



Nursing
Preceptor Orientation
Handbook

TABLE OF CONTENTS

PRECEPTED CLINICAL LEARNING EXPERIENCES	3
Functions and Responsibilities of the Agency	3
Functions and Responsibilities of Nursing Education Program / Nursing Faculty	3
Functions and Responsibilities of the Preceptor.....	4
Functions and Responsibilities of the Student	5
TEXAS BOARD OF NURSING RULES AND REGULATIONS	5
Rule §214.1 and §215.1 General Requirements.....	5
Rule §214.2 and §215.2 Definitions	5
Rule §214.10 and §215.10 Clinical Learning Experiences.....	6
TYLER JUNIOR COLLEGE NURSING PROGRAM.....	10
Policies.....	10
Mission.....	10
Vision.....	10
Values.....	11
FREQUENTLY ASKED QUESTIONS	12
STUDENT POLICIES.....	12
Attendance.....	12
Expected Clinical Behaviors.....	13
N95 Fit Testing.....	14
Medication Therapy: All Routes of Administration	15
Conduct Related to Professional Behavior/Character.....	16
Progressive Discipline.....	17
Prohibited Skills.....	17
Clinical Uniform Rules.....	20
EXEMPTION PROGRAM FOR CLINICAL PRECEPTORS AND THEIR CHILDREN.....	22

PRECEPTED CLINICAL LEARNING EXPERIENCES

The purpose of precepted clinical learning experiences is to provide the students with a professional role model whose guidance will enhance the attainment of student learning. The preceptor will act as a facilitator and resource person to the student during the clinical learning experiences and will participate in the evaluation of the student's learning.

Functions and Responsibilities of the Agency

1. Retain ultimate responsibility for the care of clients.
2. Retain responsibility for preceptor's salary, benefits, and liability.
3. Provide basic information about the agency's expectation of the preceptor experience to the program and nurses.
4. Interpret the preceptor program and expectations of students to other agency personnel who are not directly involved with preceptorship.

Functions and Responsibilities of Nursing Education Program / Nursing Faculty

1. Ensure that preceptors meet qualifications in
 - Rule §214.10, Vocational Nursing Education, Clinical Learning Experiences (for Vocational Nursing Students)
 - Rule §215.10, Professional Nursing Education, Clinical Learning Experiences (for Associate Degree Nursing Students)

It is recommended that the preceptor has been licensed and in practice for at least one year.

2. Ensure that there are written agreements which delineate the functions and responsibilities of the affiliating agency, clinical preceptor, nursing program, and student.
3. Ensure that clinical experiences using preceptors should usually occur only after the student has received applicable theory and clinical experiences necessary to safely provide care to clients (within course or curriculum), as appropriate.
4. Inform the preceptor of the skill level of the student to guide the preceptor's expectations of the student.
5. Orient both the student and the preceptor to the clinical experience.
6. Provide the preceptor an orientation to the philosophy, curriculum, course, and clinical objectives of the nursing education program. Discuss student expectations, skills performance, student guidelines for performance of procedures, and methods of evaluation.
7. Approve the scheduling arrangement for the student and preceptor to assure availability of the faculty member when needed during the precepting experience.
8. Assume overall responsibility for teaching and evaluation of the student.
9. Assure student compliance with standards on immunization, screening, Occupational Safety and Health Administration (OSHA) standards, cardiopulmonary resuscitation (CPR), and current liability insurance coverage, as appropriate.

10. Work cooperatively with the preceptor and the agency to determine student learning needs and appropriate assignments.
11. Collaborate with the preceptor to ensure appropriate student assignments and clinical experiences.
12. Communicate assignments and other essential information to the agencies.
13. Meet regularly with the clinical preceptor and the student in order to monitor and evaluate the learning experience.
14. Monitor student progress through rounds, student clinical seminars, student-faculty-preceptor conferences and review of student clinical assignments.
15. Be readily available (telephone) for consultation when students are in the clinical area.
16. Receive feedback from the preceptor regarding student performance.
17. Provide feedback to preceptor regarding performance as preceptor and the clinical learning experience.
18. Provide recognition to the preceptor for participation as a preceptor by having preceptor sign Preceptor Agreement.

Functions and Responsibilities of the Preceptor

1. Participate in a preceptor orientation.
2. Function as a role model in the clinical setting.
3. Facilitate learning activities for no more than two students during one clinical rotation.
4. Orient the student(s) to the clinical agency.
5. Guide, facilitate, supervise, and monitor the student in achieving the clinical objectives. Supervise the student's performance of skills and other nursing activities to assure safe practice.
6. Collaborate with faculty to review the progress of the student toward meeting clinical learning objectives.
7. Provide direct feedback to the student regarding clinical performance.
8. Contact the faculty if assistance is needed or if any problem with student performance occurs.
9. Collaborate with the student and faculty to formulate a clinical schedule.
10. Discuss with faculty/student arrangements for appropriate coverage for supervision of the student should the preceptor be absent.
11. Give feedback to the nursing program regarding clinical experience for student and suggestions for program development.

Functions and Responsibilities of the Student

1. Coordinate personal schedule with the preceptor's work schedule to avoid any conflicts.
2. Maintain open communications with the preceptor and faculty.
3. Maintain accountability for own learning activities.
4. Prepare for each clinical experience as needed.
5. Be accountable for own nursing actions while in the clinical setting.
6. Arrange for preceptor's supervision when performing procedures, as appropriate.
7. Contact faculty by telephone, pager or email if faculty assistance is necessary.
8. Respect the confidential nature of all information obtained during clinical experience.
9. Adhere to safety principles and legal standards in the performance of nursing care.

Reference: Texas Board of Nursing, Education Guideline 3.8.3.a, Precepted Clinical Learning Experiences, Revised 07/10/2020. Retrieved from https://www.bon.texas.gov/pdfs/education_pdfs/education_nursing_guidelines/3.8Clinical_Learning_Experiences/3-8-3-a.pdf on July 31, 2021

TEXAS BOARD OF NURSING RULES AND REGULATIONS

Selected Texas Board of Nursing Rules and Regulations that apply to the use of preceptors. Rule 214 applies to Vocational Nursing Education. Rule 215 applies to Professional Nursing Education.

Rule §214.1 and §215.1 General Requirements

- (a) The dean/director and faculty are accountable for complying with the Board's rules and regulations and the Nursing Practice Act.
- (b) Rules for vocational (§214.1) and professional (§215.1) nursing education programs shall provide reasonable and uniform standards based upon sound educational principles that allow the opportunity for flexibility, creativity, and innovation.

Rule §214.2 and §215.2 Definitions

Words and terms, when used in this chapter, shall have the following meanings unless the context clearly indicates otherwise.

Vocational Nursing Education §214.2 Definitions	Professional Nursing Education §215.2 Definitions
(10) Clinical learning experiences. Faculty-planned and guided learning activities designed to assist students to meet the stated program and course outcomes and to safely apply knowledge and skills when providing nursing care to clients across the life span as appropriate to the role expectations of the graduates. These experiences occur in actual patient care clinical learning situations and in associated clinical conferences; in nursing skills and computer laboratories; and in simulated clinical settings, including high-fidelity, where the activities involve using planned objectives in a realistic patient scenario guided by trained faculty and followed by debriefing and evaluation of student performance.	

<p>The clinical settings for faculty-supervised hands-on patient care include a variety of affiliating agencies or clinical practice settings, including, but not limited to: acute care and rehabilitation facilities; primary care settings; extended care facilities (long-term care and nursing homes); residential care settings; respite or day care facilities; community or public health agencies; and other settings where actual patients receive nursing care.</p>	
<p>(11) Clinical preceptor. A licensed nurse who meets the requirements in §214.10(i)(6) of this chapter (relating to Clinical Learning Experiences), who is not employed as a faculty member by the governing entity, and who directly supervises clinical learning experiences for no more than two (2) students. A clinical preceptor assists in the evaluation of the student during the experiences and in acclimating the student to the role of nurse. A clinical preceptor facilitates student learning in a manner prescribed by a signed written agreement between the governing entity, preceptor, and affiliating agency (as applicable).</p>	<p>(11) Clinical preceptor. A registered nurse who meets the requirements in §215.10(j)(6) of this title (relating to Clinical Learning Experiences), who is not employed as a faculty member by the governing entity, and who directly supervises clinical learning experiences for no more than two (2) students. A clinical preceptor assists in the evaluation of the student during the experiences and in acclimating the student to the role of nurse. A clinical preceptor facilitates student learning in a manner prescribed by a signed written agreement between the governing entity, preceptor, and affiliating agency (as applicable).</p>
<p>(24) Health care professional. An individual other than a licensed nurse who holds at least a bachelor's degree in the health care field, including, but not limited to: a respiratory therapist, physical therapist, occupational therapist, dietitian, pharmacist, physician, social worker, and psychologist.</p>	<p>(25) Health care professional. An individual other than a registered nurse who holds at least a bachelor's degree in the health care field, including, but not limited to: a respiratory therapist, physical therapist, occupational therapist, dietitian, pharmacist, physician, social worker, and psychologist.</p>

Rule §214.10 and §215.10 Clinical Learning Experiences

Vocational Nursing Education §214.10 Clinical Learning Experiences	Professional Nursing Education §215.10 Clinical Learning Experiences
<p>(a) Faculty shall be responsible and accountable for managing clinical learning experiences and observation experiences of students.</p>	
<p>(b) Faculty shall develop criteria for the selection of affiliating agencies/clinical facilities or clinical practice settings which address safety and the need for students to achieve the program outcomes (goals) and course objectives through the practice of nursing care or observation experiences. Consideration of selection of a clinical site shall include:</p> <p>(1) Client census in sufficient numbers to meet the clinical objectives/outcomes of the program/courses; and</p> <p>(2) Evidence of collaborative arrangements for scheduling clinical rotations with those facilities that support multiple nursing programs.</p>	
<p>(c) Faculty shall select and evaluate affiliating agencies/clinical facilities or clinical practice settings which provide students with opportunities to achieve the goals of the program.</p> <p>(1) Written agreements between the program and the affiliating agencies shall be in place before clinical learning experiences begin and shall specify the responsibilities of the program to the agency and the responsibilities of the agency to the program.</p> <p>(2) Agreements shall be reviewed periodically and include provisions for adequate notice of termination and a withdrawal of participation clause indicating a minimum period of time to be given for notice of such withdrawal.</p> <p>(3) Affiliation agreements are optional for those clinical experiences which are observation only.</p>	
<p>(d) The faculty member shall be responsible for the supervision of students in clinical learning experiences and for scheduling of student time and clinical rotations.</p> <p>(1) Selected clinical learning experiences will remain unchanged unless a client's condition demands reassignment.</p> <p>(2) Reassignment must be approved with prior consent of faculty.</p> <p>(3) The students' daily client assignment shall be made in accordance with clinical objectives/outcomes</p>	

and learning needs of the students.	
(4) The total number of daily assignments shall not exceed five clients.	
(e) Clinical learning experiences shall include the administration of medications, health promotion and preventive aspects, nursing care of persons across the life span with acute and chronic illnesses, and rehabilitative care.	
Vocational Nursing Education §214.10 Clinical Learning Experiences	Professional Nursing Education §215.10 Clinical Learning Experiences
(1) Students shall participate in instructor-supervised patient teaching.	
(2) Students shall also be provided opportunities for participation in clinical conferences / debriefing.	
(3) When a high-fidelity simulation laboratory is used to meet clinical learning objectives, the faculty shall be trained in planning and guiding the experience and in debriefing and evaluating students. Programs may use up to 50% simulation activities in each clinical course.	
(f) Faculty shall be responsible for student clinical practice evaluations. Clinical evaluation tools shall be correlated with level and/or course objectives and shall include a minimum of a formative and a summative evaluation for each clinical in the curriculum.	
(g) The following ratios only apply to clinical learning experiences involving direct patient care:	
(1) When a faculty member is the only person officially responsible for a clinical group, the group shall total no more than ten (10) students.	
(2) Patient safety shall be a priority and may mandate lower ratios, as appropriate.	
(3) Clinical learning experiences shall be designed for students to meet clinical objectives in all clinical activities (skills and simulation laboratories and hands-on care).	
(4) The faculty member shall supervise an assigned group in one (1) facility at a time, unless some portion or all of the clinical group are assigned to observation experiences or to preceptors in additional settings.	
(5) Direct faculty supervision is not required for an observation experience.	
(h) Clinical preceptors may be used to enhance clinical learning experiences after a student has received clinical and didactic instruction in all basic areas of nursing.	
(1) In courses which use clinical preceptors for a portion of clinical learning experiences, faculty shall have no more than twelve (12) students in a clinical group.	
(2) In a course which uses clinical preceptors as the sole method of student instruction and supervision in clinical settings, faculty shall coordinate the preceptorship for no more than twenty-four (24) students.	
(3) The preceptor may supervise student clinical learning experiences without the physical presence of the faculty member in the affiliating agency or clinical practice setting.	
(4) The preceptor shall be responsible for the clinical learning experiences of no more than two (2) students at a time.	
	(i) Clinical teaching assistants may assist qualified, experienced faculty with clinical learning experiences.
	(1) In clinical learning experiences where a faculty member is assisted by a clinical teaching assistant, the ratio of faculty to students shall not exceed two (2) to fifteen (15).
	(2) Clinical teaching assistants shall supervise student clinical learning experiences only when the qualified and experienced faculty member is physically present in the affiliating agency or alternative practice setting.

<p>(i)When faculty use clinical preceptors to enhance clinical learning experiences and to assist faculty in the clinical supervision of students the following applies:</p> <p>(1) Faculty shall develop written criteria for the selection of clinical preceptors. When clinical preceptors are used, written agreements between the vocational nursing education program, clinical preceptor, and the affiliating agency, when applicable, shall delineate the functions and responsibilities of the parties involved.</p> <p>(3) Faculty shall be readily available to students and clinical preceptors during clinical learning experiences.</p> <p>(4) The designated faculty member shall meet periodically with the clinical preceptors and student(s) for the purpose of monitoring and evaluating learning experiences.</p> <p>(5) Written clinical objectives shall be shared with the clinical preceptors prior to or concurrent with the experience.</p> <p>(6) Clinical preceptors shall have the following qualifications:</p> <p>(A) Competence in designated areas of practice; (B) Philosophy of health care congruent with that of the nursing program; and (2) Current licensure or privilege to practice as a licensed nurse in the State of Texas.</p>	<p>(j)When faculty use clinical preceptors or clinical teaching assistants to enhance clinical learning experiences and to assist faculty in the clinical supervision of students the following applies:</p> <p>(1) Faculty shall develop written criteria for the selection of clinical preceptors and clinical teaching assistants. When clinical preceptors or clinical teaching assistants are used, written agreements between the professional nursing education program, clinical preceptor or clinical teaching assistant, and the affiliating agency, when applicable, shall delineate the functions and responsibilities of the parties involved.</p> <p>(3) Faculty shall be readily available to students and clinical preceptors or clinical teaching assistants during clinical learning experiences.</p> <p>(4) The designated faculty member shall meet periodically with the clinical preceptors or clinical teaching assistants and student(s) for the purpose of monitoring and evaluating learning experiences.</p> <p>(5) Written clinical objectives shall be shared with the clinical preceptors or clinical teaching assistants prior to or concurrent with the experience.</p> <p>(6) Clinical preceptors shall have the following qualifications:</p> <p>(A) competence in designated areas of practice; (B) philosophy of health care congruent with that of the nursing program; and (C) current licensure or privilege to practice as a registered nurse in the State of Texas.</p> <p>(7) When acting as a clinical teaching assistant, the registered nurse shall not be responsible for other staff duties, such as supervising other personnel and/or patient care.</p> <p>(8) Clinical teaching assistants shall meet the following criteria:</p> <p>(A) hold a current license or privilege to practice as a registered nurse in the State of Texas; and (B) have the clinical expertise to function effectively and safely in the designated area of teaching.</p>
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(j) During clinical learning experiences, programs shall not permit utilization of students for health care facility staffing.

(k) The affiliating agency shall:

(1) provide clinical facilities for student experiences;

(2) provide space for conducting clinical conferences for use by the school if classrooms are located elsewhere;

(3) provide assistance with clinical supervision of students, including preceptorships, by mutual agreement between the affiliating agency and governing entity; and

(4) have no authority to dismiss faculty or students. Should the affiliating agency wish to recommend dismissal of faculty or students, such recommendation(s) shall be in writing.

TYLER JUNIOR COLLEGE NURSING PROGRAM

The following are selected excerpts from the Tyler Junior College Nursing Student Handbook applicable to preceptors.

Policies

The faculty of TJC Nursing are responsible for supporting the mission and philosophy of the college, ensuring continuous approval of the programs and facilitating the eligibility of the graduates to seek licensure. Therefore, program policies for placement, progression, and graduation of nursing students will differ in specific instances from those of the College.

Mission

The mission of the Tyler Junior College Nursing Program is to develop professionalism and sound clinical judgement by providing a quality nursing education in a caring environment that supports the needs of our community.

The mission of the Nursing Program reflects the mission of the College by maintaining a high standard of excellence in education, creating a caring environment, and meeting community needs.

The faculty of the Nursing Program supports the mission of the college and ensures continuous approval of the program by the Texas Board of Nursing therefore, program policies will differ in specific instances from those of the College.

Associate Degree Nursing graduates are vital members of the nursing profession who practice within the guidelines of the Texas Nursing Practice Act, standards of care, and the American Nurses Association Code of Ethics for Nurses, and participate in professional nursing activities. The program prepares nurses through nursing education and the teaching-learning process.

American Nurses Association Code of Ethics for Nurses - <http://www.nursingworld.org/codeofethics>

American Nurses Association Principles for Nursing Practice - <https://www.nursingworld.org/practice-policy/nursing-excellence/official-position-statements/ana-principles/>

American Nurses Association Professional Standards - <https://www.nursingworld.org/ana/about-ana/standards/>

Texas Board of Nursing, Nursing Practice Act - https://www.bon.texas.gov/laws_and_rules_nursing_practice_act.asp

Vocational Nursing graduates are prepared to provide nursing care in structured health care settings for clients of all ages who have well defined health problems with predictable outcomes. Emphasis is placed on the ability to make sound judgments based on critical thinking skills and the ability to use technical skills in a variety of settings.

(Revised Fall 2023)

Vision

To inspire excellence and life-long learning in professional nursing practice.

Values

The values of the Tyler Junior College Nursing Program are the same as those of the College.

- Unity: Coming together for a shared purpose to achieve a common goal
- Caring: Combining empathy and action to show a generosity of spirit
- Integrity: Applying principles of transparency, accountability, authenticity, and respect to every interaction
- Empowering: Investing in others by providing the means to achieve success through development and self-actualization
- Excellence: Achieving distinction by proactively identifying opportunities and continually raising the bar

(Revised Fall 2019)

FREQUENTLY ASKED QUESTIONS

1. What skills can students perform?
Students will have a Clinical Skills Checklist with them which will indicate the skills that can (and should) be performed while in the clinical setting. Information regarding procedural and medication limitations can be found in the Student Handbook (Refer to Student Policies within this document).
2. When do I contact the clinical professor?
Faculty are available by phone while students are in the clinical setting. Do not hesitate to call for questions, concerns and/or problems.
3. Who is responsible for evaluating the student?
The ultimate responsibility for student evaluation lies with the clinical professor however, your input is invaluable. You will provide input about the student's performance after each clinical rotation using a rubric.
4. How will I, the preceptor, be evaluated?
You will be evaluated by the student after each clinical rotation using the following rubric:

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
Preceptor arrived promptly as scheduled					
Preceptor was courteous and provided information pertaining to the agency					
Preceptor served as professional role model					
Preceptor introduced student to staff					
Preceptor was professional in attitude and appearance.					
Preceptor was an enthusiastic teacher and helped guide clinical learning					
Preceptor demonstrated collaboration with peers, staff, and other professionals according to the nursing process					

5. What happens if a student becomes ill or is injured during the clinical rotation?
The student must contact the faculty regarding the illness or injury as soon as possible. If injured while during a clinical rotation, the student is to notify the clinical professor and follow the facility policy as outlined by that facility. A copy of all expenses must be attached to the completed insurance form (which can be obtained from the TJC Nursing faculty).

(Revised Fall 2023)

STUDENT POLICIES

The following are selected policies from the Tyler Junior College Nursing Student Handbook.

Attendance

In addition to the Administrative Policies found in the Tyler Junior College Student Handbook concerning student attendance, student absences on religious holy days, and student absence responsibility, the following specific attendance requirements will be enforced for the Nursing program. 'Class' includes all scheduled course activities, including but not limited to lecture, exams, skills labs, simulation labs, clinical

shifts and activities, and on or off campus learning activities or assignments. Punctuality and regular class attendance are mandatory for the success of all students.

Students are expected to:

1. Report promptly and regularly to all classes and remain in attendance during the entire scheduled time unless approved by the professor. All classes will begin on time. Because we are teaching workplace behaviors, students are expected to appropriately notify the Nursing office, the professor and/or the clinical unit if the student finds that he/she will be absent or tardy. Notification of an absence or tardy should occur more than thirty minutes prior to the scheduled start time. Tardiness is unacceptable and will be addressed using the Progressive Discipline policy.
2. Submit written requests to the professor for pre-approval of absences to attend extracurricular field trips or workshops interfering with scheduled class. Requests should be submitted prior to the beginning of the semester whenever possible. Students must have at least a "C" average in theory to be eligible to be excused or rescheduled. The professor may deny requests. Make-up work will be denied/rejected for individuals whose absence was not preapproved.
3. Learning is optimized when students attend class and gain information from the lecture as well as student interaction and discussion. It is the student's responsibility to obtain any missed material. Excessive tardiness/absences may lead to disciplinary action.

Refer to the Tyler Junior College Nursing Student Handbook clinical policy on Clinical Grading for grade adjustments due to absences.

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Expected Clinical Behaviors

Clinical Absence / Attendance

Punctuality and regular class attendance are necessary for the success of all students in the classroom, lab, and clinical settings. Professors will monitor and record absences; however, students are responsible for keeping up with individual absence time.

A no call / no show to an assigned clinical area will result in the utilization of the Progressive Discipline policy.

1. Clinical hours missed are totaled for each clinical course and are included in the computation of the clinical grade; see Clinical Grade Rubric.
2. If a student anticipates they may be tardy, they are expected to appropriately notify the professor no later than 30 minutes prior to the assigned clinical shift. A tardy is reporting for clinical up to 15 minutes after the scheduled arrival time. After 15 minutes, the student will be counted absent for the entire clinical day, and will be considered a no call/no show.
3. Two tardy occurrences in the semester will result in Step Two (Conference) of the Progressive Discipline Policy.
4. Three tardy occurrences in the semester will result in Step Three (Clinical Probation) per the Progressive Discipline Policy.
5. There is no provision for make-up of clinical experiences.

6. In case of absence due to an extenuating circumstance, such as, but not limited to, illness or an accident, a written appeal requesting makeup of clinical time and/or clinical paperwork must be submitted to the Admission/Progression/Reenrollment Committee within 72 hours of a missed clinical shift. The chair of the Admission / Progression / Reenrollment Committee will review the appeal and notify the student of receipt and if any additional information is required. The student will have 72 hours to submit additional information. The Admission / Progression / Reenrollment committee will meet within five working days after receiving the appeal and all required information to determine whether or not a student will be allowed to complete makeup work and the time and nature of the makeup work.
7. Any student missing consecutive (multiple clinical days) for the same reason will file 1 appeal.
8. Students missing any portion of a scheduled clinical shift may receive a grade of zero (0) for all clinical paperwork associated with that shift.

Clinical Fitness for Duty

Tyler Junior College is committed to providing quality nursing education to its Associate Degree and Vocational Nursing Students, that promotes the safety of current and future patients of the students. As part of this effort, it promotes a supportive clinical learning environment that encourages wholeness on the part of students and other members of the healthcare team. It seeks to instill in all student nurses a life-long commitment to their own wellness and responsiveness to the needs of patients that supersedes self-interest.

1. Professional responsibilities: Students and faculty members must demonstrate an understanding of their personal role in the:
 - a. Assurance of their fitness for duty: being “fit for duty” means being capable of performing one’s duties safely, productively, and effectively throughout the clinical shift.

For the student nurse this means professional performance that protects not only patients but other students and nurses, the public, and the student themselves from harm.

- b. The student will:
 - i. Manage their time before, during, and after clinical assignments.
 - ii. Be accountable for knowing they are safe and have the capacity to perform all the duties of a student nurse.
 - iii. Recognize that learning and memory performance are negatively impacted by sleep deprivation, illness, fatigue, and substance use, in themselves, their peers, and other members of the health care team.

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N95 Fit Testing

All nursing students are required to be fit tested for an N95 respirator on an annual basis. Students must wear PPE as necessary in accordance with Occupational Safety and Health Administration (OSHA) regulations, established best practices, and infection control guidelines during clinical where the student may be exposed to potentially infectious or hazardous materials.

Medication Therapy- All Routes of Administration

1. General considerations

- a. All course prerequisites must be met prior to the initiation of any part of this policy.
- b. Prior to administration of any medication, the student is responsible for a basic knowledge of the medication to be given (action, side effects, contraindications).
- c. The student may administer any medication, allowed by their current level, with an assigned nurse preceptor. The student may observe the nurse administer medications not allowed in their current level of education, and to patients to whom the student is not assigned.
- d. The student must seek approval from instructor of record within each course before administering medications with direct licensed supervision.
- e. **A licensed nurse must verify and be present for all medication administration.** A student nurse must NEVER independently administer medication.
- f. Any questionable situation regarding the medication and/or intravenous therapy policy must be referred to a professor from the TJC Nursing program.
- g. All medications must be administered according to the policies of the clinical affiliate of assignment.
- h. Refer to the 'Prohibited Skills' policy for restrictions.

ADN Only:

- i. The licensed hospital staff member responsible for narcotics will obtain narcotics. The licensed hospital staff member will verify the remaining balance of the medication. The student may administer the narcotic to the patient, if permitted by the clinical affiliate.
- ### 2. The medication responsibilities of the **Level 1 student** may include:
- a. Administration of oral, nasal, topical, intramuscular, subcutaneous, intradermal, otic, rectal, and ophthalmic medications, excluding insulin.
 - b. Use of an anesthetic agent as a diluent for intramuscular medications.
- ### 3. In addition to the above, the **Level 2/Transition Level** student may:
- a. Initiate, maintain, and discontinue intravenous (IV) therapy. Intradermal anesthetic may be used when initiating an IV. IV initiation **MUST** be observed by professor or other licensed nurse at the discretion of the professor.
 - b. Administer piggyback solutions to primary fluids in peripheral and central venous lines with direct licensed nurse supervision, except for medications listed in the Prohibited Skills policy.
 - c. Administer hyperalimentation solutions.
 - d. Convert IV line to heparin/saline lock.
 - e. Instill Sodium Chloride and/or Heparin Flush solution into peripheral heparin locks.

- f. Administer IV push medications, EXCEPT medications listed in the Prohibited Skills policy,
 - g. Instill Sodium Chloride and Heparin Flush solution into central venous and multi-lumen catheters according to procedure of the facility.
 - h. Administer insulin once instruction is complete.
 - i. Use a syringe pump.
4. In addition to the above, the **Level 3 student** may:
- a. Administer pediatric dosages of medications.
 - b. Administer oxytocic preparations only after delivery.
 - c. Give Magnesium Sulfate after delivery, with professor supervision ONLY.
5. In addition to the above, the **Level 4 student** may:
- a. administer continuous IV piggyback solutions such as:
 - i. Antiarrhythmics
 - ii. Positive inotropes
 - iii. Electrolyte replacement
 - iv. Vasoconstrictors and vasodilators

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Conduct Related to Professional Behavior/Character

Students participating in any capacity in the TJC Nursing program should conduct themselves in such a manner as to reflect credit upon themselves, the nursing program, and the College. Refer to the Student Code of Conduct in the Tyler Junior College Student Handbook.

Program students are to conduct themselves in a professional manner when on campus, at any clinical facility, or in the community. Students are expected to assume responsibility for their actions and will be held accountable for them. If at any time a student behaves in a manner which is inappropriate, unprofessional, disrespectful, argumentative, or endangers the health or safety of fellow students, professors, patients, or the healthcare team, the progressive discipline policy will be utilized.

Every individual who seeks to practice nursing in Texas must have good professional character. The BON defines good professional character as the integrated pattern of personal, academic, and occupational behaviors which, in the judgement of the Board, indicates that an individual can consistently conform his/her conduct to the requirements of the Nursing Practice Act, the Board's rules and regulations, and generally accepted standards of practice. For more information, see Board Rule **§213.27 Good Professional Character** (<https://www.bon.texas.gov/>).

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Progressive Discipline

Please refer to the Tyler Junior College Nursing Student Handbook for full details. The following is an excerpt from the policy:

Some situations do not allow for the progressive discipline process due to the severity or the timing of their occurrence. In response to severe or extremely dangerous behavior the student may be placed on immediate probation or dismissed from the program. Examples of these include, but are not limited to:

- Unsatisfactory clinical attendance and punctuality
- Unsatisfactory clinical performance
- Inability to maintain physical and mental health necessary to function in the program
- Unethical, unprofessional behavior, and/or unsafe clinical practice
- Refusal to participate with a procedure
- Unsafe or unprofessional clinical practice that compromises patient or staff safety
- Behavior which compromises clinical affiliations
- Violation of patient confidentiality (violation of HIPAA)
- Academic dishonesty/cheating/collusion
- Willful lying or deceit, misrepresenting any fact, lying about any fact
- Verbal or physical abuse of patients
- Any facility's refusal to allow the student to practice in that facility
- Representing that the student holds a certification or license that the individual does not hold
- Falsification of any records, including sign-in sheets, timecards for self or another student
- Stealing information or tangible goods
- Practicing beyond the scope of the clinical objectives
- Being under the influence or in possession of alcohol or drugs while representing TJC on or off campus
- Insubordination to faculty or hospital personnel
- Committing a criminal act at any time while enrolled in the Nursing program
- Documented evidence of lack of proper patient care
- Leaving the clinical area or premises without permission from the clinical professor
- Any form of abusing, disrespectful, threatening, or harassing language and/or behavior to classmates, professors, hospital/clinical site personnel, patients, and patient's family
- Violating or failing to comply with any provision of the rules, regulations, or policies set forth, or any policy stated in the Nursing Student Handbook and TJC Student Handbook
- No call/no show to clinical area as assigned for duty
- Attitude or aptitude not consistent with nursing
- Failure to remain compliant with health requirements and CPR certification

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Prohibited Skills

Scope

This policy applies to all student nurses and clinical faculty at all clinical affiliate sites. A nursing student may not perform these skills during clinical learning experiences. This policy does not apply to the Tyler

Junior College Simulation Center and Skills Laboratories.

Policy

The nursing student can perform tasks for which he/she has been prepared in the education program. The student is responsible for ensuring the licensed nurse assigned to the client, or the faculty member, is present when performing skills, when preparing medications, and when administering medications. According to the Texas Board of Nursing Standards of Nursing Practice, the nursing faculty member shall:

1. Supervise nursing care provided by others for whom the nurse is professionally responsible [§217.11(1)(U)].
2. Implement measures to promote a safe environment for clients and others [§217.11(1)(B)].
3. Comply with any limitations placed on student participation in specific clinical areas that may be part of the contractual agreement between the nursing program and the clinical affiliating agency.

Procedure

1. TJC Nursing shall provide the student with appropriate content and clinical application of skills commensurate to skills and knowledge required for client care.
2. Students may perform procedures and treatments commensurate with educational attainment of these skills with some exceptions.
3. Students may **NOT**
 - a. Witness legal documents (such as consent, power of attorney)
 - b. Take telephone / verbal orders
 - c. Obtain consent, neither telephone nor in person
 - d. Function as a translator / interpreter
 - e. Assess cervical dilation
 - f. Insert an intravenous catheter into a client under 14 years of age
 - g. Attempt more than two intravenous catheter insertions on any client
 - h. Access an implanted vascular port
 - i. Flush an existing intravenous catheter to restore patency
 - j. Be in possession of narcotic keys
 - k. Pronounce death
 - l. Insert nasoduodenal, nasojejunal, or weighted enteral feeding tubes
 - m. Care for, or assist with the care for, a client currently involved in any type of investigational study

- n. Care for, or assist with the care for, a client on airborne precautions, if not FIT Tested for N95 Respirator within the last year
4. Students may **NOT** administer the following medication:
- a. Intravenous chemotherapy
 - b. Intravenous medications that require titration (for example, antiarrhythmics, positive inotropes, electrolyte replacements, vasoconstrictors, and vasodilators)
 - c. Research medications
 - d. Moderate sedation (succinylcholine, propofol)
 - e. Blood and blood products (for example whole blood, packed red blood cells, fresh frozen plasma, platelets, RhoGAM, and clotting factors)
 - f. Thrombolytics (alteplase, reteplase, tenecteplase, urokinase)
 - g. Oxytocin medications until after the placenta has been delivered
 - h. Prostaglandin suppositories
 - i. Epidural medications of any kind
 - j. Intrathecal medications of any kind
 - k. Any medication during resuscitation and stabilization of a client
 - l. Any medication not prepared by the student
 - m. Vocational nursing students may not administer any IV medications, except normal saline flushes
5. Students may not be a witness to or waste any controlled substances
6. Any medication to any patient to whom the student's nurse is not assigned. The student may observe the nurse administer medications to patients to whom the student's assigned nurse is not assigned to. The student may not participate nor assist with any other nurse's assigned client, without approval of the assigned nurse and their assigned professor.
7. Students may **NOT** manipulate arterial catheters including:
- a. Drawing blood from an existing arterial line
 - b. Removing an existing arterial line
 - c. Performing arterial punctures for blood collection or line insertion
8. Students may **NOT** perform hemodynamic monitoring including
- a. Inflating a pulmonary artery catheter (Swan-Ganz) balloon or assist with insertion
 - b. Wedging a pulmonary artery catheter

- c. Manipulating a pulmonary artery catheter
 - d. Obtaining blood from the pulmonary artery port for SVO₂ calibration or mixed venous blood gas
 - e. Injecting fluid for cardiac output measurement
9. Students may **NOT** perform any delegated medical act, such as removal of chest tube, arterial line, or pacemaker wires
10. Students may **NOT** perform the following test:
- a. Stool guaiac tests
 - b. Infant heel sticks
 - c. Any laboratory test or procedure that requires color discrimination (for example pH paper or dipsticks)
11. Students may **NOT** perform point of care testing¹, but may observe the facility employee performing the test. Examples of point of care testing include, but are not limited to:
- a. Glucose testing
 - b. Rapid strep, flu, COVID, RSV testing
 - c. Urine dipsticks
 - d. Urine pregnancy test

References: <https://www.aacc.org/publications/cln/articles/2016/february/monitoring-point-of-care-testing-compliance>

(Revised Fall 2023)

Clinical Uniform Rules

1. The student will wear full uniform, including picture identification, in the clinical area as appropriate to the day's assignment. The clinical professor will be the judge of uniform appropriateness.
2. The uniform appropriate for all clinical activities including direct patient care includes:
 - a. For females, a black (ADN) or blue (VN) scrub top or black (ADN) or blue (VN) unisex V-neck scrub top and black (ADN) or blue (VN) scrub pants (cargo style scrub pants are acceptable) or a scrub skirt. No jumpsuit or one-piece scrubs allowed.
 - b. For males, a black (ADN) or blue (VN) unisex V-neck scrub top and black (ADN) or blue (VN) scrub pants (cargo pants are acceptable). Only black or white (ADN) or blue or white (VN) tee shirts may be worn under the scrub top.
 - c. Closed toes and heel shoes that are predominately white or black. White or black (ADN) or white or blue (VN) socks or hose are to be worn with pants or skirts.

- d. Black (ADN) or blue (VN) lab jacket with the TJC patch may be worn over the uniform. Black (ADN) or blue (VN) surgical cap may be worn with the TJC uniform.
 - e. Hospital issued scrubs may be worn in designated areas only.
3. Hems
- a. Pants will be ankle length, not dragging the floor.
 - b. Skirts will be no shorter than the top of the patella (knee), no longer than mid-calf.
4. Professional accessories required include name badge, black pens, scissors, stethoscope, non-LED penlight, watch with either a second hand or digital seconds readout, and small calculator.
5. TJC patch must be sewn 2.5 inches below the shoulder seam on the left sleeve of the lab coat and scrub top.
6. Clinical Badges
- a. Badges will be worn on the left side of the top, or above the lab coat pocket. Badges must have a current semester designation attached. No retractable badge reels allowed in the clinical setting for the students' safety.
 - b. The student will wear a badge-buddy signifying the level he/she is currently enrolled in.
 - c. Clinical badges must be surrendered to the Nursing office in the event the student leaves the program for any reason.
7. Hair
- a. Hair must be of a simple style (including wigs and hairpieces), clean, neat, out of the line of student's vision, and pinned up or back to prevent bacteriological hazard to patients.
 - b. No bows or other decorations are permitted. Plain neutral colored hair clasps or headbands may be worn.
 - c. Color of the hair must be natural, (i.e., black, brown, blonde, or red) For example no blue, green, pink, etc., or other unnaturally occurring color.
 - d. Hair must meet the dress/grooming requirements of the clinical agency. Mustaches and beards must be neatly groomed, clean, and trimmed. Certain types of facial hair interfere with the effectiveness of personal protective equipment. Zero facial hair in the area of a mask is the only way to ensure protection from exposure to dangerous contaminants.
8. Grooming
- a. One flat wedding band with no stones may be worn on the appropriate ring finger. No other rings are allowed.
 - b. No neck jewelry may be worn.
 - c. No bracelets may be worn.

- d. Only one earring (no larger than $\frac{1}{4}$ " in diameter) is allowed per ear. Ear gauges are not allowed and any opening left by a gauge must be filled with a flesh-colored plug.
 - e. No visible body piercing other than ear piercings are allowed. Any other piercings may have a clear/translucent/flesh colored spacer in place of jewelry. No facial jewelry of any kind is allowed. If a spacer cannot be placed in a facial piercing the piercing must be covered or removed.
 - f. Fragrance and extreme make-up are not permitted.
 - g. Students are required to maintain good hygiene.
 - h. Tattoos may be visible **unless**:
 - i. They convey violence, profanity, indecency, or discrimination
 - ii. They are on the head, face, or neck.
 - i. Fingernails must be clean and neatly trimmed, without any nail polish, artificial nails, nail tips and/or wraps.
 - j. Uniform is to be kept neat and clean at all times.
 - k. Exceptions to the TJC policy may be requested by clinical sites or specialty areas. Students should contact the clinical instructor when recommendations are made.
9. Wearing of the uniform
- a. The scrub top and name badge will be removed before attending activities outside the hospital.
 - b. The student will refrain from smoking, vaping, chewing gum, chewing tobacco, drinking alcohol, and dipping snuff while in uniform.

A student may be removed for the shift from the clinical setting by the clinical instructor for noncompliance with these guidelines, and the Progressive Discipline policy will be utilized.

(Revised Fall 2023)

EXEMPTION PROGRAM FOR CLINICAL PRECEPTORS AND THEIR CHILDREN

If you are interested in applying for the Exemption Program for Clinical Preceptors and their Children, please retain a copy of your signed preceptor agreement to submit with your application form. For more information about the program, go to <http://www.collegeforalltexans.com/apps/financialaid/tofa2.cfm?ID=546>.