

MERCER COUNTY COMMUNITY COLLEGE
DIVISION OF SCIENCE AND ALLIED HEALTH
DEPARTMENT OF NURSING
NURSING 202
LEADERSHIP CLINICAL GUIDELINES

OBJECTIVES FOR CLINICAL EXPERIENCE

Following the clinical experience the student will:

1. be prepared to begin a career as a new graduate
2. develop a more mature level of professionalism
3. develop beginning leadership skills
4. develop an increase in confidence in role as a beginning practitioner
5. develop a sense of assertiveness
6. develop an ability to care for multiple patient assignments
7. learn to identify priority needs in multiple patient assignments for patients with multi-systems problems
8. provide care to up to four patients in an organized fashion
9. increase confidence and competence with technical skills
10. learn to work collaboratively with your student group and the staff
11. understand the steps necessary to make change
12. advance your critical thinking skills

At the end of the leadership experience you will be requested to evaluate yourself in terms of the above objectives in addition to the course objectives

EXPERIENCES:

1. You will have three separate leadership experiences
 - Team member starting with two patients working up to four patients
 - Team leader or student manager overseeing the student team
 - Medication nurse managing IV's and IVPB's for up to 10 patients
2. You will rotate off the unit to Deborah Heart and Lung Hospital.
3. You will spend one day in community shadowing a community health nurse
4. You will buddy with a nursing director for one clinical day
5. You will present a med surg case study on the last clinical day

PREPARATION AS A STUDENT TEAM MEMBER:

Assignments will be arranged by your clinical instructor initially and then by the student team manager and the instructor later in the semester as you arrive on the clinical unit

You need to know the following:

- The patients diagnoses
- The priority patient needs, problems, nursing diagnosis
- Care you will provide to meet the patient needs
- Any procedures you will have to carry out to implement this care
- The medications you are to administer to the patient, knowing the purpose, action, the major side effects along with the nursing implications
- Plan what you will do each hour of the day based on the patient's needs

This may be discussed in conference or on the clinical area

HANDLING MULTIPLE PATIENT ASSIGNMENTS AS A STUDENT TEAM MEMBER:

The key to handling multiple patient assignments is **organization, flexibility, and preparation**. By planning what you want to do and estimating approximately how long it will take, you will find that you can handle multiple patient assignments more easily. Setting priorities is an absolute necessity. The form supplied helps to organize your care. Fragmenting your care is helpful, by doing all the assessments and VS first, then doing medications, then doing ordered treatments.

You will have preconference initially to make sure you are identifying the priority needs for your clients and setting up a schedule that reflects these priorities. After about three weeks the group may progress to no preconference. This will be up to the clinical instructor. During preconference the focus will be on identifying the patient priorities and how to organize that care with multiple patient assignments. When there is no conferences the instructor will review your worksheet which shows priorities and time schedule.

STUDENT TEAM MEMBER ORGANIZATION OF CLINICAL DAY:

1. Get report from the nurse assigned to your patient. Indicate to the nurse that you will be providing care from what time to what time. Identify what meds you will be administering explaining that you will not be doing IV pushes, but can observe this done with the nurse.
2. Explain the schedule for the clinical day
3. Get the kardex if applicable to the hospital
4. Check the chart for new orders. Check the medication orders comparing the medex with the doctor's orders.
5. At Capital Health Systems Mercer and Robert Wood Johnson at Hamilton follow the following directions: Pull your medications from the pyxus/or other location and put into the patient's drawer. You could use a labeled plastic ziplock baggie marked with a permanent black marker to organize your meds. If the meds are not listed or are missing then ask for help from your team leader. Sign the medex and bring to the instructor for review of medications. You may give oral medications independently AFTER they have been reviewed by your instructor. You must do IM, sq, IV's and IVPB's with the instructor until the instructor indicates you are ready for independent administration. At University Medical Center at Princeton follow instructions of your instructor as to how to prepare medications.
6. Do a baseline assessment of your patient including vital signs (if they have not been done).
7. DOCUMENT IMMEDIATELY, NOT ON SCRAP PAPER, but on the flow sheets, VS sheet, computer or chart. This is called point of action documentation. Do it, document it.
8. Prepare a PIE note throughout the day (on chart or on computer), bringing it to the instructor as soon as possible, not waiting to the end of the clinical time. Write a PIE for all important priorities and for emergency situations
9. Use your priorities to identify care needed by the patient.
10. Report any significant changes immediately to the instructor.
11. Work cooperatively with the tech to provide AM care/PM.
12. Plan on doing teaching with all your patients.
13. All patients must have a psychological need which will be addressed by each student
14. Try to stay within one hour of your schedule; ask for help from your team leader once you are aware you are behind schedule

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15. When managing multiple patient assignments divide up the care based on priorities. You move from patient to patient: for example, do all baseline assessments and VS first, then document.
16. If your client is for discharge indicate this to your student manager so we know you need another assignment for the next clinical day. In most cases when your clinical day is split the student will need another assignment because of the high turnover rate in the acute care center.
17. Hand in your planning sheets so that the instructor has a sense of how you are thinking. They do not have to be neat. That is why they are called worksheets, so you can write in pencil, pen, yellow, red.
18. Bring problem issues to the instructor. The instructor will not solve the problem, but will ask questions to guide in possible solutions, then sending the student back to work out the problem. You will be sent back in to try to solve the problem; if no success then the instructor will come in to assist. The instructor will review what worked and why.

TEAM LEADING or student manager:

Each student will have the opportunity to have a leadership experience. The manager will make sure that the student members are providing patient care assigned efficiently and effectively

CHARACTERISTICS TO DEVELOP AS A TEAM LEADER:

1. Working through others by delegating authority
2. Working with others
3. Supervising patient care
4. Evaluating the progress of patient care
5. Being aware of all patient assignments on your team as well as priority care
6. Communicating with other health professionals clearly and concisely using an assertive communication style
7. Assisting team members to set priorities
8. Assigning others to assist team members with complex patient assignments
9. Leading problem solving
10. Delegating responsibility
11. Assisting your team members to organize patient care

STUDENT group manager PREPARATION:

1. Using the provided form listing all the patients, rooms, student names, primary nurse names, medical diagnoses and priority care
2. Research briefly any new medical diagnosis with which you are not familiar. Identify priorities for that patient.
3. You will receive the full assignment of all the patients being given to your student team from your clinical instructor

STUDENT TEAM Manager SCHEDULE/RESPONSIBILITIES:

1. Check that the posted assignment sheet is accurate. Assist in identifying the primary nurses assigned to each patient.
2. Make sure that each student has Kardexes (if available) for each patient.
3. Check to see if there are any new orders while the students are organizing their care and gathering medications
4. Make rounds to all the patients of the students doing patient care. Identify yourself as the student team leader. Discuss any patient concerns. Ask the patient how the hospitalization or illness is progressing. Be available to help problem solve any patient concerns.

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5. Be available to help student team member to:
 - Call pharmacy about missing drugs; FAX orders to pharmacy. Check that the drug might be profiled under a generic drug
 - Order and obtain missing drugs
 - Call central supply for missing products needed
 - Assist in procedures, bed changes medication administration, treatment for students who may be behind
 - Assist student to maintain identified schedule
 - Assist student to document appropriately and on time
6. Identify meal times if appropriate. Assist students to leave on time, report to primary nurse before leaving
7. Check for new orders every two hours and report changes to the student team member and to the instructor
8. In preparation for leaving unit for postconference assist students to complete assigned responsibilities (charting, treatments, reporting off) on time
9. Have a check-off list of the following to verify that the student has documented all of the following: meds, VS, PIE note, I&O, IV assessment, physical assessment. Assist team member in this documentation if needed.
10. Expect that as team leader you will need support when a peer is behind schedule. Work through approaches to increase the speed of performance by the student with a positive attitude.
11. It is probable that you will feel stress during the clinical day. It is possible that the faculty member might send you on a trip to the Carribean to refocus and come back refreshed after a 5 minute imaginary trip to Bermuda.

STUDENT MEDICATION NURSE:

GOALS OF THE ASSIGNMENT: The student will learn to manage multiple types of intravenous solutions and medications for 10 clients in a safe and timely manner increasing confidence and competence with medication administration. The student will not be providing direct patient care to the patients assigned for medication administration.

PREPARATION AND GUIDELINES FOR THE ROLE:

1. The student will receive the assignment as soon as arriving and immediately setup a schedule for medication administration using the forms provided. The instructor may ask the student to make a list of the clients with IV's and IVPB's
2. Research each drug knowing the purpose for your patient, the action, the side effects and the nursing implications.
3. Check the orders for the drug comparing the order with the medex. **SPEAK TO EACH PRIMARY NURSE PERSONALLY LETTING HER KNOW WHICH MEDS YOU ARE GIVING. REMIND HER THAT YOU ARE NOT DOING ANY PATIENT CARE.**
4. Assess what type of line the client has which indicates what type of tubing would be needed as well as infusion equipment.
5. Bring the signed medex with the drug box to review the drug with the instructor.
6. You may begin the medication administration process one hour before the meds are due since it may take you about an hour to administer meds to 4-6 patients (dependent on the total number of medications).
7. Before administering IVPB's you must know the classification of the drug, why it is being used for the client, any incompatibilities of the drug with what is hanging, and rate of administration as indicated by the textbook.
8. Once all equipment and information is collected and gathered then the instructor and student will go to the patient.

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9. You will be responsible for assessing the site of the IV, hanging IV maintenance bags of fluid, calculating the I&O, and documenting.
10. When calculating the rate of the IV fluids try to do the calculations in your head with less reliance on formulas.
11. When you are finished doing IV's you can offer assistance to student team members.

REMEMBER:

1. Most people forget to document/or do some of the basic procedures (like I&O, glucometers, sign for medications, empty foleys, etc.) In other words when adding increased responsibility at times it is more common to forget basic things that you would never forget with fewer clients.
2. **COMMUNICATION IS CRITICAL.** You must communicate effectively with the nurse, the instructor, the student manager and with your peers
3. **DOCUMENTATION IS CRITICAL.** If you don't document you didn't do it.
4. **PATIENT CARE IS THE MOST IMPORTANT THING:** if you are one hour behind **CALL FOR HELP.**

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