
 - Nursing unit orientation
13. Encourage students to complete the clinical requirements identified in the syllabus.
14. Identify student learning opportunities to assist students to meet clinical requirements.
15. Monitor student progress regarding the delivery of total patient care and completion of written clinical assignments.
16. Maintain anecdotal notes for each student as indicated.

17. Promptly respond to student questions, concerns, issues, etc. All student communications should be summarized via email and forwarded to the Clinical Coordinator and Program Director.

Responsibilities in the Nurse/Preceptor Relationship
(as stated in the NCBON Preceptor Guidelines)

Preceptor

1. Attends preceptor orientation.
2. With faculty reviews:
 - Responsibilities of the faculty member, preceptor, and student
 - Clinical objectives.
 - Student performance expectations
 - Skills checklist
 - Clinical evaluation tool
3. With faculty and student assesses learning needs and sets goals and objectives for experience based upon identified learning needs.
4. Familiarizes the student with staff, policies, and the organization of the unit.
5. Plans appropriate learning activities.
6. Acts as a role model and clinical resource for student(s).
7. Identifies problems related to the preceptor role and/or student and refers these to the clinical supervisor and faculty.
8. Meets periodically with students, faculty, and clinical supervisor to determine student progress.

Nursing Student

1. With faculty and preceptor sets goals consistent with objectives for the clinical experience, based upon identified learning needs.
2. Assumes responsibility for patient care, within limitations of knowledge and skills, with the guidance of the preceptor.
3. Utilizes resources to increase knowledge, skills, and abilities.
4. Evaluates the learning experiences and the preceptor relationship.
5. Collaborates with a preceptor in planning the student learning activities.
6. Identifies problems related to the preceptor role and/or student and refers these to the clinical supervisor and faculty.
7. Meets periodically with preceptor, faculty, and clinical supervisor to determine student progress.

Clinical Supervisor

1. With nursing program faculty, select preceptor for nursing student.
2. Approves scheduling of time and assignments to ensure that the preceptor is available to the student at all times.
3. Supports preceptor and student by assisting them in the identification of problems and the development of the student skills.

4. Evaluates the learning experiences and the preceptor relationship.
5. Collaborates with a preceptor in planning the student learning activities.
6. Is available for consultation and/or collaboration. Makes periodic observations to determine the progress and effectiveness of the relationship.
7. Meets periodically with the preceptor, student, and faculty to determine student progress.
8. Evaluates the preceptor's performance, the learning experiences, and the preceptor relationship.

Nursing Faculty

1. With clinical supervisor, selects preceptor for nursing student.
2. Conducts the preceptor orientation session.
3. With preceptor reviews:
 - Clinical objectives
 - Student(s) performance expectations
 - Skills checklist
 - Clinical evaluation tool
4. Assists student and preceptor in setting goals and objectives based upon identified learning needs.
5. Collaborates with a preceptor in planning the student learning activities.
6. Assists preceptor and student in identifying problems and provides additional instruction when indicated.
7. Is available for consultation and/or collaboration. Makes periodic observations to determine the progress and effectiveness of the relationship.
8. Meets periodically with the preceptor, student, and clinical supervisor to determine student progress.
9. Evaluates student performance and makes recommendations regarding student's achievement of goals and objectives.
10. Evaluates student clinical performance and determines if the student is meeting goals and objectives.
11. Evaluates the learning experiences and the preceptor relationship.

**JUDGE-MCRAE SCHOOL OF NURSING
SIMULATION/CLINICAL/LAB HANDBOOK**

Acknowledgment of Policies and Expectations

I have read and understand the Judge-McRae School of Nursing Simulation/Clinical/Lab Handbook, and I agree to abide by the terms therein.

Student's Full Name (Please Print) _____

Student's Signature _____

MHU ID Number _____

Date _____