

Clinical Module

INTRODUCTION

This module is intended to prepare you for your clinical experience. It is advisable for you to review and prepare for clinical procedures you will be asked to perform in the clinical setting. Below is a list of the procedures for review. This list is not inclusive. It is advisable for you to review the procedures in your fundamentals text, Basic Nursing, Essentials for Practice.

Medication administration and calculation (5 rights, 3 checks)
Wound care
Aseptic technique
Isolation procedures
NGT/Feeding tube insertion
IV start, discontinue and maintenance including drip rates
Patient safety
Restraints
Foley catheterization and care

You must review the components of practice for the licensed practical nurse, licensed required and the role of unlicensed personnel: Nurse Aides, prior to your first clinical rotation. The components of practice for the Licensed Practical Nurse and licensed required are included in this module for your review. The role of unlicensed personnel: Nurse Aide is on the board of nursing website (see below).

Please provide the following to the Allied Health Science Director **prior** to your clinical experience:

- Proof of a negative nine panel drug screen
- Proof of current adult, infant and child CPR
- Proof of CFCC liability insurance (Payable at time of registration for the clinical component NUR 107b)

You will be provided with a clinical rotation schedule prior to the start of your clinical rotation. Contact information for the faculty and clinical site will be provided on the rotation schedule. If you have a conflict with any clinical day you must notify the faculty prior to the start of the rotation.

CLINICAL OBJECTIVES

1. Participate in the collection of objective and subjective data for patients experiencing common health conditions.
2. Participate, with progressive independence, in the planning of care for patients experiencing common health conditions.
3. Participate, with progressive independence, in the implementation of patient care.
4. Assist, with progressive independence, in the evaluation of effective nursing interventions for patients with common health conditions.
5. Participate in the implementation of role delegation.
6. Demonstrate accountability and responsibility in the clinical setting.
7. Utilize appropriate communication skills with patients, significant others, and members of the health care team.

NORTH CAROLINA BOARD OF NURSING WEBSITE

www.ncbon.org

It is strongly recommended that you familiarize yourself with the board of nursing website. There is information that you will need to practice as and LPN, renew licensure etc. This module has required elements from the website.

21-36.0221. LICENSE REQUIRED

(a) No cap, pin, uniform, insignia or title shall be used to represent to the public, that an unlicensed person is a registered nurse or a licensed practical nurse as defined in G.S. 90-171.43.
(b) The repetitive performance of a common task or procedure which does not require the professional judgment of a registered nurse or licensed practical nurse shall not be considered the practice of nursing for which a license is required. Tasks that may be delegated to the Nurse Aide I and Nurse Aide II shall be established by the Board of Nursing pursuant to 21 NCAC 36 .0403. Tasks may be delegated to an unlicensed person which:

- (1) frequently recur in the daily care of a client or group of clients;
- (2) are performed according to an established sequence of steps;
- (3) involve little or no modification from one client-care situation to another;
- (4) may be performed with a predictable outcome; and
- (5) do not inherently involve ongoing assessment, interpretation, or decision-making which cannot be logically separated from the procedure(s) itself.

Client-care services which do not meet all of these criteria shall be performed by a licensed nurse.

(c) The registered nurse or licensed practical nurse shall not delegate the professional judgment required to implement any treatment or pharmaceutical regimen which is likely to produce side effects, toxic effects, allergic reactions, or other unusual effects; or which may rapidly endanger a client's life or well-being and which is prescribed by a person authorized by state law to prescribe such a regimen. The nurse who assumes responsibility for implementing a treatment or pharmaceutical regimen shall be accountable for:

- (1) recognizing side effects;
- (2) recognizing toxic effects;
- (3) recognizing allergic reactions;
- (4) recognizing immediate desired effects;
- (5) recognizing unusual and unexpected effects;
- (6) recognizing changes in client's condition that contraindicates continued administration of the medication;
- (7) anticipating those effects which may rapidly endanger a client's life or well-being; and
- (8) making judgments and decisions concerning actions to take in the event such untoward effects occur.

(d) When health care needs of an individual are incidental to the personal care needs of the individual, nurses shall not be accountable for care performed by clients themselves, their families or significant others, or by caretakers who provide personal care to the individual.

History Note: Authority G.S. 90-171.23(b); 90-171.43; 90-171.83;

Eff. May 1, 1982;

Amended Eff. July 1, 2004; April 1, 2002; December 1, 2000; July 1, 2000; January 1, 1996; February 1, 1994; April 1, 1989; January 1, 1984.

RULES DEFINING COMPONENTS OF PRACTICE FOR THE LICENSED PRACTICAL NURSE

Rules which further define the Nursing Practice Act have been established by the Board of Nursing. These rules are considered law and provide the parameters for the legal scope of practice for the licensed nurse; therefore, every nurse should have working knowledge of these rules in order to provide the public with safe nursing care.

21-36.0225. COMPONENTS OF NURSING PRACTICE FOR THE LICENSED PRACTICAL NURSE

(a) The licensed practical nurse shall accept only those assigned nursing activities and responsibilities, as defined in Paragraphs (b) through (i) of this Rule, which the licensee can safely perform. That acceptance shall be based upon the variables in each practice setting which include:

(1) the nurse's own qualifications in relation to client need and plan of nursing care, including:

(A) basic educational preparation; and

(B) knowledge and skills subsequently acquired through continuing education and practice;

(2) the degree of supervision by the registered nurse consistent with Paragraph (d)(3) of this Rule;

(3) the stability of each client's clinical condition;

(4) the complexity and frequency of nursing care needed by each client or client group;

(5) the accessible resources; and

(6) established policies, procedures, practices, and channels of communication which lend support to the types of nursing services offered.

(b) Assessment is an on-going process and consists of participation in the determination of nursing care needs based upon collection and interpretation of data relevant to the health status of a client.

(1) collection of data consists of obtaining data from relevant sources regarding the biophysical, psychological, social and cultural factors of the client's life and the influence these factors have on health status, according to structured written guidelines, policies and forms, and includes:

(A) subjective reporting;

(B) observations of appearance and behavior;

(C) measurements of physical structure and physiologic function; and

(D) information regarding available resources.

(2) interpretation of data is limited to:

(A) participation in the analysis of collected data by recognizing existing relationships between data gathered and a client's health status and treatment regimen; and

(B) determining a client's need for immediate nursing interventions based upon data gathered regarding the client's health status, ability to care for self, and treatment regimen consistent with Paragraph (a)(6) of this Rule.

(c) Planning nursing care activities includes participation in the identification of client's needs related to the findings of the nursing assessment. Components of planning include:

(1) participation in making decisions regarding implementation of nursing intervention and medical orders and plan of care through the utilization of assessment data;

(2) participation in multidisciplinary planning by providing resource data; and

(3) identification of nursing interventions and goals for review by the registered nurse.

(d) Implementation of nursing activities consists of delivering nursing care according to an established health care plan and as assigned by the registered nurse or other person(s) authorized by law as specified in G.S. 90-171.20 (8)(c).

(1) Nursing activities and responsibilities which may be assigned to the licensed practical nurse include:

(A) procuring resources;

(B) implementing nursing interventions and medical orders consistent with Paragraph (b) of this Rule and Paragraph (c) of 21 NCAC 36 .0221 and within an environment conducive to client safety;

(C) prioritizing and performing nursing interventions;

(D) recognizing responses to nursing interventions;

(E) modifying immediate nursing interventions based on changes in a client's status; and

(F) delegating specific nursing tasks as outlined in the plan of care and consistent with Paragraph (d)(2) of this Rule, and 21 NCAC 36 .0401.

(2) The licensed practical nurse may participate, consistent with 21 NCAC 36 .0224(d)(6), in implementing the health care plan by assigning nursing care activities to other licensed practical nurses and delegating nursing care activities to unlicensed personnel qualified and competent to perform such activities and providing all of the following criteria are met:

(A) validation of qualifications of personnel to whom nursing activities may be assigned or delegated;

(B) continuous availability of a registered nurse for supervision consistent with 21 NCAC 36 .0224(i) and Paragraph (d)(3) of this Rule;

(C) accountability maintained by the licensed practical nurse for responsibilities accepted, including nursing care given by self and by all other personnel to whom such care is assigned or delegated;

(D) participation by the licensed practical nurse in on-going observations of clients and evaluation of clients' responses to nursing actions; and

(E) provision of supervision limited to the validation that tasks have been performed as assigned or delegated and according to established standards of practice.

(3) The degree of supervision required for the performance of any assigned or delegated nursing activity by the licensed practical nurse when implementing nursing care is determined by variables which include, but are not limited to:

(A) educational preparation of the licensed practical nurse, including both the basic educational program and the knowledge and skills subsequently acquired by the nurse through continuing education and practice;

(B) stability of the client's clinical condition, which involves both the predictability and rate of change. When a client's condition is one in which change is highly predictable and would be expected to occur over a period of days or weeks rather than minutes or hours, the licensed practical nurse participates in care with minimal supervision. When the client's condition is unpredictable or unstable, the licensed practical nurse participates in the performance of the task under close supervision of the registered nurse or other person(s) authorized by law to provide such supervision;

(C) complexity of the nursing task which is determined by depth of scientific body of knowledge upon which the action is based and by the task's potential threat to the client's well-being. When a task is complex, the licensed practical nurse participates in the performance of the task under close supervision of the registered nurse or other person(s) authorized by law to provide such supervision;

(D) the complexity and frequency of nursing care needed by a given client population;

(E) the proximity of clients to personnel;

(F) the qualifications and number of staff;

(G) the accessible resources; and

(H) established policies, procedures, practices and channels of communication which lend support to the types of nursing services offered.

(e) Evaluation, a component of implementing the health care plan, consists of participation in determining the extent to which desired outcomes of nursing care are met and in planning for subsequent care. Components of evaluation by the licensed practical nurse include:

(1) collecting evaluative data from relevant sources according to written guidelines, policies and forms;

(2) recognizing the effectiveness of nursing interventions; and

(3) proposing modifications to the plan of care for review by the registered nurse or other person(s) authorized by law to prescribe such a plan.

(f) Reporting and recording are those communications required in relation to the aspects of nursing care for which the licensed practical nurse has been assigned responsibility.

(1) Reporting means the communication of information to other persons responsible for or involved in the care of the client. The licensed practical nurse is accountable for:

(A) directing the communication to the appropriate person(s) and consistent with established policies, procedures, practices and channels of communication which lend support to types of nursing services offered;

(B) communicating within a time period which is consistent with the client's need for care;

(C) evaluating the nature of responses to information reported; and

(D) determining whether further communication is indicated.

(2) Recording means the documentation of information on the appropriate client record, nursing care plan or other documents. This documentation must:

- (A) be pertinent to the client's health care including client's response to care provided;
- (B) accurately describe all aspects of nursing care provided by the licensed practical nurse;
- (C) be completed within a time period consistent with the client's need for care;
- (D) reflect the communication of information to other persons; and
- (E) verify the proper administration and disposal of controlled substances.

(g) Collaborating involves communicating and working cooperatively in implementing the health care plan with individuals whose services may have a direct or indirect effect upon the client's health care. As delegated by the registered nurse or other person(s) authorized by law, the licensed practical nurse's role in collaborating in client care includes:

- (1) participating in planning and implementing nursing or multidisciplinary approaches for the client's care;
- (2) seeking and utilizing appropriate resources in the referral process; and
- (3) safeguarding confidentiality.

(h) "Participating in the teaching and counseling" of clients as assigned by the registered nurse, physician or other qualified professional licensed to practice in North Carolina is the responsibility of the licensed practical nurse. Participation includes:

(1) providing accurate and consistent information, demonstrations, and guidance to clients, their families or significant others regarding the client's health status and health care for the purpose of:

- (A) increasing knowledge;
 - (B) assisting the client to reach an optimum level of health functioning and participation in self care; and
 - (C) promoting the client's ability to make informed decisions.
- (2) collecting evaluative data consistent with Paragraph (e) of this Rule.

(i) Accepting responsibility for self for individual nursing actions, competence and behavior which includes:

- (1) having knowledge and understanding of the statutes and rules governing nursing;
- (2) functioning within the legal boundaries of licensed practical nurse practice; and
- (3) respecting client rights and property, and the rights and property of others.

*History Note: History Note: Authority G.S. 90-171.20(7),(8); 90-171.23(b); 90-171.43(4);
Eff. January 1, 1991;
Amended Eff. January 1, 1996;
Temporary Amendment Eff. October 24, 2001;
Amended Eff. August 1, 2002.*

ROLES OF UNLICENSED PERSONNEL

Go to North Carolina Board of Nursing Website to review the roles of unlicensed personnel.

www.ncbon.org

On the left side of the screen locate Laws and Rules move the mouse down to Administrative rules and then proceed to page 42 of the rules and review.

CONTINUED COMPETENCE

You will need to review the webcast on continued competence prior to completion of the clinical component. You will be required to provide proof that the webcast was completed. This can be turned in to the clinical faculty.

EVIDENCE-BASED PRACTICE

Please access the link below and review the introduction video on evidence-based practice. When you access the page scroll to the bottom of the screen and click on “see the introduction video” by Dr. Schirm. You do not need to complete the tutorial. You will need to review the video prior to the start of clinical rotation and be prepared to discuss with clinical faculty.

<http://www.lias.psu.edu/instruction/ebpt-07/>

NUR 107b Licensed Practical Nursing Refresher Clinical Evaluation

Final Evaluation: _____ Date: _____

Student: _____

Instructor: _____

S = Satisfactory: In order to demonstrate satisfactory clinical performance, the student must meet the course and clinical outcomes for the course. Grades of “S” on all clinical objectives and satisfactory completion of any action plans demonstrates satisfactory performance. Weekly anecdotal notes will be used to monitor clinical progress.

- The student performs in a safe, therapeutic manner the described or expected behavior.
- The student seeks guidance when necessary to function in nursing situations.
- The student is prepared for each clinical experience.
- Initiates care for assigned patients in a timely manner.
- Safely performs psychomotor skills.
- Observes professional ethics at all times.
- Is sensitive to patients' needs.
- Demonstrates effective communication skills.
- Within assigned clinical timeframe, prioritizes care for assigned patients, organizes and implements care for at least three adult clients. Collects evaluative data and recognizes the effectiveness of interventions.
- Identifies own personal strengths and weaknesses.

Weekly during the course, the student and the clinical instructor document on the anecdotal sheet indications of whether the objectives are met or not met. When it is determined that the student is not progressing toward meeting the clinical objectives an action plan will be initiated. The action plan will be reviewed weekly with the student by the clinical instructor to monitor progression toward criteria indicated on the action plan.

At final evaluation, each objective on the clinical evaluation tool is given a grade of “S” or “U”. Students with action plans must meet the criteria outlined on the action plan in order to receive a satisfactory clinical evaluation.

U = Unsatisfactory: The student requires continuous guidance and/or assistance to perform the described or expected behavior safely. She/He is not prepared for the clinical learning experiences. A grade of “U” for one or more of the course outcomes or clinical outcomes indicates the area(s) of unsatisfactory performance and the student will not graduate from the program. If the action plan is not satisfactorily completed, the student will earn a grade of unsatisfactory and will not graduate from the program.

Students shall be dismissed from the nursing program for behaviors that violate any of the following criteria.

Refer to Practical Nursing Student Policy Manual

1. Behaviors which conflicts with safety essential to nursing practice.
2. Violation of the Code of Conduct and Standards set forth in the Sampson Community College Student Handbook.
3. Behavior or conduct as set forth under sub-paragraphs (1) through (7) inclusive, of North Carolina, General Status, Section 90-171.37 of the Nursing Practice Act of the State of North Carolina, effective July 2003. The behavior includes but is not limited to the following
 - a. Has a mental or physical disability or uses any drug to a degree that interferes with his or her fitness to deliver nursing care.
 - b. Engages in conduct that endangers the public health.
 - c. Is unfit or incompetent to deliver nursing care appropriate to level of preparation by reason of deliberate or negligent acts or omissions regardless of whether actual injury to the patient is established.
 - d. Engages in conduct that deceives, defrauds, or harms the public in the course of clinical activities or services.

NUR 107b Licensed Practical Nursing Refresher Clinical Evaluation

In NUR 107b, the student will be assigned several patients each clinical rotation. Assignments will reflect course theory related to nursing care of adult clients experiencing alterations in health and associated activities of daily living.

NURSING PROCESS	S	U	Comments
ASSESSMENT			
<i>Utilizes the nursing process and best practice in the delivery of safe and effective direct nursing care to clients in diverse health care settings under the guidance of a licensed Registered Nurse.</i>			
Recognizes the physiological, psychological health and safety needs of each assigned client.			
Collects objective and subjective data about clients with health problems related to common conditions. This includes observations of appearance and behaviors, measurements of physical structure and physiological function and information regarding available resources			
Clinical Assessment Sheet (CAS) is thorough and complete with data collected.			
Identifies normal and abnormal data collected.			
Determines the need for additional data.			
Determines the significance of diagnostic tests.			
Determines significant signs and symptoms by comparing normal data to data collected			
PLANNING			
<i>Demonstrates the ability to participate in planning and implementing nursing or multidisciplinary approaches for the client's care.</i>			
Identified appropriate nursing interventions and goals for review by the registered nurse/faculty member.			
IMPLEMENTATION			
<i>Demonstrate skills that incorporate evidence-based practice to provide client-centered, culturally competent care that respects client differences and values.</i>			
<i>Promote client involvement in decision-making and care management.</i>			
<i>Promote healthy lifestyles for clients and populations across the lifespan.</i>			
<i>Assure implementation of the plan of care for a specified group of patients as assigned by an RN.</i>			
Employs principles of safety			
a. practices within the code of conduct as referenced on cover sheet			
b. verifies client identity			
c. uses safety measures appropriate for client's age, developmental level and condition			

NURSING PROCESS	S	U	Comments
d Appropriately prioritized nursing interventions for assigned client			
e Demonstrates competence in performing nursing skills			
Performs procedures within a reasonable timeframe			
Utilized standards of care/critical pathways as guidelines for implementing care.			
Performed basic therapeutic and preventive nursing interventions.			
Administered medications safely and appropriately to assigned patient utilizing the 5 rights of medication administration.			
Assisted patients and others in understanding nursing care provided.			
Recognized responses to nursing interventions			
Modified immediate nursing interventions based on changes in client's status.			
Applies teaching-learning principles when reinforcing client teaching.			
Communicated data collected with faculty and other health team members.			
Recognizes and reports changes in client conditions to instructor and staff member.			
Communicated within a time period consistent with the client's need for care.			
<i>Utilize informatics to communicate, manage knowledge, mitigate error and support decision making.</i>			
Documents accurately regarding data collected, interventions provided and client response to interventions provided.			
<i>Demonstrate the ability to delegate effectively to other Licensed Practical Nurses and unlicensed assistive personnel (UAP).</i>			
<i>Validate that tasks, assigned or delegated, have been performed according to established standards of practice.</i>			
Gives a report of assigned client's status to appropriate staff member prior to leaving unit.			
Provides pertinent information during clinical conferences.			
EVALUATION			
Collected evaluative data from relevant sources according to written guidelines, policies and forms.			
Recognized the effectiveness of interventions.			
Participated in evaluating care of assigned patients.			
<i>Evaluate client's response to interventions and propose modifications to the plan of care for review by the Registered Nurse.</i>			

ACCOUNTABILITY AND RESPONSIBILITY	S	U	Comments
<i>Accountable for responsibilities accepted, including nursing care given by self and all personnel to whom such care is assigned or delegated.</i>			
Recognized own abilities and limitations.			
Utilizes feedback for professional growth.			
Demonstrates purposeful, self-regulatory judgment (<i>Critical thinking skills</i>).			
Demonstrates accountability by attending clinical as scheduled and arriving on time.			
Assumes responsibility for own actions, including following directions.			
Evaluates personal performance of course/clinical objectives and identifies activities to improve performance.			
COMMUNICATION			
Implemented appropriate communication skills with client, family and significant others.			
Implemented appropriate communication with nursing and health team members			
Maintained appropriate communication with faculty.			

Date _____

Student Signature _____

Faculty Signature _____

Three Strengths

Three Weaknesses
