McAuley School of Nursing

Graduate Clinical Handbook APRN Students

2023-2024

The McAuley School of NursingGraduate Clinical Handbookprovides the policies and procedures specific to the clinical experiencesin the graduate program.



Mary Serowoky DNP, RN, FNP-BC Clinical Associate Professor

(313) 993-1935 serowoml2@udmercy.edu

Professional Decorum Policy

Guidelines for Clinical Conduct

As the graduate nursing programs offer new clinical challenges, the developing professional bears the responsibility of representing the profession to patients, the public, and other members of the health care team. The following guidelines should be observed in representing the nursing profession:

Consistently demonstrate your concern for the welfare of the patient. Be thoughtful **and** professional when obtaining the history and performing the physical exam. Treat patients with respect and dignity, both in your interactions with them, and in your patient-related discussions with other professionals. Demonstrate your concern not only for the medical problem but for the total patient.

The following, however, ar professional standards:	e examples of b	ehavior that woul	d constitute a violation of

Requirements for Clinical Participation

The ability to participate in clinical rotations requires that students meet several conditions. Students must successfully complete a criminal background check which includes a urine drug screen. Students must have evidence of current BLS certification and meet all health requirements related to p

The following summarizes the health requirements related to vaccine-preventable disease and nosocomial infection.

Measles, Mumps, Rubella and Varicella

The MSON requires that each student ensure that they are immune to the usualchildhood illnesses; particularly measles (rubeola), mumps and rubella as well as varicella.

Tetanus and Diphtheria

Healthcare workers under 65 who have direct patient contact in hospitals or clinics must get a dose of Tdap. *There is no minimum interval for tetanus*. All adult health care providers should get a booster dose of Td every 10 years.

Hepatitis B

The MSON's policy on Hepatitis B is consistent with the current CDC guidelines. All students have at least begun the Hepatitis B vaccination prior to the beginning of the program. Post vaccination testing for antibody to Hepatitis B surface antigen (Anti-HBs) response is required, and should be done 1-2 months following the last dose. If the student has documentation that he or she received the Hepatitis B vaccine in the past, but did not have post vaccination testing for the presence of anti-HBs response, that student does not need to show proof of immunity. In the event that a student chooses not to obtain the Hepatitis B vaccination and proof of immunity, a signed declination must be received prior to the beginning of training. Students who are known to be Hepatitis B Virus-infected are subject to the CDC guidelines for the management of Hepatitis B-Virus infected health-care providers and students http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6103a1.htm?s_cid=rr6103a1_e

Tuberculosis Status

Students must es. c(stu)-5(d)-3(e)6(286 w(h)-3(a)-3(s)10()--5()-3(t)c-3(sis)8(te)nBT/F1 1TB 6(P)-2a C

Health Service (http://www.udmercy.edu/slo/wellness/index.htm).

Students are responsible for any health care costs, even those that arise from clinical or laboratory assignments. The university assumes no responsibility for a student's medical care.

<u>Criminal Background Check Policy - College of Health Professions</u>

Michigan Public Act 303 of 2002 requires that any individual who regularly provides direct services to patients or residents of nursing homes, county medical care facilities, hospital long-term care units, homes for the aged and adult foster care homes must submit to a criminal background check in order to obtain and maintain clinical privileges. Additionally, many clinical sites affiliated with the University for educational purposes have adopted this requirement. The clinical programs

For the CNS program, preceptors should be nationally certified CNSs in Adult, Gerontology or Adult-Gerontology. When CNSs are not available or additional expertise is deemed essential for the student's education, other professionals (e.g., master's or doctoral prepared nurse practitioners, physicians, nutritionists, social workers, psychologists, nurses, or other health professionals with advanced preparation and specialized expertise) may precept CNS students for circumscribed experiences. Virtual CNS preceptors may be used when preceptors on site are not CNSs.

Please review the guidelines for choosing a preceptor. All clinical sites must be approved by the clinical or program coordinator and a clinical agency affiliation agreement and/or a memo of understanding must be on file. Preceptor credentials in the form of a completed Preceptor Information Sheet(PIS) and unencumbered license to practice must be submitted. Students are required to complete an evaluation of the experience after each rotation.

Graduate Nursing Student Conflict of Interest Statement

In order to ensure both patient safety and the highest standard of clinical education, students must receive impartial supervision and evaluation. A preceptor conflict of interest exists when a previous or current relationship between the student and preceptor could influence or bias the preceptor's assessment and evaluation of the student due to a personal vested interest in the student outcome.

impact, patients, nurses and systems for the CNS program.

A preceptor should be willing to do the following:

- 1. Serve as a role model and be willing to mentor and coach the student.
- 2. Orient the student to the practicum setting and all policies.
- 3. Assure that all staff members at the practice setting understand the role of the student.
- 4. Plan learning activities with the graduate student to meet course objectives.
- 5. Provide the student with consultation and constructive feedback as needed.
- 6. Maintain communication with the student and MSON Faculty. If the student's performance is below expectations, the preceptor should notify the faculty of record for the course immediately.
- 7. Provide the faculty with completed student performance evaluations as required by the program.
- 8. Meet with the clinical faculty at mid-term and/or the end of the term to discuss student performance. Meetings may be virtual or live, program dependent.

Attendance at Clinical Practicum

Students schedule clinical time consistent with preceptor availability and are expected to attend clinical as scheduled. If a student must be absent for a scheduled clinical day, the

emergency setting in urgent care, or other outpatient settings where care is provided on a more urgent need. Students must care for patients across the lifespan.





