KRAMER SCHOOL OF NURSING

GRADUATE CLINICAL/PRACTICUM STUDENT HANDBOOK

August 1, 2023– July 31, 2024



THIS HANDBOOK SUPERSEDES AND REPLACES ANY AND ALL PREVIOUS HANDBOOKS. INFORMATION INCLUDED IS SUBJECT TO CHANGE WITHOUT NOTICE.

These policies and procedures, supplemental in nature to policies and procedures in the *Oklahoma City University (OCU) Student Handbook*, the *OCU Undergraduate Catalog*, the *OCU Graduate Catalog*, and the *KSN Student Handbook* are intended to clarify material contained therein or to address concerns and subjects not covered by those documents. Where Kramer School of Nursing (KSN) policies are silent as to policies enumerated in the *OCU Student Handbook* and catalogs, those documents shall govern.

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Clinical/Simulation/Practicum Information

Clinical Facilities Requirements

Any student participating in a course or independent study with a clinical (traditional or non-traditional) component must present proof of compliance with current health status, health insurance, immunization, CPR (American Heart Association, Healthcare Provider level), HIPAA, liability insurance, background checks, drug screens, and any other requirements specified by the facility where they will have clinical or practicum experiences. This documentation will be submitted on the orientation day prior to the first class meeting. Students are responsible for presenting updated required documentation to the Graduate Clinical Specialist prior to the expiration date of the documents.

Clinical/Simulation/Practicum Attendance

The student will notify the professor and the facility at which the student is expected regarding absence or anticipated tardiness, at least one hour before the experience is scheduled to begin. Absences or tardiness will jeopardize the student's successful completion of the clinical/practicum portion of this course. Failure to notify the facility and the professor may result in clinical/practicum failure. Failure of the clinical/practicum portion will result in failure of the course.

Liability (Malpractice) Insurance

Liability insurance is provided for all KSN students while participating in educational activities at supervised clinical/practicum settings, through a blanket policy held by Oklahoma City University. The policy provides a minimum of \$1,000,000 each occurrence/\$3,000,000 aggregate per year of liability coverage.

Health Insurance Requirement

Students must have health insurance. Acceptable forms verifying health insurance include a card or letter from the insurer that shows the effective dates and the type of coverage. Students with a Certificate of Degree of Indian Blood (CDIB) or tribal enrollment card must present that document along with verification of health insurance provided by such status. Students covered by military insurance must present military identification and an insurance card or eligibility of coverage letter. All Kramer School of Nursing (KSN) students who have assignments in clinical settings are required to have health insurance throughout their KSN enrollment to meet such requirements by the agencies and health care facilities where clinical practicum experiences are held. The student must submit verification of health insurance with other required documents as outlined by the program.

Required Immunizations

All OCU students must meet the immunization requirements outlined by Campus Health Services (https://www.okcu.edu/students/health/immunizations). Students completing clinical/practicum hours must also meet the facility's immunization requirements, if different. The cost of testing, vaccines, and follow-up are the responsibility of the student. Failure to obtain required vaccinations or titers showing immunity can result in dismissal from the Kramer School of Nursing.

The following are requirements by our clinical agencies and community partners. This documentation is required for all students and faculty who participate in clinical/practicum experiences. This process takes more than a few minutes, so it is necessary to start providing documents before your semester begins. This all must be completely finished and on file and verified so it can be forwarded to the appropriate clinical/practicum agencies BEFORE the first day of clinical/practicum. Students who are missing requirements will not be allowed to go to clinical/practicum.

- 1) Current adult **Tdap**
 - a. One dose of Tdap as an adult (18 years or older).
 - b. Booster of Td or Tdap every ten years
 - c. https://www.cdc.gov/vaccines/vpd/dtap-tdap-td/hcp/recommendations.html
- 2) **Measles Immunity. Both** types require immunization or titer.
 - a. Rubella (German or 3-day measles)
 - b. Rubeola (10 day or Red measles)
 - c. Mumps. Students need proof of 2 Mumps vaccines OR the titer showing immunity.

MMR (Measles, Mumps, Rubella) vaccine

Born 1957 or after, proof of two MMRs or two live measles vaccines. Born before 1957, proof of one MMR or titer.

- 3) **Chicken Pox Immunity.** Varicella titer or completed vaccine series (two vaccines) is **required**. If titer is negative, two doses of varicella vaccine required. .
- 4) **Hepatitis B Vaccine series.** Complete series or immune titer. Students may begin clinical/practicum with proof of #1 injection, provided proof of the remainder of required injections in the series are provided to the school. Failure to comply will result in dismissal from the program.
 - a. Most receive three-dose vaccines. Heplisav B is the only two-dose hepatitis B vaccine approved for use in the US, for adult use only.
- 5) **Tuberculin Test. Initial:** Two Negative PPDs, one Quantiferon test (QFT), or T-spot test with negative results within the previous 365 days of semester starting clinical. **Annually**:
 - PPD, Quantiferon test (QFT), or T-spot test with negative results

- If a previous positive TB test, then one Chest X-ray with negative results. Each year thereafter, a physical exam with negative TB symptoms and a Release for Contact form signed by HCP.
- If CXR is positive, an annual medical examination with negative TB symptom screening. A Release for Contact Form must be signed by HCP.
- 6) **Flu vaccine.** Flu vaccination is required before October 31 of each year. Those unwilling or unable to comply will be required to wear a mask throughout their time in any clinical/practicum facility requiring the flu vaccine or mask.
- 7) **COVID-19 vaccine.** Evidence of the COVID-19 vaccine may be required by some healthcare agencies. Students are encouraged to provide verification of the COVID-19 vaccine.

All required immunizations have been established in accordance with the CDC; Oklahoma State Department of Health; and the Occupational, Safety, and Health Administration guidelines.

CPR Certification

Current BLS (CPR) for Healthcare Providers from American Heart (must be renewed every 2 years) is required. Students participating in clinical/practicum experiences must provide documentation of having completed an American Heart Association (Healthcare Provider) CPR course annually to the appropriate program personnel or Clinical Regulations Specialist before expiration of the previous certification. Current ACLS is required for those enrolled in the AGACNP track.

Additional Clinical/Practicum Requirements

Additional clinical/practicum requirements may include:

- Negative drug screen
- Negative background check
- Annual sexual misconduct prevention
- Bloodborne Pathogens Exam with a score of 85% or higher
- In preparation for attending clinical/practicum, you will be provided with documents specific to the facility you will be attending. For some of these you may be required to print, sign, and submit the document.
 - o Orientation specific to the facility you will be attending
 - o HIPAA review for the facility you will be attending
 - o Parking restrictions for the facility you will be attending
 - The dress code for the facility you will be attending in addition to the KSN clinical/practicum dress code in the clinical/practicum handbook

<u>Unsafe/Unprofessional/Unethical Nursing Practice Policy</u>

Unsafe clinical practice is any act, behavior, or omission during clinical practice that fails to conform to the accepted standards of the nursing profession which may directly or indirectly cause physiological and/or emotional harm to others. A violation of the "Unsafe Nursing Practice Policy" is a violation of academic standards. Conduct which falls under the "Unsafe Nurses Practice Policy" may also be subject to disciplinary action under the applicable Oklahoma City University conduct code. Students with LPN, RN, or APRN licenses must also comply with this policy. If a student's performance is deemed "unsafe" they will be removed from the clinical area to protect clients. The student may receive a failing grade for the course. Integrity is essential to the practice of professional nursing. Dishonesty is unacceptable and may result in immediate failure of the course.

Unsafe nursing practice involves placing a client's life, health, or safety at risk, engaging in unprofessional conduct, or violating the KSN Code of Ethics for Nursing Students or the ANA Code of Ethics for Nursing. Unsafe nursing practice is defined to include, but is not limited to, the following behaviors of a nursing student.

- 1. Unsafe practice means jeopardizing a client's life, health, or safety by conduct that *shall include, but not be limited to,* the following:
 - a. Failure to supervise adequately the performance of acts by any person working at the nursing student's direction; or
 - b. Delegating or accepting the delegation of a nursing function or prescribed health care function when the delegation or acceptance could reasonably be expected to result in unsafe or ineffective client care; or
 - c. Unauthorized alterations of medications; or
 - d. Failure to utilize appropriate judgment in administering safe nursing practice based upon the expected level of nursing preparation.
 - e. Failure to exercise technical competence in carrying out nursing care; or
 - f. Performing new nursing techniques or procedures without proper education and preparation; or
 - g. Failure to report through the proper channels the unsafe or illegal practice of any person who is providing nursing care; or
 - h. Engaging in activities which do not fall within the realm of standardized nursing practice; or
 - i. Endangering the welfare of the client through own physiological or mental health status.
 - j. Failing to prepare for clinical adequately.
 - k. Attending clinical without adequate time for sleep or allowing a minimum of 12 hours between shifts; or

- 1. Scheduling clinical shifts longer than 12 hours.
- 2. Unprofessional conduct is nursing behavior (acts, knowledge, and practices) which fails to conform to the accepted standards of the nursing profession, and which could jeopardize the health and welfare of people which shall include but not be limited to the following:
 - a. Inaccurate recording, reporting, falsifying or altering client records; or
 - b. Verbally or physically abusing clients; or
 - c. Falsely manipulating drug supplies, narcotics or client records; or
 - d. Appropriating, without authority, medications, supplies or personal items of the client or agency; or
 - e. Falsifying documents submitted to the Kramer School of Nursing; or
 - f. Leaving a nursing assignment without properly advising appropriate personnel; or
 - g. Violating the confidentiality of information or knowledge concerning the client; or
 - h. Conduct detrimental to the public interest; or
 - i. Discriminating in the rendering of nursing services; or
 - j. Aiding and abetting the practice of practical nursing, registered nursing or advanced practice nursing by any person not licensed as a Licensed Practical Nurse, Registered Nurse or recognized as an Advanced Practitioner; or
 - k. Impersonating a licensed practitioner, or permitting another person to use their nursing student identification for any purpose; or
 - 1. Aiding, abetting or assisting any other person to violate or circumvent any law, rule or regulation intended to guide the conduct of a nurse or nursing student.
 - m. Forging a prescription for medication/drugs; or
 - n. Presenting a forged prescription; or
 - o. Selling or attempting to sell a controlled dangerous substance or otherwise making such drugs available without authority to self, friends, or family members; or
 - p. While caring for a client, engaging in conduct with a client that is sexual or may reasonably be interpreted as sexual; in any verbal behavior that is seductive or sexually demeaning to a client; engaging in sexual exploitation of a client; or
 - q. Obtaining money, property or services from a client through the use of undue influence, harassment, duress, deception or fraud; or
 - r. Engaging in fraudulent billing practices, including violations of federal Medicare and Medicaid laws or state medical assistance laws; or
 - s. Allowing own value system to interfere with client care/well-being.
 - t. Having repeated episodes of tardiness without notifying faculty and/or preceptor as appropriate in advance; or

- u. Failing to attend clinical on the assigned days and times without notifying faculty in advance.
- 3. **Unethical behavior** is a violation of KSN Code of Ethics for Nursing Students or the ANA Code of Ethics for Nursing and *shall include, but not be limited to*, the following:
 - a. Lack of respect for human dignity and the uniqueness of the client, restricted by considerations of social or economic status, personal attributes, or the nature of health problems.
 - b. Fails to safeguard the client's right to privacy.
 - c. Fails to act to safeguard the client and the public when health care and safety are affected by the incompetent, unethical, or illegal practice of any person.
 - d. Fails to assume responsibility and accountability for individual nursing judgments and actions.
 - e. Fails to exercise informed judgment and use individual competence and qualifications when seeking consultation, accepting responsibilities, and delegating nursing activities to others.

Nursing faculty will take the following actions if concerns about unsafe practice by a nursing student are raised:

- 1. Provide a detailed, progressive, and written evaluation of the unsafe practice.
- 2. Clearly identify problems with failure to meet standards for safe practice.
- 3. Document specific recommendations for achieving student improvement in collaboration with the student.
- 4. Provide definitions of expectations of the clinical/practicum experiences that are not being met.
- 5. Communicate with the Chair of the appropriate academic program to inform of potential student problems and seek consultation and support.

If a nursing student demonstrates unsafe or unprofessional behavior in a course or courses, the nursing faculty may impose any of the following sanction(s):

- Immediate suspension from the setting
- Additional learning assignments designed by the faculty to contribute to the achievement of course objectives and change unsafe behavior
- Failing grade for the course
- Immediate dismissal from the course
- Dismissal from the Kramer School of Nursing

Confidentiality of Patient Information

Data transcribed from patients' charts may be used for educational purposes as long as there is no name, number, or information that could be used to relate that information to a specific patient. Printouts of patient information may not be taken from the clinical facility.

Patient information in assignments submitted to fulfill course requirements should use nondescript identification, such as Patient A, Patient B, Mr. B, Ms. B, and so forth. Names should not be used unless fictitious. Any student paper that contains identifying patient information shall not be returned to the student and shall be destroyed by the faculty member. Students are responsible for protecting confidentiality of those who participate in the student's research according to guidelines provided in the National Institutes of Health website and the OCU Institutional Review Board.

Student information in the educational setting is also protected information that cannot be disclosed or taken outside of the institution.

A breach of confidentiality will result in immediate dismissal from KSN.

Background Checks

In order to protect patients and the general public, performing a background check and drug screen on each student and professor participating in clinical/practicum rotations is now a provision required by many clinical/practicum sites using the facility's "Clinical Affiliation Agreement". Background check results, dissemination of self-disclosure information, and conviction records, whether in or outside the state of Oklahoma, may be provided to the clinical/practicum sites as deemed necessary by the school to meet requirements of the academic program. Conviction/criminal history records are reviewed as they relate to the content and nature of the curriculum and the safety and security of patients and the public. The clinical/practicum site (facility) may refuse any student or professor from participating in the clinical/practicum experiences with a background check record that relates to a felony. To be considered for a clinical/practicum placement in those sites requiring background checks, the student must comply with the requirement and all findings must be satisfactory according to the guidelines below.

Students who refuse to submit to a background check will be barred from engaging in clinical/practicum experiences and will be unable to complete requirements of the program or gain employment as a registered nurse. Required components of a background check vary by clinical/practicum agency, so the policy of the Kramer School of Nursing is to require a check that meets the most stringent requirements of local agencies, allowing KSN maximal flexibility for clinical/practicum placements. A copy of the background check report, copies of any relevant court records, and related correspondence with the student will be filed in the student's permanent record.

For most questionable findings, the decision will be made by KSN as to whether the person in question will be permitted to participate in clinical/practicum experiences after consultation with the Oklahoma Board of Nursing, or state board of nursing where student is completing their clinical/practicum experience. If the student has a history of felony charges or registration as a sex offender, the Program Chair of the appropriate program will also review the case with relevant clinical/practicum facilities to determine whether the student will be able to complete clinical/practicum rotations at the facility. The clinical/practicum facility, the school, and the Board of Nursing will together decide whether there is evidence that placement of the student in clinical/practicum rotations could jeopardize the safety of others. KSN reserves the right to request other information as necessary.

Based on the joint decision, the Program Chair will consult with the Dean of KSN and notify the student in writing regarding the student's ability to complete the clinical/practicum requirements of the program.

Background record searches are acceptable only when conducted by the agency authorized by the Kramer School of Nursing. If the student leaves the program and is later re-admitted, another check should be completed. Schools and facilities reserve the right to review any information that could impact the student's ability to function safely in the clinical/practicum area. A conviction/criminal history record does not necessarily disqualify an individual for admission in a program. However, the Kramer School of Nursing does reserve the right to deny admission or progression of any student with a felony history. If a student may not be eligible for licensure/certification (per the Board of Nursing), s/he will be counseled as to the wisdom of completing the program.

International students are subject to the same review as stated above. It may be necessary for the student to contact his/her embassy or utilize a commercial investigative service in order to comply with this requirement. The international student is responsible for obtaining this clearance at his/her expense.

The appropriate Program Chair will review students' background check results. If a review of the report indicates a felony charge or registration on the Sex Offenders Registration List, KSN will request that the person on whom the check was conducted obtain certified copies of court records related to the charge. These records may be obtained from the courthouse in the county in which the charges were filed. Certified copies of court records may vary from state to state, but generally include an information sheet (with a description of the charge), a statement of the charges, and a statement of the judgment and sentence rendered by the court. It is important to review the court records because the information included on the report is sometimes incomplete. For example, a charge may be originally filed as a felony, but later reduced to a misdemeanor. In addition, the report does not always indicate whether the charge was filed as a felony or misdemeanor, nor does it always show the judgment and sentence rendered.

The cost of students' background checks is covered by the Nursing School fees. The cost of background checks for students enrolled in online programs without fees will be at the student's

expense. The report will be accessible only to personnel authorized by the Dean. Individuals may have a copy of their own reports upon request.

The cost of students' background checks is covered by the nursing school fees. For students who are online, and fees do not apply, the cost of the background check is the student's responsibility.

The background check will include, but not be limited to, the following:

- Social Security number verification
- Criminal search (last seven years or up to five criminal searches)
- Employment verification
- Violent Sexual Offender and predatory registry search
- HHS/OIG List of Excluded Individuals/Entities
- GSA List of Parties Excluded from Federal Programs
- Treasury Department's Terrorist List
- Professional license verification/certification and designations check
- Professional disciplinary action search

Drug Screening

As stated in the *OCU Student Handbook*, "Oklahoma City University is to be a safe environment free from alcohol and other drugs." This statement applies to any activities on the OCU campus and those activities off campus that are sponsored by the university. When a student at Kramer School of Nursing is engaged in any activity that is part of the learning experience, the student is to be free of alcohol and other drugs that affect coordination, behavior, judgment, and decision-making ability. The following drug screen policy is in effect for students enrolled in nursing courses:

- 1. All students must participate in mandatory drug screening immediately before or during their first semester of enrollment in nursing courses containing a clinical/practicum component. Students at any level in any program may be subject to random drug screens if there is reason to believe they may be under the influence of or using certain drugs or alcohol.
- 2. The company responsible for drug screening of students will be designated by Kramer School of Nursing. The company will be responsible for collecting specimens, maintaining legal chain of custody, testing specimens, and determining whether specimens are negative. If a student's specimen is non-negative, the specimen will be submitted for further testing and follow up by the medical review officer designated by the company. Kramer School of Nursing will be notified of the results of all drug screens.
- 3. A student with a positive drug screen will not be allowed to attend clinical experiences and will be dismissed from Kramer School of Nursing. If the student holds a license to practice nursing, the appropriate regulatory board where the student is licensed will be notified of the positive drug screen.
- 4. Students who attend classes on campus will have no advance notification of the drug screening. Students enrolled in an online program and/or students who were absent for the on-campus drug screening will be notified by email of timeline and expectations for drug screening as designated by the testing company. Students who are absent on the day specimens are collected will have a 24-hour time frame in which to provide a urine

- specimen according to procedures designated by the testing company. Failure to submit the specimen within 24 hours may result in dismissal from the Kramer School of Nursing.
- 5. As long as the student remains enrolled in the nursing program, the drug screen is not required to be routinely repeated. If, however, the behavior of the student is such that faculty or health care professionals reasonably believe the student is functioning under the influence of drugs or alcohol, a drug screen may be required.
- 6. If the student is absent from the nursing program for any reason for the period of one semester or longer, a drug screen may be required prior to returning to Kramer School of Nursing classes, labs, or practicum experiences.
- 7. Refusal to submit to drug screens is grounds for immediate dismissal from Kramer School of Nursing.
- 8. The student should refer to the *Oklahoma City University Student Handbook* for the current academic year to review policies on student alcohol and drug use while not engaged in nursing activities.
- 9. If a student is dismissed from Kramer School of Nursing due to a positive drug screen, the student may be considered for reinstatement if the following conditions are met: i) submission of written documentation of successful completion of a rehabilitation program relevant to the offense, ii) a minimum of one year has elapsed between the positive drug screen and the request for readmission, and iii) a licensed drug rehabilitation specialist recommends the return to nursing school. Kramer School of Nursing is not obligated to allow the student to return even if all these conditions have been met.
- 10. If the student is readmitted to Kramer School of Nursing, random drug screening may be required during the duration of the nursing program at the student's expense.

Sexual Abuse Prevention

In compliance with Oklahoma City University policy, all employees and students who come into contact with minors of any age are to undergo the required training related to sexual abuse prevention. The training is required only once and is arranged by the Office of Student Affairs, unless required annually by clinical/practicum sites.

Student Dress Code in Clinical/Simulation, Practicum, and Lab Settings

Faculty have the right to require students they perceive to be dressed inappropriately to make immediate modifications or to leave the premises to make specified corrections. The following policies provide consistent requirements for appropriate dress for students in clinical, practicum, and lab settings and any time the uniform is worn.

 MSN students attending practicum should discuss appropriate dress with their individual preceptor and wear what is determined appropriate for the setting (scrubs versus professional dress). BSN-DNP/FNP/AGACNP students may wear professional style street attire with a lab coat. If scrubs are required by the

- agency, BSN-DNP/FNP/AGACNP students may wear scrubs and a white lab coat. BSN-DNP/PMHNP students will wear professional style street attire.
- Student attire will be clean, in good condition, and properly fitted neither too short nor dragging on the floor. Skirts are optional instead of scrub pants, in the appropriate setting. Skirts should be loose enough to allow freedom of movement for bending and stooping activities, must not be any shorter than the bottom of the knee, must not be rolled or otherwise artificially shortened during clinical hours, and must not have any slits in the sides or back that extend higher than the knee.
- All students will wear clean shoes that are sturdy enough to protect the feet from
 injury. Shoes should not have holes, tears, or signs of excessive wear. Clogs may
 be worn if permitted by the clinical agency. Sandals, platform shoes, and shoes
 that make excessive noise are not acceptable. The laces (when required) will be
 clean and tied. Non-porous shoes are recommended for inpatient and clinic
 settings. Socks must be worn with shoes.
- A clean, all-white shirt may be worn under a scrub top; this should fit snugly and be free of designs or logos.
- The Kramer School of Nursing clinical identification badge must be worn during all clinical/practicum and lab experiences. These should be positioned so that the name and picture are always visible.
- Hair must be clean, neat, and off the collar with no extremes in hair styling or coloring. Examples of extreme colors are, but not limited to, blue, purple, or hot pink. Beards and mustaches will be neatly trimmed.
- Jewelry will be limited to engagement and/or wedding ring, watch, and pierced earrings of small post style (less than dime size) with only one earring per ear.
 Medic-Alert® identifications are exceptions to this rule. No other visible jewelry is allowed. Tattoos may not be visible on the face or neck. Tattoos that are visible in the KSN uniform must not be offensive in nature. Henna tattoos are not acceptable.
- No jeans, T-shirts, shorts, or sandals are allowed in the clinical areas of the hospital or during simulation.
- Nail polish is discouraged. If worn, it must be very light in color, without patterns or chips. Nails must be kept short and clean. No artificial nails may be worn.
- Makeup may be used in moderation. No perfume, aftershave, or fragranced
 personal care products will be worn during clinical, simulation, or skills lab.
 Likewise, there must be no odor of tobacco or cigarette smoke on a student's
 clothing during clinical, simulation or skills lab.
- There will be no gum chewing in patient care area, simulation, or skills lab.
- Any special guidelines for clinical dress that deviate from the above will be provided by the faculty during the course or clinical orientation.

• In all cases, if the clinical site has stricter dress code requirements, the student is expected to comply with the dress code of the clinical agency.

Student Exposure to Communicable Disease or Injury in Clinical/Practicum Settings

Specific steps must be followed when a student is exposed to a communicable disease or is injured while practicing in the clinical setting. Students are required to carry health insurance coverage. Procedures in case of exposure or injury are as follows:

- 1. The student will notify the supervising faculty at the time s/he has been exposed to a communicable disease or injured while in the clinical/practicum setting.
- 2. In accordance with the OCU/Agency-signed Clinical Affiliation Agreement, the student will follow the correct procedure of the agency for reporting such an event. If the student is examined or receives care, the student will be responsible for any charges incurred for this examination and subsequent laboratory/x-ray tests or other services required by the institution. Students may refuse treatment.
- 3. If the student chooses treatment, s/he will be seen by a health care provider of the student's choice and at the student's expense.
- 4. If a student refuses to receive care, the student may not be permitted into the clinical/practicum area. Alternate clinical/practicum learning sites will be assigned as available. If no alternatives are found, the student must bear the responsibility of meeting course requirements.
- 5. At the beginning of the nursing courses, students will produce evidence of insurance coverage.

Master of Science in Nursing (MSN) Policies and Procedures

Preceptor Policy for the MSN Student

Preceptors are used for supervision of MSN students in the role-specific practicum experience. Preceptors are not required for observational experiences. A preceptor is employed by the facility in which the experience takes place who agrees to provide supervision to the student for a specified period of time during the preceptor's scheduled work hours in order to assist the student to meet course outcomes and student-identified learning objectives. A faculty member is not on site.

A nurse preceptor shall have the following minimum qualifications:

- At least one year of experience in nursing
- Current unencumbered licensure as an RN
- Comparable or greater formal educational preparation than the student is pursuing.

An Affiliation Agreement will be established between Kramer School of Nursing and the cooperating facility where the preceptor practices. These agreements will be initiated by the program specialist and will be based upon information provided by the student. Kramer School of Nursing shall delineate the functions and responsibilities of all parties involved and provide a preceptor letter of agreement that must be signed before the preceptorship experiences begin. Master of nursing students are acting under the direct supervision of their assigned preceptor and may perform only those duties allowed by the preceptor and which fall within the student's specialty track. No student is to accept or volunteer for any activity for which she/he is not qualified.

With assistance from course faculty, the student will be responsible for finding preceptors in their community. Each student will be responsible for meeting with the preceptor to obtain permission from preceptors for their involvement. No remuneration from Oklahoma City University is available or appropriate for preceptors.

Preceptor Program Policies

The purpose of these policies is to ensure safety of the agency's clients and to protect the preceptor, preceptor agency, student, and nursing program.

An Affiliation Agreement between the clinical agency and Kramer School of Nursing is required. A letter of agreement between the designated preceptor and Kramer School of Nursing is required.

1. The agency shall ensure that:

- a. The preceptor understands and agrees to function in the preceptor role as outlined in the course syllabus. This role must be approved and supported by the administration of the agency.
- b. The preceptor is provided with salary and benefits by the preceptor's employing agency commensurate with his/her position within the agency while acting as preceptor and receives no compensation from Oklahoma City University.
- c. The student is allowed to participate with the supervision of the preceptor, in experiences that enable him/her to meet the learning outcomes of the course.
- d. The preceptor provides faculty with a written evaluation of the student's performance and log of dates and times at the completion of the preceptor experience.
- e. The preceptor cosigns any and all documentation with the student.

2. Kramer School of Nursing will ensure that:

- a. Each preceptor and preceptor agency are provided with policies and learning outcomes of the preceptor program.
- b. The preceptor is provided with these preceptor policies.
- c. A faculty member is available by phone during all experiences.
- d. Faculty will mentor and confer with preceptors throughout the experience.

3. The student will be responsible for:

- a. Reviewing course learning outcomes for the experience and developing personal learning objectives, subject to approval by the faculty and the preceptor. The student must meet the course learning outcomes to successfully complete the course. The student may select areas of interest for their preceptorships at sites approved by course faculty. The student is responsible for writing his/her individual practicum objectives for each preceptor experience. These objectives must be approved by course faculty prior to the first day of the experience.
- b. Negotiating times and dates for each practicum experience with the preceptor. The times and dates must fall within the framework specified and must be submitted to course faculty in writing. The total number of preceptor hours must meet the total number of hours required for the course.
- c. Ensuring that hours are not completed independent of the preceptor.
- d. Evaluation of the preceptor and practicum site at completion of the experience.

Preceptor Role

Experienced professionals in the health care and health education communities possess invaluable talents, knowledge and abilities. When these gifts are shared with students,

opportunities for learning open that are unique to the practical experience. The student benefits from the interaction with a role model while focusing on special learning needs. The preceptor benefits from the teaching experience. As a result, both are better prepared as the student transitions into higher levels of professional practice. The role of preceptor should be undertaken with consideration for the following:

- 1. The preceptor, functioning as an employee of the preceptor agency, acts as a teacher and role model for the student. Otherwise, the preceptor is not expected to perform outside of his/her professional role. It is the sharing of the reality of this role that is the value of the experience for the student.
- 2. The preceptor experience is best facilitated when the preceptor maintains open communication with the student and faculty. The student should be provided with a verbal appraisal of performance each day he/she spends with the preceptor. At the completion of the practical experience, the preceptor will provide a written evaluation of the student's overall performance during the practicum. The faculty will share the preceptor's evaluation with the student during individual conferences. The faculty retains the responsibility for assigning the grade, but preceptor feedback is considered when making these decisions.
- 3. If a situation arises during the experience that the preceptor believes is beyond their role to handle, faculty will be available for consultation. Preceptors are encouraged to call faculty if any doubt exists. A preceptor may request immediate assistance from faculty, if necessary.

Student Role

The faculty at Kramer School of Nursing view learning as a shared experience between teacher and learner. The preceptor program enables the student to design a personal learning experience that best suits individual learning needs within the framework of the course and educational track. The student's primary responsibility lies in communication of these needs to the preceptor and faculty, who can then assist the student in meeting these needs. Times and dates are negotiated with the preceptors prior to beginning the experience. It is the student's responsibility to let faculty know their schedule. Students are expected to communicate with course faculty at the beginning and end of each shift worked and during the shift if there are any concerns. It is important to always keep communication lines open between the student and preceptor. Students may not stay in a practicum area without a designated preceptor and a preceptor agreement on file with the faculty. **Students may not accrue hours during scheduled, paid work hours.**

Evaluation Tool

The criteria for evaluating the MSN student's performance are identified in the "Preceptor Evaluation of Student" form. Additional anecdotal notes may supplement the evaluation. Students should evaluate their preceptor using the "Student Evaluation of Preceptor".

MSN Practicum Preceptorship Processes

To ensure the most positive practicum experience possible, students must work closely with faculty and staff. Paying close attention to specified procedures from identifying a preceptor to completion of required documentation, and all steps in between, is critical. Each step of the process is listed below and reiterated within the student's Homeroom on D2L, with informational content, and/or documents required within that step. Faculty and staff support is provided; however, students must maintain responsibility for meeting deadlines as indicated.

Step 1: Practicum Overview

• Students must review all information included in the practicum process the semester before the practicum is to begin.

Step 2: Submission of Practicum Requirements

- Completion of practicum requirements can be time consuming. It is to the student's advantage to begin gathering the required documentation as soon as possible after beginning the program. It is the student's responsibility to maintain current requirements and documentation in SurPath, throughout the program, even if not currently enrolled in a practicum course. Failure to maintain currency of requirements may result in delaying the student's ability to participate in the practicum experience. Review Clinical/Simulation/Practicum Information in this handbook and the synopsis provided within the student's Homeroom on D2L. The process will begin one-to-two courses before practicum begins. The synopsis will include additional information for practicum preparedness including:
 - o Review Graduate Clinical Practicum Handbook
 - Obtaining a Practicum Badge
 - o Obtaining Background Checks and Urine Drug Screens
 - Immunizations
 - o CPR
 - Sexual Assault Prevention Training
 - o Bloodborne Pathogens Exam

Step 3: Identifying a Preceptor

• Initially, students may find it difficult to find a willing preceptor unless they have already secured one through work or other personal avenues. However, understanding which preceptor is appropriate is important. Students should begin by reviewing the Preceptor Policy for MSN Student requirements with track-specific faculty.

Step 4: Submission of the Preceptor Request

• Submission of a correctly completed Preceptor Profile Form by the set deadline is of utmost importance. Deadlines are communicated within the student's Homeroom on D2L by course faculty well in advance. Reviewing the tutorial prior to submission to SurPath can help avoid delays in processing requests. Incomplete or erroneous data submitted by the student will result in communication from the Graduate Specialist and require resubmission of a corrected preceptor profile form and will delay processing of the request. Requests submitted for facilities that do not have an existing affiliation

agreement with KSN may take longer to process. Review the tutorial in the Homeroom on D2L.

Step 5: Practicum Clearance

When the affiliation agreement is in place for the requested facility and student practicum requirements are satisfactory, the student will receive a clearance notification through email. This notification will provide specific instructions regarding the date you may begin accruing hours with the preceptor. The clearance notification will be communicated from the graduate specialist with instructions for delivering the Preceptor Packet to the preceptor. **Final clearance** is communicated by course faculty. Students may not begin practicum until objectives and final clearance from faculty is received. It is the responsibility of the student to ensure the information is delivered directly to the preceptor on the first day of the practicum. The Preceptor Packet consists of the Preceptor Orientation Letter, Preceptor Letter of Agreement, the Course Description document, and the Preceptor Evaluation of Student form. These forms are available in the student's Homeroom on D2L. The Preceptor Letter of Agreement must include the facility name, signed by the preceptor, and uploaded to D2L before or on the first day of practicum. Failure to complete any of these steps could result in suspension from the practicum setting and loss of accrued hours.

Step 6: Completion of Clinical Hours

• Once a student has completed the required clinical hours for a course, all hours and documentation must be verified. The student will submit the Practicum Documentation Checklist to verify completion of all course requirements. Final documents that must be submitted include the Preceptor Evaluation of Student, Student Evaluation of Preceptor, Student Evaluation of Institution/Practicum Agency, and Student Log of Practicum Hours. Information related to this process can be found in the course syllabus and in the student's Homeroom on D2L.

Critical Names and Email Addresses:

Chair & Faculty

Dr. Cene' L. Livingston, Associate Professor of Nursing, Chair of Advanced Practice Nursing, Chair of Graduate Education, Lead Faculty Psychiatric Mental Health Nurse Practitioner Track - cllivingston@ocku.edu

Dr. Megan Dernaika Clinical Assistant Professor - mdernaika@okcu.edu

Graduate Program Staff

Sherri Christian, Graduate Clinical Specialist - schristian@okcu.edu

Stacey Warden – Graduate Program Specialist - sjwarden@okcu.edu

Doctor of Nursing Practice (DNP/Post-Master Certificate (PMC) Clinical Tracks Policies and Procedures

Clinical Competencies

Kramer School of Nursing is committed to maintaining quality education with measurable outcomes. Multiple national standards and criteria are linked to curricular content to facilitate achievement of program learning outcomes of the Doctor of Nursing Practice (DNP) degree and post-master certificates (PMC). The standards and criteria measured within the DNP and PMC clinical tracks are available through the following links: The American Association of Colleges of Nursing (AACN) provides indicators of quality for all levels of professional nursing education. The indicators for doctoral education are well-organized and widely available as online publications:

- The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006)
- Nurse Practitioner Role Core Competencies (NONPF, 2022)
- Adult-Gerontology Acute Care Nurse Practitioner Competencies (AACN, 2021)
- Adult Gerontology Acute Care (and Primary Care) NP Competencies (NONPF, 2016)
- <u>Population-Focused Nurse Practitioner Competencies (Psychiatric Mental Health)</u> (NONPF, 2013)

Preceptor Policies for the Advanced Practice Programs: Arranging Preceptorships (Adapted from the Oklahoma Board of Nursing Preceptor policy)

Preceptors are used for supervision of students in clinical and role practicum experiences involving participation in patient care. Preceptors are not required for observational experiences. A preceptor is employed by the facility in which the experience takes place and agrees to provide supervision to the student for a specified period of time during the preceptor's scheduled work hours. They will assist the student in meeting identified learning outcomes. A faculty member is not on site.

A preceptor for the nurse practitioner student shall have the following minimum qualifications, as outlined by the Oklahoma Board of Nursing:

- At least one year of experience in their realm of practice, either nursing or medicine
- Current, unencumbered license in the state of Oklahoma, or in another state (if employed by the US government or any bureau, division, or agency thereof), as an APRN, Medical Doctor, or Doctor of Osteopathy and practices in a comparable practice focus
- Function as a supervisor and teacher and contribute to the evaluation of the individual's performance in the clinical setting

 Have demonstrated competencies related to the area of assigned clinical teaching responsibilities

An Affiliation Agreement will be established between Kramer School of Nursing and the cooperating facility where the preceptor practices. These agreements will be initiated by the program specialist and will be based upon information provided by the student. Kramer School of Nursing shall delineate the functions and responsibilities of all parties involved and provide a preceptor letter of agreement that must be signed before the preceptorship experiences begin.

Nurse practitioner students are acting under the direct supervision of their assigned preceptor and may perform only those duties allowed by the preceptor and which fall within the student's training. No student is to accept or volunteer for any activity for which she/he is not qualified. All procedures shall be done under the direct supervision of their assigned preceptor.

With assistance from course faculty and clinical liaison, the student will be responsible for finding preceptors in their community. Each student will be responsible for meeting with the preceptor to obtain permission from preceptors for their involvement. No remuneration from Oklahoma City University is available or appropriate for preceptors. Preceptors must be physicians (MD, DO) or APRNs. It is highly encouraged that the student utilizes both as resources for clinical experiences, however, the student must complete some of their clinical hours with a nurse practitioner.

Preceptor Program Policies

The purpose of these policies is to ensure safety of the agency's clients and to protect the preceptor, preceptor agency, student, and nursing program.

1. An Affiliation Agreement between the clinical agency and Kramer School of Nursing is required. A letter of agreement between the designated preceptor and Kramer School of Nursing is required.

2. The agency shall ensure that:

- a. The preceptor understands and agrees to function in the preceptor role as outlined in the course syllabus. This role must be approved and supported by the administration of the agency.
- b. The preceptor is provided with salary and benefits by the preceptor's employing agency commensurate with his/her position within the agency while acting as preceptor and receives no compensation from Oklahoma City University.
- c. The student is allowed to participate with the supervision of the preceptor, in experiences that enable him/her to meet the learning outcomes of the course.

- d. The preceptor provides faculty with a written evaluation of the student's performance and log of dates and times at the completion of the preceptor experience.
- e. The preceptor cosigns all documentation with the student.
- 3. Kramer School of Nursing will ensure that:
 - a. Each preceptor and preceptor agency are provided with policies and learning outcomes of the preceptor program.
 - b. The preceptor is provided with these preceptor policies.
 - c. A faculty member is available by phone during all experiences.
 - d. Faculty will mentor and confer with preceptors throughout the experience.
- 4. The student will be responsible for:
 - a. Reviewing course learning outcomes for each experience, subject to approval by the faculty and the preceptor. The student must meet the course learning outcomes to successfully complete the course.
 - b. Negotiating times and dates for each clinical experience with the preceptor, subject to faculty approval. The times and dates must fall within the framework specified and must be submitted to course faculty in writing. The total number of preceptor hours must meet the total number of hours required for the course.
 - c. Ensuring that hours are not completed independent of the preceptor.
 - d. Evaluation of the preceptor and clinical site at completion of the clinical experience.

Preceptor Role

Experienced professionals in the health care community possess invaluable talents, knowledge and abilities. When these gifts are shared with students, opportunities for learning open that are unique to the clinical experience. The student benefits from the interaction with a role model while focusing on special learning needs. The preceptor benefits from the teaching experience. As a result, both are better prepared as the student transitions into higher levels of professional practice. The role of preceptor should be undertaken with consideration for the following:

- 1. The preceptor, functioning as an employee of the preceptor agency, acts as a teacher and role model for the student. Otherwise, the preceptor is not expected to perform outside of his/her professional role. It is the sharing of the reality of this role that is the value of the experience for the student.
- 2. The preceptor experience is best facilitated when the preceptor maintains open communication with the student and faculty. The student should be provided with a verbal appraisal of performance each day he/she spends with the preceptor. At the completion of the clinical experience, the preceptor will provide a written evaluation

- of the student's overall performance in the course. The faculty will share the preceptor's evaluation with the student during individual conferences. The faculty retains the responsibility for assigning the grade, but preceptor feedback is considered when making these decisions.
- 3. If a situation arises during the experience that the preceptor believes is beyond his/her role to handle, faculty will be available for immediate consultation. Preceptors are encouraged to call faculty if any doubt exists. A preceptor may request immediate assistance from faculty, if necessary.

Student Role

The faculty at Kramer School of Nursing view learning as a shared experience between teacher and learner. The preceptor program enables the student to design a personal learning experience that best suits individual learning needs within the framework of the course. The student's primary responsibility lies in communication of these needs to the preceptor and faculty, who can then assist the student in meeting these needs. Times and dates are negotiated with the preceptors and approved by faculty prior to beginning the experience. It is the student's responsibility to let faculty know his/her schedule. Students are expected to communicate with course faculty at the beginning and end of each shift worked and during the shift if there are any concerns. It is important to always keep communication lines open between the student and preceptor. Students may not stay in a clinical area without a designated preceptor and a preceptor agreement on file with the faculty.

Evaluation Tool

The criteria for evaluating the nurse practitioner student's performance are identified in the "Evaluation of Clinical Competencies/Clinical Site Visit Report". Additional anecdotal notes may supplement the evaluation. Students also have an opportunity to evaluate their experiences with the preceptor.

Advanced Practice Clinical Liaison Policy

Kramer School of Nursing Advanced Practice Program offers the support of a Clinical Liaison. The Clinical Liaison partners with students in securing an appropriate preceptor to meet clinical requirements for each course. It is recommended that students secure a preceptor six-to-twelve months before a clinical course begins. If a student needs assistance securing a preceptor, they must communicate with the Clinical Liaison, via OCU email, several months before the clinical course begins. Student needs are addressed in order of their request for assistance.

Once a preceptor is secured for a student, the student will receive a detailed email with the option to use the selected preceptor. The student must respond to the email within three days to confirm their acceptance of the placement. If a student does not respond, the preceptor will be offered to the next student requesting assistance. If a student responds to the email but declines to use the preceptor, the student's need will move to a lower priority and may be required to secure a

preceptor on their own. Once a student accepts a placement, it is their responsibility to contact the preceptor and discuss a schedule for the rotation.

DNP/PMC Clinical Preceptorship Processes

To ensure the most positive clinical experience possible, students must work closely with faculty and staff. Paying close attention to specified procedures from identifying a preceptor to completion of clinical documentation, and all steps in between, is critical. Each step of the process is listed below and linked to additional tasks, informational content, and/or documents required within that step. Faculty and staff support is provided; however, students must maintain responsibility for meeting deadlines as indicated.

Step 1: Clinical Orientation and Medatrax Training

• Clinical orientation and training for getting started with the web-based clinical database (Medatrax) will be scheduled prior to upcoming clinical rotations. The timing of the orientation varies depending on the student's degree completion plan (BSN-DNP or PMC). Additional information and tools are available by clicking the Step 1 link above.

Step 2: <u>Submission of Clinical Requirements</u>

• Completion of clinical requirements can be time consuming. It is to the student's advantage to begin gathering the required documentation as soon as possible after beginning the program. It is the student's responsibility to maintain current clinical requirements and documentation in Medatrax, throughout the program, even if not currently enrolled in a clinical course. Failure to maintain currency of clinical requirements may result in delaying the student's ability to submit a preceptor request until records are updated and reviewed. Review the Clinical Facilities Requirements Policy and additional information by clicking the Step 2 link above.

Step 3: Identifying a Preceptor

• Initially, students may find it difficult to find a willing preceptor unless they have already secured one through work or other personal avenues. However, understanding which preceptor is appropriate. Students should begin by reviewing the Preceptor Policies for the Advanced Practice Programs and discuss future course requirements with track-specific faculty. Much of this information will be provided in program orientation. Contacting the Clinical Liaison early and submitting a resume for distribution to potential preceptors is also helpful. Review the Clinical Liaison Policy and find additional helpful information and a list of established affiliation agreements using the Step 3 link above.

Step 4: Submission of the Preceptor Request

• Submission of a correctly completed clinical request - preceptor profile form (one for each preceptor) by the set deadline is of utmost importance. Deadlines are communicated by course faculty well in advance. Reviewing the tutorial prior to submission can help avoid delays in processing requests. Incomplete or erroneous data submitted by the student will result in communication from the Graduate Specialist and will require resubmission of a corrected clinical request – preceptor profile form and will delay processing of the request. Requests submitted for facilities that do not have an existing

affiliation agreement with KSN may take longer to process. Use the Step 4 link above to view a tutorial and other information.

Step 5: Clinical Clearance

• When the affiliation agreement is in place for the requested facility and student clinical requirements have been sent, the student will receive a clearance notification through Medatrax. This notification will provide specific instructions regarding the date you may begin accruing hours and with which preceptor. The clearance notification will also include instructions for delivering the Preceptor Packet to the preceptor. It is the responsibility of the student to ensure the information is printed and given directly to the preceptor on the first day of clinical. The Preceptor Packet consists of the Preceptor Orientation Letter, Preceptor Letter of Agreement, the Course Description document, and the Evaluation of Student Clinical Competencies form. The forms are available in the content section of each clinical course's D2L shell. The Preceptor Letter of Agreement must include the facility name, signed by the preceptor, and uploaded to Medatrax the first day of clinical. Failure to complete any of these steps could result in suspension from the clinical setting and loss of clinical hours. A tutorial is available using the Step 5 link.

Step 6: Completion of Clinical Hours

• Once a student has completed the required clinical hours for a course, all hours and documentation must be verified. The student will submit the Clinical Documentation Checklist to verify completion of all course requirements. Information related to this process can be found in the course syllabus and by clicking the above Step 6 link.

Critical Names and Email Addresses:

Advanced Practice Faculty

Dr. Kim Abernathy

Clinical Instructor - Lead Faculty Adult-Gerontology Acute Care Nurse Practitioner Track - kabernathy@okcu.edu

Dr. Kristen Bomboy

Clinical Instructor - ktbomboy@okcu.edu

Dr. Sara Buster

Clinical Assistant Professor of Nursing - sabuster@okcu.edu

Dr. Megan Dernaika

Clinical Assistant Professor - mdernaika@okcu.edu

Dr. Michelle Johnston

Assistant Professor, Lead Faculty Family Nurse Practitioner - mljohnston@okcu.edu

Dr. Cene' L. Livingston

Associate Professor of Nursing, Chair of Advanced Practice Nursing, Lead Faculty Psychiatric Mental Health Nurse Practitioner Track - cllivingston@ocku.edu

Dr. Danna Weathers Clinical Instructor of Nursing-drweathers@okcu.edu

Advanced Practice Staff

Sherri Christian, Graduate Clinical Specialist - schristian@okcu.edu

Gwendolyn Curry – Advanced Practice Clinical Liaison - gcurry@okcu.edu

Stacey Warden – Graduate Program Specialist - sjwarden@okcu.edu

Appendix:

Forms

A. Forms Required for All Graduate Clinical/Practicum Education

Note: These forms are typically completed in each program's orientation.

Kramer School of Nursing Graduate Student Clinical/Practicum Handbook

I acknowledge with the below	signature that I have received an or	ientation to the KSN Graduate
understand that I am responsib	andbook, including directions on hoole for compliance with the policies lent Clinical/Practicum Handbook.	
Student's Printed Name	Student's Signature	Date



Clinical Experiences: Assumption of Risk

Clinical experiences (practicum clinical rotations, supervised practice, or internships) are a required component of academic programs in the Kramer School of Nursing at Oklahoma City University. These experiences allow students to practice skills and techniques learned in didactic and lab courses as well as develop critical thinking skills that are important for health care providers. Clinical experiences occur in hospitals, clinics, schools, community organizations, and other appropriate settings where students can interact with patients and clients. Students may have the opportunity to be placed in a different setting, but alternative site options are not always available and changes may delay the completion of the student's degree.

Sites selected for students' clinical experiences are required to take reasonable and appropriate measures to protect students' health and safety in the clinical setting. Faculty will develop appropriate policies and procedures relating to student safety and prevention of exposure to disease. Students will have access to appropriate PPE during their clinical experiences. Students will receive training related to potential hazards and prevention techniques. Students have the responsibility to report any potential exposures to the supervisor at their site as well as their KSN faculty member.

However, even with such measures, there are risks inherent to clinical experiences. Potential risks of completing clinical experiences include, but are not limited to:

- Exposure to infectious diseases through blood or other body fluids via skin, mucus membranes or parenteral contact
- Exposure to infectious diseases through droplet or air-borne transmission
- Hazardous chemical exposure
- Radiation exposure
- Environmental hazards, including slippery floors and electrical hazards
- Physical injuries, including back injuries
- Psychosocial hazards
- Offensive, inappropriate, or dangerous conduct by patients, or clients, including violence, harassment, and sexual harassment

These risks can lead to serious complications, trauma, bodily injury or death.

SPECIAL NOTICE REGARDING COVID-19

COVID-19, the disease caused by the novel coronavirus, is a highly contagious disease that causes symptoms that can range from mild (or no) symptoms to severe illness. COVID-19 can cause severe and lasting health complications, including death. Everyone is at risk of COVID-10. There is currently no vaccine to prevent COVID-19.

Although anyone who contracts COVID-19 may experience severe complications, the CDC has found that individuals with certain underlying health conditions are at higher risk of developing severe complications from COVID-19. These medical conditions include: chronic lung disease, asthma,

conditions that cause a person to be immunocompromised, obesity, diabetes, chronic kidney disease and liver disease.

COVID-19 is believed to spread primarily by coming into close contact with a person who has COVID-19 and may also spread by touching a surface of object that has the virus on it, and then touching one's mouth, nose or eyes.

Much remains unknown about COVID-19. Further research may reveal additional information regarding the disease, including how it spreads and what health complications, including long-term complications, can result from contracting it.

Participating in clinical experiences, even when wearing recommended PPE, may increase the risk of contracting COVID-19, and these risks cannot be eliminated.

ACKNOWLEDGEMENT OF RISK

I certify that I have carefully read and understand this document. I acknowledge and understand that, as explained in this document, my degree program requires the participation in clinical experiences, and that such participation carries risks that cannot be eliminated. I fully understand these risks.

I understand that it is my responsibility to follow all instructor and supervisor instructions and take all available precautions so that the risk of exposure is minimized. I will follow all program specific information relating to prevention of disease.

Knowing these risks, I certify that I desire to pursue my chosen degree program, including the participation in clinical experiences. I expressly agree and promise to accept and assume all risks associated with doing so. I am voluntarily agreeing to be bounds by this document's terms.

Student Signature	Date
Student (print name)	-
If student is under 18 years of age, Paren	t/Guardian must also sign:
Parent/Guardian	Date

 $Adapted\ from\ Tulsa\ University\ Oxley\ College\ of\ Health\ Sciences,\ with\ permission.\ June\ 2020$

Kramer School of Nursing Drug Screening Policy

I agree to a mandatory drug screen	ing prior to my beginning clin	ical/practicum time. In keeping
with professional standards, I ackn	owledge that I will be subject	to drug screenings throughout
my nursing education at KSN, whe	ether as an individual or as a pa	art of group screening, if there is
any reason to believe that I may be unannounced random screenings.	under the influence of or usin	g drugs, or as part of
	· -	
Student's Printed Name	Student's Signature	Date

Oklahoma City University Kramer School of Nursing

Confidentiality Statement for Students and Faculty

I know that in performing my duties on the premises of a patient care facility or any site of a clinical/ practicum, I will have access to and/or I may be involved in the processing of confidential information. Confidential information includes but is not limited to verbal, written, or computerized patient/member information, employee/volunteer/ student information, financial information, and proprietary information. I further understand that:

- State and federal laws or regulations have established rights of confidentiality and security obligations regarding patient medical records and information.
- I will not access information concerning any patient in whose care I am not directly involved.
- I will only access, use, or disclose the minimum amount of patient information that I am authorized to access, use or disclose and that is necessary to carry out my assigned duties, unless otherwise required by law.
- I will not improperly divulge any information which comes to me through the carrying out of my assigned duties, program assignment, or observation.
- I will not remove from the department/unit any printed, photocopied, or electronically copied patient, personnel, or business data, or proprietary software.
- I will not discuss any patient or any information pertaining to any patient with anyone (even my own family) who is not directly working with said patient.
- I will not discuss any patient information in any place where it can be overheard by anyone who is not authorized to have this information.
- I will not mention any patient's name or admit directly or indirectly that any person named is a patient except to those authorized to have this information.
- I will not describe any behavior which I have observed or learned about through my association with the facility or its subsidiaries, except to those authorized to have this information.
- I will not contact any individual or facility outside of this institution to get personal information about an individual patient unless a release of information has been signed by the patient or by someone who has been legally authorized by the patient to release information.
- If I am given computer access privileges which are identified and issued to me by a unique identification code and password, the identification code/password must remain secret and cannot be used by anyone but me. The use of my identification code/password constitutes my electronic signature. Any inquires and/or modifications performed by me once computer access has been granted are referenced by my name via the unique identification code/password assigned to me.
- Internet user and usage must comply with all state and federal laws pertaining to Internet use and users including copyright laws. If I am granted Internet access, I must comply with the information services policy of the facility.
- I will not violate confidentiality of students, as established by FERPA laws, if working in an educational practicum setting.

- I will report known, suspected, and potential violations of this Statement of Confidentiality to an appropriate person in the facility and the Kramer School of Nursing.
- I am responsible for protecting the patient's right to confidentiality and for maintaining the confidentiality of patient, personnel and business data/information AT ALL TIMES according to this Statement of Confidentiality.
- If I am found to be in violation of the above confidentiality requirements, disciplinary action by the facility and/or the Kramer School of Nursing may result. Additionally I may be subject to civil legal action and prosecution for violation of criminal law that may apply.

I certify by my signature below that I have read and agree to the above statements and requirements regarding patient/personnel/student/system information.						
(Print) Last name	First name	Middle initial				
Signature and title	Date					
Submit this signed form to y nursing course.	your program specialist within	one week of the first day of your first				