

# Undergraduate Nursing Student Clinical Policy Handbook

(Traditional BS, RN-BS, Second Degree Accelerated BS Tracks)



Revised April 2018, October 2018, November 2018, November 2019, August 2020, December 2020, October 2021, May 2023

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## **Fall 2021 Reopening Plan and Requirements**

The University, following CDC and Massachusetts Department of Public Health guidance, plans to offer a combination of face-to-face, blended, and remote learning courses this fall. The full re-opening plan is available at: <https://www.umassd.edu/covid/> .

As per the letter sent to students, families and the public by Dean Christopher (appendix A) the CNHS will offer clinical, labs and classes following the same guidelines and procedures set forth by the university.

### **Clinical Policies**

#### **Policy for Documentation of Health and Non-Health Credentials**

The College of Nursing and Health Sciences (CNHS) uses a Third-Party Vendor to manage documents related to nursing clinical requirements. Communication from the nursing program regarding clinical requirements and credentials is disseminated through email.

**Students are responsible for reading all CNHS communications throughout the calendar year.**

- Requirements and timelines apply to ALL students: including students who are enrolled in a clinical course, students who are not enrolled in a clinical course, and students who will enroll in a clinical course.
- Students are subject to CNHS/UMassD disciplinary actions if expected credentials are not met by the predetermined deadline.

**Students are expected to comply with the following requirements:**

1. Establish an account with the third-party vendor as directed at the student's expense
2. Complete all clinical requirements as directed.
3. Upload **all** documents and credentials related to clinical requirements per schedule.
4. Meet all timelines and deadlines as outlined by the CNHS
5. Contact the third-party vendor help desk with any questions or concerns with your individual profile.
6. Contact the CNHS staff if unable to resolve concerns, issues or questions with the third-party vendor staff.

#### **General Clinical Policies**

##### **1. Immunization**

ALL students who are admitted to UMass Dartmouth CNHS must comply with the Massachusetts Department of Health Immunization Laws for Healthcare Workers available at:

<https://www2a.cdc.gov/vaccines/statevaccsApp/Administration.asp?statetmp=MA>

## AND 244 CMR 6.04 (3) MA Board of Nursing

Initial health immunization records are managed by Student Health Services on admission to UMassD. Sophomore, Junior and Senior Traditional BS students, ABS and RN-BS track students have additional health related requirements as delineated by the nursing program, clinical agencies, and Massachusetts Department of Public Health. In the summer preceding each year in which nursing students are enrolled in a clinical “NUR” course(s), information about health-related requirements, including immunizations, will be sent to you from the College. Traditional BS and ABS students must complete the required requirements and submit the completed forms to the third-party vendor as instructed.

**Students will not receive a clinical assignment in a clinical course until the health/immunization requirements have been met. Failure to meet health/immunization requirements may result in a failing grade in the course.**

The clinical instructor for each section of a clinical “NUR” course will exercise the authority to defer clinical assignment until the student completes the stipulated health related requirements. Protracted delay could result in the student's inability to meet course outcomes within that semester.

If you have any questions about health services, forms, or health insurance, please call the College (508-999-8586)

### 2. Cell Phone Use

The inappropriate use of cell phones is not permitted in the clinical setting. Inappropriate use is defined by clinical faculty and may vary by clinical setting. Prohibited activities include: texting, social telephone calls, telephone use during pre/post conferences, use of social networking, and photography of any kind.

Phones should be set to “vibrate” or “off” while in the clinical setting. In any case of cell phone use, if the policy of the clinical institution is more prohibitive than the policy of the University of Massachusetts Dartmouth, the policy of the clinical setting shall supersede the University of Massachusetts Dartmouth policy.

### 3. Cardiopulmonary Resuscitation (CPR) Certification Requirement

**Students are required to be certified in Basic Life Support for Health Care Providers (CPR and AED) by the American Heart Association prior to the beginning of each academic year in which they enroll in clinical courses. A copy of the certification must be submitted per instructions. Students without this certification may not attend clinical.**

- Courses are offered by American Heart Association, local hospitals, local community groups, and the UMass Dartmouth Public Safety Office. The course that students must take is CPR for Health Care Providers from the American Heart Association.
- It is suggested that students take a CPR Course through the recommendation of the student support staff. You will then be certified in time for Fall clinical courses. Check with the Student Support Staff for specific time and dates.

- Students are required to submit all necessary documentation per instructions by the established deadline in order to attend clinical experiences. Students will receive a clinical warning and will not be able to participate in clinical until all documentation is uploaded to the 3rd party vendor.
4. A requirement imposed by one of our largest clinical settings for all employees and student affiliates is a ten (10) panel urine screening (for drug use) conducted once before the first agency clinical course. Typically, this will be required in the fall of the Sophomore year.
  5. Basic students entering the Sophomore year, Senior year, ABS and RN Students will be subject to a Criminal Offender Check (CORI) in the State of Massachusetts. Students must submit the permission form prior to the start of clinical sessions. Should a CORI check result in a positive finding (evidence of a criminal record,) the report will be reviewed by the Dean and the student will be required to submit a written explanation of the criminal offense, the outcome and subsequent activity. The Dean will determine if the student may continue in the program. The outcome of the Dean's deliberation cannot be appealed. Additionally, during senior mentorship, some facilities require a national criminal background check. This may result in an additional charge for students at these facilities.
  6. All students must wear the official student uniform when in the clinical agency. The faculty may make alterations in requirements as appropriate to the clinical activity. At all times students are to present themselves in a professional manner.
  7. All students must read and understand the clinical information and policies related to infection control and exposure contained in this handbook.
  8. Students are responsible to provide their own transportation to clinical agencies.

**Note:** The following pages contain more detailed information about each of the policies referenced above...

Rev. 6/98, 6/99, 6/00, 6/01, 6/04, 8/09, 3/12, 4/15, 12/20

## **CORI/SORI Policy**

### **For CNHS Students and Potential Applicants to the CNHS**

In order for a student to be eligible to participate in an academic, community, clinical program or internship that involves potential unsupervised contact with children, the disabled, or the elderly, the student will be required to undergo a Criminal Offender Record Information (CORI) check and/or a Sex Offender Registry Information (SORI) check and the possibility of fingerprinting per clinical agency policy. An additional cost may be incurred per clinical agency policy. Students found to have certain criminal convictions or pending criminal actions will be presumed ineligible to participate in clinical activities. The CNHS is authorized by the Commonwealth's Criminal History Systems Board, pursuant to Massachusetts General Laws, Chapter 6, Sections 167-178B, to access CORI records. The CNHS shall refer to regulations issued by the Commonwealth's Executive Office of Health and Human Services, 101 Code of Massachusetts Regulations 15.00-15.16, as guidance when assessing student CORI records. Sex Offender checks shall be performed pursuant to Massachusetts General Laws, Chapter 6, Sections 178C-178P.

For information regarding the CNHS's CORI/SORI check process, please contact the Dean of CNHS or designee.

For mentorship students, there may be an additional expense for clinical agency mandated CORI.

Please NOTE: The CNHS is obligated to comply with our contracted agencies CORI polices. Therefore, this information is subject to change. CORI forms are submitted per annual instructions. Students are responsible for providing all required information by specified deadlines. 9/10, 3/12, 8/12 4/15

## **Professional Appearance Guidelines**

To prepare for a successful academic year in the CNHS students, faculty and staff are reminded to review the existing dress code for the nursing program. The current dress code must be adhered to in the Nursing Lab, faculty and administrative offices, and in classrooms in which nursing courses are taught. These dress code standards are very important to maintain and are not difficult to attain. Please contact the Assistant Dean if you have questions regarding the present dress code.

### **Laboratory Expectations**

Nursing students, whether in the Nursing Lab, faculty or administrative offices or in the classroom, must respect the image of the profession. The college frequently has visitors touring the building and laboratory. Apparel is one aspect of communicating professional image of nursing to the public. Dress code requirements in the clinical setting are not addressed here. Dress required for religious reasons such as, but not limited to head scarves, is acceptable. The following dress code must be followed.

Faculty members will require students to comply with this dress code. A determination of whether the dress code has been violated shall be at the sole discretion of the administrative staff and faculty members. As a first warning, the student will be reminded of the dress code. After the first warning, if the student continues not to adhere to the dress code, the student will be asked to leave the classroom or faculty/staff area. Revised 10/04, 8/09, 8/10, 12/14

### **In Addition:**

A professional appearance reflects pride in oneself, the professional image of the CNHS and communicates competence to those you care for. All students are expected to follow these guidelines.

Clinical faculty will advise the student of guidelines that are specific to the clinical lab, clinical agency, nursing unit, or learning experience.

### **Personal Appearance**

Students shall be neat and clean at all times. Good personal hygiene is expected.

#### ***Fingernails***

In accordance with infection control standards, fingernails should be well manicured and kept at a short/active length (just beyond the tip of the finger). Artificial nails (acrylic, gels, or wraps) are not allowed. If wearing nail polish; clear or a pale colored nail polish only. Nail polish should not be chipped.

### ***Hair Styles***

Hair styles should be neat and clean.

Hair is to be above the collar of your shirt.

Beards and moustaches should be neatly trimmed and well groomed. Hair color per agency policy.

### ***Jewelry***

Jewelry should be kept to a minimum. Jewelry can create a potential safety or infection-control hazard and may not always reflect a professional image. Students will be asked to remove any jewelry that impairs safe and effective nursing practice such as: Dangling/projecting earrings and/or piercing (including barbell/industrial piercings and hoops), bracelets or necklaces. Rings beyond a wedding band are not allowed, as they may present a safety and/or infection control hazard. (Revised 5/23)

### ***Tattoos***

Tattoos are not to be visible.

### ***Perfume***

Staff, peers, patients, and guests may be allergic to or find some odors offensive.

Perfume, aftershave, strongly scented lotion and strongly scented hair spray is not to be worn.

### ***Gum Chewing***

No gum chewing during clinical or on nursing lab days.

Revised 10/04, Reviewed 12/14

## **Expectations Lab and Clinical Agency**

### ***Shoes***

Students should wear one of the following: a professional nursing shoe that is fully closed without air vent openings or sling back, pair of well-kept cross trainers, running shoes, clogs or walking shoes in white, black or brown.

(update voted by Faculty org. 2/23/2015)

### ***Socks & Stockings***

Clean socks or stockings must be worn. You are not allowed to wear shoes without socks or stockings.

### ***White Lab Coat***

Three-quarter or waist-long lab coats are appropriate. Ample pocket space is desirable. UMass Dartmouth emblem/patch attached to the left sleeve, near the shoulder.

UMass Dartmouth name pin is to be worn on the left chest of your lab coat. Both are available for purchase through

the UMass Dartmouth Bookstore.

***UMass Dartmouth Name Pin:***

To be purchased through the UMass Dartmouth Bookstore and worn at all clinical experiences. The name pin is to include the student's first name and last initial.

**Hospital Based and CNHS Based Clinical Days (including assessment, skills and SIM labs)**

UMass Dartmouth College of Nursing uniform unless otherwise instructed by your clinical faculty.

***UMass Dartmouth CNHS Nursing Uniform***

The UMassD College of Nursing school uniform is available for purchase through the University of Massachusetts Dartmouth Bookstore. All students are required to purchase the following:

**Sophomores:**

- One navy UMass Dartmouth CNHS uniform top.
- One pair of unisex navy uniform pants

**Junior & Seniors:**

- There is a minimum of 2 clinical days each week. Recommend: One (or two) navy UMass Dartmouth CNHS uniform tops. One (or two) pair of unisex navy uniform pants

**Psych Clinical Agency:**

- One (or two) navy polo UMass Dartmouth CNHS uniform top.
- One (or two) pair(s) of khakis

**ABS Track:**

Recommend two navy UMass Dartmouth CNHS tops and navy unisex uniform pants. Uniform is to be neat and clean (ironed if needed). Equipment

***Equipment***

- Wrist watch with sweep second hand. Any brand of watch is acceptable. A waterproof watch is recommended.
- Stethoscope
- Bandage scissors

***Shoes***

Students should wear one of the following: a professional nursing shoe that is fully closed without air vent openings or sling back, pair of well-kept cross trainers, running shoes, clogs or walking shoes in white, black or brown. (update voted by Faculty org. 2/23/2015)



### ***Socks & Stockings***

You are not allowed to wear shoes without socks or stockings.

### ***Student Identification***

It is required that you be legally identified as a student nurse. Always introduce yourself by name and title (“Student Nurse”) when entering a nursing unit and/or patient’s room.

**NOTE:** Faculty will advise the student of additional guidelines that are specific to the clinical agency or nursing unit.

### ***Agency/Hospital Badge***

Students may be issued a clinical agency “student identification” badge. This badge is to be worn visibly at all times while on hospital/agency property. Badges are to be returned to your clinical instructor at the end of your clinical experience.

### ***UMass Dartmouth Name Pin***

Worn at all clinical experiences (voted by Faculty org. 2/23/2015)

### ***Face Mask***

Beginning Fall semester 2020, it is imperative that students wear a face mask at all times while in the clinical agencies, CNHS lab areas, and while on the UMass D campus. (8/2020)

## **Policy Regarding Blood Borne Pathogens**

### **To Prevent Transmission of Blood Borne Pathogens in Health Care Settings**

The increasing prevalence of blood borne pathogens increases the risk that health-care workers will be exposed to blood/body fluids from patients infected with bloodborne pathogens, especially when blood and body-fluid precautions are not followed for all patients. Thus, this document emphasizes the need for health-care workers to consider ALL patients as potentially infected with blood borne pathogens and to adhere rigorously to infection-control precautions for minimizing the risk of exposure to blood and body fluids of all patients.

The Center for Disease Control and Prevention (CDC) has issued guidelines regarding occupational exposure to blood borne pathogens (including HIV, Hepatitis B and Hepatitis C). The College of Nursing has adopted the following policies in conformity with CDC guidelines.

The following policies are your first line of defense against HIV, Hepatitis B and Hepatitis C, but also against all Blood Borne Pathogens. The following policies:

1. Body substances of all clients are to be considered infectious.
2. Handwashing is the major preventive technique. It should be used:
  - a. Prior to and following any patient contact.
  - b. Immediately, if contact with any body substance onto the skin or mucous membranes occurs.
  - c. After removing contaminated gloves, gowns, or equipment.
3. Needles should not be recapped or broken; deposit in a puncture-resistant container.
4. Gloves should be worn if contact with body substances is anticipated. These include:
  - a. Handling of blood, urine, feces, vaginal drainage, saliva, tears, amniotic fluid, breast milk, or wound drainage, including wet dressings and laundry.
  - b. When potential contact with body substances is anticipated (IVs, irrigations).
  - c. When carrying body substances in containers (bedpans, urinals, specimen containers).
5. Added precautions should be taken if splashing of body substances is anticipated, or if contact with eyes or mouth is expected (masks, goggles, gown).
6. Students should be knowledgeable of the nature and risks of body substance transmitted diseases, the mode of transmission, and the appropriate preventive techniques.
7. Students with cuts, sores or other broken skin areas on their hands should not be in direct contact with patients. Clinical instructor must be notified immediately to determine if clinical practice can be carried out by wearing gloves or by applying an occlusive dressing.

8. Any needle-stick injuries with contaminated needles, cuts with contaminated sharp objects, body substance splashes or contact with mucous membranes should be managed following CDC guidelines. Clinical instructor must be notified immediately. Immediately wash area, report to agency and refer to ED for treatment of exposure. Occupational health referral will be made by ED provider and follow up with occupational health and University Health Services. Documentation of exposure will be required.
9. Spills of body substances should be immediately cleaned from the surface using soap and water then follow agency policy. Gloves should be worn during cleaning and hands washed when gloves removed. The agencies recommended bactericidal cleaning procedure should be followed.

**The following principles should also be recognized:**

1. Blood and body fluids transmitted diseases are not transmitted by ordinary contact with patients (bathing, feeding or touching). They are not transmitted through the air.
2. Blood and body fluids guidelines are for the protection of patients as well as the health care worker.
3. Gloves must be worn when it can be reasonably anticipated that the student may have hand contact with blood, other potentially infectious materials, mucous membranes, and non- intact skin; when performing vascular access procedures and when handling or touching contaminated items or surfaces.
4. When needed equipment or supplies are not available in the clinical area, the instructor should use his/her judgment as to how the student should proceed.
5. After caring for a patient, students should not put hands to face, especially eyes or mouth, prior to washing hands.
6. Students are accountable for the correct implementation of the above procedures.
7. Students are responsible for reviewing agency procedure/policy manual.

Rev 6/98, 6/99, 6/00, 5/05, 8/09

**Blood Borne Pathogen Policy Signature Sheet**

Annual clinical requirement which is part of the annual clinical requirements that are managed by a third-party vendor.

Rev 6/98, 6/99, 6/02, 5/05, 8/09, 2/12

## **Clinical, On-Campus Clinical, Simulation and Lab Attendance Policy Statement**

Students are expected to attend all scheduled clinical experiences, including Clinical, On-Campus Clinical, Simulation and Lab experiences. Attendance consists of arriving on time, dressed according to the dress code for that experience, and prepared to work. Any absence must be reported to the appropriate faculty, the agency and preceptor (if applicable) prior to the time the students is expected to arrive (as stated in the course syllabus). Student absences due to extenuating circumstances (see definition) will be considered on a case-by-case basis.

### **Extenuating Circumstances:**

Unforeseen events such as an auto accident, deaths in the immediate family or personal illness which requires a student to be absent from class or clinical may be viewed as an extenuating circumstance. In the case of such events, the student must notify faculty members as soon as possible. **Vacations, weddings, doctor appointments, studying for an exam, childcare issues, job interviews, working, etc.** are not considered extenuating circumstances as these are not unforeseen events. Students wishing to claim extenuating circumstances will be asked to provide documentation of the condition that led to absenteeism. The presence of extenuating circumstances does not guarantee that a student will be exempted from this attendance policy.

### **Absences**

If a student demonstrates patterns of behavior that includes tardiness and absences, they will be placed on clinical warning and *is at risk of failing the course*. The student is required to establish a remediation plan with the course faculty and may be required to complete an activity, assignment, or clinical hours as decided by the course faculty.

#### **Student Clinical Absence With Notification**

1. The student must notify their clinical faculty a minimum of 1 hour before the beginning of their clinical experience or as directed in the course syllabus.
2. With the first clinical absence; the student is required to complete an activity, assignment, or clinical hours as decided by the course faculty.
3. If a second clinical absence occurs; the student is required to complete an activity, assignment, or clinical hours as decided by the course faculty and establish a remediation plan with the course faculty and department chairperson.
4. If a third clinical absence occurs (or more); the student will meet with the Course faculty, department chairperson and/or Assistant/Associate Dean to review/update the remediation plan and *is at risk of failing the course*.

#### **Student Clinical Absence Without Notification (*No Call No Show*)**

1. The first *no call no show* will result in clinical warning and remediation plan that includes an activity, assignment, clinical hours, and/or a deduction in overall course grade as decided by the course faculty (as

indicated in course syllabus).

2. The second *no call no show*; will result in *failure of the course*.

### **Tardiness**

Tardiness is defined as arrival to the designated clinical unit or meeting place any time after the designated start of clinical. In the event the student anticipates clinical tardiness, the faculty must be notified prior to the beginning of the clinical day.

1. If a student is more than 1 hour late to clinical the incident will be counted as an absence, the student may be sent home from the clinical site, and they may be required to complete an activity, assignment, or clinical hours as decided by the course faculty
2. Two or more incidences of tardiness will result in a clinical warning and remediation plan and the student may be required to complete an activity, assignment, or clinical hours as decided by the course faculty.

Accepted March 26, 2018

## **UNDERGRADUATE CLINICAL WARNING POLICY AND PROCEDURE POLICY STATEMENT**

A clinical warning is an official written notice to the student given by the clinical instructor for unacceptable clinical performance or behavior (see *DEFINITION* below). “Clinical” includes simulated learning activities (Sim Lab); laboratory learning activities (Lab); and clinical agency learning activities.

### **PURPOSE:**

Consistent application, documentation, and record retention of a Clinical Warning.

### **DEFINITION:**

A student receives a clinical warning when performance or behavior in the clinical setting is below the level expected for a student at his/her current level of training as defined in the clinical evaluation tool, and if continued, could result in failure of the clinical course.

### **PROCEDURE:**

When an instructor determines that the clinical performance or behavior of a student merits a clinical warning, the following procedures will be implemented.

1. The clinical instructor:
  - a. notifies the student verbally on the clinical practice day and states the specific reason for the clinical warning.
  - b. notifies the clinical coordinator *within 24 hours* of the occurrence.
  - c. schedules a conference (face to face) with the student and clinical coordinator, to occur within two (2) working days, for discussion of the unacceptable performance and/or behavior. *The clinical coordinator may meet with the student in lieu of the clinical instructor in order to adhere to the 48-hour period.*
  - d. gives the student a written copy of the clinical warning which will include:
    - i. a description of the unacceptable performance and/or behavior;
    - ii. mutual assessment of the causative factor(s)
    - iii. mutually determined goal(s)/remediation action plan and expected time frame for achievement of same; and
    - iv. a section for evaluation of the action plan on the expected date of achievement.
2. The clinical instructor, the course coordinator, and the student are required to sign the conference interaction indicating their participation in the above steps (Clinical Warning form).
3. The clinical faculty will retain the original copy of the Clinical Warning until the end of the semester. All completed forms will be retained in the office of the Assistant/Associate Dean of Undergraduate Studies, and a copy will be provided to the student.
4. Depending on the issue/problem, the student receiving a clinical warning may be required to satisfactorily complete remediation in the clinical lab and Simulation Center before returning to their clinical setting.
5. Remediation in the Clinical lab and Simulation Center does not count as a clinical day; make-up of any missed clinical day is per the course syllabus.
6. If the student is unable to successfully remediate within the timeframe, the student will be subject to failure of the clinical course.
7. Students with two or more warnings during the program of study are subject to disciplinary action up to and including dismissal from the program upon review by the Assistant Dean/Dean.

### **RESPONSIBILITY:**

- Clinical Instructor
- Clinical Coordinator
- Assistant/Associate Dean of Undergraduate Studies

**ATTACHMENT(S):**

Clinical Warning Form

**APPROVAL AND EFFECTIVE DATE:**

October 25, 2017

**CLINICAL WARNING**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

COURSE NUMBER AND TITLE: \_\_\_\_\_

GRADE AT MIDSEMESTER/PRESENT: \_\_\_\_\_

**Description:** Based on student actions described below the students currently not meeting the following competency(s):

These behaviors fail to meet the following course objective(s):

**Action Plan and expected date of achievement:**

Evaluation:

\_\_\_\_\_  
COURSE COORDINATOR

\_\_\_\_\_  
CLINICAL FACULTY

\_\_\_\_\_  
STUDENT



## **Guidelines for Mentorship Placement in the College of Nursing- ABS Program**

All students in the ABS Program will be expected to complete NUR 457- Mentorship and Simulation in their final fall semester. To provide learning opportunities to prepare the students for professional generalist nursing practice, mentorship placements will be found on an acute adult health unit, outpatient setting, or at a long-term care facility.

If requesting alternative placement, the student must submit a recommendation request form to his/her academic advisor no later than May 1 of the spring prior to mentorship.

### **Alternative Placement Criteria for Advisor**

\*\*Students must meet the following requirements to be considered for alternative mentorship placement. Alternative clinical placements are not guaranteed even if requirements are satisfied due to limited availability of placement and proctoring in alternative areas.

Cumulative GPA at time of application submission: 3.7

Achieve at least 95% in all clinical rotations prior to mentorship including NUR 255, NUR 331 and NUR 327.

Achieve at least a Level 2 on all ATI proctored exams including NUR 250, NUR 330, and NUR 326.

\*\*If you have received a clinical warning for any reason you will be ineligible for an alternative placement.

Added 10/18/18

