Clinical Faculty Resource Manual for Nursing Services (Nursing, PCT, Surgical Tech, Unit Secretary)

2012-2013 Academic Year

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Our Mission:
*Heal compassionately. Teach innovatively. Improve constantly.*

Our Vision:
*Transform health care for the benefit of the people and communities we serve.*

Our Values:
*Our core values are compassion, respect, caring, honesty, integrity, and trust. We live our values through open communication, forward thinking, creativity, continually striving to improve, responsiveness, a willingness to change, education, research, and clinical quality.*

Nursing Vision:
*Committed to nursing excellence through leadership, knowledge, caring and innovation.*

AIDET®
*(GHS Adopted Method of Patient Communication)*

**Expectation: Faculty and Students use AIDET® at GHS.**

<table>
<thead>
<tr>
<th>A</th>
<th><strong>Acknowledge</strong></th>
<th>Smile and greet patients by name.</th>
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<tr>
<td>I</td>
<td><strong>Introduce</strong></td>
<td>State your name, role (student/faculty) and which school you represent. Personalize yourself!</td>
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<td>D</td>
<td><strong>Duration</strong></td>
<td>How long will you be with the patient? Procedure length?</td>
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<tr>
<td>E</td>
<td><strong>Explanation</strong></td>
<td>What will you be doing with the patient? Explain before getting hands-on with a patient.</td>
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<td>T</td>
<td><strong>Thank you</strong></td>
<td>Thank the patient for their understanding, patience and trust!</td>
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Greenville Memorial Medical Campus:
Faculty may park in levels 1-5 of Parking Deck 9C. Students are required to park on the 5th level of Parking Deck 9C. Levels 1-4 of Deck 9C are reserved for GHS employees only. Students who park in unauthorized areas may be asked to move their vehicles and/or will be ticketed. Faculty members and the Student Liaisons will receive notification of any issues involving unauthorized parking of students.

The access code for Parking Deck 9C changes yearly at the beginning of the calendar year. Contact Sheree Mejia, Nursing Student Liaison (smejia@ghs.org) to find out the current year’s access code.

Please note: It is recommended that valuables such as purses, computers, phones, etc., be locked in the trunk or dash of vehicles and not left inside vehicles in visible view. Any problems related to vehicles while parked in the 9C parking lot should be reported to security. The parking deck is equipped with cameras that monitor activity on all levels. In case of emergency, there are call boxes throughout the deck and walkway to the hospital. If at any time a faculty member or student need escort assistance for any reason please call Security at 455-7931.

Greer Memorial Hospital:
Employee (student/faculty) parking is located behind the hospital, below the physician parking area between the helicopter landing area and the back dock to the hospital.

MOB A- employee (student/faculty) parking is located in the parking area on the north side of the building. Park in spaces nearest to SC 14.

MOB B- employee (student/faculty) parking is located in the parking area on the south side of the building. Park in the spaces nearest to SC 14.

Hillcrest Memorial Hospital:
All employees (students/faculty) working between the hours of 6:00 am and 7:00 pm are permitted to park in the front perimeter parking lane (closest to Main Street) and first parking island closest to the main entrance only (see attached map for clarification).

All employees (students/faculty) working 7pm to 7 am and employees returning for call may park in front of the hospital in the lot directly in front of the Lab.

North Greenville Hospital:
Students/faculty are authorized to park in the front parking area on a daily basis.

Patewood Memorial Hospital:
Students/faculty are authorized to park in the parking area; furthest spaces from the entrance.

Patewood Outpatient Services (Building A):
Students/faculty are to park in the designated staff parking lot; farthest lot from the building entrance.
**Directions to Greenville Memorial Medical Campus and Parking Deck-9C**

Greenville Memorial Medical Campus  
701 Grove Road, Greenville, SC  29605-5601

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**From Charlotte, N.C.**
- I-85 South to Exit 44 (White Horse Rd)  
- Right onto White Horse Rd.  
- Right at the 2nd traffic light (Grove Rd.)  
- Right on Faris. Continue on to Entrance #5, follow signs to the Parking Deck -9C  

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**From North Carolina via Highway 25 and 276 South**
- Hwy 25 S to Travelers Rest  
- Hwy 25 will merge with Hwy 276  
- Stay on Hwy 276 into downtown Greenville  
- Right onto Hwy 29 (Church St.)  
- Left onto Augusta Rd.  
- Stay on Augusta Rd to Faris Rd.  
- Right onto Faris Rd  
- Use Entrance #5 and follow signs to Parking Deck -9C  

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**From Columbia, S.C.**
- I-26 to I-385 towards Greenville  
- I-385 into downtown Greenville  
- Under the overpass, turn left onto Church Street  
- Left onto Augusta Rd.  
- Stay on Augusta Rd to Faris Rd.  
- Right onto Faris Rd.  
- Use Entrance #5 and follow the signs to Parking Deck -9C  

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**From Atlanta, Ga.**
- Interstate 85 North toward Greenville to Exit 42 (I-185)  
- Turn right onto Henrydale Drive.  
- Right onto Grove Rd.  
- Right onto Faris Rd  
- Take Grove Road to Faris Rd and use Entrance #5 and follow signs to parking deck -9C  

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_9C Parking Deck 5th Level is for all faculty and students. Once you enter through entrance number 5, the parking deck is on the right side._
Checklists for Faculty

Faculty Requirements:

- Completion of Health Record & Immunization Form (NS-1-10B1) and Additional Student / Faculty Requirements Form (NS-1-10B2)
- Completion of Healthstream Core Regulatory & GHS Facility Specific Modules
- Submission of resume or CV—work / educational experience clearly defined
- CPR certification – copy of card submitted
- GHS Faculty Contact Sheet
- GHS Faculty Badge
- Complete GHS Faculty Evaluation
- Provide opportunity / encouragement for students to complete GHS Student Evaluation

Secured Access:

Do you need....

- Clinical Documentation Access- need “Soarian Training”
  a. Request for User ID
- Medication Administration Ability- need “MAC Training”
  a. Request for User ID
  b. Medication Cabinet Access - Complete Omnicell Medication Automation Password Verification Statement
- ScrubEx Machine Access- need to complete “ScrubEx Request Form”

Student / Faculty Evaluations

Faculty and students are to complete online evaluations of their GHS experience either during or after their assigned clinical rotation or practicum experience. Evaluations are found on the GHSNet Nursing webpage under “Student Resources- Online Evaluation Forms", or offsite by direct link:

GHS Student / Faculty ID Badges

GHS students and faculty must properly display their GHS Student / Faculty ID badge and their School Picture ID badge on their person while in a GHS facility. GHS ID badges are issued by the GHS Badge Security Office, are numbered for tracking purposes, and are issued for identification purposes only. Student / faculty ID badges will not provide access to any restricted areas within GHS (exception: faculty badges for MIPH). If the school ID badge does not contain a picture ID or the school does not provide a student / faculty ID badge, then a GHS picture ID badge must be purchased for $10.00. (GHS Policy S-101-17 Security Badges; found in GHS Manual of Policy Directives.)

Badge Security Office: (864-455-6290)
The Badge Security Office is located at the Medical Center’s Clinic (MCC) Building, adjacent to the entrance of Roger C. Peace Hospital. Designated parking spaces are marked for usage in front of the entrance of the MCC Building.

Hours of Operation—
Mondays, Tuesdays, Thursdays, Fridays: 8:30 am to 4:30 pm
Wednesdays: 7:00 am to 3:00 pm

Badge Request Process:

Faculty must request badges prior to the clinical start date, allowing for ample processing time. Prior to request, students / faculty must have completed all GHS student / faculty requirements.
1. Faculty must email Sheree Mejia, Nursing Student Liaison (smejia@ghs.org) the following information:
   a. Quantity of student or faculty ID badges
   b. Date when badges are needed
2. Nursing Student Liaison will forward email to the Badge Security Office as approval of request.
3. Faculty to contact Badge Security Office to arrange pick-up date / time.
4. Faculty will be required to provide a contact number and signature for all badge picked-up.
Each school with students regularly attending GHS facilities will be issued an appropriate number of student badges. Each school will be required to audit their badges twice a year and report the results to the Badge Security Office.

Lost or Damaged Badges:

If a faculty / student badge is lost or damaged, the Badge Security Office should be notified at once. Lost badges are reissued at a cost of $10.00 per badge. Once a threshold of lost badges is exceeded, a complete reissue will be conducted. A $10.00 replacement fee must be paid before picking up a replacement badge. For more information, contact the Badge Security Office.

Proper Displaying of GHS and School ID Badges:

Faculty and students must wear their school picture ID badge (if schools provide), in addition to the GHS badge at all times during their clinical experience.
- The school ID badge is to be secured to the GHS badge and must be worn on the left upper chest, high and visible, at eye level. (See NS-1-3: GHS Dress Code Policy)
- Faculty and students, who are GHS employees, must not wear or use their employee badges while at GHS on faculty or student time.
Secured Access- Electronic Applications / Supply Cabinets

Prior to requesting student / faculty computer user IDs to access electronic applications or supply cabinets, all students and faculty must have completed all requirements, including the HealthStream- GHS Facility Specific modules.

Electronic access will only be given to students and faculty assigned to areas using electronic applications. Student user IDs will “only” be in effect for the duration of the clinical rotation. User IDs will be deactivated at the completion of each rotation or senior practicum experience and must be reactivated with each additional clinical rotation or experience. Schools of Nursing must immediately notify the Nursing Student Liaison of any student or faculty who is no longer in clinical at GHS.

Requests must be emailed to appropriate parties at least 1 week prior to the clinical start date.

Problems with sign-on codes (Soarian or MAC) should be reported to requests@ghs.org. Please include the following pertinent information in your email:

1. Full name
2. School Name and Faculty/Student
3. User ID
4. Description of issue; Soarian and/or MAC
5. Contact # and email address

SOARIAN / CPOE

Soarian / CPOE (Computerized Physician Order Entry) is the Clinical Documentation System used by all GHS facilities, but not by all GHS departments.

Access Request Process—
1. Student Access:
   a. Faculty / School Representative complete the “GHS Soarian Access Request Form”. Dates for the clinical rotation must be included with the request.
   b. Faculty / School Representative to email request to the GHS Information Services Security Department at (requests@ghs.org).
2. Faculty Access:
   a. Faculty must email Sheree Mejia, Nursing Student Liaison (smejia@ghs.org) the following information: full name (first, MI, last) and last 5 digits of social security.
   b. Allow 1 week turn-around time for Nursing Student Liaison to process ID request. Liaison to email faculty their ID / password.

IBEX

IBEX is the Clinical Documentation System that is used by the Emergency Department and Children’s Emergency Center. Electronic “read-only” access is granted to only senior nursing practicum students.

Access Request Process—
1. Faculty must email Sheree Mejia, Nursing Student Liaison (smejia@ghs.org) the following information: the student’s full name (first, MI, last) and Soarian User ID.
2. Allow 1 week turn-around time for Nursing Student Liaison to process ID request.
MAC

MAC (Medication Administration Check) is the medication administration system used by all GHS facilities, but not by all GHS departments. Those GHS departments not using MAC include: ER, L&D, and the OR.

MAC access will only be given to:
- Nursing faculty upon completion of a MAC training class:
  - To sign up for a MAC class: Log into faculty HealthStream account, go to the Catalog, search “MAC”, and sign up for a class.
- Senior nursing practicum students:
  - The practicum student’s nurse preceptor must co-sign with the student when completing the medication administration process.
  - For high-risk meds, 2 RNs must co-sign with the student. Access to MAC is only active during the assigned student practicum dates.

All non-practicum undergraduate nursing students administering medications will be supervised throughout the entire medication process by their nursing faculty (using the faculty user ID) or a staff nurse and be co-signed by their faculty or staff nurse. **RN Refreshers or Advanced Practice students will not receive a MAC user IDs.

Access Request Process—
1. Faculty Access:
   a. Faculty must email Sheree Mejia, Nursing Student Liaison (smejia@ghs.org) the following information: MAC class date, full name (first, MI, last), and last 5 digits of social security.
   b. Allow 1 week turn-around time for Nursing Student Liaison to process ID request. Liaison to email faculty their user ID / password.
2. Practicum Student Access:
   a. Nursing practicum faculty must email Sheree Mejia, Nursing Student Liaison (smejia@ghs.org) the following information: list of all student names (first, MI, last), student Soarian user IDs, and the dates of the practicum rotation.
   b. Allow 1 week turn-around time for Nursing Student Liaison to process ID request. Liaison to email faculty student user IDs / password.

Omnicell- Medication Automation Password Verification

Access to the Omnicell cabinet is only given to nursing faculty in a MAC unit. Students will not be given Omnicell access. Request for faculty access must be completed at the beginning of each semester and is only valid for the current semester.

Faculty or the nurse preceptor for senior nurse practicum students will use their Omnicell sign-on with the student to remove medications from the Omnicell. All controlled medications must be within the possession of the person who removed the medication. Any medication that is removed from the Omnicell under the Blind Count function is a controlled substance.
Discrepancies must be resolved prior to the end of the shift or prior to the students and faculty leaving the unit. Unresolved discrepancy must be immediately reported to the Nurse Manager. Medications that must be removed using the override function must be removed by the registered nurse assigned to the patient.

Nursing faculty will not have access to the Automated Dispensing System override function. If medications
are needed for a patient not in the Automated Dispensing System profile, consult with an RN member of the unit nursing staff to determine if the medication must be administered prior to the review by the pharmacist. If it is determined that the medication is needed for the patient, a staff registered nurse must override the patient’s profile and withdraw the needed medication, administer the medication or witness the administration of the medication.

Access Request Process—
1. Complete the “Omnicell- Medication Automation Password Verification Statement”. Required signatures on the form include: nurse manager of the assigned unit and faculty.
2. Take completed form, a valid picture ID, and faculty school name badge to the main GMH pharmacy (located on 1st floor across from Credit Union).

**OptiFlex- Supply Omnicell**

Access to OptiFlex is granted to nursing faculty only. Contact Sheree Mejia, Nursing Student Liaison (smejia@ghs.org) to find out your school’s designated access code.

**ScrubEx**

Access to ScrubEx is granted to students / faculty in clinical locations requiring scrub attire. The GHS departments using ScrubEx include: OR and L&D. Students / Faculty will be responsible for returning their scrubs at the end of each clinical day. The Materials Service Department can track the badge number and student name. **Access is good for one academic school year.**

Access Request Process—
1. Student / Faculty Access:
   a. Faculty must complete / email the “ScrubEx Request Form” to Sheree Mejia, Nursing Student Liaison (smejia@ghs.org).
      i. Student Access-- Each student will be responsible to keep up with their card number and PIN number.
      ii. Faculty Access with additional scrubs added-- Faculty can request to have a certain number of scrubs added to their access to cover all their students. On the email request, please clearly state the “number” of scrubs needed on a faculty access.
   b. Allow 1 week turn-around time for Nursing Student Liaison to process request. Liaison to email faculty completed request.
2. Practicum Student Access:
   a. Nursing practicum faculty must complete / email the “ScrubEx Request Form” to Sheree Mejia, Nursing Student Liaison (smejia@ghs.org).
   b. Allow 1 week turn-around time for Nursing Student Liaison to process request. Liaison to email faculty completed request.

ScrubEx Machine Instructions—
To obtain a set of scrubs:
1. Enter the card number and PIN number. Please enter the card number first, then the pin number.
2. Select option F (“New Size”) and enter the size of scrubs that you will need.
3. Enter the card number and PIN number again and select “Collect” and follow the rest of the instructions to retrieve the selected scrubs (you should be able to select the size that you entered in the previous transaction (step #2).

To return a set of scrubs:
   1. Enter the card number and PIN number
   2. Select option “Deposit”
   3. Return scrubs in the machine as specified (top goes in one bin and the bottom goes in another)

**Internet Access**

- **GHS Nursing Webpage**—
  Access the Nursing Webpage through any GHS computer.
  - Click on the GHSNet icon.
  - Under the GHSNet Menu, click on “Departments & Units”, then “Nursing”.
  - Quick Links to: Office Tracker & Soarian Scoop and Newsletter
  - Learn about: Student Resources, Nursing Research and more…

- **Internet Browsing outside of GHSNet**—
  Access the world-wide web through any GHS computer by logging in with an issued user ID (ACADEMICS) and an assigned weekly internet password. A newly generated, weekly password and internet access directions will be emailed to faculty each week by the Nursing Student Liaison.
GHS Soarian Access Request Form  
(Nursing Students)

Complete form in entirety (student names & last 5 digits of social security OR school ID number) to receive Soarian access for your students. Form must be submitted by the school at least one (1) week prior to the students’ clinical assignment. User IDs will be deactivated at the completion of each rotation and must be reactivated with each clinical rotation.

Email completed form to: requests@ghs.org  
Email Access Issues to: requests@ghs.org

Name of School: ________________________

Dates of Clinical Rotation(s): ________________________

<table>
<thead>
<tr>
<th>Student Name (First, Mi, Last)</th>
<th>Last 5 digits of Social OR School ID number</th>
<th>Access ID</th>
<th>Initial Password</th>
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Omnicell
Medication Automation Password Verification Statement

I understand that my access code, which consists of an identification code and a password, is my electronic signature for all transactions in the OmniSupplier. It will be used to track all of my transactions on the system and will be permanently attached to those transactions with a time/date stamp.

My user ID will be assigned by the Pharmacy System Administrator. There will be no record of this password, therefore, should I forget my password I must contact the Pharmacy.

I also understand that to maintain the integrity of my electronic signature, I must not give this password to any other individual. This password is encrypted throughout the Omnicell system and cannot be accessed by Pharmacy users, Nursing Management or Omnicell employees. If for any reason I feel an individual has knowledge of my password, I must select a new password immediately and notify my Nurse Manager. A password can be reset by any member of nursing management/Pharmacy and reentered by the user at his/her convenience.

First Name ___________________________ M.I. ___ Last Name ___________________________
Employee ID Number _______________ Date _______________ 
Host User Id ___________________________ Nursing Unit(s) _______________ 
Nursing Instructor Date Rotation Begins: _______________ Ends: _______________

RN ___________________________ Physician ___________________________ Respiratory Technologist ___________________________
LPN ___________________________ Anesthesiologist ___________________________ Bronch Lab Technician ___________________________
Nurse Manager ___________________________ CRNA ___________________________ Echo/Cath Lab Technician ___________________________
Nurse Clinician ___________________________ Radiology Technologist ___________________________ Pharmacist ___________________________
Nursing Instructor ___________________________ Pharmacy Technician ___________________________

Seal this form securely in an envelope and send to:
Mitzi Alewine (5-6692)
Central Pharmacy
Omnicell

User Signature ___________________________ Date _______________

Nurse Manager/Pharmacy Manager Signature ___________________________ Date _______________
**ScrubEx Request Form**

Complete form in entirety (student/faculty name(s) & GHS badge number) to receive access to the ScrubEx system for students/faculty. The badge number refers to the number on the back of the GHS faculty or student badge.

Email completed form to: smejia@ghs.org

Name of School: ________________________________

<table>
<thead>
<tr>
<th>Student Name or Faculty Name</th>
<th>List the GHS Student or Faculty Badge Number</th>
<th>Access Code</th>
<th>Pin Number</th>
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Senior Nursing- Practicum Student Requests

The GHS Nursing Student Liaison, in collaboration with nursing practicum faculty and GHS clinical nurse educators / specialists / managers, coordinate placement of senior nursing practicum students. Placements are contingent upon availability of GHS practicum preceptors and unit suitability, at the time of the practicum rotation. Practicum placements cannot be guaranteed.

Once a student’s practicum location / preceptor / schedule is confirmed, the Nursing Student Liaison will email the details and unit contact person to the practicum faculty for dispersal to the student. Students may contact their preceptor if that information is provided. The students may not meet their preceptor at GHS outside of their confirmed clinical dates.

Practicum students will be secured placement in medical / surgical areas, unless students are qualified and / or selected for placement in a specialty area. Faculty must round on all their practicum students at least “3” times during their practicum rotation, meeting with the preceptor and / or designated unit contact person.

Any issues that arise during a student’s practicum rotation are to be immediately relayed to the Nursing Student Liaison and unit contact person by phone or email.

Practicum students / faculty are to complete the online GHS evaluation of their clinical experience during or at the conclusion of the practicum rotation.

Request Timeline:

Practicum Faculty must submit their student practicum request, practicum syllabus, and “Senior Practicum Eligibility Forms” at least “1” month prior to the practicum start date or by the following timeline:

<table>
<thead>
<tr>
<th>Semester</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Fall Semester</td>
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<tr>
<td>• September / October Rotations</td>
<td>August 1st</td>
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<tr>
<td>• November Rotations</td>
<td>October 1st</td>
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<tr>
<td>Spring Semester</td>
<td>Due Date</td>
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<tr>
<td>• January Rotations</td>
<td>December 1st</td>
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<tr>
<td>• March Rotations</td>
<td>February 1st</td>
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<tr>
<td>Summer Semester</td>
<td>Due Date</td>
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<tr>
<td>• June Rotations</td>
<td>May 1st</td>
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Specialty Request Process:

Due to the desirability of specialty placement and the limited number of available preceptors, placement of senior practicum students in specialty areas will require that faculty “pre-screen” a limited number of students eligible to apply. Those eligible students will complete in entirety the “Senior Practicum Eligibility Form”. The GHS specialty areas include: NICU, PICU, L&D, pediatrics, adult critical care units (MSICU, NTICU, CVICU, CCU), oncology (pediatric / adult), OR, and ER.
# SENIOR PRACTICUM ELIGIBILITY FORM
**GREENVILLE HOSPITAL SYSTEM**
(PLEASE TYPE; Complete ALL Sections)

**SUBMISSION OF THIS FORM DOES NOT GUARANTEE CLINICAL PLACEMENT**

<table>
<thead>
<tr>
<th>Nursing Student Name:</th>
<th>School:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Area Requesting:</strong></td>
<td></td>
</tr>
<tr>
<td>□ NICU Neonatal Intensive Care Unit</td>
<td>□ PICU Pediatric Intensive Care Unit</td>
</tr>
<tr>
<td>□ PICU Pediatric Intensive Care Unit</td>
<td>□ ADULT Critical Care Units</td>
</tr>
<tr>
<td>□ L&amp;D General Pediatrics</td>
<td>□ Adult Critical Care Units</td>
</tr>
<tr>
<td>□ Emergency Department</td>
<td>□ Emergency Department</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Graduation:</th>
<th>Dates for Practicum:</th>
</tr>
</thead>
<tbody>
<tr>
<td>_________________</td>
<td>_________________</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Clinical Faculty:</th>
<th>Contact #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>______________________</td>
<td>__________</td>
</tr>
</tbody>
</table>

I ☐ have ☐ have not completed Critical Care/Advanced Med/Surg Course

<table>
<thead>
<tr>
<th>☐ Bedside Preceptor Hrs. Needed=</th>
<th>☐ Manager/Educator Hrs. Needed=</th>
</tr>
</thead>
<tbody>
<tr>
<td>____________________</td>
<td>____________________</td>
</tr>
</tbody>
</table>

**Essay:** (In the space below, describe why you have an interest in the area you have chosen for your senior practicum – please TYPE)

<table>
<thead>
<tr>
<th>Student Signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________________</td>
<td>______</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Hours you can work:</th>
<th>Day Shift 7a-7p</th>
<th>Evening Shift 7p-7a</th>
<th>Week-end hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________________</td>
<td>________________</td>
<td>_________________</td>
<td>______________</td>
</tr>
</tbody>
</table>

Faculty evaluative review (instructor feedback):

<table>
<thead>
<tr>
<th>Faculty signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________________</td>
<td>______</td>
</tr>
</tbody>
</table>

For spring placement submit by Jan 15
For summer placement submit by April 15
For fall placement with Sept/Oct start times submit by Aug 2
For fall placement with Nov start times submit by Sept 2

For GHS Only
☐ Accepted for Placement  ☐ Not Accepted

Faculty will review completed form, sign, and submit electronically to the GHS Education Consultant/ Nursing Student Liaison: smejia@ghs.org or 864-455-8485 (secure fax)
Clinical Experiences Within Nursing Services at GHS: Requirements for Students and Faculty

POLICY:
Students enrolled in schools affiliated with the Greenville Hospital System (GHS) may participate in supervised clinical experiences within Nursing Service at GHS to fulfill academic requirements.

Affiliation agreements must be current and on file with GHS.

A GHS Registered Nurse maintains responsibility for the care of the patient in all GHS clinical settings (i.e. acute care, Subacute, clinic, Home Health, etc.), including when students are involved in patient care.

PERSONNEL:

- Students
- Registered Nurses
- Approved Faculty

DESIRED OUTCOME:

To provide a positive learning environment for students while ensuring safe, quality care for patients.

SUPPORTIVE DATA:

Nursing Policy and Procedure Manual:

NS-1-9  Supervision of Student Nurses at GHS
NS-1-3  Nursing Uniform and Dress Code Policy

GHS Manual of Policy Directives:

S-101-17  Issuance of Name Badges
S-104-6  Personal Appearance, Dress and Uniform Policy

- Affiliation Agreements
- Student Nurse and Preceptor Handbook (GHS)
- Faculty Manual (Clinical Resource Manual)
- Advanced Practice Nurse Packet (Resource booklet)
- GHS Health and Immunization Requirement (Infection Control Manual)
CLASSIFICATIONS OF STUDENTS:

The following student roles / classifications will be considered for clinical rotation placement:

- Initial RN licensure students (unlicensed nursing students enrolled in associate or baccalaureate degree nursing programs)
- Licensed RN students (i.e., RN-to-BSN or BSN-to-MSN or doctorate program)
- Refresher RN students
- Patient Care Technician students
- Unit Secretary students
- Surgical Technologist students
- Advanced practice degree seeking students

ON-LINE TRAINING:

Student and faculty learning modules are to be completed through computer-based on-line courses in HealthStream (the GHS learning management system) prior to the beginning of a GHS clinical experience and then annually.

Modules for Student, Faculty and GHS Employees are different and are tracked differently by various schools and GHS. If a student/faculty is also a GHS employee, both the employee and student/faculty HealthStream modules must be completed annually.

PROCEDURES:

Clinical experiences / rotations are coordinated through the Nursing Student Liaison in the department of Nursing Clinical Programs and Research. Any questions or concerns regarding student placement, requirements, or scheduling must be directed to the Nursing Student Liaison.

All Student and Faculty requirements must be submitted, in their entirety, at least 4 weeks prior to the requested clinical placement.

Clinical placement requests for initial RN licensure students, RN-to-BSN students, and graduate students must be made in writing, using the approved format (see Appendix A), to the Nursing Student Liaison according to these timelines:

- Fall Semester by March 1
- Spring Semester by October 1
- Summer Semester by February 1

The maximum GHS approved faculty-to-student ratio is 1:8, including students in observational experiences. (Refer to Nursing policy NS-1-9 for specific critical care unit faculty-to-student ratios.)

The availability of clinical sites and the appropriateness of student placements are individually evaluated on each request by the Nursing Student Liaison. Specific clinical sites may or may not be available, based upon predetermined needs and site availability. All clinical placements are subject to change.
Annually, per the academic year, school faculty are responsible for submitting a copy of each course curriculum, clinical objectives, performance checklists, and an evaluative summary of the clinical experience.

Priority placement for advanced degree seeking students will be given to those who are current GHS employees whose school has a current affiliation agreement on file.

**REQUIREMENTS:**

**Faculty:**

- **“On-Site” Clinical Faculty:** (Faculty present in the clinical setting during the assigned clinical rotation/experience; or faculty available to be on-site within 30 minutes, reachable by cell phone or beeper—i.e. senior practicum nursing students, observation-only students, unit secretary students, surgical technologist students)

  A faculty member must be approved by the Nursing Student Liaison, prior to clinical assignments. The following faculty-specific documents must be on file at GHS for each clinical faculty:

  1. Resume or curriculum vitae including:
     a. Contact information and education
     b. Work experience: Faculty must have a minimum of two (2) years of RN work experience. All non-critical care and critical care work experience must be clearly documented. (Refer to policy NS-1-9A for minimum work experience requirements for critical care faculty.)
  2. Current S.C. RN license verification
  3. Current CPR card
  4. The Information Form for Student or Faculty (Appendix B). Information from this form must be kept on file and up to date at the School of Nursing.
     a. Faculty must complete mandatory online orientation modules (confidentiality agreement included within) in HealthStream per the requirement timeline and annually thereafter.
     HealthStream access is arranged by the School of Nursing.
  5. Faculty Contact Information Sheet (Appendix C) is to be submitted each academic year and updated as necessary.
  6. Nursing faculty who supervise nursing students in the clinical setting, are required to complete the following electronic documentation/medication administration classes as applicable: MAC, Soarian, and/or ClinDoc. The Nursing Student Liaison will coordinate class dates after the submission/review of faculty required documentation.

- **“Off-Site” Clinical Faculty:** (Faculty not in the clinical setting, but reachable by phone or email contact information for students, i.e., RN-to-BSN students, RN Refresher students, graduate/doctorate students.) The following faculty-specific documents must be on file at GHS for each “off-site” clinical faculty:

  1. Resume or curriculum vitae including:
     a. Contact information (office phone, cell phone, beeper, email address)
     b. Education
     c. Work experience
2. Current RN license verification (in the state licensed)

- **Student:**
  1. The **Information Form for Student or Faculty** (Appendix B): Information contained in this form must be current and completed in its entirety.
  2. **Undergraduate Students:** Completed information form to be kept on file at the designated School of Nursing and must be available upon immediate request.
  3. **RN-to-BSN, Refresher RN, and Graduate/Doctorate Students:** Completed form must be submitted to Nursing Student Liaison. **Designated schools will keep information and/or form on file at the School of Nursing, subject to immediate review by the Nursing Student Liaison.**

Students who are **Refresher RNs** or **Licensed RNs** seeking a higher degree (i.e., RN-to-BSN, BSN-to- MSN or doctorate degree) must submit additional requirements, including, but are not limited to:
- Curriculum vitae or resume
- Proof of valid South Carolina RN license (temporary S.C. RN license—Refresher RNs)
- Proof of liability insurance (advance practice RN students)

4. Students must complete mandatory online orientation modules (confidentiality agreement included within) in HealthStream per the requirement timeline and annually thereafter.
   - **Undergraduate Students:** HealthStream access is arranged by the School of Nursing.
   - **RN-to-BSN, Refresher RN, and Graduate/Doctorate Students:** HealthStream access is arranged by the School of Nursing with the exception of select graduate/doctorate Schools of Nursing (Nursing Student Liaison to arrange access).

- **School:**
  For designated Schools of Nursing (determined by Nursing Student Liaison), the information contained in the **Information Form for Student or Faculty** (Appendix B) will be kept on file at the School of Nursing and be subject to immediate review by the Nursing Student Liaison. **Information contained in this form is subject to GHS auditing.**

The **Required Documentation for Clinical Rotations Form** (Appendix D) is to be completed in its entirety on each student/faculty and emailed to the Nursing Student Liaison. The document includes the following:

1. Student and/or faculty identification information
2. Dates for:
   - Health requirements (Health History, PPD)
   - CPR (expiration date)
   - Mandatory training (student or faculty learning modules) is completed through HealthStream (GHS learning management system) and includes the GHS confidentiality agreement and facility specific information. **

3. Criminal background check—complete and submit to Nursing Student Liaison four (4) weeks prior to requesting educational placement at GHS. Information submitted must comply with the following:
a. State criminal record search for all locations in which they have resided and/or worked for the past twelve (12) months.
b. Submitted by the school and not by the student.

**Note:** Healthstream must be completed at least one week prior to the beginning of a clinical rotation in order for a student or faculty to be assigned a log-in code for accessing electronic applications (Appendix D).

- **Clinical Course Rosters / Schedules (rotation of students in the clinical setting)—**NOTE specific time requirement

  The school must provide the Nursing Student Liaison with clinical course rosters/schedules (names of all students/faculty) for all assigned GHS clinical sites at least one (1) week prior to the beginning of a clinical rotation. Any faculty additions or changes on an existing roster must be submitted in writing prior to the clinical rotation, including the clinical start date of that faculty member. The clinical course roster/schedule must include:

1. Supervising faculty (name, site and contact information)
2. Course identification
3. Site identification
4. Dates and times of clinical rotation
5. Student names correlating with their assigned dates, times and location(s)

- **Clinical Placement for Advanced Degree Seeking Students**

  The following is required the semester prior to the requested clinical experience:

1. Course curriculum outlining hours and objectives
2. Student’s current resume

**REVISION AUTHORS:**

Sheree Mejia, MSN/MHA, RN, Education Consultant/Nursing Student Liaison
Jan Smith, MSN, RN, CPAN, Magnet Coordinator/Nursing Student Liaison
Susan Bethel, MS, RN, Director, Nursing Clinical Programs & Research

**REPLACES:**

NS-1-1, Advanced Practice RNs, Clinical Placement of
- Appendix A: Verification Form for APRN Students
- Appendix B: Verification Form for CRNA Students

**DATE:**

January, 2003
REVISED:

October, 2005
April, 2011
March, 2012

APPROVAL SIGNATURE FOR THE FOLLOWING APPEARS ON THE ORIGINAL DOCUMENT, ON FILE IN THE OFFICE OF THE CHIEF NURSING OFFICER:

Michelle Taylor-Smith, RN
Chief Nursing Officer

Approval Date: March 15, 2012
Calendar Request Format

Example of calendar request format for submission of clinical placement requests. Please include the faculty name and contact information.

<table>
<thead>
<tr>
<th>Name of Unit:</th>
<th>Adult ER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Name:</td>
<td>GMH</td>
</tr>
<tr>
<td>Faculty Name:</td>
<td>Snow White</td>
</tr>
<tr>
<td>Phone:</td>
<td>123-4567</td>
</tr>
</tbody>
</table>

<p>| August 2011 |  |  |  |  |  |</p>
<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td>1</td>
<td>2</td>
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<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
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<td>24</td>
<td>25</td>
<td>26</td>
<td>27</td>
<td>28</td>
<td>298</td>
<td>30</td>
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<tr>
<td>31</td>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

"If the name and phone number of the faculty member that will be doing the clinical rotation is not known, you must submit the name of the lead faculty or clinical coordinator and phone number.

NOTE – CALENDAR TEMPLATES are available in Microsoft WORD™ and other software programs."
Health Record & Immunization Form
(Student or Faculty)

GENERAL INFORMATION: (PRINT)
Name: ___________________________ Address: ___________________________
Contact #: ________________________  □ Cell □ Home  Email Address: ________________ Date of Birth: ________________
School ID#: ________________________ Last 5 digits of SS #: (Full SS# for USCSM students): __________________________
School: ___________________________ Educational Program: ___________________________
Dates of Rotation: From ___________ to ___________  GHS Employee: NO √ YES □ Location: ___________ FT PT PRN

- Documented Proof of requirements must be immediately available to GHS Student Coordinator upon request.
- Form valid one (1) year from date signed. Must be updated annually.
- Immunizations are Mandatory for ALL Educational Affiliations with GHS.

Must submit supportive documentation for: “Positive” TB Screening, Hepatitis B declination, and Influenza exemptions

Please provide Vaccine dates and/or Titer dates for specified "immunizations" below:

<table>
<thead>
<tr>
<th>Immunization</th>
<th>Vaccine(s) Date</th>
<th>Titer Date</th>
<th>Titer Result</th>
<th>Date of Declination or Approved Exemption (attach copy)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TB Screening</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2-step PPD)</td>
<td>#1</td>
<td>#2</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>-OR-</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual PPD</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>If &quot;positive&quot; tuberculin skin test: Baseline CXR Date (within 3 months): ___________________________ TB Evaluation Form Date: ___________________________</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acceptable Blood Tests:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>QuantIFERON®-TB test (QFT) Blood Test Date: ___________________________ Results: □ Positive □ Negative</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>T-SOT®:TB Blood Test Date: ___________________________ Results: □ Positive □ Negative</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rubella**</td>
<td>#1</td>
<td>#2</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Rubella**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mumps**</td>
<td>#1</td>
<td>#2</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;GHS accepts documentation of 2 MMR’s or a combination of childhood immunizations and 1 MMR.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varicella**</td>
<td>#1</td>
<td>#2</td>
<td>#3</td>
<td>Date of Declination: (not available to USCSM-Greenville or Columbia students)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis B**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Series 1:</td>
<td>#1</td>
<td>#2</td>
<td>#3</td>
<td></td>
</tr>
<tr>
<td>Series 2:</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>#1</td>
<td>#2</td>
<td>#3</td>
<td></td>
</tr>
<tr>
<td>Influenza**</td>
<td></td>
<td></td>
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<tr>
<td>(annual requirement)</td>
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<td></td>
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<td></td>
<td></td>
<td>NA</td>
<td>NA</td>
<td>Approved Exemption:</td>
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</tbody>
</table>

Health Information:
Health problems/physical limitations – indicate any: □ N/A ___________________________
Allergies: list all e.g. Drug, vaccine, latex, food: □ N/A ___________________________
Contraindications for requirements, list all and explain: □ N/A ___________________________

SIGNATURE: I have provided the information requested on this form to the best of my knowledge.

Student Signature ______________________ Date ______________________

Revised: February, 2012
Information Form
Additional Student / Faculty Requirements

**Undergraduate Students** – Completed Information Form is to be kept at the school and **must** be immediately available upon request.

**RN to BSN, Refresher RN, and Graduate/Doctorate Students** – Form must be on file at GHS.

**Documented Proof of Requirements** – Must be immediately available to GHS Student Coordinator upon request.

**Form valid one (1) year from date signed. Must be updated annually.**

**PROFESSIONAL LIABILITY INSURANCE:**
I am covered by: □ Insurance provided by the school □ Personal liability insurance
Company Name or State Statute: ________________________________
Policy Number: ________________ Exp. Date: ________________
Amount of coverage: $____________ per occurrence; $____________ aggregate ________________

**HealthStream—Student / Faculty Online Training (must be updated annually):**
Student and faculty learning modules are completed through computer-based, online courses in HealthStream. Required modules must be completed prior to the beginning of a GHS clinical experience and annually.

**Note:** Student / Faculty and GHS Employee modules are different and are tracked differently by various schools and GHS. If a student / faculty is also a GHS employee, both the Employee and Student / Faculty HealthStream modules must be completed annually.

Date Completed: ____________________ or

“Courses not yet completed” — will be completed by this Date: ____________________

**OTHER REQUIRED DOCUMENTS (please submit):**
- Criminal Background Check – Copy of report must be reviewed, then submitted by the school at least four (4) weeks prior to the scheduled rotation. (Student / faculty may not send their own reports.)
- Resume’ or CV – Required for all licensed RNs.
- CPR card – Copy; required for all licensed RNs
- Temporary RN license – Copy; RN Refresher only.

**SIGNATURE:** I have provided the information requested on this form to the best of my knowledge.

Student Signature __________________ Date __________________
<table>
<thead>
<tr>
<th><strong>NAME</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td><strong>SCHOOL</strong></td>
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<td></td>
</tr>
<tr>
<td><strong>EMAIL ADDRESS</strong></td>
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<tr>
<td></td>
</tr>
<tr>
<td><strong>CELL PHONE</strong></td>
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<td></td>
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<tr>
<td><strong>BEEPER</strong></td>
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<td></td>
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<tr>
<td><strong>OFFICE NUMBER</strong></td>
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<td></td>
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<tr>
<td><strong>FAX NUMBER</strong></td>
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<td></td>
</tr>
<tr>
<td><strong>UNIT/LOCATION</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>SEMESTER/DATES</strong></td>
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<tr>
<td><strong>SUPERVISOR NAME &amp; CONTACT INFO.</strong></td>
</tr>
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<td></td>
</tr>
<tr>
<td>SCHOOL:</td>
</tr>
<tr>
<td>---------</td>
</tr>
<tr>
<td>BJU</td>
</tr>
<tr>
<td>CU</td>
</tr>
<tr>
<td>GTC</td>
</tr>
<tr>
<td>TCTC</td>
</tr>
<tr>
<td>USCU</td>
</tr>
<tr>
<td>USC-C</td>
</tr>
</tbody>
</table>

Revised: April, 2011
How to View On-Line Clinical Rotation Calendars

To view the calendars from inside or outside GHS, go to: http:\/65.82.135.45:222/calendar/

If you are asked for a user ID and password, the ID is “view” and the password is “please”. (Both should be entered in lower case.)

The first screen will show a pop-up box, asking you to choose a calendar to view. Click “OK”.

A pull-down “Calendar” menu is at the top of the screen. Choose the unit or department you wish to view.

The calendar should default to a 31-day format when it appears. Scroll forward or backward to the month you wish to view.

If you want to print a calendar, be sure to set your print preference to ‘Landscape’. However, if the header prints on a separate page, print from the “Print Preview” screen instead of straight from the printer icon. Different printers’ process website information in different ways, but most problems can be avoided by printing in Landscape.
<table>
<thead>
<tr>
<th>UNIT NAME</th>
<th>LOCATION</th>
<th>STUDENT PLACEMENT</th>
<th>KEY COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greenville Memorial Hospital (GMH)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ortho/Trauma</td>
<td>2D</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Neuroscience</td>
<td>2C</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Vascular Surgery and Urology</td>
<td>3C</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>General Surgery</td>
<td>3D</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Palliative Care</td>
<td>4A</td>
<td></td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
</tr>
<tr>
<td>Cardiology Medicine</td>
<td>4B</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Cardiac Telemetry</td>
<td>4C</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>CV/Monit Surgery</td>
<td>4D</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Renal Medicine</td>
<td>3B</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Pulmonary Medicine</td>
<td>5C</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Oncology Nursing</td>
<td>5D</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Hemodialysis</td>
<td>5th Floor</td>
<td>Assigned by GHS</td>
<td>Observation Only 1:4 ratio</td>
</tr>
<tr>
<td>Neonatal Intensive Care</td>
<td>6th Floor</td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td></td>
</tr>
<tr>
<td>Mom-Baby (Family Beginnings)</td>
<td>6C/6T</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Women’s Specialty Unit (GYN/OB)</td>
<td>6D</td>
<td>Assigned by GHS</td>
<td>Faculty: Students ratio 1:8</td>
</tr>
<tr>
<td>Labor &amp; Delivery</td>
<td>6F W. Tower</td>
<td>Assigned by GHS</td>
<td>Faculty: Student 1: 6- 8</td>
</tr>
<tr>
<td>Coronary Care Unit</td>
<td>4E W. Tower</td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td></td>
</tr>
<tr>
<td>NeuroTrauma ICU</td>
<td>4th Floor</td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td></td>
</tr>
<tr>
<td>Medical-Surgical ICU</td>
<td>4th Floor</td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td></td>
</tr>
<tr>
<td>Cardiovascular ICU</td>
<td>2E W. Tower</td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td></td>
</tr>
</tbody>
</table>

*Observation Only 1:4-6* Faculty with NICU/ PICU/ HIGH RISK OB/NEWBORN clinical experience required.
<table>
<thead>
<tr>
<th>UNIT NAME</th>
<th>LOCATION</th>
<th>STUDENT PLACEMENT</th>
<th>KEY COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greenville Memorial Hospital</td>
<td></td>
<td></td>
<td>No overlapping of schools during same time period</td>
</tr>
<tr>
<td>Pediatric ICU</td>
<td>5F W. Tower</td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td>Faculty with pediatric critical care clinical experience required</td>
</tr>
<tr>
<td>Peds Hem/Onc</td>
<td>5F W. Tower</td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>Coronary Intervention Recovery Unit</td>
<td>4F W. Tower</td>
<td>no students</td>
<td></td>
</tr>
<tr>
<td>Pediatrics- Overflow</td>
<td>5A W. Tower</td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>Pediatrics- General</td>
<td>5E W. Tower</td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>Pediatrics- Adolescent/School Age</td>
<td>6E W. Tower</td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>ETC</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; Floor</td>
<td>Assigned by GHS</td>
<td>Strict criteria/limited; Practicum</td>
</tr>
<tr>
<td>Children’s ER</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; Floor</td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>Operating Room</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt; Floor</td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td>Strict criteria/limited</td>
</tr>
<tr>
<td>Recovery Room</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outpatient OR</td>
<td></td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td>Strict criteria/limited</td>
</tr>
<tr>
<td>PAR</td>
<td></td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td></td>
</tr>
<tr>
<td>GI Lab</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; Floor</td>
<td>Specific criteria must be met and special request submitted for review/minimal number of students</td>
<td>Strict criteria/limited</td>
</tr>
<tr>
<td>Cath Lab</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt; Floor West Tower</td>
<td>No - only if student is accompanying their assigned unit patient for diagnostic procedure and ok’d by the primary nurse and with patient consent</td>
<td></td>
</tr>
<tr>
<td>IV Team</td>
<td>4&lt;sup&gt;th&lt;/sup&gt; Floor</td>
<td>no students</td>
<td></td>
</tr>
<tr>
<td>Radiology</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; Floor</td>
<td></td>
<td>No - only if student is accompanying their assigned unit patient for diagnostic procedure and ok’d by the primary nurse and with patient consent</td>
</tr>
<tr>
<td>UNIT NAME</td>
<td>LOCATION</td>
<td>STUDENT PLACEMENT</td>
<td>KEY COMMENTS</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
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<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Marshall I. Pickens Hospital (MIPH) – Behavioral Health</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adolescent</td>
<td></td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>Adult</td>
<td></td>
<td>Assigned by GHS</td>
<td>↓</td>
</tr>
<tr>
<td>Geriatric</td>
<td></td>
<td>Assigned by GHS</td>
<td>↓</td>
</tr>
<tr>
<td><strong>Roger C. Peace Hospital (RCPH) – Acute Rehabilitation</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Roger C. Peace- Gen Rehab</td>
<td>2nd Floor</td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>Roger C. Peace- (TBI)</td>
<td>3rd Floor</td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>Transitional Care Unit (Subacute)</td>
<td>2nd Floor</td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td><strong>Greer Memorial Hospital (GrMH)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OPS</td>
<td></td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>LDRP</td>
<td></td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>Med/Surg (1 floor/unit only)</td>
<td></td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>Med/Surg ICU</td>
<td></td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>ER</td>
<td></td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td><strong>Long Term Care</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cottages at Brushy Creek</td>
<td>Greer</td>
<td>Assigned by GHS</td>
<td>Must discuss arrangements for supervision of students in the cottages before placement</td>
</tr>
<tr>
<td>Campus (Limited)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hillcrest Memorial Hospital (HMH)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Med/Surg</td>
<td></td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>ER</td>
<td></td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>ICU</td>
<td></td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>OR</td>
<td></td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>GI Lab</td>
<td></td>
<td></td>
<td>No - only if student is accompanying their assigned unit patient for diagnostic procedure and ok'd by the primary nurse and with patient consent</td>
</tr>
<tr>
<td>Radiology</td>
<td></td>
<td></td>
<td>No - only if student is accompanying their assigned unit patient for diagnostic procedure and ok'd by the primary nurse and with patient consent</td>
</tr>
<tr>
<td>UNIT NAME</td>
<td>LOCATION</td>
<td>STUDENT PLACEMENT</td>
<td>KEY COMMENTS</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>----------------</td>
<td>-------------------</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>North Greenville Hospital (NGH)</td>
<td></td>
<td></td>
<td>No overlapping of schools during same time period</td>
</tr>
<tr>
<td>NG LTACH</td>
<td></td>
<td>Assigned by GHS</td>
<td>Faculty:Students ratio 1:8</td>
</tr>
<tr>
<td>North Greenville ER</td>
<td></td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>Patewood Memorial Hospital (PMH)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Med/Surg</td>
<td>2nd Floor</td>
<td>Assigned by GHS</td>
<td>Faculty:Students Practicum 1:8</td>
</tr>
<tr>
<td>OR/Pre-OP</td>
<td></td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>Patewood Eastside Outpatient Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patewood OPS</td>
<td>Building A</td>
<td>Assigned by GHS</td>
<td>Practicum only</td>
</tr>
<tr>
<td>Home Health</td>
<td></td>
<td>Assigned by GHS</td>
<td>one community health student</td>
</tr>
<tr>
<td>Other GHS Settings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OB-GYN Clinic</td>
<td>Grove Road</td>
<td>Assigned by GHS</td>
<td>2-3 students only (2 OB, 1 GYN)</td>
</tr>
<tr>
<td>OB-GYN Clinic (Greer)</td>
<td>Greer Location</td>
<td>No students</td>
<td>1-2 students only</td>
</tr>
<tr>
<td>PEDS Clinic</td>
<td></td>
<td>Assigned by GHS</td>
<td>1-6 students only</td>
</tr>
<tr>
<td>Ped. Hem/Onc. Clinic</td>
<td></td>
<td>Assigned by GHS</td>
<td>1 student only Practicum Allowed</td>
</tr>
<tr>
<td>Wonder Center</td>
<td></td>
<td>Assigned by GHS</td>
<td>1-2 students only</td>
</tr>
</tbody>
</table>
GREENVILLE HOSPITAL SYSTEM NURSING STAFF POLICY
Nursing Uniform and Dress, Guidelines for

POLICY:

Staff employed in Greenville Hospital System nursing services will dress in the appropriate attire specific to the employee’s position and / or work setting.

All nursing staff must:

• Wear identification badge in an easily observed location, preferably the left upper part of blouse, coat, dress, shirt, or uniform at all times during working hours (see GHS Policy Directive S-101-17).

• Adhere to GHS Policy Directive S-104-6: Personal Appearance, Dress and Uniform Policy.

For infection prevention, patient care personnel may not wear artificial fingernails. Fingernails should be ¼-inch or less in length. Patient care personnel may wear no more than 2 rings per hand (unless part of a wedding set).

PERSONNEL:

Registered Nurses (RN)
Licensed Practical Nurses (LPN)
Certified Nursing Assistant Students
Certified Nursing Assistants (CNA)
Nurse Externs
Nursing Specialty Technicians (NST)
Nursing Support Specialists (NSS)
Patient Care Technician Students
Patient Care Technicians (PCT)
Surgical Technologists (ST)
Unit Secretaries (US)
Unit Secretary Students
All faculty members
All levels of Student Nurses

SUPPORTIVE DATA:

Greenville Hospital Manual of Policy Directives S-101-17: Name Badges
Greenville Hospital Manual of Policy Directives S-104-6: Personal Appearance, Dress and Uniform Policy
GHS Uniform Grid: Uniform Listing

NOTE: For the most up to date information, refer to the approved uniform grid maintained by the GHS Uniform Committee and available in the GMH Uniform Shop.

GUIDELINES: Holiday / Seasonal Attire

Seasonal scrub tops and/or jackets may be worn to celebrate the following holidays or special occasions:
• Winter Holidays (Thanksgiving Day through New Year’s Day)

Seasonal scrub tops and / or jackets may be worn the week of the following special occasions, beginning on the Sunday of or before the special occasion, and ending on the Saturday of or following the special occasion.

• Valentines Day
• Halloween
• July 4th

**SPECIFIC NURSING STAFF ATTIRE**

**Registered Nurses and Licensed Practical Nurses**

*(Excludes RNs and LPNs working in clinics, physician practices and Behavioral Health - Marshall I. Pickens Hospital)*

• RNs/LPNs in adult areas will wear white and/or cobalt/galaxy blue scrubs or uniforms. No prints are allowed. These two colors may be interchanged, i.e., blue top/white pants; white top/blue pants; white pants & top/blue jacket, etc.

Examples Manufacturer:  
Peaches  Cobalt Blue  
Landau  Galaxy Blue  
Meta  Galaxy Blue

RNs/LPNs in pediatrics, PICU, NICU, Peds ER and Family Beginnings will have the option of wearing children’s print tops and scrub jackets. Print tops and print scrub jackets must coordinate with cobalt/galaxy blue and white.

• Nurses have the option to wear a solid white turtleneck or solid white t-shirt under a scrub top. They may wear a solid white or cobalt blue/galaxy blue turtle neck, collared shirt, or round neck (no collar) knit shirt with a scrub jacket instead of a scrub top. No v-neck shirts are allowed. Scrub jacket or vest must be cobalt blue, galaxy blue or white. No designs on turtlenecks or t-shirts. T-shirts may only be worn under scrub tops.

• Shoes for RNs/LPNs will be predominantly white or black leather, closed toes with white or black socks or stockings.

**Patient Care Technicians, Nurse Externs, Nursing Specialty Technicians, Certified Nursing Assistants**

*(Excludes PCTs, CNAs and NSTs in clinics and physician practices)*

• PCTs, CNAs and NSTs will wear solid teal scrubs/jackets.

• PCTs/CNAs/NSTs have the option to wear solid white turtleneck/solid white T-shirt under scrub top. No v-neck shirts are allowed. No designs on turtlenecks or t-shirts. Teal turtlenecks/t-shirts may be substituted for white, if available.

• Shoes for PCTs/CNAs/NSTs will be predominantly white or black leather, closed toes with white / black socks or stockings.
• PCTs/CNAs/NSTs cannot wear white lab coats.

• Nurse Externs will wear chocolate scrub tops and white pants. Shoes predominantly white or black leather, closed toes with coordinating white / black socks or stockings.

**Unit Secretaries (Excludes clinics and physician practices)**

• Unit Secretaries (US) will wear khaki pants or skirt with white turtleneck, collared shirt/blouse or round neck, no collar, knit shirt (with short, 3/4 or long sleeves) and navy vests/navy blazers/navy cardigan sweaters or navy scrub jacket. (No v-neck shirts are allowed).

• Unit Secretary Shoes will be navy, black, brown or white with closed toes and coordinating solid socks or stockings.

**Nursing – Other Staff**

*(Excludes clinics, Physician Practices and Behavioral Health - MIPH)*

<table>
<thead>
<tr>
<th>Position</th>
<th>Attire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Managers &amp; Utilization Review</td>
<td>White lab coats with business attire</td>
</tr>
<tr>
<td>Social Workers II</td>
<td>Turquoise lab coats</td>
</tr>
<tr>
<td>Complex Discharge Planners</td>
<td>Celadon lab coats</td>
</tr>
<tr>
<td>CNS/CNE</td>
<td>RN uniform <em>(Cobalt Blue &amp; White)</em></td>
</tr>
<tr>
<td>Nurse Managers</td>
<td>RN uniform <em>(Cobalt Blue &amp; White)</em> or</td>
</tr>
<tr>
<td></td>
<td>White lab coat and business attire</td>
</tr>
<tr>
<td>Directors of Nursing</td>
<td>White lab coat and business attire while on clinical areas</td>
</tr>
<tr>
<td>Child Life</td>
<td>Bright pink or light yellow embroidered polo with black or chocolate brown pants/scrubs or business attire</td>
</tr>
<tr>
<td>Heart Life</td>
<td>RN uniform <em>(Cobalt Blue &amp; White)</em></td>
</tr>
</tbody>
</table>

*Clinics and Physician Practices determine appropriate dress based upon their patient population and attire that is generally acceptable as neat conservative business attire as outlined above.*

**Behavioral Health – Marshall I. Pickens Hospital**

**General guidelines include:**

Nursing staff (RN/LPN/CNA/US) may wear business casual attire.

The gero-psych unit staff wear scrub type uniforms in colors similar to their staff level and other departments across GHS. Medication nurses may wear business casual attire with a lab coat.
Adolescent unit staff may wear casual attire considered neat and conservative.

Nurse Manager wears business attire with a lab coat. Clinical Nurse Educator wears business attire.

Note: During orientation, staff members discuss dress code and how this relates to potential therapeutic relationship issues and safety hazards for behavioral health patients.

**STUDENTS ON CLINICAL ASSIGNMENT AT GHS**

Students on clinical assignment at GHS facilities must:


- Wear identification badge in an easily observed location, preferably the left upper part of blouse, coat, dress, shirt, or uniform at all times during working hours (see GHS Policy Directive S-101-17).

- Follow any School of Nursing guidelines for professional dress that identify a higher standard than those outlined in GHS policies.

**Nursing students in the clinical setting:**

- Nursing students requiring patient contact or students on patient areas preparing for clinical assignments are required to wear the uniform designated by the School of Nursing or their course faculty member including the photo identification badge.

- School photo identification badges are considered a part of the uniform for students on clinical assignment and must be worn at all times and visible, preferably on the upper left part of the blouse, coat, dress, shirt, or uniform.

- GHS “Student” badges must be worn at all times, along with the school photo identification badges. The word **STUDENT must be clearly visible.** Students who do not have their identification badge will not be allowed to remain in the clinical area.

- Footwear must conform to GHS guidelines: Shoes predominantly white or black leather, closed toes with coordinating white / black socks or stockings.

**Nursing Students in Specialty Areas:**

- Nursing students on clinical assignment at Behavioral Health - Marshall I. Pickens Hospital wear the uniform that is associated with their School of Nursing. If the school does not have a specific uniform, students must be dressed in a manner that would be considered conservative, neat and professional. A white lab coat may be worn.

- Student nurses in Pediatric ICU, Neonatal ICU, Pediatric ER, Acute Care Pediatrics and Mom/Baby Units must wear their School of Nursing uniform. It is not acceptable to wear children’s print tops or seasonal scrub jackets.

- Students in clinical areas where scrub attire is provided for GHS personnel should follow the guidance of the nursing management in those areas as to the appropriate dress attire (for example green OR scrubs).
**Nursing Students in RN to BSN or Master of Nursing Programs:**

Nursing students enrolled in an RN to BSN or Master of Nursing program should dress professionally and wear a white lab coat with photo identification badge and a GHS “Student” badge, preferably worn at the left upper part of the blouse, coat, dress or shirt at all times. The word STUDENT should be clearly visible.

**Faculty Members in the Clinical Setting:**

- Faculty members who are with students in clinical areas may wear a white uniform with white lab coat or professional business attire with a white lab coat. The white lab coat should have the school logo on it.
- Faculty members assigned to Pediatric ICU, Neonatal ICU, Pediatric ER, acute care Pediatrics and Mom/Baby units may wear children’s print tops with white lab coat.
- All faculty members must wear school photo identification badges and GHS “Faculty” badges, preferably at the upper left part of the blouse, coat, dress, shirt or uniform. Faculty members who do not have identification badges will not be permitted to remain in the clinical area.
- Faculty members in clinical areas where scrub attire is provided by GHS personnel will wear department designated attire (example: OR scrubs). Faculty should contact the Nursing Student Liaison for access to the automated scrub attire dispensing system.

**OTHER STUDENTS ON CLINICAL ASSIGNMENT AT GHS (Unit Secretary, Patient Care Technician and Certified Nursing Assistant students):**

- All students involving patient or family contact must wear the uniform designated by their school or course faculty. Designated uniforms for students will exclude any uniforms or colors designated for GHS employees.
- Students must be dressed in a manner that would be considered conservative, neat and professional.
- School photo identification badges and GHS “Student” badges are considered part of the uniform for students on clinical assignments and must be worn at all times, preferably at the upper left part of the blouse, coat, dress, shirt or uniform. Students who do not have their identification badges will not be permitted to remain in the clinical area.
- Footwear must conform to GHS guidelines. Shoes predominantly white or black leather, closed toes with coordinating white / black socks or stockings.

**REFERENCE:**

**EFFECTIVE DATE:**
June 30, 2003 (as a directive to the GHS Nursing Staff)
April 7, 2004 (established as GHS Nursing Staff Policy with additional statements concerning students)
REVISED:

May, 2005
August, 2006
December, 2007
January, 2009
July, 2011
February, 2012

REVISION AUTHOR:

Jan Smith, MSN, RN – Magnet Coordinator/Nursing Student Liaison

APPROVAL SIGNATURE FOR THE FOLLOWING APPEARS ON THE ORIGINAL DOCUMENT, ON FILE IN THE OFFICE OF THE CHIEF NURSING OFFICER:

Michelle Taylor-Smith, RN
Chief Nursing Officer

Approval Date: February 27, 2012
GREENVILLE HOSPITAL SYSTEM NURSING STAFF POLICY

Student Nurses: Supervision of

POLICY:

Student nurses enrolled in schools of nursing affiliated with the Greenville Hospital System (GHS) may participate in supervised clinical experiences to fulfill academic requirements.

Nursing students must function under the direct supervision of a Registered Nurse (RN) licensed in South Carolina.

A GHS Registered Nurse maintains responsibility for the care of the patient in all GHS clinical settings (i.e., acute care, Subacute, clinic, Home Health, etc.), including when students are involved in patient care.

PERSONNEL:

- Students
- Registered Nurses
- Approved Faculty

DESIRRED OUTCOME:

To provide a positive learning environment for students while ensuring safe, quality care for patients.

SUPPORTIVE DATA:

GHS Nursing Staff Policy and Procedure Manual:

- NS-1-3 Uniform & Dress Policy
- NS-1-9A Student Nurses: Critical Care Clinical Experience at GMH
- NS-1-9B Skills and Procedures for Student Nurses
- NS-1-10 Requirements for Students & Faculty: Clinical Experiences within Nursing Services at GHS

GHS Manual of Policy Directives:

- S-101-17 Security Badges
- S-104-6 Personal Appearance, Dress, and Uniform Policy

- Affiliation Agreements
- Clinical Resource Manual (Faculty Manual)
- GHS Health and Immunization Requirement (Infection Control Manual)
- Graduate/Doctorate Student Handbook (GHS)
- Student Nurse and Preceptor Handbook (GHS)
TYPES / CLASSIFICATIONS of Students:

The following types / classifications of nursing students are considered for clinical placement:

- Initial RN licensure students (i.e., unlicensed nursing students enrolled in associate or baccalaureate degree nursing programs or LPN-to-RN)
- Licensed RN students (i.e., RN-to-BSN or BSN-to-MSN or doctorate program)
- Refresher RN students

REQUIREMENTS:

I. Co-Signatures for Student Documentation in Patient Records

Documentation by a student nurse (initial RN licensure students, LPN-to-RN students, and Refresher RN students) must be co-signed (electronically validated for online documentation) by a Registered Nurse. Those RNs approved to co-sign/validate student documentation include an RN who is a credentialed school of nursing faculty member, a GHS RN preceptor, or another GHS Registered Nurse involved in the care of the patient.

The co-signature/electronic validation must be completed at the time of the patient record entry. Co-signatures are required for any documentation by the student when a licensed RN is required/authorized to document in the patient record. Documentation authorized for unlicensed assistive personnel does not have to be co-signed.

II. Supervision of Medication Administration

GHS Policies and Procedures indicate that student nurses can administer medications under the direct supervision of a Registered Nurse. RNs approved to supervise medication administration include an RN credentialed as a school of nursing faculty member, a GHS RN preceptor, or another GHS Registered Nurse involved in the care of the patient. The Registered Nurse who supervised the administration of the medication by the student must co-sign (electronically validated for online documentation) immediately following the administration of that medication. The co-signature or electronic validation will be entered on the Medication Administration Record, any approved form, or electronic record related to medication administration.

The student nurse may not administer medications if a Registered Nurse is not immediately available to supervise the entire medication administration process.

III. Faculty Supervision / Availability

A designated, credentialed faculty member must be assigned to all nursing students. The faculty member is responsible for supervising and evaluating the clinical experience. The credentialed faculty member must be a Registered Nurse licensed by the state in which they practice and be employed by an affiliated school of nursing.

Students and faculty must function under the terms of the affiliation agreement between the School of Nursing and GHS. Additionally, they must adhere to the policies and procedures, rules and regulations of the Greenville Hospital System, and function within the scope of practice for Registered Nurses in South Carolina.
A. Student nurses in initial RN licensure programs

A credentialed faculty member must be present in the clinical setting and available for student nurses that are involved in patient care or patient observational experiences (see definition) when enrolled in an initial RN licensure program. The faculty to student “safe” ratio has been established as 1:8 at GHS. The faculty-to-student ratio of 1:8 must be considered when scheduling a rotation of students including those in observational experiences.

The credentialed faculty member must be in the clinical setting when students are:
- involved in patient care or observational experiences
- obtaining information from the medical record
- obtaining information from staff members concerning assignments

The faculty can be available by cell phone or beeper when students are:
- onsite in the Health Sciences Library reviewing literature for their assignment
- attending meetings or educational programs
- completing a senior level practicum experience
- completing a RN refresher experience

The faculty member is responsible for collaborating with the Charge Nurse, Nursing Supervisor, or Nurse Educator in making student assignments. The faculty member will communicate the clinical assignments to the student nurses.

B. Student nurses in senior level practicum experiences and Refresher RNs

During the senior level practicum experience (often referred to as a preceptorship) or Refresher RN experience, the student nurse is assigned to work directly with a GHS RN preceptor. (As noted above, a credentialed staff member must be immediately available by phone or beeper.)

C. RN students in advanced degree completion programs / expanded roles (including but not limited to: RN to BSN, RN to MSN; MSN to doctorate; specialty-advanced practice nursing students (Nurse Practitioner, Clinical Nurse Specialist, and Certified Registered Nurse Anesthetist)

A designated faculty member must be immediately available by phone, cell phone or beeper for the student who is a licensed RN seeking an advanced degree when the student is completing a clinical experience or project at GHS. Experiences may include direct patient assessment or care, a project involving indirect care, or a project involving employee or patient information/data at a GHS site.

Additional approvals and signature documents may be required before a clinical placement request is considered for the students seeking expanded roles and/or to meet specialty clinical requirements (i.e., signature of supervising physician, NP preceptor, or MSN mentor/preceptor).

The faculty member assigned to represent or supervise the RN student in an advanced degree program must have the following information on file at GHS (to be provided by school or student):
1. Faculty resume (including name and contact information)
2. Proof of current licensure as RN in the State of South Carolina (if on-site); or proof of current licensure in the state in which they practice (on-line schools)
3. Copy of the course objectives
4. Clinical experience requirements
5. Preceptor requirements (if other than outlined in GHS guidelines)

C. GHS employees as nursing students

GHS nurses seeking a higher degree may choose to utilize GHS settings to meet clinical experience requirements. The GHS employee, as a student, must meet the same requirements as non-employee students prior to the arrangement of the clinical experience and clinical placement. (Refer to above Section III-C and Policy NS-1-10.)

All GHS employees who are “onsite” in the role of a student must wear a GHS student badge and their school photo ID badge. (If the school does not provide an ID badge, the student must collaborate with the Nursing Student Liaison to obtain an appropriate badge through the GHS Badge Office prior to start of clinical experience.) The word “STUDENT” must be readily visible, at all times, when the badge is worn in addition to the student’s name. (Refer to Section III-B in the GHS Badge Policy S-101-17.)

In the event of limited clinical placement sites for students, placement preference will be given to students who are:

1. GHS employees
2. Enrolled in in-state South Carolina colleges

Documentation co-signature exception: RN students who are GHS RNs

Students who are GHS RN employees are not required to have their documentation co-signed (electronically validated) by a faculty member or another GHS RN. However, the documentation must be reviewed by a faculty member and/or RN preceptor.

Students who are non-RN GHS employees are required to have their clinical documentation co-signed by a GHS RN.

Note: When an employee is in the student role, a “student file” is maintained for the individual. Employee files cannot be accessed or shared for student information and the student file is not accessed for employee information.

ROLES AND RESPONSIBILITIES:

I. Clinical Nursing Faculty Roles & Responsibilities:

- Work collaboratively with GHS to plan clinical objectives
- Provide written learning objectives for the clinical experience for the student, preceptor and GHS files
- Communicate with clinical preceptors to meet student’s individual and course objectives
Collaborate with supervisors, charge nurses, or educators in the selection of appropriate learning experiences / student assignments

Communicate with the preceptor and student on a regular basis to assure that the learning experience is progressing satisfactorily

Review and immediately co-sign (electronically validate as appropriate) student documentation and medication administration for the following types of students**:
  - Initial RN licensure students,
  - Refresher RN students, and
  - Licensed RN students in higher degree programs

**Exception: Students who are GHS RN employees

Evaluate the student's clinical experience with input from the preceptor and other appropriate nursing staff (i.e., nurse manager, clinical nurse specialist, etc.)

Orient to the clinical areas (i.e. meet with the preceptors or appropriate GHS staff) prior to the clinical experience and/or as requested

Responsible for facilitation of and validation of student learning or opportunities for improvement/ remediation

Evaluate the clinical experience of the student groups at GHS and provide feedback immediately (or as soon as possible) following the experience via on-line survey (GHS Nursing Web Page) and/or other methods as appropriate

I. Clinical Preceptor Qualifications, Role and Responsibilities:

A GHS Registered Nurse employee may serve as a clinical preceptor for student nurses, as requested by GHS or the School of Nursing when specified qualification criteria are met.

A. Qualifications

  - Minimum of two years of clinical experience as an RN
  - Demonstrated competencies in the area of assigned clinical teaching responsibilities
  - Complete an orientation to the preceptor role
  - Comply with nursing education program’s requirements for preceptor appointment (Refer to Preceptor Handbook for Student Nurses)

B. Role and responsibilities

  - Function within the written description of a preceptor
  - Limit acceptance to not more than two students for any preceptor experience
  - Remain physically present in the clinical site and available to the student at all times during the clinical assignment
  - Review course objectives with the student
  - Collaborate with the nursing faculty and student to provide a quality learning experience to meet individual and specific course objectives
  - Act as role model for professional nursing practice
  - Provide supervision of student practice in collaboration with nursing faculty member
  - Ensure that the nursing student’s documentation in the medical record has been reviewed and co-signed (electronically validated as appropriate) at the time of documentation
  - Directly supervise medication administration and review documentation
  - Provide the student with information regarding GHS Policies and Procedures
• Provide the student and faculty with evaluative feedback regarding the student’s performance
• Maintain open communication and consultation with the faculty
• Provide feedback of preceptor experience via on-line survey- GHS Nursing web page

DEFINITION OF TERMS:

Initial RN licensure student – student enrolled in a nursing RN educational program, leading to initial licensure as a nurse (i.e. student in a diploma, associate degree or baccalaureate degree nursing program or LPN to RN program).

Licensed RN student – RN with an active license enrolled in a higher degree nursing education program (i.e. RN to BSN, BSN to MSN, or doctorate program).

Refresher RN – RN with an inactive license (not actively practicing as a nurse) enrolled in a nurse refresher program to update clinical education and skills. This may include students who hold a temporary license in South Carolina but need to be supervised by a GHS employed RN preceptor.

Patient care – Providing care to meet the needs for patients’ hygiene, nutrition, ambulation, and elimination. In addition, care includes the measurement of vital signs, interviewing, transporting, positioning or in any way engaging in hands-on care and/or intervention for a treatment plan during a clinical experience.

Observation experience – Observational experiences are considered part of patient care experiences for students and involve observing only (no hands-on) while other healthcare members are providing patient care. Observational experiences are limited to specific patient areas.

Faculty must be immediately available in the clinical setting when basic nursing education students are involved in observational experiences. In some units/departments the faculty member is required to remain in the unit/department while students are in an observational experience. Observational experiences must be approved by the manager and/or Nursing Student Liaison.

REFERENCES:


REVISION AUTHORS:

Sheree Mejia, MSN/MHA, RN, Education Consultant/Nursing Student Liaison
Jan Smith, MSN, RN, CPAN, Magnet Coordinator/Nursing Student Liaison
REVIEWED BY:
Sue Bethel, MSN, RN, Director, Nursing Clinical Programs & Research
GHS Nursing Executive Council
Nursing Clinical Practice Council (April, 2011)

DATE:
December, 2002

REVISED:
January, 2003
April, 2003
September, 2003
September, 2005
February, 2010
April, 2011

APPROVAL SIGNATURE FOR THE FOLLOWING APPEARS ON THE ORIGINAL DOCUMENT, ON FILE IN THE OFFICE OF THE CHIEF NURSING OFFICER:

Carol A. Moody, BSN, RN, MAS, NE-BC
(Interim) Chief Nursing Officer

Approval Date: 19 April 2011
GREENVILLE HOSPITAL SYSTEM NURSING STAFF POLICY

Student Nurses: Critical Care Clinical Experience at Greenville Memorial Hospital

POLICY:

Student nurses enrolled in schools of nursing affiliated with the Greenville Hospital System may participate in supervised critical care clinical experiences at Greenville Memorial Hospital (GMH) to fulfill academic requirements.

Nursing students must function under the direct supervision of a Registered Nurse (RN) licensed in the state of South Carolina.

A GHS Registered Nurse maintains responsibility for the care of the patient in all GHS clinical settings, including when students are involved in patient care.

PERSONNEL:

- Students
- Registered Nurses
- Approved Faculty

SUPPORTIVE DATA:

GHS Nursing Staff Policy and Procedure Manual:

NS-1-9 Student Nurses: Supervision of
NS-1-9B Skills and Procedures for Student Nurses

DESIRED OUTCOME:

The desired outcome / focus of the critical care clinical experience is to support development of critical thinking skills, application of critical thinking through observation, nursing assessment of a patient, and evaluation of the patient’s response to evidenced based treatments.

REQUIREMENTS:

I. Adult Critical Care Units at Greenville Memorial Hospital (GMH)

The adult critical care nursing student experience applies to generic nursing students in their advanced medical-surgical or critical care rotation. Adult critical care units may be able to accommodate a limited number of students during a student rotation. A BSN school that wishes to rotate students through adult critical care units in a GMH facility must meet the following requirements.
• The maximum number of students allowed in each critical care unit in a 24 hour period (subject to change as determined by the unit’s nurse manager) are listed in the following:

<table>
<thead>
<tr>
<th>Adult Critical Care Unit</th>
<th>Max. Number of Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coronary Care Unit (CCU)</td>
<td>6</td>
</tr>
<tr>
<td>Medical/Surgical ICU (MSICU)</td>
<td>4</td>
</tr>
<tr>
<td>NeuroTrauma ICU (NTICU)</td>
<td>4</td>
</tr>
<tr>
<td>Cardiovascular ICU (CVICU)</td>
<td>2</td>
</tr>
</tbody>
</table>

• Only one (1) school per day may rotate through an adult critical care unit.
• In order to provide proper supervision of students:
  o Maximum faculty-to-student ratio is 1:8.
  o Faculty can only be assigned to a maximum of three (3) adult critical care units during one (1) rotation period.
• Faculty are required to be present in the unit in which the largest number of students are assigned and are also responsible for communicating and “checking in” with each student, the student’s assigned primary nurse, and unit charge nurse in all other assigned adult critical care areas.
• Assigned faculty are required to have a minimum of three (3) years of documented clinical experience with a minimum of two (2) of those years in an adult critical care area. (This information will be clearly stated on faculty resume submitted for GHS approval.)
• Critical care student experiences are limited to specific patient areas within each adult critical care unit as defined by the nurse manager and/or the Nursing Student Liaison.
• All faculty and students must abide by all GHS policies and procedures.

The adult critical care nursing student experience will provide students the opportunity to exercise critical thinking skills while actively participating in patient care. The experience is further defined as follows:

• **Under the Direct Supervision of Faculty or the Primary RN**

  Each student will be assigned to a primary nurse and will be given the opportunity to actively participate in the basic care of those patients assigned to that primary nurse. The care will include:

  1. Head-to-toe assessments
  2. Assist in positioning
  3. Assist with or provide ADL’s
  4. Active participation in the critical thinking process of assigned patient(s)

• **Under the Direct Supervision of the Primary RN**

  The student may have the opportunity to participate in specific procedures approved for student nurses under the direct supervision of a registered nurse. Participation in patient care is contingent upon patient acuity, changes in patient condition, nursing judgment/accountability and time available. (See procedures defined in the Guidelines for Specific Procedures and Skills, NS-1-9C.)
II. Neonatal Intensive Care (NICU) at GMH

The NICU nursing student experience applies to generic nursing students in their pediatric rotation who are assigned to rotate through the GMH Neonatal Intensive Care Unit. The following requirements must be met by schools:

- In order to provide proper supervision of students:
  - Faculty-student ratio is 1:6.
  - Assigned faculty will be present in the unit and supervising their students at all times.
- The NICU will accept only one (1) assigned nursing school in a day and a total of three (3) days in a week used for nursing student rotations.
- Assigned NICU faculty must have a minimum of five (5) documented years of NICU, PICU, High Risk OB or Newborn experience (clearly stated on faculty resume submitted for GHS approval).

The NICU nursing student experience will provide students with the opportunity to develop critical thinking skills while evaluating an infant’s status, to view procedures with staff RN and faculty approval, and the ability to complete the following components of an infant’s assessment:

- Auscultation of the heart, lungs, and abdomen
- Palpation of the fontal/suture line

The student “hands-on” time will be limited to the time the NICU caregiver is performing his/her nursing assessment and will be at the discretion of the assigned RN, taking into account the acuity of the infant.

SPECIAL NOTE: There will be no further “hands-on” contact with the infant and no documentation in the medical record (patient charting) by students.

III. Pediatric Intensive Care Unit (PICU) at GMH

The PICU nursing student experience applies to generic nursing students in their pediatric rotation who are assigned to rotate through the GMH Pediatric Intensive Care Unit. The following requirements must be met by schools.

- In order to provide proper student supervision:
  - Only one (1) nursing student may rotate through the PICU in a 24 hour period.
  - This one (1) student is included in the 1:8 ratio (count) of students supervised by a specific pediatric faculty member.
  - Assigned faculty must be immediately available in the hospital and is responsible for communicating and “checking in” with the student, assigned primary nurse and/or charge nurse.
- Assigned PICU faculty must have a minimum of three (3) documented years of clinical experience, with a minimum of two (2) of those years in a critical care area (clearly stated on faculty resume submitted for GHS approval).
The Pediatric Intensive Care student experience will provide students the opportunity to exercise critical thinking skills while actively participating in patient care. The student will be assigned to a primary nurse and will actively participate in the basic care of those patients assigned to that primary nurse. The patient care may include:

1. Head-to-toe assessments
2. Assist in positioning
3. Assist with or provide ADL’s
4. Active participation in the critical thinking process of assigned patient(s)

The student’s “hands-on” time will be limited to the time the PICU caregiver is performing their nursing assessment or task and will be at the discretion of the assigned RN, taking into account the acuity of the patient.

SPECIAL NOTE: There will be no further “hands-on” contact with the assigned patient and no documentation in the medical record (patient charting) by students.

REFERENCES:


AUTHORS:

Sheree Mejia, MSN/MHA, RN, Education Consultant/Nursing Student Liaison
Jan Smith, MSN, RN, CPAN, Magnet Coordinator/Nursing Student Liaison
Sue Bethel, MSN, RN, Director, Nursing Clinical Programs and Research

REVIEWS BY:

Carol Moody, Director of Nursing, Cardiovascular and Critical Care Services / Interim CNO
Laura Meister, Director of Nursing, GHS Children’s Services
Members of the Critical Care Services CNS/CNE Group

DATE:

April, 2011
APPROVAL SIGNATURE FOR THE FOLLOWING APPEARS ON THE ORIGINAL DOCUMENT, ON FILE IN THE OFFICE OF THE CHIEF NURSING OFFICER:

Carol A. Moody, BSN, RN, MAS, NE-BC  
(Interim) Chief Nursing Officer

Approval Date: April 18, 2011
GREENVILLE HOSPITAL SYSTEM NURSING STAFF POLICY

Unlicensed Assistive Students, Supervision of Under Nursing Services

POLICY:

Students enrolled in unlicensed assistive personnel programs affiliated with the Greenville Hospital System (GHS) may participate in supervised clinical experiences to fulfill academic requirements.

Unlicensed assistive personnel students must function under the direct supervision of a Registered Nurse (RN) licensed in South Carolina.

A GHS Registered Nurse maintains responsibility for the care of the patient in all GHS clinical settings, including when students are involved in patient care.

PERSONNEL:

- Students
- Registered Nurses
- Approved Faculty

TYPES / CLASSIFICATIONS of Students:

The following types / classifications of unlicensed assistive students are considered for clinical placement:

- Patient Care Technician Students
- Surgical Technologist Students
- Unit Secretary Students

DESIRED OUTCOME:

To provide a positive learning environment for students while ensuring safe, quality care for patients.

SUPPORTIVE DATA:

GHS Nursing Staff Policy and Procedure Manual:

- NS-1-3 Uniform & Dress Policy
- NS-1-10 Requirements for Students & Faculty: Clinical Experiences within Nursing Services at GHS
Faculty Supervision

Unlicensed assistive personal (UAP) students must be assigned to a designated, credentialed faculty member. The faculty member is responsible for supervising and evaluating the clinical experience. Faculty who are Registered Nurses must be licensed by the state in which they practice and be employed by an affiliated school of nursing.

Faculty and students must function under the terms of the affiliation agreement between the affiliated school and GHS. Additionally, they must adhere to the policies and procedures, rules and regulations of the Greenville Hospital System, and function within the scope of practice for their discipline and within the GHS job description for their role.

The GHS faculty-to-student “safe” ratio has been established as 1:8. The ratio may not be exceeded when scheduling a rotation of students, including those in observational experiences.

A. **Patient Care Technician Students**

A designated school faculty member must be available on-site during the clinical experience.

B. **Surgical Technologist Students**

Site availability and number of student placements are not guaranteed and are subject to the approval of the Nurse Manager / Director.

1. Greenville Memorial Hospital (GMH):
   
   a. A designated school faculty member must be available on-site during the clinical experience.
   
   b. GMH may accommodate up to eight (8) students any clinical day: six (6) students scheduled in the operating room, one (1) student in the GI Lab, and one (1) student in labor and delivery.

2. GHS Satellite Facilities (Greer Memorial Hospital, Patewood Memorial, Patewood Eastside Outpatient, Cross Creek, and Hillcrest Hospital):

   a. A designated school faculty member must be either / or:
      
      • Available during the entire clinical experience,
      • Regularly rotate on all students at each satellite clinical location.
NOTE: A rotating faculty must communicate regularly with the nurse manager or charge nurse, be available by cell phone or beeper, and readily available in the clinical setting within 30 minutes.

- GHS satellite facilities may accommodate up to three (3) students any clinical day: two (2) students in the perioperative area and one (1) student in the GI Lab.

*Exception-- Cross Creek is limited to only one (1) student on any clinical day.

C. **Unit Secretary Students**

Unit secretary students are placed with GHS employed unit secretaries for a non-direct patient care learning experience.

A designated faculty member must be available by cell phone or beeper and readily available in the clinical setting within 30 minutes.

The school faculty member must round with the student, preceptor, and unit “point person” (Manager/CNE/CNS) at least three (3) times during the clinical rotation.

D. **GHS Employees as Unlicensed Assistive Students**

The GHS employee, as a student, must meet the same requirements as non-employee students. *(Refer to Nursing Policy NS-1-10.)*

All GHS employees who are “onsite” in the role of a student must wear a GHS “student” badge and their school photo ID badge. *(Refer to Section III-B in the GHS Badge Policy S-101-17.)*

**ROLES AND RESPONSIBILITIES:**

School Faculty (on-site and rotating) must:

- Work collaboratively with GHS to plan clinical objectives.
- Provide written learning objectives for the clinical experience for the student, preceptor and GHS files.
- Orient to the clinical areas (i.e., meet with the preceptors or appropriate GHS staff) prior to the clinical experience and / or as requested.
- Communicate with clinical preceptors to meet the student’s individual and course objectives.
- Collaborate with managers, supervisors, charge nurses, or educators in the selection of appropriate learning experiences / student assignments.
- Communicate with the preceptor and student on a regular basis to assure that the learning experience is progressing satisfactorily.
- Review and immediately co-sign (electronically validate) student documentation or medical record entries.
- Responsible for facilitation and validation of student learning or opportunities for improvement / remediation.
- Provide immediate / timely student experience feedback to the Nursing Student Liaison, preceptor, and other appropriate nursing / clinical staff (i.e., nurse manager, clinical nurse specialist, unit secretary, etc.).
- Evaluate the student’s clinical experience with input from the preceptor and other appropriate nursing / clinical staff (i.e., nurse manager, clinical nurse specialist, unit secretary, etc.).
- Instruct / request students to complete online GHS student evaluations of their clinical experience. Online evaluations are found on the GHS Nursing Web Page or by direct link.
- Complete the online GHS faculty evaluation. Online evaluations are found on the GHS Nursing Web Page or by direct link.

**GHS Preceptors must:**

- Review and immediately co-sign (electronically validate) student documentation or medical record entries.
- Communicate with the faculty and unit “point person” (Manager/CNE/CNS) on a regular basis to assure that the student learning experience is progressing satisfactorily.
- Provide immediate / timely student experience feedback (i.e., student performance or behavior issues) to the Nursing Student Liaison, unit “point person” (Manager/CNE/CNS), and faculty.

**DEFINITION OF TERMS:**

**Patient care** – Providing care to meet the needs for patients' hygiene, nutrition, ambulation, and elimination. In addition, care includes the measurement of vital signs, maintaining asepsis, interviewing, transporting, positioning or in any way engaging in hands-on care and / or intervention for a treatment plan during a clinical experience.

**Observation experience** – Observational experiences are considered part of patient care experiences for students and involve “observing only” (no hands-on) while other healthcare members are providing patient care. Observational experiences provide opportunities for students to exercise critical thinking skills. These experiences are limited to specific patient areas.

**REFERENCES:**


**2012 REVISION AUTHOR:**
Sheree Mejia, MSN/MHA, RN, Education Consultant/Nursing Student Liaison

**REVIEWED BY:**
Sue Bethel, MS, RN, Director, Nursing Clinical Programs & Research
Jan Smith, MS, RN, CPAN, Magnet Coordinator / Nursing Student Liaison
GHS Nursing Executive Council
DATE:
January, 2007

REVIEWED WITHOUT REVISION:
January, 2009

REVISED:
March, 2012

APPROVAL SIGNATURE FOR THE FOLLOWING APPEARS ON THE ORIGINAL DOCUMENT, ON FILE IN THE OFFICE OF THE CHIEF NURSING OFFICER:

Michelle Taylor Smith, RN
Chief Nursing Officer

Approval Date: April 4, 2012
UNIT SECRETARY ELIGIBILITY FORM

FOR UNIT SECRETARY STUDENT PLACEMENTS WITHIN GHS FACILITIES
(PLEASE TYPE)

SUBMISSION OF THIS FORM DOES NOT GUARANTEE CLINICAL PLACEMENT

Student Name: ___________________________ School: GTC

Pick ONE □ Online Student □ “Live Class” Student

Clinical Request Date: ________________ Total HRS Needed: 80

Employed? □ YES □ NO Employer: □ GHS □ Other Work Schedule: __________________________

GHS Dept./Unit: ______________________________________________________________

Essay: (In the space below, describe why you decided to become a Unit Secretary and what your career plans are after you complete your Unit Secretary program.-- Please Type--)

Student Signature: ___________________________ Date: __________________

GHS Specific Clinical Requirements

GHS Standards of Behavior:
1. Student received and demonstrated understanding of GHS Standards of Behavior.
2. Student signed GHS Standards of Behavior agreement.

GHS First Impressions Class:
1. Student received and demonstrated understanding of GHS First Impressions teachings.
2. Student received and demonstrated proper AIDET technique.

This student has received and successfully demonstrated understanding of the above GHS specific clinical requirements, in order to be considered for clinical placement within a GHS facility.

Faculty signature: ___________________________ Date: __________________

For GHS Only:
□ Accepted for Placement Unit ___________________________ □ Not Accepted

Faculty will review completed form, sign, and submit electronically to the GHS Education Consultant/ Nursing Student Liaison: smejia@ghs.org or 864-455-8485 (secure fax)
GHS Manual of Policy Directives

BELOW: EXCERPT FROM GHS Policy S-104-06 Personal Appearance, Dress and Uniform Policy; found in GHS Manual of Policy Directives. Revised March 1, 2009

Tattoos which may reasonably be perceived as offensive (examples include but are not limited to tattoos depicting nudity, foul language, or other insensitive content) are not permitted to be visible. While on duty, employees must conceal any offensive content with clothing or make-up in a manner that is compliant with Infection Control policy. Bandages can be disconcerting to patients, but, as a last resort, an employee may use a bandage in a manner that is compliant with Infection Control policy, however employees may not wear more than two visible bandages for such purposes. If a manager determines an employee’s tattoo could reasonably be perceived as offensive, the manager may counsel the employee directly or consult with the Director of Diversity or the Diversity Coordinator. If the employee disagrees with the manager’s concern, he or she may consult with the Director of Diversity or the Diversity Coordinator. In the event the manager and employee cannot agree on whether the tattoo should be concealed, the Director of Diversity shall make the determination as to whether the tattoo may reasonably be perceived as offensive, and thus subject to the concealment rules stated above.

BELOW: EXCERPTS FROM GHS Policy S-010-20 Improper Conduct and Disruptive Behavior; found in GHS Manual of Policy Directives. Revised March 1, 2009

Common courtesy and respect for others is necessary in a professional environment. The Greenville Hospital System expects its employees to observe “common sense” rules of honesty, good conduct, safe practices, and to adhere to generally accepted customs of good taste. Employees are also expected to be knowledgeable of and to comply with System and departmental directives as well as policies and legal requirements set forth by governmental and accrediting agencies, which affect their scope of responsibility. Thus employees of the Greenville Hospital System are expected to use appropriate business ethics and to conduct themselves in a professional and cooperative manner at all times. Greenville Hospital System employees will not engage in disruptive or unprofessional behavior. Improper conduct, disruptive behavior or negligence that leads to any of the acts outlined in this policy should immediately be reported to a direct supervisor and to the appropriate department(s) stated in the guidelines below. All reports of improper conduct or disruptive/unprofessional behavior will be investigated. Any employee who, in good faith, provides information about any activities of others as outlined in this policy will not be subject to disciplinary action, adverse job performance evaluations, or any other retaliatory actions by GHS, as a result of providing such information.

Improper Conduct

Improper conduct shall include, but not be limited to, any violation of Hospital policy; any violation of state, federal, or local laws, and any other conduct which is not in the best interest of GHS, its patients, or its employees. Improper conduct includes, but is not limited to, dishonest acts; breach of privacy of patient information or confidentiality of GHS information; conflicts of interest; forgery of or alterations of official GHS documents or policy related items; theft; any misappropriation of funds, securities, supplies, or other assets; any irregularity in the handling of or reporting of financial transactions; intentional misstatement of services rendered or failure to correct known errors; violations of the Medicare Anti-Kickback Statute or any other irregularities which may result in the imposition of financial penalties or sanctions; disappearance of any hospital property, furniture, fixtures and equipment; or any similar or related irregularity. Improper conduct may also include any inappropriate behavior or inappropriate conduct toward
another person. It also includes the unauthorized appropriation of controlled or non-controlled substances or any potential work related criminal activity.

**Disruptive Behavior**

"Disruptive behavior" can consist of one episode or a chronic pattern of contentious, threatening, unruly, or uncooperative behavior that deviates significantly from the culture, Mission, Vision and Values of Greenville Hospital System, creating an atmosphere that interferes with the efficient functioning of the health care staff and the System.

Disruptive behavior includes, but is not limited to:
1. Conduct that interferes with the provision of quality patient care including refusing to perform assigned tasks
2. Refusal to cooperate with other staff members including impatience with questions and reluctance or refusal to answer questions or return phone calls or pages
3. Condescending language or voice intonation
4. Verbal outbursts including shouting or using vulgar or profane or abusive language
5. Intimidating behavior
6. Abusive behavior towards others
7. Physical threats or assault
8. Making or threatening reprisals for reporting disruptive behavior
9. Bullying or similar behavior


Personal Cell Phones or Similar Devices. During work time, employees are expected to exercise the same discretion with the use of personal communication devices as is expected with the use of any business phone. Personal phone calls (including text messaging) during the work day, regardless of the phone or device used, are not appropriate and can interfere with productivity and be distracting to others. Employees are expected to make personal calls on non-worked time and to inform family and friends of the policy.

**BELOW: EXCERPTS FROM GHS Policy S-104-112 Social Media and Social Networking; found in GHS Manual of Policy Directives. October 1, 2009**

This policy applies to employees who use the following:
- Multi-media and social networking websites such as MySpace, Facebook, Yahoo! Groups and YouTube
- Blogs (Both external to GHS and GHS blogs)
- Wikis such as Wikipedia and any other site where text can be posted
- All of these activities including multi-media, social networking sites, blogs, photo sharing, video sharing, microblogging, podcasts, and posted comments are referred to as "Internet postings" in this Policy

Internet postings should not disclose any information that is confidential or proprietary to GHS or to any third party that has disclosed information to GHS. Employees are prohibited from posting any patient information which may include, but is not limited to, name, photograph, social security number, address, diagnosis or prognosis, treatment, date of admission or discharge, or any other identifying information which may be protected by HIPAA.
Greenville Hospital System Infection Control Department

Blood or Body Fluid Exposure Procedure
When the Health Care Worker is a Student/Faculty at a GHS Facility

Definition of Exposure

A. Health Care Worker (HCW) Exposure is defined as contact with blood or body fluids of a patient.

B. Reverse Exposure is defined as the patient being exposed to the blood or body fluids of the Health Care Worker.

C. Method of exposure:
   1. Needle stick or other contaminated sharp object injury
   2. Splash to eye, mouth or other mucous membrane
   3. Ingestion
   4. Open wound or other non-intact skin (i.e. hangnails, rashes, eczema, etc.)
   5. Human bite: Human bite: If visible breaking of the skin occurs, the patient may have been exposed to the Health Care Worker (HCW); this is a Reverse Exposure. If the patient’s blood has contact with the bite sight of the HCW, the HCW is also potentially exposed. (An example would be a patient who has trauma to the mouth and is bleeding at the time of the bite).
   6. Intact Skin: If the exposure was to blood and an extensive area of skin was exposed or there was prolonged contact.

Body fluids include:
cerebral spinal fluid
synovial fluid
pericardial fluid
amniotic fluid
semen
vaginal secretions
peritoneal fluid
pleural fluid
saliva in dental procedures
any other body excretion/secretion (e.g., urine, stool, sputum, saliva) that contains visible blood

First Aid

At the time of a suspected exposure, basic first aid measures should be taken to thoroughly irrigate and disinfect the affected body part to prevent infection/illness:

1. Skin exposure, puncture or laceration - Wash with bactericidal soap and water.
2. Eyes, mouth or other mucous membranes - Rinse with running water, normal saline, or other suitable sterile eye wash for at least ten (10) minutes.

All Blood and Body Fluid Exposures are to be Reported Immediately:

CDC RECOMMENDS THAT WHEN PROPHYLACTIC DRUG THERAPY IS INITIATED, IT SHOULD BE STARTED WITHIN HOURS OF THE EXPOSURE EVENT.

A. Immediately after first aid, reporting of an exposure (or possible exposure, including Reverse Exposures) to blood or body fluids is the responsibility of the individual who was exposed and is to be reported immediately to the Exposure Control Nurse (ECN) at the appropriate facility. See table 1 below.

Table 1

<table>
<thead>
<tr>
<th>Location</th>
<th>Reporting Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>GMMC (includes all of the main campus, Life Center, CFM, North Greenville Campus.)</td>
<td>At all times</td>
</tr>
<tr>
<td>Greer Memorial Medical</td>
<td>At all times</td>
</tr>
<tr>
<td>Practice Name</td>
<td>Reporting Options</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>--------------------------------------------------------</td>
</tr>
<tr>
<td>Campus/Greer Practices</td>
<td>At all times Call ECN at 454-6196 and follow directions on the voice mail.</td>
</tr>
<tr>
<td>Hillcrest Memorial Hospital and Simpsonville and Laurens Practices</td>
<td>At all times Call ECN at 797-1069 and follow directions on the voice mail.</td>
</tr>
<tr>
<td>Patewood Medical Campus</td>
<td>At all times Call the number listed above of the hospital nearest your practice.</td>
</tr>
<tr>
<td>University Medical Group and Partners in Health</td>
<td>At all times Call the number listed above of the hospital nearest your practice.</td>
</tr>
</tbody>
</table>

For all locations, if you have any difficulty reporting, call beeper number 290-3386.

B. The exposed person obtains a Supervisors’ Report of Employee Occurrence (SREO) form from the department manager and completes the written report. If circumstances do not allow time for completing SREO (e.g. performing surgery), or the manager is not available, the exposure is still reported immediately to the appropriate ECN.

C. The exposed person will be instructed by the ECN regarding scheduling of follow-up appointment with the ECN. The entire SREO is brought to this appointment. The ECN will keep the Employee Health copy and return the remaining copies to the exposed individual for their Workers Comp records. The ECN has SREO’s available if needed.

D. The instructor or manager of the exposed person is responsible for counseling the employee regarding injury prevention and disciplinary action that may be taken if injuries are preventable and repetitive.

E. The ECN initially manages the exposure event as follows:
   1. Test patient source
   2. Offer to test the exposed person
   3. Complete all paper work and have signed
   4. Report all lab results to the exposed person
   5. Report the source patient’s lab results to their physician as indicated
   6. If prophylactic drugs are needed, offer the beginning drugs, but ONLY enough until they can follow up with their Workers Comp physician or their own MD

F. Remaining follow-up is completed by the exposed person’s school, employer or private MD.

Notes:

1. All exposures (Tb, Pertussis, etc.) are reported to the ECN at the facility where the exposure occurred. (Refer to Table 1.)
2. Schools that do not fit test their students for use of the N-95 respirators should not permit their students to care for any patient on airborne precautions.
<table>
<thead>
<tr>
<th>UNIT NAME</th>
<th>LOCATION</th>
<th>PHONE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMERGENCY TRAUMA CENTER</td>
<td>1st Floor</td>
<td>455-1660</td>
</tr>
<tr>
<td>CHILDREN'S EMERGENCY CENTER</td>
<td>1st Floor</td>
<td>455-6021</td>
</tr>
<tr>
<td>GI LAB</td>
<td>1st Floor</td>
<td>455-7934</td>
</tr>
<tr>
<td>NEUROSCIENCE</td>
<td>2C</td>
<td>455-1723</td>
</tr>
<tr>
<td>OR</td>
<td>2D</td>
<td>455-1724</td>
</tr>
<tr>
<td>OR</td>
<td>2nd Floor</td>
<td>455-7170</td>
</tr>
<tr>
<td>PACU</td>
<td>2nd Floor</td>
<td>455-8899</td>
</tr>
<tr>
<td>PRE-OP</td>
<td>2nd Floor</td>
<td>455-4427</td>
</tr>
<tr>
<td>CARDIOVASCULAR ICU</td>
<td>2E</td>
<td>455-1725</td>
</tr>
<tr>
<td>MEDICAL RENAL</td>
<td>3B</td>
<td>455-1732</td>
</tr>
<tr>
<td>VASCULAR SURGERY</td>
<td>3C</td>
<td>455-1733</td>
</tr>
<tr>
<td>GENERAL SURGERY</td>
<td>3D</td>
<td>455-1734</td>
</tr>
<tr>
<td>PALLIATIVE CARE</td>
<td>4A</td>
<td>455-1741</td>
</tr>
<tr>
<td>CARDIOLOGY MEDICINE</td>
<td>4B</td>
<td>455-1742</td>
</tr>
<tr>
<td>CARDIAC TELEMETRY</td>
<td>4C</td>
<td>455-1743</td>
</tr>
<tr>
<td>CV/MONITORED SURGERY</td>
<td>4D</td>
<td>455-1744</td>
</tr>
<tr>
<td>CORONARY CARE UNIT</td>
<td>4E</td>
<td>455-1745</td>
</tr>
<tr>
<td>MED/SURG ICU</td>
<td>4th Floor</td>
<td>455-1444</td>
</tr>
<tr>
<td>NEURO/TRAUMA ICU</td>
<td>4th Floor</td>
<td>455-7149</td>
</tr>
<tr>
<td>PULMONARY MEDICINE</td>
<td>5C</td>
<td>455-1753</td>
</tr>
<tr>
<td>ONCOLOGY MEDICINE</td>
<td>5D</td>
<td>455-1754</td>
</tr>
<tr>
<td>GENERAL PEDIATRICS</td>
<td>5E</td>
<td>455-1755</td>
</tr>
<tr>
<td>PEDIATRIC HEM/ONCOLOGY</td>
<td>5F</td>
<td>455-1756</td>
</tr>
<tr>
<td>PEDIATRIC ICU</td>
<td>5G</td>
<td>455-7146</td>
</tr>
<tr>
<td>LABOR &amp; DELIVERY</td>
<td>6th Floor</td>
<td>455-7164</td>
</tr>
<tr>
<td>OB TRIAGE</td>
<td>6th Floor</td>
<td>455-7801</td>
</tr>
<tr>
<td>FAMILY BEGINNINGS</td>
<td>6C</td>
<td>455-1763</td>
</tr>
<tr>
<td>SPECIALTY OB (HIGH RISK)</td>
<td>6D</td>
<td>455-7042</td>
</tr>
<tr>
<td>ADOL/SCHOOL AGE PEDS</td>
<td>6E</td>
<td>455-1765</td>
</tr>
</tbody>
</table>

**PATEWOOD CENTER**

<table>
<thead>
<tr>
<th>UNIT NAME</th>
<th>LOCATION</th>
<th>PHONE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>OR/PACU</td>
<td>2nd Floor</td>
<td>455-1729</td>
</tr>
<tr>
<td>SUBACUTE</td>
<td>2nd Floor</td>
<td>455-1728</td>
</tr>
<tr>
<td>TRAUMATIC BRAIN INJURY</td>
<td>3rd Floor</td>
<td>455-1739</td>
</tr>
</tbody>
</table>

**HILLCREST HOSPITAL**

<table>
<thead>
<tr>
<th>UNIT NAME</th>
<th>LOCATION</th>
<th>PHONE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMPREHENSIVE REHAB</td>
<td>2nd Floor</td>
<td>455-7172</td>
</tr>
<tr>
<td>SUBACUTE</td>
<td>2nd Floor</td>
<td>455-7128</td>
</tr>
<tr>
<td>TRAUMATIC BRAIN INJURY</td>
<td>3rd Floor</td>
<td>455-1739</td>
</tr>
</tbody>
</table>

**MARSHALL I. PICKENS HOSPITAL**

<table>
<thead>
<tr>
<th>UNIT NAME</th>
<th>LOCATION</th>
<th>PHONE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADULT PSYCHIATRIC</td>
<td>N/A</td>
<td>455-7180</td>
</tr>
<tr>
<td>GERO PSYCHIATRIC</td>
<td>N/A</td>
<td>455-7191</td>
</tr>
<tr>
<td>CHILD/ADOL PSYCHIATRIC</td>
<td>N/A</td>
<td>455-8845</td>
</tr>
</tbody>
</table>

(last updated 4.24.2012)
### GHS Emergency Codes, Conditions and Basic Staff Responses

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Initial Response</th>
<th>Secondary Response</th>
<th>Follow Up</th>
</tr>
</thead>
<tbody>
<tr>
<td>CODE ALERT</td>
<td>Disaster notification describing effects on GHS</td>
<td>Call Newsline for information on disaster/impact on department</td>
<td>Department initiates call back, equipment/supply checklist, discharge potential</td>
<td>HEICS decisions to recall, divert or discharge made. All departments evaluate response.</td>
</tr>
<tr>
<td>CODE BLACK</td>
<td>Power failure; location to be paged.</td>
<td>Verify that all critical equipment is on emergency power.</td>
<td>All power failures—check batteries, use flashlights</td>
<td>Review systems and equipment for function/calibration. Check patient status.</td>
</tr>
<tr>
<td>CODE ORANGE</td>
<td>Fire alarm notification; location announced</td>
<td>Recue, Alarm, Confine, Extinguish (RACE)</td>
<td>Use extinguisher if small fire. Prepare to evacuate or be refuge</td>
<td>Horizontal evacuation as necessary. Evaluate for work practice/engineering control problems.</td>
</tr>
<tr>
<td>CODE 5</td>
<td>Tornado warning; facility-wide page.</td>
<td>Move all persons away from exterior glass to inner halls. Close blinds.</td>
<td>Await “All Clear” from area of refuge.</td>
<td>Evaluate for damage and response. Return to operations.</td>
</tr>
<tr>
<td>CODE 100</td>
<td>Emergency security response</td>
<td>All security officers and able-bodied staff respond.</td>
<td>Follow intervention team lead. Take continuing action.</td>
<td>Report as necessary. Use WPV assessment as necessary.</td>
</tr>
<tr>
<td>CODE PINK</td>
<td>Infant abduction—missing or is known to have been taken</td>
<td>All staff watch for person with an infant or large package that is not being escorted by clinical staff.</td>
<td>Ask to verify infant ID or inspect package. Get clear description or ID and direction of travel.</td>
<td>Immediately report information to security and nursing supervisor.</td>
</tr>
</tbody>
</table>

### Fire Safety

All staff including students should understand the basics of the environment of care within the GHS organizations. GHS Orientation includes learning and knowing fire safety information. At GHS, Fire Response is based on the **RACE** procedure:

- **R** - Rescue
- **A** - Alarm
- **C** - Confine
- **E** - Extinguish

GHS announces any fire or suspected fire as a **CODE ORANGE** at which time all staff (and students) should respond to the code and take action as required. It is important to become familiar with any unique activities in a department-specific fire plan including alarm and extinguisher locations, exit pathways, nearest firewall, staff assignments, evacuation considerations, and areas of refuge. Students should be familiar with these plans. Students should be familiar with the use of portable extinguishers; know the type of extinguisher available, the location and how to use it:

**PASS** procedure for use of fire extinguishers:
- **P** - Pull Pin
- **A** - Aim
- **S** - Squeeze the handle
- **S** - Sweep extinguishing agent at the base of the fire