Governors State University
An Illinois Public University

Department of Nursing Clinical Practicum/Residency Handbook

2025-2027

INTRODUCTION

Congratulations! You have taken the first step toward earning your graduate degree or post-graduate FNP certificate in nursing. Learning is life-long process, and we are pleased that you have chosen the nursing program at Governors State University (GovState) as the place to continue your education. GovState has been a leader in quality affordable nursing education for over 4 years. GovState graduates are found in a variety of health care settings and are making significant contributions throughout the state of Illinois and beyond.

Please consult the most recent Governors State University Catalog for additional information regarding the university, its programs, courses, and faculty. Also, you should obtain a copy of the Student Handbook. It is available from the Admissions or Student Development Offices, or online at www.govst.edu/handbook.

The right is reserved to change tuition and fees, to add or delete courses, to revise instructional assignments, or to change regulations, requirements, or procedures where such changes are thought to be in the best interests of the

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WELCOME

Congratulations on progressing to the clinical practicum/residency phase of your graduate nursing program at Governors State University (GSU). This phase integrates academic learning with clinical practice.

Purpose of the Handbook

This handbook provides essential information regarding clinical requirements, policies, procedures, and expectations for students, faculty, and preceptors.

Program Overview

GSU nursing programs emphasize evidence-based practice, clinical competency, and professional development aligned with accreditation standards.

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Clinical Practicum Courses

Clinical Nurse Specialist (CNS)

The CNS program requires 540 faculty supervised clinical hours. See university catalog for clinical course description. CNS Clinical Courses:

NURS 8107 Adult- Gerontology Acute Care Alterations
NURS 8108 Adult- Gerontology Chronic Alterations
NURS 8210 Adult – Gerontology I: Clinical Nurse Specialist
NURS 8946 Adult – Gerontology II: Clinical Nurse Specialist: Internship and Project

Nursing Executive & Innovattive Leadership (NEIL)

The NEIL program requires 540 faculty supervised clinical hours, effective Spring 2027.
See university catalog for clinical course description.
NEIL Clinical Courses:
NURS 7109 - information for Nurse Executive
NURS 8104 Quality improvement & Innovation for Nurse Executives
NURS 8350- Nursing Administration I
NURS 8550- Nursing II Seminar
NURS 8956- Nursing Administration II Practicum

Family Nurse Practitioner/ Post Master's Certificate

The certificate program requires at least 750 face to face clinical practicum hours or more. The other 40 hours could be direct patient care or can be used as indirect patient care hours i.e., FNP-related conferences, and workshops. The total hours for the FNP program completion are 750 hours, pending Curriculum approval for Fall 2026 or Spring 2027. See university catalog for clinical course description.

FNP Clinical Courses:
NURS 8221- Clinical Practicum in Family Nurse Practitioner Role
NURS 8111- Clinical Practicum in Adult Family Health and Illness
NURS 8119- Clinical Practicum in Young Family Health and Illness (Pediatric, OB, Women's Wellness)
NURS 8949- Clinical Practicum for Family Nurse Practitioner Residency Project
The Post Master's degree must meet national standards for nurse practitioner practice and certification. Students can have up to three preceptors in a semester. If a student does not have a selected clinical site placement by the third week of school, the student is encouraged to withdraw from the course. See university catalog for clinical course description.

Doctor of Nursing Practice (DNP)

The Doctor of Nursing Practice (DNP) program at Governors State University prepares advanced nursing professionals to lead the transformation of healthcare through evidence-based practice, quality improvement, systems leadership, and clinical scholarship. Consistent with the 2021 American Association of Colleges of Nursing (AACN) Essentials: Core Competencies for Professional Nursing Education, the program prepares graduates to deliver person-centered, population-focused, equitable, and high-quality care while creating healing environments and fostering caring communities.

The nursing faculty consists of advanced practice registered nurses (APRNs), experienced nurse leaders, educators, and doctoral prepared scholars committed to preparing graduates for advanced nursing practice through innovative teaching, interprofessional collaboration, and experiential learning.

The DNP is a terminal professional practice doctorate designed for registered nurses entering with either a Bachelor of Science in Nursing (BSN) (post-baccalaureate entry) or a Master of Science in Nursing (MSN) (post-master's entry). The curriculum prepares graduates for advanced leadership roles in one of the following areas of concentration:

- Advanced Practice
- Community Behavior
- Leadership/Administration
- Nurse Practitioner
- Nurse Educator

The curriculum integrates the AACN Essentials Domains and Concepts, emphasizing:

- Knowledge for Nursing Practice
- Scholarship for Nursing Practice
- Quality and Safety
- Interprofessional Partnerships
- Informatics and Healthcare Technologies
- Professionalism
- Personal, Professional, and Leadership Development

Graduates are prepared to translate evidence into practice, improve healthcare quality and patient outcomes, lead organizational and systems change, evaluate healthcare delivery models, influence health policy, and address the healthcare needs of diverse individuals, families, communities, and populations across a variety of practice settings.

DNP Clinical Courses

The following DNP courses include supervised clinical, residency, internship, or scholarly project experiences:

- **DNP 9180 – Nursing Leadership Internship**
- **DNP 9510 – Practitioner/Educator Role Residency**
- **DNP 9540 – Advanced Practice Role Residency**
- DNP 9601 – Scholarly Project Proposal Development I
- DNP 9602 – Scholarly Project Proposal Development II
- DNP 9961 – Scholarly Project
- DNP 9999 (or another designated clinical course) until the required clinical practice hours have been achieved.

These clinical practicums courses provide students with opportunities to demonstrate achievement of the DNP program outcomes and the AACN Essentials through competency-based clinical experiences, systems leadership, quality improvement initiatives, interprofessional collaboration, and scholarly inquiry.

DNP Scholarly Project

The DNP Scholarly Project represents the culmination of doctoral study and demonstrates the student's ability to apply evidence-based practice, quality improvement methodologies, implementation science, leadership principles, and systems thinking to address a significant healthcare issue. Students work closely with their DNP Tutorial Committee throughout proposal development, implementation, evaluation, dissemination, and completion of the scholarly project.

Because the scope of scholarly projects varies, DNP 9601 – Scholarly Project Proposal Development I, DNP 9602 – Scholarly Project Proposal Development II, and DNP 9961 – Scholarly Project may require enrollment over more than one semester. Continued enrollment is determined by the student's doctoral committee until all project requirements have been successfully completed.

DNP Clinical Practice Hour Requirements

In accordance with the 2021 AACN Essentials and national expectations for Doctor of Nursing Practice education, students must complete a minimum of 1,000 post-baccalaureate supervised clinical practice hours that provide opportunities to attain and demonstrate advanced-level competencies.

Students entering the DNP program with a Master of Science in Nursing are expected to have completed at least 500 verified supervised clinical practice hours during their master's education. Previously completed graduate clinical hours that meet program and accreditation requirements may be applied toward the 1,000 post-baccalaureate clinical practice hour expectation.

Students entering with fewer than 500 verified master's-level clinical practice hours will be required to complete additional supervised clinical experiences. Any deficiency may require enrollment in DNP 9999 (designated clinical course) until the required clinical practice hours have been achieved.

All clinical practice experiences are designed to provide sufficient breadth and depth to demonstrate competency in advanced nursing practice and are completed under qualified supervision in accordance with university policies, accreditation standards, and national professional guidelines.

Student Learning Outcomes of the Clinical/Residency Experience

MSN Program Student Learning Outcomes. By the time the students in the Master of Science in Nursing complete their degree they will be able to:

1. Integrate information from humanities and other disciplines as a basis for advanced nursing practice
2. Demonstrate leadership abilities in all areas of nursing practice
3. Create a culture of quality and improvement in health care delivery
4. Compare nursing literature in translating research into practice
5. Evaluate clinical and decision support information systems in the nursing service organization
6. Develop familiarity in the legislative and policy processes
7. Collaborate effectively across disciplines within a healthcare organization
8. Display professional leadership skills exhibiting ethical, moral, and legal behavior
9. Plan health promotion and illness prevention activities for patient care.

DNP End of Program Student Learning Outcomes Graduates will be able to:

1. Critically analyze complex clinical situations and practice systems including the social, economic, political and policy components of health care systems to affect care planning and delivery.
2. Demonstrate advanced levels of clinical/judgement/scholarship to improve health care of diverse populations by analyzing and applying conceptual models, theories, and research.
3. Systematically investigate clinically focused areas of practice in nursing.
4. Assume leadership roles in the development of clinical practice models, education models, health policy, and standards of care
5. Integrate professional values and ethical decision-making in advanced nursing practice
6. Collaborate with interprofessional health care teams in diverse health care settings and systems to promote health and prevent illness
7. Assess technology and information systems for best practice across care settings

End of Program Student Learning Outcome(EPSLO's) and Role Specific Competency's (RSPCs)

EPSLO #1 Critically analyze complex clinical situations and practice systems {including} the social, economic, political and policy components of health care systems to affect care planning and delivery

ROLE SPECIFIC PROFESSIONAL COMPETENCIES (RSPC): RSPC #1 Knowledge of Practice: Synthesizes established and evolving scientific knowledge from diverse sources and contributes to the generation, translation and dissemination of health care knowledge and practices (all DNP roles as above)

RSPC #2 Translates and disseminates nursing knowledge (all DNP roles as above and clarified in specialty guidelines in Standard 4)

Community Behavior RSPC #2 ●Analysis and Assessment: Identifying and understand data, turning data into information for action, assessing needs and assets to address community health needs, developing community health assessments and using evidence for decision making ●Public Health Sciences: Understand the foundation and prominent events of public health, apply public sciences to practice, critique and develop research, use evidence when developing policies and programs, and establish academic partnerships

Direct Practice RSPC #2 Scientific Foundation Essential: ▪Critically analyzes data and evidence for improving advanced nursing practice. Integrates knowledge from the humanities and sciences within the context of nursing science. Translates research and other forms of knowledge to improve practice processes and outcomes. Develops new practice approaches based on the integration of research, theory, and practice knowledge.

Leadership/Administration RSPC #2 ● Knowledge of the Healthcare Environment: ▪Clinical practice ▪Delivery models / work design ▪Health care economics and policy ▪Governance ▪Evidence-based practice/outcome measurement and research ▪Patient safety ▪Performance improvement/metrics and ▪Risk management

Practitioner/Educator RSPC #2 Implement Effective Clinical and Assessment Evaluation Strategies

EPSLO #2 Demonstrate advanced levels of clinical/ judgement/ scholarship to improve health care of diverse populations by analyzing and applying conceptual models, theories, and research to improve health care of diverse populations.

ROLE SPECIFIC PROFESSIONAL COMPETENCIES (RSPC): RSPC #1 Practice-Based Learning and Improvement: Ability to investigate and evaluate one's care of patients, to appraise and assimilate emerging scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning (all DNP roles)

RSPC #2 Translates and disseminates nursing knowledge (all DNP roles as above)

Community Behavior RSPC #2 ●Public Health Sciences: Understand the foundation and prominent events of public health, applying public sciences to practice, critique and develop research, use evidence when developing policies and programs and to establish academic partnerships ●Cultural Competency: Understand and respond to diverse needs, assessing organizational cultural diversity and competence, assessing effects of policies and programs on different populations and taking action to support a diverse public health workforce

Direct Practice RSPC #2 ●Independent Practice: Functions as a licensed independent practitioner. ●Quality: Use best available evidence to continuously improve quality of clinical practice

Leadership/Administration RSPC #2 Knowledge of the Healthcare Environment:▪Clinical practice knowledge e▪Delivery models / work design ▪Health care economics and policy ▪Governance ▪Evidence-based practice/outcome measurement and research ▪Patient safety ▪Performance improvement/metrics ▪Risk management

Practitioner/Educator RSPC #2 Apply clinical expertise in the health care environment

EPSLO #3 Systematically investigates clinically focused areas of practice in nursing.

ROLE SPECIFIC PROFESSIONAL COMPETENCIES (RSPC): RSPC #1 Patient Care: Designs, delivers, manages and evaluates comprehensive patient care

(All DNP Roles)

RSPC #2

Community Behavior: Analysis & Assessment: Identify and understand data, turn data into information for action, assess needs and assets to address community health needs, develop community health assessments and use evidence for decision making

Direct Practice: ●Health Delivery System: Applies knowledge of organizational practices and complex systems to improve health care delivery, ●Practice Inquiry: Applies clinical investigative skills to improve health outcomes

- Leadership/Administration N/A
- Practitioner/Educator N/A

EPSLOs/RSPCs

EPSLO #4 Assume leadership roles in the development of clinical practice models, education models, health policy, and standards of care.

*ROLE SPECIFIC PROFESSIONAL COMPETENCIES (RSPC): RSPC #*1 Systems-Based Practice: Demonstrates organizational and systems leadership to improve healthcare (all DNP roles as above)

RSPC #2

Community Behavior ●Leadership and Systems Thinking: Incorporate ethical standards into the organization; create opportunities for collaboration; mentor personnel; adjust practice to address changing needs and environment; ensure continuous quality improvement; managing organizational change; and advocating for the role of governmental public health. ●Financial Planning and Management:

Direct Practice: Leadership: ▪ Guide change ▪Foster collaboration with multiple stakeholders ▪Uses critical and reflective thinking ▪Advocate for improved access, quality and cost-effective health care. ▪Advance or influence practice ▪Communicate practice knowledge

Leadership/Administration ●Leadership: ▪Foundational thinking skills ▪Personal journey disciplines ▪Systems thinking ▪Succession planning ▪Change management ● Knowledge of the Healthcare

Environment:

Practitioner/Educator N/A

EPSLO #5 Integrate professional values and ethical decision-making in advanced nursing practice.

ROLE SPECIFIC PROFESSIONAL COMPETENCIES (RSPC):

RSPC #1 ●Personal and Professional Development ●Professionalism: Demonstrates a commitment to carrying out professional responsibilities and an adherence to ethical principles. (all DNP roles as above)

RSPC #2

Community Behavior: ●Leadership and Systems Thinking: In incorporate ethical standards into the organization; create opportunities for collaboration among public health, healthcare and other organizations; mentor personnel; adjust practice to address changing needs and environment; ensure continuous quality improvement; manage organizational change; and advocate for the role of governmental public health

Direct Practice: Ethics: ▪Utilize ethical principles in decision making. ▪Evaluate the ethical consequences of decisions ▪Apply ethically sound solutions to complex issues related to individuals, populations and systems of care

Leadership/Administration: Professionalism: ▪Personal and professional ▪accountability ▪Career planning

Ethics ▪Advocacy

Practitioner/Educator: Operate within the Education and Health Care Environments: ▪Clinical Educator ▪Operationalize the curriculum ▪Follow legal requirements, ethical guidelines, agency policies, and guiding framework

EPSLOs/RSPCs

EPSLO #6 Collaborate with other members of the health care team to promote health and prevent illness.

ROLE SPECIFIC PROFESSIONAL COMPETENCIES (RSPC): RSPC #1 Interpersonal Collaboration: Demonstrates interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, the public, and health professionals; and promotes therapeutic relationships with patients across a broad range of cultural and socioeconomic backgrounds (all DNP roles as above)

RSPC #2

Community Behavior: ●Communication: Assess and address population literacy; soliciting and using community input; communicating data and information; facilitating communications; and communicating the roles of government, health care, and others ●Community Dimensions of Practice: Evaluate and develop linkages and relationships within the community, maintain and advance partnerships and community involvement, negotiate for the use of community assets, defend public health policies and programs and evaluate and improve the effectiveness of community engagement.

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Direct Practice: Leadership: Foster collaboration with multiple stakeholders

Leadership/Administration: Communication & Relationship Building include: ▪Effective communication ▪Relationship management ▪Influencing behaviors ▪Diversity ▪Community involvement ▪Medical/staff relationships ▪Academic relationships

Practitioner/Educator: Demonstrate Effective *Interpersonal Communication and Collaborative Inter-professional Relationships.*

EPSLO #7 Assess and implements technology and information systems for best practice across care settings.

ROLE SPECIFIC PROFESSIONAL COMPETENCIES (RSPC): RSPC #1 Interpersonal and Communication Skills: Demonstrates interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, the public, and health professionals; and promotes therapeutic relationships with patients across a broad range of cultural and socioeconomic backgrounds. (all DNP roles as above)

RSPC #2

Community Behavior: ●Analysis and Assessment: Identify and understand data, turning data into information for action, assess needs and assets to address community health needs, develop community health assessments, and use evidence for decision making. ●Cultural Competency: Understand and respond to diverse needs, assess organizational cultural diversity and competence, assess effects of policies and programs on different populations, and take action to support a diverse public health workforce

Direct Practice: Technology and Information Literacy: ▪Integrate appropriate technologies for knowledge management to improve health care. ▪Translate technical and scientific health information appropriate for various users' needs

Leadership/Administration: Business Skills and Principles: ▪Financial management ▪Human resource management ▪Strategic management ▪Information management and technology

Clinical Placement Process

Students are responsible for initiating clinical placement in collaboration with the Director of Clinical Education.

Key Steps

- Identify a qualified preceptor
- Ensure specialty alignment
- Submit Clinical Site Application each semester
- An Affiliation Agreement is required for every clinical site

Securing a Clinical/Residency Site

The clinical should reflect the population under study in the corresponding didactic courses. In selecting a clinical site, first meet with the Director of Clinical Education 90 days before the semester before taking the clinical course. Consult the list of approved clinical sites available in Typhon Directory or give the name of the potential clinical site to the Director of Clinical Education. The Director of Clinical Education will review the College of Health and Human Services affiliation agreement (contract) database to determine if the site has an agreement (contract) with the site. If there is no agreement with the clinical site, the Director of Clinical Education will initiate an affiliation agreement with the site. Note: execution of a new agreement can take 6 weeks to 6 months or longer.

Review your goals, strengths, and weaknesses. Discuss your ideas for clinical or residency sites and potential preceptors with the course faculty and Director of Clinical Education. If needed, meet with your clinical faculty/clinical site/residency supervisor again for assistance. Note: A Registration hold is placed on the student account for the clinical and diacritic course until a clinical site is located, to have removed contact advisor.

The procedure for securing a clinical site entails several actions:

1. Contact the preceptor you would like to work with. This may be someone you already know or may be from a preceptor or site list on Typhon Directory, talk with your current clinical instructor about the clinical site you are thinking about. your course instructor/Director of Clinical Education. Typhon is mandatory for MSN and DNP students free of charge. Access will be given 120 days before the start of your clinical semester.

2. Make sure that the preceptor's specialty is the same as the subject of the clinical course. For example, the Young Family in Health and Illness course (NURS 8119) student should be precepted by a Nurse Mid-wife, or a Women's Health Nurse Practitioner, a Family Nurse Practitioner, an Obstetrician, or a pediatrician. For CNS and Nurse executive students, the preceptor's specialty should match the specific course focus. A CNS student in the last two semesters should have a CNS Provider only. NEIL Students should have a Nurse Executive, Director or CNO with a minimum of two years' experience.

3. Once the preceptor agrees to work with you, notify the Director of Clinical Education. The Director of Clinical Education will communicate with the chosen preceptor to determine what paperwork the site requires and inform the site what paperwork is required by GovState College of Health and Human Services. Students are not involved in communication process.

4. An affiliation agreement (contract) must be signed by the authorized person at the chosen clinical site. The student does not communicate further with the preceptor until the affiliation agreement process is completed. The student, course instructor, and the Director of Clinical Education will work as a team to solve issues which occur during this process. The execution of the Affiliation Process can take 6 weeks to 6 months or longer.

5. Dean's Office personnel in College of Health and Human Services will obtain the necessary signatures and forward the affiliation agreement to the university's attorney's office where it will be filed. A copy will be sent to the designated person at the clinical site.

Preparation for Clinical

CastleBranch Required Documents

Before the student can begin clinical hours, several items must be in place:

1. All Mandatory Documents must be completed and uploaded to CastleBranch Clinical Tracker. (1) Semester before clinical begins. See CastleBranch Website https://www.castlebranch.com/sign-in For Clinical Requirements. There is a fee of approximately $55.00
2. The Mandatory Drug test must be completed through CastleBranch Website.
3. Orientation to the Clinical or Practicum Site must be completed.
4. Criminal Background check must be completed through CastleBranch Website.
5. Other required paperwork must be submitted or uploaded to CastleBranch; Clinical Tracker site: (CPR card, Standard Precautions, HIPPA review form, Malpractice insurance, and Criminal Background Check, etc). See CastleBranch Clinical Tracker for required information.

Note: If CastleBranch Clinical tracker is not complete, the student will not be permitted to attend clinical or register for class and clinical. A registration hold is placed on student account. To have a registration hold removed contact student advisor, once you have completed your CastleBranch requirements.

Mandatory Practicum Course/Clinical Documentation

Additional course-specific assignments, forms, or documentation may be required and may not be included in the list below. Students are responsible for reviewing their course syllabus and all instructor communications to ensure they complete every required clinical document and assignment.

Unless otherwise directed by the course faculty, all required clinical documentation must be submitted in the designated format and by the specified deadlines. Failure to complete and submit all required documentation may result in delayed progression, an incomplete grade, or failure of the clinical course.

- Course Acknowledgement Form
- Clinical Documentation: Pass/Fail
- Clinical Log Summary Sheet: Pass/Fail
- Typhon Clinical Documentation: Pass/Fail
- Clinical Objectives: Pass/Fail
- Midterm Clinical Evaluation: Pass/Fail
- Final Clinical Evaluation: Pass/Fail
- Faculty Clinical Site Visit: Pass/Fail
- Student Self-Reflection Course Assessment Form:
- Student Evaluation of Clinical Agency: Pass/Fail
- Student Evaluation of Preceptor: Pass/Fail

Preceptor Qualifications

Family Nurse Practitioner students, preceptors may be Family Nurse Practitioners or Nurse Midwives who are actively engaged in clinical practice. They are required to hold a minimum of a clinical master's degree with at least one year of clinical experience. The preceptors also need to be recognized as an APRN in their practice state with prescriptive authority or recognized as an APRN/FNP-BC meeting federal guidelines (such as in VA clinics, the military, Outpatient Care setting or Primary Care, Women's health, Pediatric Care, Midwife and Obstetrician). Family Nurse Practitioner students may also utilize licensed MDs / DOs in active clinical practice. Minimum of two years' experience in field.

Clinical Nurse Specialist students work with Clinical Nurse Specialists, Nurse Educators and Nurse Executives, depending on their coursework. The Clinical Nurse Specialist preceptor must have a minimum of a clinical master's degree and be licensed as an advanced practice nurse. There may be some states that do not require Clinical Nurse. Specialists to be licensed. That is acceptable if the student is doing clinical practice in that state. Nurse Educator and CNS Preceptor should have a minimum of the master's degree in their specialty and the requisite experience. Certification is preferred. The Clinical site can be outpatient, Hospital unit, Private Md office area for NURS 8107 & NURS 8108. The final Clinical Courses NURS 8210 and NURS 8946 Preceptor must be a Clinical Nurse Specialist only. Certification is preferred. Minimum of two years' experience in field.

Nurse Executive & Innovative Leadership students will need to work with a preceptor who has experience as a nurse administrator in a health care institution. Some examples include Clinical Department Director/Supervisor, Chief Nursing Officer, Quality Assurance Director, and Vice-President of a specialty area. The preceptor must have a minimum of a master's degree in nursing. The preceptor is required to have two years of experience as a nurse leader. Certification is preferred.

Doctor of Nursing Practice residency supervisors should have a doctorate or (at a minimum) a master's in nursing degree. They should have experience in the specialty role the student has chosen. Their position should be at a higher level than the student currently has more than two years' experience. For example, a Dean, Director, Chief Nursing Officer or vice-president for nursing may be chosen. Minimum of two years' experience in field.

Post- Graduate Certification:

To practice as a Clinical Nurse Specialist or FNP graduates must take a certification exam given by ANCC (FNP & CNS). In the state of Illinois, certification is required to obtain an Advance Practice Nurse License. Minimum of two years' experience in field.

Preceptor Interview

When the clinical placement is approved by all parties, and the affiliation agreement is in place, the student will want to meet with the preceptor to do an interview. The course syllabus, the number of clinical hours required, and the learning course outcomes of the student are discussed in the meeting. The purpose of the interview and discussion is to determine if the preceptor/student arrangement is workable for both sides. NOTE: Some preceptors charge a fee of $6.00-$11.00 per clinical hour.

Responsibilities of the Preceptor

1. Work with the course instructor to support student success in the practicum.
2. Orient the student to the facility.
3. Design experience situations.
4. Provided receipt of payment. (if Charging student)
5. Ensure safe practice and safety of the student.
6. Provide constructive feedback to the student and course instructor.
7. Verify student hours with a signature.
8. Communicate with the clinical course instructor about any problems or concern regarding student or clinical site.
9. Evaluate the student at midterm(if required) and final.
10. Provide an opportunity/ (opportunities) to improve performance if necessary.
11. The course instructor will be available via telephone or e-mail to discuss any issues and to provide support/consultation to the preceptor.

Responsibilities of the Student

1. Arrive at the clinical site on time.
2. Adhere to the schedule agreed upon with the preceptor and/or site administrator.
3. Dress appropriately professional: No jeans, flip-flops, high heels, no long or fake nails or eyelashes. Wear a lab coat and GovState patch (Left Shoulder) with identification as a GovState student.
4. Maintain good hygiene.
5. Complete all assignments in a timely manner and to the satisfaction of the preceptor/clinical course instructor.
6. Meet with the preceptor and the GovState site faculty.
7. Communicate appropriately with patients and site personnel.
8. Complete and submit required documents to the appropriate person(s)/computer systems.
9. Students are required to complete a minimum of two days at the clinical site.

Preceptor Evaluation (*by Student*)

The student and the preceptor evaluate each other. Therefore, evaluations are completed by the end of the clinical practicum and shared with the Clinical Instructors. Evaluations are then turned in to the course instructor and uploaded onto Typhon.

Preceptor Evaluation (*of the student*)

Preceptors will be given a form to evaluate the student's performance. The clinical instructor and the preceptor should discuss the student's performance. This is done in conjunction with the instructor observing the student at the site at least once a semester. A midterm and final evaluation are required in some clinical courses. The official grade is submitted by the course instructor. Both the clinical and didactic classes must be passed to progress to the next classes.

Evaluation of the Clinical Site

In addition to the student's evaluation of the preceptor, the student should do an evaluation of the clinical site. This information will help the faculty and Director of Clinical Education of Nursing in determining which clinical sites are appropriate for the student clinical experience.

Scheduling of Clinical Hours

There are prescribed clinical hours for all the concentrations within the master's and doctoral programs. Refer to the course syllabus/Govstate catlog and check the certification organization for your specialty for specific requirements. Clinical hour requirements vary for the MSN FNP and CNS tracks; the minimum is 540 hours for certification. Clinical hours for each class in these specialties vary. Consult the course syllabus for more information. The clinical hours for the Nurse Administrator/Nurse Executive specialty are 540 clinical hours starting in Spring 2027. The clinical hours for the DNP are 1000 hours. FNP and Post-Masters Certificate 750 hours are required, pending GSU Curriculum Committee approval for fall 2026 or Spring 2027. The clinical hour requirement is subject to change depending on changes in the appropriate nursing organizations.

1. Clinical practicum hours are to be scheduled at the convenience and the availability of the preceptor. Students are not to ask preceptors to conform to a schedule that meets the student's personal and employment needs.
2. Students are expected to attend the clinical site at a minimum of two days per week.
3. The student's personal and work schedules are expected to accommodate the required number of clinical hours prescribed by the clinical course.
4. Prior to beginning the practicum experience, students and preceptors need to agree on the days and times that the student will be in the clinical agency. Any changes need to be discussed ahead of time and confirmed by the preceptor. The clinical instructor and Director of Clinical Education must be informed.
5. Once the scheduling is agreed upon, the student obtains the preceptor CV or resume and forwards it to the course instructor or specialty program coordinator. The student also is responsible for delivering the preceptor packet to the preceptor from the clinical Instructor.

Documentation of Clinical Hours/Activities

Students are required to maintain accurate documentation of all clinical hours and activities completed during each practicum experience.

A hard (paper) copy clinical log must be maintained by the student to document daily clinical hours, patient care activities, and other assigned learning experiences. The preceptor must review and verify the documented hours and activities, and the clinical log must be signed by the preceptor at the end of each clinical shift or practicum day. Students are responsible for maintaining these records throughout the clinical rotation.

In addition to the paper clinical log, students must electronically document all clinical hours and activities in the Typhon Time Log on the same day the clinical experience occurs. Students are responsible for entering their clinical hours while at the clinical site, when possible, to ensure the accuracy and completeness of the documentation.

At the conclusion of the clinical rotation, students must upload the completed and signed clinical log to the designated external upload area in Typhon, as instructed by the course faculty.

Accurate and timely documentation of clinical hours in Typhon is essential. Clinical hours that are not entered into the Typhon Time Log may not be counted toward course requirements, and failure to maintain complete documentation may delay course completion or prevent the awarding of clinical credit for that practicum day.

Clinical Requirements

All students must have current requirements on file one semester AHEAD to register for any course in the nursing program. Documentation of requirements should be uploaded to CastleBranch. Students are required to upload in CastleBranch the following documents:

RN license in the state you will complete your clinical rotation CPR-BLS certification Tuberculosis skin testing or QuantiFERON gold test Chest x-ray (for positive tuberculosis skin testing or QuantiFERON test) Yearly flu vaccine or declination Tetanus status Covid vaccine status Facility Orientation form Student Resume GovState Acknowledgement form Annual 10-panel urine drug screen Titer reports (mumps, measles, rubella, and varicella)	Hepatitis B immunization or positive antibody titer Annual health physical must use GovState physical form only. Annual Citi training on Bloodborne Pathogen, infection control, and OSHA (Occupational Safety and Health Administration). Annual personal, professional liability insurance Health insurance Malpractice insurance is 2 million per incident/6million aggregate coverage active. Students MUST submit a photocopy of renewed coverage on the anniversary of the date that coverage expires, showing inclusive dates.

Failure to have all requirements on file 90- days prior to your clinical may impact on the student's ability to continue in the program. Students are responsible for all costs related to these requirements.

Clinical Practicum Placement

Students are to submit a clinical site request form to the university Nurse Advisor and Director of Clinical Education. After the Nursing Advisor approved clinical site request form, the Director of Clinical Education initiates clinical placement. The student should email the clinical instructor for clinical objectives and requirements before meeting with the preceptor/residency supervisor.

Students' requirements for clinical placement:

1. Obtain information on the requirements of the chosen clinical site for approaching potential preceptors from the Director of Clinical Education. The Director of Clinical Education determines if the student is allowed to approach the potential preceptor directly or if the contact person is someone other than the preceptor at a particular institution.
2. Complete Clinical Site Request forms each term for the clinical site. The student is required to meet with the current instructor or Program Coordinator to create clinical objectives to present to the preceptor, designating the goals of the practicum. The preceptor, student, and faculty may consult with each other to modify the objectives if necessary (see above).
3. Once the procedure for approaching a potential preceptor is approved, the student makes an appointment for an interview.
4. Establish dates and times for clinical hours with the preceptor and the course instructor. Complete Facility Orientation Form with your preceptor or designated person.
5. Week four all students will attend their clinical site and make Blackboard/Typhon documentation per syllabus.
6. Attend facility orientation or onboarding process. Upload all facility orientation or onboarding paperwork into CastleBranch designated area.
7. Attend periodic conferences with the preceptor and clinical faculty
8. Document of the clinical hours on a Clinical Summary Log form must be signed by the preceptor and course faculty. Upload the Clinical Summary Log in Blackboard/Typhon, in the external area using the drop down "Clinical Summary Log." Students will have their preceptor sign off hours each day on a hard copy clinical log each clinical day attended.
9. Complete Clinical Site Evaluation and Preceptor Evaluation in Typhon using the EASI Evaluations tab. The Midterm and Final Evaluations from the Preceptor are uploaded in Typhon/BlackBoard.
10. Students are required to complete the Clinical Site Evaluation, and Preceptor Evaluation will populate on your Typhon home page.
11. The student is required to purchase CastleBranch Clinical Document Tracker and upload all required documents.
12. Each semester, students will receive an updated Clinical Clearance Letter for the current semester from the Director of Education.

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CastleBranch Codes:

CastleBranch Codes:			
Initiating the CastleBranch website for the first time https://portal.castlebranch.com /GO05	This code is for GovState Nursing Department only.		
Package Code	**Includes**		**Additional Information**
GO01im Must Purchase	**Medical Document Manager**	55.00	A onetime fee of 43.00 to monitor clinical Mandatory documents
GO01 Use this code if this is your first time purchasing from CastleBranch	**Combined Package:** **Criminal Background & drug test** Statewide Criminal IL Nationwide Sexual Offender Index Drug Test Nationwide Patriot Act Residency History	$91.00	If any county appears outside of the state of Illinois within the past 7 years from the Residency History search, that county will cost $16.00 per additional county search.
GO01dt	Drug Test **Only**	$50.00	
GO01re	**Only,** Statewide Criminal IL Nationwide Sexual Offender Index Residency History Nationwide Patriot Act	$70.00	This package is for students that require re-checks only. There will be no additional charges.

Electronic Document Systems used in MSN and DNP:

Students enrolled in the MSN and DNP programs utilize third-party compliance and clinical tracking systems to support student safety, regulatory compliance, secure documentation management, and achievement of clinical learning outcomes.

CastleBranch Compliance Management System

MSN and DNP students use the CastleBranch third-party compliance management system to upload and maintain required clinical compliance documentation, including:

- Vaccine and immunization status
- Physical examination documentation
- Nursing licensure for the State of Illinois or the state in which clinical rotation occurs
- Professional malpractice insurance
- Student résumé/CV
- Clinical orientation forms
- Background check documentation
- Drug testing results

CastleBranch is utilized to ensure*:*

- Student safety and clinical readiness
- Compliance with agency and regulatory requirements
- Secure storage and transmission of sensitive student information
- Efficient sharing of required documentation with clinical agencies and practicum sites

The system supports standardized compliance monitoring across all clinical placements and assists in maintaining current documentation prior to student participation in clinical experiences

CastleBranch code: **GovState Nursing Portal** Link: https://portal.castlebranch.com/GO05
CastleBranch is the most secure document manager to protect student personnel information upload student sensitive documents. Students will use the GovState Nursing Portal Link: https://portal.castlebranch.com/GO05 when initiating the CastleBranch website.

Students can share documents with the clinical site or work or a potential employer securely. CastleBranch will keep track of sites when your records are viewed. Students are to maintain documents by keeping updated or face exclusion from the clinical site once the document reaches a 30-day renewal period in CastleBranch. Failure to have all requirements on uploaded may impact the student's ability to continue or start Practicum or Register for nursing course(s).

Typhon Clinical Tracker System

Typhon is a comprehensive software solution to help nursing programs manage changing accreditation requirements, demonstrate core competencies throughout their core curriculum and student clinical experiences, and improve learning outcomes. Students use case logs and time logs to enter experiences. Create calendars of student events & rotations and optionally allow requests for preference-based scheduling. Students can create and customize their own multi-page portfolio website to showcase their experience as an invaluable tool for seeking employment after graduation!

Typhon Clinical Tracking

Typhon is a third-party clinical tracking software system utilized by MSN and DNP students to document and monitor clinical learning experiences.

Typhon is used for:

- Tracking clinical practicum hours and patient encounters (FNP Students only)
- Storage of student evaluations and final clinical evaluations
- Upload and storage of hard-copy clinical time log records
- Student evaluation of clinical sites
- Student evaluation of clinical preceptors

The Typhon system supports program oversight, monitoring student progression toward required clinical competencies and hours, and documentation necessary for accreditation and regulatory compliance. Faculty and program coordinators utilize Typhon data to evaluate student progress and ensure achievement of end-of-program student learning outcomes.

Access to Typhon

To gain access to Typhon system email contact the Director of Clinical Education at email address: tchairse2@govst.edu with the following information: Student ID number, nursing option example; FNP or CNS., Graduation date; month and year (December 2029).

eValue Clinical Tracker System

Effective June 2026, the Department of Nursing will discontinue the use of eValue. Beginning with the Fall 2024 semester, all newly enrolled, continuing, and returning students will utilize Typhon as the official clinical tracking and documentation system. Typhon will be used for clinical schedules, clinical hour documentation, evaluations, and other required clinical practicum activities. Students are expected to become familiar with the Typhon platform and ensure all required clinical information is entered accurately and maintained throughout their program of study

Clinical Site Application Form

Clinical Site Application Form is required to be completed **every semester,** you are enrolled in an MSN or DNP clinical/practicum course, even if you are returning to the same clinical site or preceptor.

How to fill out the Clinical site application:

Student Information Section

Complete the following information:

- Student Name
- Student ID Number
- Date the application is completed

Program Concentration

Indicate your program concentration by selecting:

- FNP (Family Nurse Practitioner)
- CNS (Clinical Nurse Specialist)
- NEIL (Nurse Executive Innovative Leadership)
- DNP (Doctor of Nursing Practice)

Clinical Course Information

Write the clinical course in which you are enrolled for the semester.

Example:

- FNP students beginning clinical courses may enter **NURS 8221**.

Term Requested

Indicate the semester for which you are requesting authorization.

Example:

- Fall 2026
- Spring 2027
- Summer 2027

Expected Graduation Date

Enter your anticipated graduation term and year.

- **Example:** December 2029

Clinical Site Information: **This section must be completed by the student.**

Do not give this form to your preceptor or the clinical site for completion.

Provide the following information:

Clinical Site

- Name of Clinical Site
- Street Address
- City, State, ZIP Code
- Phone Number
- Email Address

Preceptor Information

Provide the following information for your preceptor:

- Full Name
- Credentials
- Phone Number (cell phone preferred)
- Email Address that is checked regularly

Clinical Site Contact Person (if applicable)

If there is an additional contact person at the facility, provide:

- Contact Person's Name
- Phone Number
- Email Address

Please identify the individual with whom the Director of Education can contact by phone or email and who is most likely to respond promptly regarding clinical placement matters.

Submission Instructions:

Once the Clinical Site Application is completed:

1. Review the form for accuracy and completeness.
2. Save the complete form.
3. Upload the form into the **Typhon External Documents Area**.
4. Title the document using the appropriate semester designation.
   Example: Fall 2026 Clinical Site Application

Important Reminder: Even if your preceptor has already agreed to accept you for clinical placement, you are still required to complete and submit a new Clinical Site Application for each semester that you plan to complete clinical hours at that site.

Clinical Process Training and Student Support

Students are provided with clinical process training to support successful progression through clinical and practicum requirements. The purpose of the training is to provide students with detailed information regarding:

- Clinical process requirements
- Steps to initiate the clinical placement process
- Use of the CastleBranch and Typhon systems
- Clinical documentation and compliance expectations

A demonstration of both CastleBranch and Typhon systems is provided during training sessions. Students are issued Typhon access by the Director of Clinical Education.
Clinical process training is conducted multiple times throughout the semester and is incorporated into:

- Clinical course orientations
- Faculty resource sessions
- Student liaison meetings
- Student town hall meetings

Training content includes:

- Clinical requirements and deadlines
- Clinical compliance checklists
- Clinical site and preceptor requirements
- Demonstration of how to upload and maintain documentation within CastleBranch and Typhon
- Guidance regarding practicum documentation and clinical hour tracking.

The clinical process training also provides students with opportunities to voice concerns or discuss challenges related to locating clinical sites or securing qualified preceptors. Faculty and clinical leadership provide guidance and support to assist students in addressing barriers to successful clinical placement and progression.

Preceptor Clinical Training

Preceptors receive clinical training materials electronically in the form of a PowerPoint presentation designed to support effective supervision and mentorship of students during practicum experiences. The preceptor training includes information regarding:

- Expectations of the preceptor, student, and clinical faculty
- Governors State University Department of Nursing Mission Statement
- Roles and responsibilities of all parties involved in the clinical learning experience
- The role of the preceptor in supporting student learning and professional development
- Criteria and process for selecting preceptors
- Required practicum hours and clinical expectations
- Preceptor responsibilities
- Student responsibilities
- Student evaluation processes
- Procedures for communicating student concerns or performance issues to clinical faculty

The training is intended to promote consistency across clinical learning environments, support evidence-based and safe clinical practice, and strengthen communication between the University, preceptors, and students. Preceptors are provided with a certificate of completion following review of the PowerPoint training presentation.

Specialty Clinical Agencies

- Pediatrics
- Obstetrics/Gynecology (OB/GYN)
- Women's Health
- Adult-Gerontology settings
- Specialty physician practices
- Hospital systems and medical groups

Educational Practice Agreements

- Educational Practice Agreements are non-standard agreements that outline risk management processes between universities to allow students from other institutions to receive instructional activities and learning experiences facilitated by GSU faculty. These agreements support:
- Instructional strategies that promote student learning
- Development of content knowledge and clinical competencies
- Faculty oversight and practicum instructional practices
- Currently, four (4) manual term agreements are maintained within this category.

Single Student Agreements

Single Student Agreements are non-standard agreements established between a CHHS/COE department and an external agency for one individual student. These agreements outline:

- Risk management expectations
- Departmental requirements
- Student-specific practicum placement details
- Specified practicum dates and responsibilities

Primary Healthcare Center Agreements

Primary Healthcare Center Agreements outline the risk management process between GSU and healthcare organizations. Agreements may be:

- Standard or non-standard
- Manual or auto-renewing

These agreements include partnerships with:

- Hospitals
- Medical groups
- Physician practices
- Community healthcare organizations

Adequacy of Clinical Sites for Enrollment and Program Outcomes

Clinical and practicum sites are evaluated to ensure adequacy for:

- Student enrollment capacity
- Achievement of program outcomes
- Exposure to diverse patient populations
- Achievement of course and program competencies
- Alignment with end-of-program student learning outcomes Ethical and culturally competent care.
- Contemporary healthcare delivery systems

The University maintains sufficient clinical affiliations and partnerships to support student progression and completion of required practicum hours. Program coordinators and clinical faculty monitor placement availability and appropriateness to ensure students receive meaningful, supervised learning experiences.

Distance and Travel Considerations for Clinical Sites

Governors State University (GSU) recognizes the importance of flexibility and accessibility in supporting student success. Students may identify and request clinical sites that are geographically convenient and within a reasonable travel distance from their residence or place of employment.

Upon identification of an appropriate clinical site, the Director of Clinical Education will initiate the affiliation agreement process with the student's selected agency. Students should be aware that affiliation agreements require review and approval by authorized representatives of both organizations and may take approximately 6 weeks- 6 months, or longer, to complete. Therefore, students are encouraged to begin the clinical placement process well in advance of their anticipated practicum start date to allow sufficient time for contract execution and site onboarding requirements.

Clinical/Practicum Learning Environments and Experiences

Student clinical experiences and practicum learning environments at Governors State University (GSU) are designed to be evidence-based, reflect contemporary nursing and advanced practice standards, incorporate nationally established patient health and safety goals, and support achievement of the end-of-program student learning outcomes. Clinical and practicum experiences are aligned with ACEN Standards, national nurse practitioner competencies, and institutional accreditation expectations.

Evidence-Based and Contemporary Practice Standards

GSU clinical/practicum learning environments are guided by multiple evidence-based frameworks and national standards, including:

- ACEN Accreditation Standards and Criteria
- 2026 American Association of Nurse Practitioners (AANP) standards
- NONPF/AANP Preceptor Expectation Checklist
- NONPF = National Organization of Nurse Practitioner Faculties
- AANP = American Association of Nurse Practitioners
- Higher Learning Commission Criterion 1–5, Number: CRRT.B.10.010

Clinical learning experiences emphasize:

- Evidence-based practice (EBP)
- Patient safety and quality improvement
- Interprofessional collaboration
- Population health and prevention

Students participate in supervised clinical and practicum experiences that integrate theory with practice and support achievement of program learning outcomes across BSN, MSN, and DNP programs.

Primary Healthcare Center Agreements

Primary Healthcare Center Agreements outline the risk management process between GSU and healthcare organizations. Agreements may be:

- Standard or non-standard
- Manual or auto-renewing

These agreements include partnerships with:

- Hospitals
- Medical groups
- Physician practices
- Community healthcare organizations

Adequacy of Clinical Sites for Enrollment and Program Outcomes

Clinical and practicum sites are evaluated to ensure adequacy for:

- Student enrollment capacity
- Achievement of program outcomes
- Exposure to diverse patient populations
- Achievement of course and program competencies
- Alignment with end-of-program student learning outcomes

The College Health and Human Service maintain sufficient clinical affiliations and partnerships to support student progression and completion of required practicum hours. Director of Clinical Education and clinical faculty monitor placement availability and appropriateness to ensure students receive meaningful, supervised learning experiences.

Graduate and DNP Nursing Programs

- MSN and DNP students identify clinical sites and preceptors that accommodate:
    - Employment schedules
    - Geographic location
    - Work-life-school balance
    - Individual learning needs

This individualized placement process supports student accessibility while ensuring achievement of required clinical competencies and program outcomes.

Consistency of Resources Across Clinical Sites

The College of Health and human Service and The Nursing Department strives to ensure consistency in

student learning experiences across clinical and practicum environments through:

- Standardized clinical expectations
- Program coordinator oversight
- Faculty monitoring and evaluation
- Preceptor orientation and communication
- Established practicum objectives and Learning Outcomes on syllabus
- Ongoing review of clinical learning environments

Students receive consistent guidance regarding:

- Patient safety standards
- Documentation expectations
- Professional conduct
- Evidence-based practice
- Clinical competency development

Simulation and Supplemental Clinical Learning

Simulation activities may be utilized to supplement clinical learning experiences when appropriate.
Shadow Health Simulation Platform
Shadow Health and other simulation technologies are used to:

- Enhance clinical reasoning
- Support development of assessment skills
- Reinforce evidence-based practice
- Provide standardized patient encounters
- Promote safe learning environments

Simulation activities support student competency development and complement direct patient care experiences.

Written Agreements and Protection of Students

GSU maintains current written agreements with clinical and practicum agencies that specify expectations for all parties and provide protection for students.
Agreements include provisions related to:

- Student supervision
- HIPAA compliance
- Orientation requirements
- Risk management
- Emergency treatment procedures
- Facility policies and procedures
- Patient safety
- Communication responsibilities

Emergency Treatment

Emergency treatment is available to students during clinical experiences at the student's expense. Facilities are not responsible for providing free medical care.

Designated Liaisons and Communication
Facilities designate a liaison responsible for coordinating clinical learning experiences and maintaining communication with university representatives.

Evidence-Based Nursing Practice

Clinical and practicum learning experiences reflect evidence-based nursing practice through:

- Student learning objectives aligned with program learning outcomes
- Exposure to safe, high-quality, contemporary healthcare environments
- Integration of evidence-based clinical decision-making
- Preceptor review and approval processes
- Faculty oversight and evaluation

Requirements include:

- Student learning needs and objectives
- Safe and high-quality clinical learning culture
- Preceptor résumé/CV review
- Program coordinator review of practicum requirements.
- Signed agreements between agencies and the University.

Clinical Practicum Policies

Student Handbook and Policies

We are happy you've joined the Governors State University learning community. You and all your fellow students make us what we are – a diverse, lively, friendly place. We take pride in all we do to maintain a true sense of community on our campus. As members of the Governors State University community, we all must know what to expect of one another and how we make our shared values come to life every day. Our mission is not a static statement – it is what we live by. Any well-functioning community must have a set of values; this Handbook is meant to serve as a guide not only for our students, but also for faculty, staff, and administrators to ensure that all members of our community, are informed about policies, procedures, rights, and privileges.
Our Student Code of Conduct, along with other university policies, will give you clear guidance on both what you can expect from GovState faculty and staff and what we will expect from you. The Student Handbook also contains helpful information, guides, and directories that will make navigation of campus life easier.If you have questions after reading through this Handbook, please do not hesitate to contact the **Office of the Dean of Students.**

Student Health Insurance Requirement

The Department of Nursing supports health promotion and as such believes that all students must have personal access to health care. All students enrolled in the nursing program must carry health insurance, either through employment, spouse, or personal purchase throughout enrollment in the nursing program. Evidence of current health insurance must be uploaded in the CastleBranch. Failure to have health insurance uploaded in Castle Branch may impact the students' ability to continue in the program.

Personal Professional Liability Insurance

All nursing students are required to purchase and maintain personal professional liability insurance in the amount of at least **$1,000,000 per claim and $6,000,000 aggregate**. *FNP students must be insured with $2,000,000 per claim and $6, 000,000 aggregate*.
Coverage obtained through a place of employment will not satisfy this requirement.
Evidence of personal professional liability insurance (students need to upload into Castle Branch showing dates **of coverage)** Failure to have personal professional Liability insurance uploaded to Castle Branch may impact on a student's ability to continue in the program.

Universal Precautions Training

To eliminate or minimize occupational exposure to all blood borne pathogens, all nursing students are required to follow universal precautions by Federal Law: Occupational Safety and Health Administration (OSHA) Part 1910:1030. All students enrolled in the Nursing Program are required to complete an educational program on blood borne pathogens and universal precautions yearly.
Documentation on completion of this requirement must be uploaded to the CastleBranch annually**.**

Communicable Disease Policy

The Department of Nursing seeks to minimize the risk of occupational exposure to communicable diseases, including Hepatitis (HBV) and the human immunodeficiency virus (HIV), for its students, faculty, and patients/clients. The Department of Nursing provides the following information regarding the possibility of occupational exposure to communicable diseases, including HBV and HIV, to students enrolled in the program. The Department of Nursing will not request an individual's HIV status during the admissions process. If a student informs the program that he/she is HIV positive, reasonable

academic adjustments will be made if needed. A student who knows that he/she is HIV positive or believes he/she is a "high risk" for HIV transmission is ethically responsible for considering the risk of transmitting HIV to the patient/client during invasive procedures.

Upon admission, the student will be required to sign a form acknowledging that he/she has been informed of, and understands, the risk of exposure to communicable diseases in the

clinical setting. Any student who refuses to sign the acknowledgement form may be terminated from the nursing program. All students
are expected to care for any patient/client regardless of HBV and/or HIV status. A student who Refuses to care for a patient/client who is known to be HIV positive and/or HBV positive may be terminated from the nursing program.

Students who have a diagnosed immunosuppressed condition, open wounds, or who are pregnant, will be exempted from caring for patients who are known to be HIV positive and/or HBV positive. Some vaccinations are contraindicated or have decreased effectiveness in immunosuppressed conditions.

Student Exposure to Blood-Borne Pathogens

While needle stick is the most obvious incident, any specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials is considered an exposure incident and should be reported.
When an exposure occurs, students must follow specific Occupational Safety and Health Administration (OSHA) standards. In the clinical setting, all students will practice Universal Precautions in accordance with the current Centers for Disease Control and Prevention (CDC) guidelines and will adhere to the policies of the clinical site as well. If a student is exposed to blood or other body fluids of a patient/client, an incident report for both the clinical site and Governors State University Department of Nursing must be completed.

The student must immediately notify the faculty supervising the clinical experience and the clinical site. Faculty members shall notify the chair of the Department of Nursing and follow-up with the Infection Control nurse (or other appropriate personnel) at the clinical site, in any incident involving a student. The policies of the institution where the exposure occurred and/or the CDC Guidelines and OSHA Standards shall be consulted and followed. The student is strongly encouraged to immediately obtain HIV and HBV testing to establish zero-negativity. Testing should be repeated at six weeks, three months, six months, and one-year post-exposure. The nursing program or the institution will suggest follow-up counseling referrals for students exposed to blood or body fluids of a patient/client.

Agency Drug Testing

Some clinical agencies used by the Department of Nursing have policies regarding drug testing which allow these agencies to request drug testing of employees, volunteers, and students. In addition, the Department of Nursing fully supports the Governors State University Student Code of Conduct, which prohibits alcohol or drug abuse.

To protect patients/clients and other students, the nursing program will request drug testing to meet agency requirements. These drug screens will be at the student's own expense. If a student has a positive drug test, there will be an immediate referral to the Dean of Students. The student will be unable to continue within the nursing program (clinical or course work) and criminal charges may be filed, as described in the Student Handbook. If a student refuses to participate in required Agency drug screening, the student may be dismissed from the nursing program. Forms available through CastleBranch Branch.

Agency Background Checks

All students are required to have criminal background checks prior to the start of their clinical practicum. Criminal background checks are done by a professional company. Information may be obtained from practicum faculty and Director of Clinical Education. Students are required to pay for the background check.

Influenza Immunizations

Some clinical sites may also require proof of influenza immunization.

Student Attire

Student attire will be governed by the clinical setting. Faculty will inform students of any special requirements concerning attire, security badges, etc. In some situations, students will wear a full-length white laboratory coat, bearing the GovState nursing patch on the left shoulder sleeve. The laboratory coat is worn over appropriate business casual clothes. No blue jeans, sweatpants, sweatshirts, scrub suits, sneakers, jogging shoes, or boots are allowed.

Nursing Patch

The Governors State University nursing patch is purchased by the student at the university bookstore. The patch is to be securely sewn **to the left shoulder sleeve** of a full-length laboratory coat worn for clinical practicum.

Clinical Agency Requirements

Students are expected to comply with clinical agency requirements at the facility at which they do their practicum.

UNIVERSITY REFUND POLICY

Upon registration, students acknowledge that they are responsible for dropping or withdrawing from classes themselves on the myGSU portal. Students who need to drop or withdraw from one or all of their courses may do so online within published deadlines found on the student's schedule or in Search for Sections on myGSU. Students who drop courses on or before the published 100 percent refund deadline are entitled to a full refund of tuition and fees. Tuition and fee refunds are not provided for course withdrawals with the exception of an approved Emergency / Medical Leave or university error as determined through the non-academic student grievance process. Students who are unable to drop or withdraw through the myGSU portal due to a hold on their student account should contact the Registrar at **regoffice@govst.edu**.

For more information, **visit the Registrars page for Withdrawal information**. Please note, credit hour minimums apply to financial aid rules, international student visa requirements, and NAIA (Athletics) regulations. Students receiving financial aid who withdraw may owe a balance depending upon the last date of attendance.

GRIEVANCE POLICY

In the event a student was unable to drop courses by the 100 percent refund deadline due to a university error, the student can file a grievance through the process outlined in the Student Handbook (see (provide link to Handbook here)). To file a non-academic grievance, please review the **Student Complaints and Grievances website**. If the grievance is found to be meritorious, a tuition refund may be granted by the Dean of Students (for a non-academic grievance) or the appropriate College Dean (for an academic grievance) if determined to be an appropriate remedy for the university error. *If you have questions or would like to meet to discuss your options, please contact the Office of the Dean of Students at 708.235.7595 or via email at* ***deanofstudents@govst.edu***

Clinical Site Safety Issues

The students may be required to visit clients or organizations in a variety of areas, and it is the responsibility of the students to review the issues of street safety. All nursing students are required to follow the procedures and guidelines listed below when making community visits:

- Complete Facility Orientation form, one form each site every 12 months.
- Students are responsible for learning and adhering to all safety policies, emergency procedures, and evacuation protocols established by their selected clinical facility prior to beginning clinical activities.
- Clinical hours are negotiated with the clinical site. Some agencies may require clinical activities that extend into the early morning/evening. Be aware of this need for flexibility in your clinical schedule and make adjustments as needed.
- Never take a client/patient anywhere in your personal car.
- Facility provides Orientation on emergency codes and emergency protocols.
- Be sure you know where you are going before setting out; obtain a detailed map of the area and plan the route.
- Governors State Universities policies such as title XI or discrimination are expected to be adhered to in the clinical area.
- Let the client know when to expect your visit, if appropriate.
- Do not wear expensive clothes or jewelry.
- Park near your destination and be aware of your surroundings.
- If there are concerns or issues with the site, please notify your instructor and Director of Clinical Education.
- Additional issues and/or guidelines may be provided by the instructor

Clinical Practicum Faculty

Faculty Member/Professor

The GovState nursing faculty member carries responsibility for overall leadership, coordination, and supervision, and evaluation of the designated practicum. The primary functions of the faculty member/ professor are as follows:

- Along with the Director of Clinical Education select or assists the student to select the sites for graduate student clinical.
- Approve the clinical site.
- Select or assist the student to select the preceptor who will cooperate with the university.
- Interpret the practicum experience to the health care agency and/or the prospective adjunct clinical faculty.
- Coordinate and communicate schedules, deadlines, and other information in fulfilling the practicum Student Learning outcomes.
- Supervise and evaluate the graduate student's development, progress, and overall performance.
- Arrange for periodic conferences with the graduate student and the preceptor (if applicable), as needed.
- Prepare evaluation criteria and provide the criteria to the students in writing.
- Provide feedback after observation of the student's performance of a clinical assignment.
- Serve as liaison during the practicum experience that involves a preceptor.
- Along with the Director of Clinical Education, assist students to obtain affiliation agreements between clinical agency and GovState.

In addition to university faculty, two categories of clinical agency personnel may be involved in student clinical learning experiences. These roles are preceptor/residency supervisor and clinical resource person. The following are the requirements, roles, and responsibilities ascribed to these positions.

Preceptor/Residency Supervisor

Requirements:

- Registered Nurse – depending upon program/degree of the student, the preceptor/residency supervisor must have a Clinical Nursing Master's degree, a Family Nurse Practitioner Master's degree, Certified Nurse Midwife, Nursing Administrative Master's degree, or a MD/D.O.
- DNP students consult with the faculty for requirements for the residency supervisor.
- Excellence in a specialty area chosen student.

Preceptor/Residency Supervisor

Roles/Responsibilities:

- Meet with the graduate student prior to the beginning of the practicum.
- Discuss the graduate student's clinical objectives for the practicum.
- Plan the activities needed to meet the clinical objectives with the student.
- Orient the nursing staff to the graduate student's purpose and objectives for clinical experience.
- Review appropriate materials with the student.
- Assist the student in developing and using self-evaluation techniques.
- Participate in three-way evaluative conference(s) attended by student, professor, and the adjunct clinical faculty regarding the student's progress.
- Notify the course professor immediately of any concerns.

Clinical Resource Person

Requirements:

- Registered Nurse, preferably witha B.S. orM.S. in nursing or an MD/ D.O.
- Competency in specialty area or leadership role or higher at clinical site.
- Competency in specialty area or leadership role Roles and responsibilities:
- Meet with the student prior to the beginning of the practicum.
- Discuss the student's clinical objectives for the practicum experience.
- Orient the nursing staff to the student's purpose and student learning outcome for the clinical experience.
- Participate in conferences with the student and the course professor as needed regarding student progress.
- Facilitate contacts with other appropriate resource people.

Clinical Practicum Placement

Clinical experiences are faculty-supervised, and the faculty will determine student placement. See Clinical Handbook for more specific information. In Clinical courses students submit clinical objectives in their specialty area to the university faculty. After the objectives are finalized and approved, the university faculty initiates placement procedures with the appropriate personnel or director. The student takes a copy of the student's objectives, professional resume, and teaching plan to the preceptor/residency supervisor on their initial practicum meeting.

Students

1. Obtain information on the requirements of the chosen clinical site for approaching potential preceptors. Determine if the student is allowed to approach the potential preceptor directly or if the contact person is someone other than the preceptor at a particular institution.
2. Once the procedure for approaching a potential preceptor is approved, make an appointment for an interview.
3. Along with the Director of Clinical Education, assist students to obtain affiliation agreements between clinical agency and GovState
4. Create clinical student learning outcomes to present to the preceptor which would accomplish the students' learning outcomes of the practicum. The preceptor, student, and faculty may consult with each other to modify student learning outcome if necessary (see above). Present the course syllabus to the preceptor.
5. Provide information regarding clinical contract/affiliation agreements to the course faculty member who will forward them to the Director of Clinical Education for affiliation agreement.
6. Establish dates and times for clinical hours with the preceptor and the course instructor. The student is to create a schedule in Typhon of the days and time the student will attend the clinical site.
7. Week four all students will attend their clinical site and make documentation per syllabus.
8. Document the clinical hours in a log signed by the preceptor and course faculty. Students are required to keep hard copies of Clinical hours. The clinical log form record is mandatory to show for credentialing and verification of hours for future education endeavors. Student is required to document electronically clinical hours in Typhon.

9. Attend periodic conferences with the preceptor and faculty.
10. Complete and upload in Ultrabroad and submit to the Typhon computer program evaluations of clinical experience.
11. Arrange for periodic conferences with the graduate student and the preceptor (if applicable), as needed.
12. Prepare evaluation criteria and provide the criteria to the students in writing.
13. Provide feedback after observation of the student's performance of a clinical assignment.
14. Serve as liaison during the practicum experience that involves a preceptor.

In addition to university faculty, two categories of clinical agency personnel may be involved in student clinical learning experiences. These roles are preceptor/residency supervisor and clinical resource person. The following are the requirements, roles, and responsibilities ascribed to these positions.

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Requirements:

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- DNP students consult with the faculty for requirements for the residency supervisor.
- Excellence in a specialty area chosen student.

Preceptor/ Residency Supervisor Roles/Responsibilities:

- Meet with the graduate student prior to the beginning of the practicum.
- Discuss the graduate student's clinical objectives for the practicum.
- Plan the activities needed to meet the clinical objectives with the student.
- Orient the nursing staff to the graduate student's purpose and objectives for clinical experience.
- Review appropriate materials with the student.
- Assist the student in developing and using self-evaluation techniques.
- Participate in three-way evaluative conference(s) attended by student, professor, and the adjunct clinical faculty regarding the student's progress.
- Notify the course professor immediately of any concerns.

Governors State University Orientation

We have created a virtual orientation for all graduate students. To access the orientation website; go to the myGovState portal and click on the "ORIENTATION" button. We're excited and ready to assist you in making the most of your graduate experience here at GovState. Whether you're new to our campus or you decided to return after completing your undergraduate degree at GovState, we're confident our Graduate Orientation will help you to identify available resources that will help you make a smooth transition to graduate studies. PLEASE NOTE: Some graduate programs and colleges may supplement our University-wide program with their individualized graduate orientation programs, contact your department or program for specific program orientation questions.

- Graduate Orientation
- Transfer Student
- First time College student

During virtual Undergraduate/ Graduate orientation, all graduate students will have the opportunity to learn about the various resources and services GovState offers. Students will have a chance to discover the various supports GovState offers to graduate students including scholarships, fellowships, career services support, mental health/well-being support and the Under/Graduate Professional Network.

Virtual Orientation Provides Information On:

- Welcome from Leadership
- Campus Tours
- Technology
- Academic Advising
- Academic Support Services
- Student Support Services
- Financial
- Community Standards
- Student Life
- Student Success

If you have any questions, please contact New Student Programs at nsp@govst.edu

Access Services for Students with Disabilities

The role of Access Services for Students with Disabilities (ASSD) is to assist in providing an accessible environment and equality of educational opportunities for students with documented disabilities. The goal is to focus on a student's ability, not the disability.

The ASSD office operates under the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973. Legally mandated access and accommodations are available to all qualified students who self-identify with ASSD. Students must provide documentation by a qualified professional (including but not limited to an IEP/504 plan) that can verify the functional impact of the disability as well as recommendations for appropriate accommodation. The information provided by students is voluntary and confidential. To arrange for appropriate accommodations, students need to contact the ASSD office at email address: assd@govst.edu

List of possible accommodation for students with disabilities;

- Extended Time on Tests
- Reduced Distraction Testing area/room
- Recording of Lecture
- American Sign Language Interpreters
- Captioning Textbooks in Alternative format
- Reader for Test Taking
- Scribe for Test Taking
- Accessible seating arrangements

Students, who have a disability or special needs and require accommodation to have equal access to the course, must register with Access Services for Students with Disabilities (ASSD). Please call phone: 708-235-3968 or click on website https://www.govst.edu/access-services-students-disabilities for additional information.

-

Department of Nursing Communications

In an effort to remain informed of changes and requirements in the Nursing Program, students are encouraged toattendClinicalProcesstrainingand updates,Faculty StudentLiaisonResource meetings, Virtual Town Hall Meetings on a regular basis for broadcast announcements, share concerns, learn volunteer opportunities, learning resources, Clinical opportunities, Chair/Director of Nursing, Program Coordinators, Faculty Student Liaison Resource and Director of Clinical Education provide announcements. Contact Director of Clinical Education at email address tchairse2@govst.edu.

University Services

University Library

The University Library provides reference and information services at the circulation and reference desk at 708-534-4111. For more information about library services, check out the current university catalog or visit the library website library@govst.edu .

The GovState Writing Center

The Writing Center provides students the resources necessary to become confident, effective writers and self-directed learners. We accomplish this task through encounters with students that focus on organization, content development, argumentation, proper formatting, and citation in their written work. The Writing Center helps students at every stage of the writing process and encourages them to view writing as a craft they must master through revision, reading, and perspective. Ultimately, our goal is to help students use writing as a skill that can inspire their lifelong learning, career advancement, personal fulfillment, and civic engagement. If you need assistance, please call 708.534.4090. If you arrive more than 15 minutes late for your scheduled appointment, you may be asked to reschedule.

Wellness Center

Governors State University Counseling and Wellness Center (CWC), in partnership with Advocate Health Care, provides comprehensive medical, mental health, and case management services. The CWC's mission is to help improve GSU students' mental health, academic experiences, and overall well-being through facilitating personal, emotional, and social growth so that they can achieve their goals and aspirations. In order to aid and empower students to address their personal challenges, CWC programs include both individual and group counseling, couples counseling, and mental health crisis services–with a focus on wellness and prevention, services also include consultation, outreach, training, and educational services to students. To this end, the CWC also collaborates with other departments such as academic resources, disability services, career services, and other student service departments.

Sexual Harassment

GovState provides multiple options for reporting information about possible sexual harassment and other forms of sex discrimination to the Title IX Coordinator. Students, employees, and others with information to report are encouraged to choose the option with which they will feel most comfortable**.** In an emergency, call 9-1-1 or contact law enforcement before using another channel to make a report to the Title IX Coordinator!

The Health Center at GovState

Governors State University Counseling and Wellness Center (CWC), in partnership with Advocate Health Care, provides comprehensive medical, mental health, and case management services.

Student Services: As part of your Student Health Fees, the following services are available to actively enrolled students:

- Required immunizations for full compliance with the College Student Immunization Act [110 ILCS 20]
- Sexually Transmitted Disease (STD)/Sexually Transmitted Infection (STI) screenings
- Women's Health Screenings
- Basic Physicals and Sports Physicals
- Minor Illnesses: Coughs, Colds, Nausea, Earaches, Sinus Infections, Fevers, Urinary Tract Infections
- Diagnostic Testing: Strep, Influenza (Flu)
- Minor Injuries: Abrasions, Sprains, Splinters, Steri-Strip Removal, Minor Burns
- Skin Conditions: Rashes, Bites
- Consultation/Education: High Blood Pressure, High Cholesterol, etc.

Services beyond what are listed are not covered in the student health fee.

The Health Center at GovState
Location**:** A-1120
Phone: 708-235-2114
Hours**:** Monday - Thursday from 9 a.m. - 4 p.m.
Friday from 9 a.m. - 1 p.m**.**

Center for Student Engagement and Leadership

The Center for Student Engagement and Leadership is where involvement and learning intersect. The Center for Student Engagement and Leadership encourages students to connect with their peers, attend social activities and fulfill their civic duty, all while serving as members of the GovState community. Our aim is to promote a sense of belonging and connectedness through campus programming, leadership development, intercultural education and service learning to enhance the collegiate experience for all GovState students.

Division of Student Affairs & Enrollment Management

The Division of Student Affairs & Enrollment Management provides comprehensive support for students from admission application to graduation. We actively engage students at every level of their academic journey to support their personal and professional development for success inside and outside the classroom. Our commitment to student excellence is expressed through partnerships and collaborations with stakeholders including faculty, staff, community members, and Governors State University alumni. Our extensive relationships stem from one goal: to ensure each GovState program and initiative aligns with the university's vision, so every student enjoys a dynamic and rewarding college experience.

Faculty Liaison of Student Support and Resources

The faculty Liaison for Student Support and Resources is dedicated to promoting student success in nursing programs by providing academic support, guidance, and resource referrals. The faculty liaison assists students in developing effective time management, prioritization, study, test-taking, critical thinking, and clinical judgment skills. Students are referred to the faculty liaison after first seeking assistance from the course faculty member of record. The liaison works collaboratively with students to identify barriers to academic success, explore opportunities for improvement, and develop individualized support plans with measurable goals and strategies. The liaison monitors student progress follows up on agreed-upon action plans and communicates with referring faculty members regarding student outcomes.

Additional responsibilities include collaborating with the Department of Nursing Chairperson, program coordinators, and directors to develop and implement student support initiatives; maintaining records of student support activities; preparing monthly reports; and submitting documentation for departmental records. The primary purpose of this role is to provide targeted support that enhances student achievement, retention, progression, and successful completion of nursing didactic and clinical courses.

Office of the Dean of Students

Navigating all of the moving parts that make up a whole university can be overwhelming – even intimidating – for students. The Office of the Dean of Students advocates for and with students to provide access across a wide spectrum of areas. We work closely with university services and community agencies to clear a pathway to success in areas such as university policies and procedures, academic performance, and personal crises. Visit the Office of the Dean of Students to learn what resources are available to you. Regardless of your need, we help students succeed! Connect with the Dean of Students Office by emailing **deanofstudents@govst.edu**, calling **708.235.7595**, or visiting C-1310. The Dean of Student have various resources available for you see below:

The care program: The CARE Program (Formerly known as the Student Concerns Program) is designed to help ensure timely outreach to students who are believed to be in distress or acting in a manner of concern and connect them to resources best suited to address the conveyed concern. Since members of the campus community play a key role in identifying students who are in distress, the CARE Program depends on referrals that identify students who might benefit from proactive outreach and assistance.

Any member of the campus community is encouraged to report behaviors or concerns of any GovState student by using the online reporting form to identify students and describe their area(s) of concern. Student concerns can include, but are not limited to academic, physical, or emotional concerns such as:

- a public outburst
- sporadic attendance at classes
- disruptive classroom behavior
- distressed writing in assignments
- changes in behavior, appearance or personal habits

GSU4U

GSU4U is an initiative to strengthen support for student success. GSU4U connects students facing personal difficulties, such as food and housing insecurity, to campus and community resources. We are dedicated to assisting all students, no matter how serious or small the situation may seem. Contact Angela Johnson, GSU4U Program Coordinator, A Building 2124, Call 708-534-4083 or email ajohnson-armstrong@govst.edu.

Emergency or Medical Leave

A student may request an emergency or medical leave when extraordinary circumstances, such as a serious illness, injury, hospitalization, or military deployment, prevent the student from continuing classes. Additionally, a student may request emergency leave due to a sudden or consistent lack of transportation or due to a significant increase in cost of living. The severity or duration of the problem must be such that it would not be reasonable to expect the student to be able to make up the missed work. Medical leave includes both physical and mental health concerns. Please review Options for Students with Medical Issues below.

Emergency & Medical Leave Requests will be considered only after the student has first withdrawn from all classes if the request is made before the withdrawal deadline (generally 10 weeks into the semester). Emergency & Medical Leave Requests will also be considered after the withdrawal deadline but before two weeks prior to the end of the semester. If approved, a hold will be placed on your student account until a re-entry request has been approved (see below). It is not possible to receive emergency leave while remaining enrolled in classes. A student who wishes to withdraw from one or more individual courses may withdraw themselves on the myGSU portal or submit a late withdrawal request to the **Office of the Registrar** if or if it is past the withdrawal deadline.

FAMILY MEDICAL ISSUES OR DEATH IN THE FAMILY

A student may also request emergency or medical leave when the health issues or death of a legal dependent prevent the student from continuing their classes. While the University recognizes that a family member's medical issues or death is traumatic, requests will only be considered when the family member is the student's legal dependent, unless documented extenuating circumstances exist. Students may be asked to provide documentation of legal dependency.

SUPPORTING DOCUMENTATION

Requests for an emergency or medical leave must be supported by official documentation that confirms the severity and/or duration of the emergency or medical issue occurred during the semester/term in which the leave is requested. Ongoing chronic conditions can be considered for a medical leave, but the documentation must demonstrate a significant acute occurrence during the semester/term in which the leave is requested. Please review the guidelines for the required supporting documentation under the “Submit an Emergency / Medical Leave Request” tab below.

DEADLINE TO SUBMIT A REQUEST

Students must submit a completed application for an Emergency & Medical Leave no later than two weeks before the last day of the semester in which the leave is requested. Incomplete or late requests will not be reviewed. Please see the **Academic Calendar** for deadlines. All communication will be sent to your GSU student e-mail account.

RE-ENTRY REQUEST

Prior to your hold being lifted, you need to complete the following tasks AT LEAST ONE WEEK prior to the first day of classes for the semester you are requesting to return. Requests to return will NOT be considered after the deadline.

- File

Please complete the Emergency/Medical Leave Re-entry Form

Write a personal statement that describes the steps taken to ensure that the cause for your emergency/medical leave has been addressed and your personal readiness for returning to school;

1. Give written permission for the Office of the Dean of Students, Counseling & Wellness Center, and the student's college to share relevant information regarding your request;
2. Recent documentation from a treating, licensed healthcare provider (preferably, the healthcare provider who provided the original documentation for your leave), that includes, at a minimum:
    - General description of the treatment provided
    - Clinical status
    - A statement of opinion as to the student's readiness to resume academic study and university life

After receipt of all required documentation, Office of the Dean of Students, in consultation with the Counseling & Wellness Center, will make a final decision and communicate with the student regarding that decision, next steps, and the appeals process, if relevant. A meeting (virtual or in-person) may be required prior to approval.

Appendix A

Governors State University
An Illinois Public University

Instructions: Complete this form to request a clinical site or preceptor for clinical or practicum or residency courses, every semester. Upload in Typhon external area. Along with preceptor. The student is to complete the form.

Clinical Application Form for MSN and DNP Students

Student Name _____ID#_____ Date _____

Select Concentration: **FNP**_____ **CNS** _____ **NEIL**_____ **DNP**_____

List the Course For which you are requesting Authorization: _____

Which term are you requesting Authorization (Place an "X" by correct term):
Fall 2026_____ **Spring 2027** _____ **Summer 2027**_____

Expected Year and Term of Graduation: _____

SITE Information:

Name of Clinical Site: _____

Address of Clinical Site (include City & State, & zip code): _____

Phone Number at clinical site: _____

Contact Person at Clinical Site: _____

Contact Person email address: _____

Contact Person Phone number: _____

Preceptor Information:

Preceptor Name and credentials: _____

Preceptor Emai Address: _____

Preceptor Phone Number: _____

Appendix B

Governors State University
An Illinois Public University

Ref: Increase in Student Nurse Practitioner Liability Coverage

To Whom It May Concern:

There has been a mandatory increase in the amount of liability insurance that our Nurse Practitioner students must-have for their clinical coverage Governors State University. It is now compulsory that Nurse Practitioner students carry a 2 million/ 6 Million policy. Therefore, we are asking that students be approved to increase their student coverage to reflect the mandatory required coverage by Governors State University. Please see the attached checklist that will outline the requirements for the Nurse Practitioner student at Governors State University.

I want to thank you for your cooperation in ensuring that the nursing students have adequate liability insurance.
Respectfully,

Dr. Runez Bender, DNP, APRN, FNP-BC, CNE
Governors State University FNP Coordinator
Department of Nursing
College of Health and Human Services
1 University Parkway- 708-534-4040 Nursing Office University Park, IL 60484-0975
708-235-7682, Ext. 7682
Fax: 708-235-21

Timetable for Uploading Required Documents for Clinical /Practicum 90-120 days before clinical start.

Appendix C

DOCUMENTATION REQUIRED	BEFORE TAKING ANY NURSING CLASS	UPON ADMISSION TO THE PROGRAM	YEARLY	OTHER
RN LICENSE Upload in CastleBranch	X			AT RENEWAL
BACKGROUND CHECK Upload in CastleBranch				PRIOR TO CLINICAL
FINGERPRINTING Upload in CastleBranch				UPON REQUEST
DRUG TESTING Upload in CastleBranch				PRIOR TO CLINICAL
C Upload in CastleBranch PR-BLS CERTIFICATION		X	X	AT RENEWAL
PERSONAL PROFESSIONAL LIABILITY INSURANCE* Upload in CastleBranch	X		X	AT RENEWAL
UNIVERSAL PRECAUTIONS EDUCATION Upload in CastleBranch		X	X	
HEALTH INSURANCE COVERAGE Upload in CastleBranch		X		WHEN EXPIRES OR CARRIER CHANGES
TB CLEARANCE Upload in CastleBranch			X	PRIOR TO CLINICAL
HEPATITIS B IMMUNIZATIO N OR REFUSAL Upload in CastleBranch			X	PRIOR TO CLINICAL
RUBELLA IMMUNITY Upload in CastleBranch			X	PRIOR TO CLINICAL
RUBEOLA (MEASLES) IMMUNITY Upload in CastleBranch			X	PRIOR TO CLINICAL
MUMPS IMMUNITY Upload in CastleBranch			X	PRIOR TO CLINICAL
VARICELLA (CHICKEN POX) IMMUNITY Upload in CastleBranch			X	PRIOR TO CLINICAL
TETANUS Upload in CastleBranch			X	BOOSTER EVERY 10 YEARS
COVID VACCINE STATUS Upload in CastleBranch			X	Follow CDC Guidelines

Appendix D

CLINICAL TIME LOG
SUMMARY SHEET

CLINICAL SHEET 1

GOVERNORS STATE UNIVERSITY
DEPARTMENT OF NURSING
CLINICAL HOURS LOG SUMMARY/SIGNATURE SHEET

STUDENT NAME: _____ TERM: FALL /SPRING/SUMMER

Date	Location/Preceptor	Total # of Hours	Comments	Preceptor Signature
	-			

Please add columns or rows as needed

Total HOURS THIS TERM:

INFANT/ PEDS/Adolescent _____ ADULT _____ WOMEN'S HEALTH _____ GERI _____

CUMULATIVE HOURS: _____

STUDENT SIGNATURE: DATE: _____

FACULTY SIGNATURE: DATE: _____

Appendix E

GOVERNORS STATE UNIVERSITY NURSING PROGRAM POLICY MANUAL

Clinical or Residency Site Placement

1. Site selection

2. Mandatory documents

PURPOSE

Student timely submittal of clinical or residency site selection and Mandatory **documents 90 days before the start of Clinical or Residency.**

POLICY

Student required to timely submit clinical or residency site selection and mandatory documents 90 days before the start of Clinical or Residency rotation. Failure to have requirements on file may impact the student's ability to continue in the program. Students are responsible for all costs related to these requirements.

PROCEDURE

Clinical Practicum Placement

Student is to submit a clinical site request form to the university Nursing Academic Advisor and Director of Clinical Education every semester. After the Academic Nursing Advisor approved clinical site request form, the Director of Clinical Education initiates clinical placement. The FNP, CNS, NEIL and DNP students must have an approved practicum site and preceptor by the third week of the semester for all FNP, CNS, NEIL, and DNP practicum courses. (We cannot require that students withdraw from the course.) It is recommended that students withdraw from the course if they do not have an approved preceptor or practicum site by the third week.

The student is to initiate a schedule in Typhon or eValue. The clinical request will be approved or denied by the Director of Clinical Education. Students are to monitor schedule request often to monitor for changes or addition items requested for placement at the site. Student Failure to complete or monitor schedule request or provide additional documents will result in delayed placement or loss of the clinical site. Review student clinical handbook ***(link for student handbook)*** for *Students requirements for clinical placement.*

Date Approved 5.6.2021

Appendix F

GOVERNORS STATE UNIVERSITY NURSING PROGRAM POLICY MANUAL

Clinical or Residency Refusal of Clinical site

1. Student refusal of clinical site

2. Site placement

PURPOSE

In the event a student is not able to obtain a clinical or residency site the Director of Clinical Education will locate a clinical site that has an affiliation agreement with the school. If the student refuses the preceptor or practicum site established by the Director of Clinical Education. The student will need to locate another preceptor or practicum site by the third week of the semester. If the student fails to obtain a preceptor or practicum site, the student is required to withdraw from the clinical course until the next clinical course offering.

POLICY

Student required to timely submit clinical or residency site selection and mandatory documents 90 days before the start of Clinical or Residency rotation. Failure to have requirements on file may impact the student's ability to continue in the program. In the event a student is not able to obtain a clinical or residency site the Director of Clinical Education will locate a clinical site that has an affiliation agreement with the school. If the student refuses the preceptor or practicum site established by the Director of Clinical Education. The student will need to locate another preceptor or practicum site by the third week of the semester. If the student fails to obtain a preceptor or practicum site, the student is required to withdraw from the clinical course until the next clinical course offering. The students are responsible for all costs related to these requirements. The FNP, CNS, NEIL, and DNP students must have an approved practicum site and preceptor by the third week of the semester. If the student fails to obtain a preceptor, the student is required to withdraw from the clinical course until the next course offering.

PROCEDURE

Student will notify the Director of Clinical Education when they are not able to locate a clinical site or preceptor. The Director of Clinical Education will send the student a list of approved clinical sites and preceptors that may accept the student.

1. The student is responsible for contacting the site(s) for a potential placement.
2. The student is responsible to research the site and preceptor before making contact to ensure preceptor and site will be a match.
3. If the student fails to obtain a preceptor or site, the student will notify the Director of Clinical Education they are not able to locate a clinical site or preceptor.
4. The Director of Clinical Education will locate a clinical site that has an affiliation agreement with the school. If the student refuses the preceptor or practicum site established by the Director of Clinical Education. The student will need to locate

another preceptor or practicum site by the third week of the semester.

5. If the student fails to obtain a preceptor or practicum site, the student is required to withdraw from the clinical course until the next clinical course offering.
6. The student must notify the Clinical Instructor, Academic Advisor to have their Study Plan adjusted, and the Director of Clinical Education.
7. The students will be responsible for all costs related to the clinical rotation and requirements

If the student refuses the clinical site list the Director of Clinical Education provides the student. The student will be responsible for all costs related. Review student clinical handbook for *Students requirements for clinical placement.*

Appendix G

Date: Approved 5.6.2021
Updated 8. 2025

GOVENORS STATE UNIVERSITY CLINICAL

PLACEMENT ACKNOWLEDGMENT

Many professional academic programs at Governors State University include a clinical component that requires students to be present in hospitals, clinics, private practices or other community sites to further their professional development in their chosen fields. Although all such clinical programs have always involved some degree of personal and professional risk, the current global Communicable disease presents risks of a unique and uncertain nature.
Accordingly, in order to begin the clinical placements to which you have been accepted in fulfillment of certain of your academic requirements, you are required to acknowledge that you have read and understand the following:

- Your Placement Site(s) is responsible for following all applicable federal, state, county and other local rules and regulations regarding the reopening of their business and student placement. Governors State University cannot guarantee that your Placement Site(s) is in compliance with such rules and regulations. If your Placement Site(s) must close or you are not permitted to continue your placement for whatever reason, your academic progress may be impacted.

- Your Placement Site(s) is most likely required to provide you appropriate personal protective equipment (PPE) as necessary for your duties and you are required to follow all the rules, regulations and requirements set forth by your Placement Site(s) for the use of PPE as well as all other work site rules. If, at any time, you feel unsafe or that you have not been provided with sufficient PPE to perform your duties and complete your clinical education opportunity safely, you may leave the Placement Site(s). If you chose to leave your Placement position, your academic progress may be impacted.

- There are dangers and risks to which you may be exposed by choosing to participate in this clinical education opportunity. Among other things, clinical education in a health care setting includes a wide variety of risks, including exposure to bodily fluids, in particular poses risks including upper-respiratory illness, hospitalization, and loss of life. The University cannot make any guarantees regarding whether or not you will contract Communicable disease if you choose to participate in this clinical education opportunity.

- If you voluntarily decide to attend a clinical site(s), and subsequently do not feel comfortable in continuing your rotation because of concern of exposure to Communicable disease or for any other reason at all, please email your Clinical instructor and Director of Clinical Education. There will be absolutely no prejudice or judgment. If you chose to delay starting your clinical rotation, you will be able to fulfill the remaining days [or hours or weeks] at a later date. However, your academic progress may be impacted.

- If you are concerned about exposure to Communicable, you may decline to participate in this clinical education opportunity. However, your academic progress may be impacted.

- **IF YOU BELIEVE YOUR ACADEMIC PROGRESS WILL BE IMPACTED FOR ANY OF THE ABOVE REASONS –OR FOR ANY OTHER REASON—IT IS YOUR PERSONAL OBLIGATION TO IMMEDIATELY CONSULT WITH YOUR ACADEMIC ADVISOR TO CONSIDER ACADEMIC ALTERNATIVES OR CHANGES THAT WILL ADDRESS ACADEMIC PROGRESS AND /OR ON-TIME GRADUATION.**

Your personal acknowledgment below indicates that you have read and understand the above conditions associated with your clinical placements for your entire clinical rotations at GovState.

I, _____(printed name), have read, understood, and accept the above conditions related to my clinical placement(s).

_____
Student Signature

Appendix H

CLINICAL ORIENTATION FORM

Student Name (first and last name): _____

Facility/Organization Stamp: _____ **Clinical Dates**: _____

The content below is a minimal initial orientation to the facility for clinical nursing students. Facility orientation must be completed by the facility personnel designated prior to the student first clinical rotation. The student must upload this form in CastleBranch.

Method of Validation (MOV) Key:

O = **Observation** ***V*** = **Verbalization** ***GD*** = **Group Discussion**
D = **Demonstration** ***T*** = **Test** **N/A= Not Apply**

TOPIC/CONTENT	Method of Validation
Tour of facility	
Safe/secure locations for personal items	
Student name tag & any required uniform/dress code	
Student schedule/hours	
Preceptor schedule/hours & typical session	
Communication expectations with team lead or primary RN, LPN, MA, CNA, PA, NP, DO,	
Sick day/absence procedure	
Introduction of key personnel (titles and roles)	
Facility policy/restrictions	
Referral procedures	
Telephone system	
Emergency phone numbers	
Location of code cart and/or AED	
Identification of patient code status	
Location of fire pull stations, fire extinguishers, emergency exits	
Emergency code system (Facility designation and student expectation): ▪ Rapid Response Team ▪ Sudden death ▪ Bomb threat ▪ Terrorist ▪ Weather ▪ Fire ▪ Disaster ▪ Missing Person (adult and/or infant/child) ▪ Aggressive Management	
Infection Control: ▪ Location of and use of personal protective equipment ▪ Standard precautions ▪ Isolation categories and signage ▪ Hand hygiene ▪ Exposure to blood borne pathogens	

TOPIC/CONTENT	Method of Validation
Securing equipment and supplies	
Medication administration procedure	
Documentation process and expectations	
Use of Facility approved abbreviations	
Patient plan of care	
Patient information restrictions	
High risk patients (e.g., fall, suicide, etc.)	
Accessing facility, Community tour, policies, resources and references	
Patient/Clinic room orientation: ▪ Call light ▪ Urgent/emergency lights ▪ Use of patient bed ▪ Emergency equipment (manual resuscitator, mouth-mask device) ▪ Assistive devices (e.g., gait belt, lifts, etc.) ▪ Sharps containers	
Location of eye wash station	
Waste and linen handling (infectious, medication, etc.)	
What to do in case of student injury	
Reporting unexpected events, incidents, medical errors	
Other:	

Signature of Facility Orientation Personnel and Date of Student Orientation below:

I have oriented the student to my Facility policies.

Printed Name of Mentor Signature Date

Printed Name of Mentor Signature Date

I have been oriented to the above Facility on specific items as indicated above. I am aware that I am responsible to ask my instructor or Preceptor, a facility staff nurse, Physician or manager if I have any future questions or concerns about these items or any other Facility specific policies and/or procedures throughout my clinical placement period at this facility. In addition, I am aware that I am responsible for ongoing education related to the clinical experience at my assigned facility.

STUDENTS MUST SIGN BELOW:

X _____

Printed Name of Student Signature Date

Appendix I

Example Clinical Clearance letter

FROM: Tareylon Chairse, MSN, RN
Director of Clinical Education
Department of Nursing
College of Health & Human Services
Governors State University
1 University Parkway – Office #F1521
University Park, Illinois 60484-0975
Email: tchairse2@govst.edu | Call: 708.534-7894

TO: Summer 2022 Professor,
I, *Tareylon Chairse, MSN, RN*, within the Department of Nursing at Governors State University's College of Health and Human Services, do verify that Valentine Onyima meets the required criteria (listed below) to complete a preceptorship.

Up-to-date on all immunizations:
Influenza, Hepatitis B, Pertussis (Tdap), TB as well as Immunity titer(s) for Mumps, Measles, Rubella and Varicella.
A clear criminal background check
Negative 10 Panel drug screen
Current Health insurance coverage
Current BLS/CPR Card
Health Insurance
Updated Preceptor:
☒ Active RN License
☒ Malpractice Insurance
Current CV/Resume
Annual Health Physical
Annual infection control, Bloodborne pathogen training

I verify the above information to be accurate and adequate in meeting the requirements outlined on the Student Preceptorship for Governors State University. In the event that the facility requests copy of any of the items listed above, **the student has an e-portfolio to produce the documentation**. The student must submit a new Clinical Site Application form for the upcoming semester 90 days prior to the start on the clinical.

Tareylon Chairse, MSN, RN
The Director of Clinical Education

Appendix J

Types of Liability Insurance Coverage for Nursing Students

Student is responsible for cost of Malpractice Insurance

The student is responsible for the cost of Malpractice Insurance.

- Individual Student Malpractice Insurance
  - Covers students during clinical rotations or practicums.
  - Provides protection for legal defense costs and settlements/judgments.
- Occurrence vs. Claims-Made Policies
  - Occurrence: Covers incidents that happened during the policy period, even if the claim is made later.
  - Claims-Made: Only covers claims made while the policy is active; may require "tail" coverage if you leave the policy.
- Policy Limit Options
  - GSU require:

    FNP Students - $2 million per incident / $6 million aggregate

    DNP, NEIL &CNS Students - $1million per incident / $6 million aggregate NSO (Nursing Service Organization)
    - Some policies offer lower or higher limits, sure to match school requirements.
    - Website: www.nso.com
    - One of the most trusted and widely used providers by nurses and students.
    - Offers policies tailored for RN, LPN/LVN, NP, and student nurses.

    M&F Group
    - Website: www.cmfgroup.com
    - Offers student nurse practitioner and RN student malpractice insurance.
    - Also used widely in APRN and specialty roles

    Proliability (Administered by Mercer)
    - Website: www.proliability.com
    - Offers policies for student nurses, RNs, NPs, and other healthcare professionals.

    Berxi (A Berkshire Hathaway Company)
    - Website: www.berxi.com
    - Known for competitive pricing and simple online quote process.
    - Offers direct-to-consumer policies.

    HPSO (Healthcare Providers Service Organization
    - Website: www.hpso.com
    - Similar to NSO and tailored for healthcare professionals including nursing students.

Appendix K

GOVState Nursing Department Clinical FAQ'S

When can I register for the first clinical/residency course?
You can register for your first clinical course when all of your core courses are completed satisfactorily. Consult your study plan and advisor if you have questions or concerns.

When should I begin my activities to plan for and secure a clinical/residency site? *You should work with the Director of Clinical Education to plan and secure a site for one (1) semester before you start clinical.*

How long will this process take?
Usually 4-12 weeks. However, if there is no affiliation agreement (contract) with the agency, it could take much longer.

What happens if my clinical/residency placement falls through?
Notify the clinical/residency course instructor and the Director of Clinical Education immediately and work with them to find a new site. These are the appropriate people to notify and discuss any problems occurring at the clinical site. If the issue is compatibility with the site personnel, the Director of Clinical Education and the course instructor will work with you to find a replacement. However, replacement is not guaranteed for the same semester.

What happens if an agreement cannot be reached with my first selection?
The Director of Clinical Education and course instructor will work with you to find an alternative site. This may result in making up clinical hours.

What happens if there is a delay in arranging my site placement?
You may have to start clinical later than planned and do more clinical hours in a shorter time than planned.

Who fills out and sends the various verification forms to certification agencies, state boards of nursing, and Doctor of Nursing practice programs?
You can find verification forms for certification agencies at their respective websites. After you fill out your information on the form, the verification information will be filled out by the program coordinator or the Department of Nursing Director/Chairperson. Consult the department secretary for further instructions if necessary.

Appendix L

The University of Chicago Medical Center

AT THE FOREFRONT OF NURSING EXCELLENCE

AT THE FOREFRONT
UChicago Medicine

NURSING STUDENT PLACEMENT FOR CLINICAL ROTATIONS AT THE UNIVERSITY OF CHICAGO MEDICINE (UCMC)

Rev 5.2026

Table of Contents

Central Clinical Nurse Education, Center for Nursing Excellence
UChicago Medicine
5841 S. Maryland Avenue
MC1083/Room C135
Chicago, IL 60637-1470
Pre-licensure Phone: 773-834-3478
Post-licensure Phone: 773-834-5564
Email: NursingStudents@uchicagomedicine.org

Welcome to *The University of Chicago Medicine (UCMC)*

We look forward to partnering with you to provide your nursing students with a productive and informative learning experience at The University of Chicago Medicine (UCMC). Please confirm that your school has a current contract in place with UCMC prior to submitting requests. Contract renewals need to be maintained by the affiliating school to ensure that contracts remain active and ensure there is no delay in student experiences.

UCMC reserves the right to immediately discontinue the relationship with any student or instructor whose performance is not acceptable to the hospital. UCMC also reserves the right to refuse an instructor if it is shown that he/she is a previous employee and employment was terminated due to unsafe practices or policy violation.

General Information

myClinicalExchange
In our continuing efforts to mitigate risk, streamline processes, and optimize cost while improving productivity, accuracy, and quality, The University of Chicago Medicine utilizes myClinicalExchange (mCE) as our web based automated tool to operate, administer and manage our student clinical placement program. All clinical requests for nursing student placements are to be submitted into mCE. Refer to Appendix A for more information.

Policy Relating to Nursing Students
Review by the end of first clinical day on campus accessible though mCE or through this link: 1254 Student Nurses

Communication:
All communication should go to nursingstudents@uchicagomedicine.org.
Communication between UCMC and students and/or instructors must be to school's email address and NOT to personal emails.

Required Faculty/Nursing Clinical Instructor/Nursing Student Information
Each nursing student and instructor must be familiar with the material in this packet. Important information that must be reviewed prior to Clinical Rotation can be found under the following headings:

- ✓ Standards of Behavior: Our Values
- ✓ Emergency/Safety Procedures – Staying Safe at Work
- ✓ Universal Precautions & Personal Protective Equipment (PPE) – Infection Control Annual Training
- ✓ Summary of the HIPAA Privacy & Security Rules
- ✓ Hazardous Waste Disposal information
- ✓ Fall Prevention & Post-Fall Management

All Faculty/Nursing Clinical Instructor/Nursing Student must sign an attestation located in mCE that indicates this material has been reviewed.

Compliance Documentation in mCE
Faculty/Nursing Clinical Instructor/Nursing Student compliance and supporting documentation is submitted directly into mCE using the UCMC forms in mCE. Students/Instructors who are also UCMC employees have the same requirements and must submit all compliance documentation into mCE.

Nursing Student/Instructor Badges

Every pre-licensure and post-licensure nursing student and faculty, including UCMC employees, must wear a UCMC issued nursing student photo ID badge for clinical rotations. Badges are issued through UCMC Human Resources (HR). Instructions regarding how to obtain UCMC badges will be emailed to the student/instructor after clinical approval. Badges cannot be issued until all required documentation has been completed and verified. Students/Instructors who are noncompliant in mCE will not receive clearance for badging.

Due to security, all UCMC badges are issued with General Staff Access – no specialty doors, closets, or areas will be granted. The student/instructor must return all badges immediately after the clinical rotation is completed to UCMC HR.

UCMC has the right to remove a student/instructor from a clinical education program (i.e. - non-compliant, not following UCMC policy or processes, inappropriate behavior).

Parking

Free parking for all nursing students and instructors is available Monday through Friday at the Apostolic Church of God located at 63rd St. & Dorchester Ave. There is a shuttle bus to the hospital that leaves approximately every fifteen minutes between 5:00am-12:00am. Public Safety and UCPD patrol the parking lots and surrounding streets for added safety and security. Please contact the parking office for further questions regarding parking 773-702-4381.

Students can additionally register for the free parking which includes nights/weekends by following the instructions below:

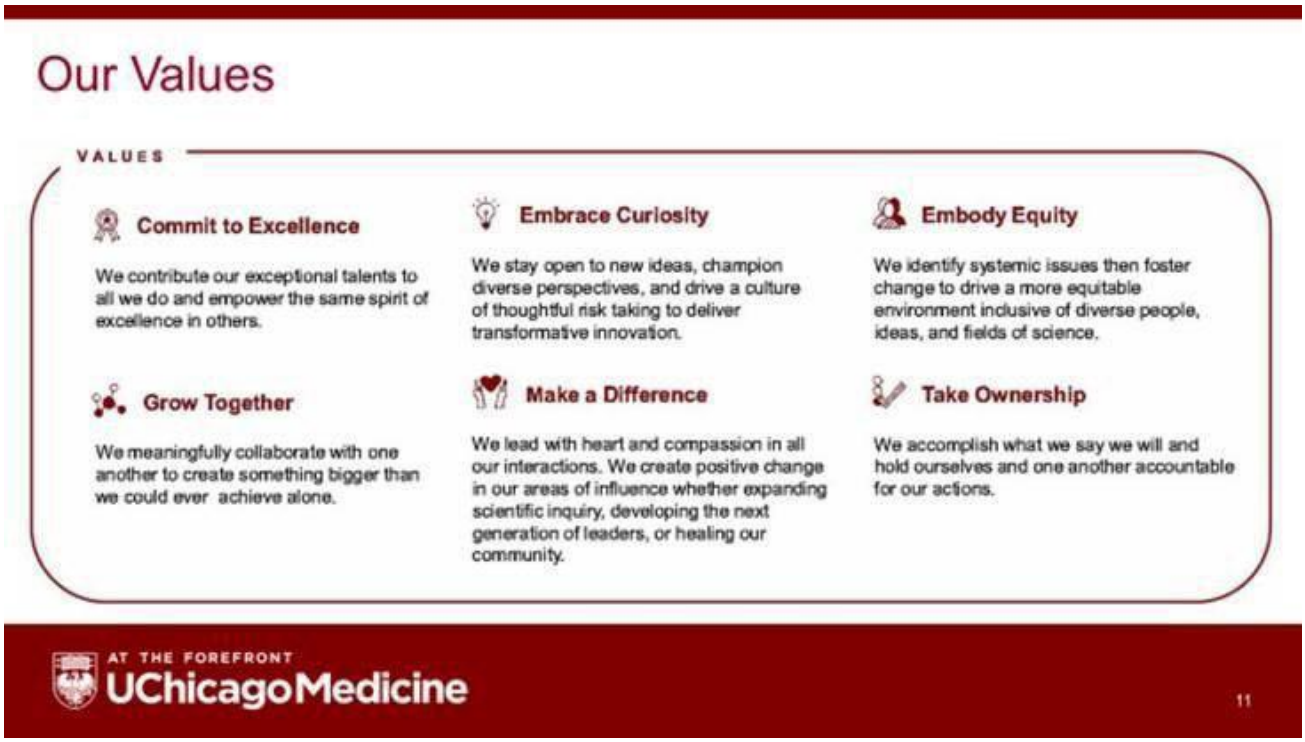
The online parking registration tool is used by UCMC employees to sign up for parking. You may type the following address for direct access to the registration portal via the UCMC intranet homepage: https://ucmpark-web.uchospitals.edu/parkingregistration. If the link does not work, follow the steps below to register for parking from the UCMC homepage:

1. Visit the UCMC Intranet home page or enter **home.uchicagomedicine.org** in the search bar.
2. Hover the cursor over "**Employee Center**" near the top menu bar & select "**UCMC Parking**" from the drop-down list. You'll be re-directed to another webpage to choose a facility.
3. Select "**Employee Parking Registration**" and follow the prompts to complete your registration.
4. The monthly registration portal will ask for your UCMC ID # (this is the 5- or 6-digit number at the back (*at the bottom, very small*) of your ID that starts with either an asterisk, plus or a minus sign)

You may register for monthly parking at our Apostolic Lot (which is FREE), or our Campus South (Drexel) parking lot. Each option conveniently allows access to Parking A & Parking B, ONLY between 5:00pm – 8:00am, and 24hr access on weekends and select holidays.

Standards of Behavior: Our Values

The Standards of Behavior, which describe our expectations of each other as we strive to create the ideal patient experience, are built on the foundation of our values.



Emergency Safety Procedures – Staying Safe at Work

Staying Safe at Work Material must be reviewed by clinical instructors and students prior to arrival or on the first day on campus. You can access this material by scanning the QR code below and also by clicking here on campus.

- **Complete Staying Safe at Work CBT**

UNIVERSAL PRECAUTIONS & PERSONAL PROTECTIVE EQUIPMENT (PPE) – Infection Control Annual Training

Infection Control Intranet and Policy Page (accessible from campus)

- **Complete Infection Control Annual: Infection Control Comprehensive Training for Direct Patient Care CBT**
- Students are not fit tested at UCMC, therefore they are not permitted to enter any Airborne or Special Respiratory Precaution Isolation rooms requiring N95 or PAPR (i.e. - TB, Covid)

Summary of HIPAA Privacy & Security Rules

HIPAA PRIVACY RULE OVERVIEW

The Privacy Rule of the Health Insurance Portability and Accountability Act of 1996 became effective on April 14, 2003. The federal government said that every employee working in healthcare in any job must be taught about the Privacy Rule. The Privacy Rule tells us how we are to use and share health information about patients. A major goal of the Rule is to assure patients that their health information will be protected. The Department of Health and Human Services published a final Security Rule in February 2003. This Rule sets national standards for protecting the confidentiality, integrity, and availability of electronic protected health information. Compliance with the Security Rule was required as of April 20, 2005. HIPAA governs the use and disclosure of protected health information and the protections that must surround it. The fundamental question always centers around what is the purpose of the use and disclosure.

UChicago Medicine, a HIPAA covered entity, is part of an Organized Health Care Arrangement (OHCA) which includes The University of Chicago Medical Center (UCMC), including its nurses, residents, volunteers, and other staff; Portions of the University of Chicago that participate in or support the activities of health care, including its physicians, nurses, students, volunteers, and other staff; UCMC Community Physicians; UCMC Care Network Medical Group; and Primary Healthcare Associates, SC. The HIPAA regulations apply to all members of our workforce; our workforce means faculty, staff, volunteers, students, and all others whose conduct, in the performance of work for the UChicago Medicine, is under its direct control, whether or not they are paid by an entity within the Medical Center. This includes the Biological Sciences, the UCMC Care Network and PHA. This summary is being given to you to help you understand the Rule and how important it is to our patients.

- **Complete HIPAA Privacy and Security Training for New Employees CBT**

Privacy and Security Policies:
All UChicago Medicine HIPAA Privacy and Security Policies can be found on the Privacy and Security Intranet.

Privacy and Security Contacts and Resources
Karen Habercoss, Chief Privacy Officer
773-834-2563; khabercoss@bsd.uchicago.edu

UCMC IT Service Desk: help@bsd.uchicago.edu or 702-3456
HIPAA Privacy Program: hpo@bsd.uchicago.edu or 834-9716
Anonymous Resource Line: 1-877-440-5480, select option 2.
UCMC Information Security Office: security@uchospitals.edu
BSD Information Security Office: security@bsd.uchicago.edu
ITS Security: Security@uchicago.edu
Campus Security: 773-702-8181
Public Safety: 773-702-6262

Hazardous Communications & Waste Management Program

- **Complete Hazard Communication and Waste Annual CBT**

References: OSHA Hazardous communication 29CFR1910.1200
EPA hazardous waste regulations 40CFR Part 261 Sub part C
DOT hazardous waste regulations 49CFR Part 178

****Nursing students are not permitted to administer any Hazardous Drugs at UCMC.**

Fall Prevention and Post-Fall Management

Patient Fall: A patient fall is "a sudden, unintentional descent, with or without injury to the patient, that results in the patient coming to rest on the floor, on or against some other surface (e.g., a counter), on another person, or on an object (e.g., a trash can)" (NDNQI 2020).

All nursing students and instructors must be familiar with UCMC Fall prevention including universal and high risk fall precautions and interventions. The Fall Prevention Policy PC 149 Fall Prevention Policy should be reviewed prior to clinical rotation or by the end of first clinical day.

The nursing student, NSA, MA or RN must stay with the high fall risk patient until they are safely back in the bed/chair/crib.

- Purposeful Rounding- "5 Ps"
  - **P**ain
  - **P**ositioning- assist the patient to reposition, bed low and locked or chair locked
  - **P**lacement- room free of clutter and call light/personal belongings within reach.
  - **P**ersonal Care- toileting, bathing. Supervised toileting= being within arm's reach of the patient while toileting.
  - **P**resence
    - ✓ Remind patient to call for assistance to get up.
    - ✓ **Remind patient to call so that you can or unplug any equipment for them such as IV pump, ALPS.**
    - ✓ Let the patient know, when you will be back
    - ✓ Reinforce use of ALPs
  - **6th P = Prevention-** use of fall prevention interventions

Nepotism Policy

Preceptors/Instructors cannot be a relative of a student as defined by HR202 Anti-Nepotism Policy.

Pre-licensure Nursing Student & Instructor Form Requirements

The school coordinator must complete the following items in mCE. *****The only form submitted to UCMC by email is Computer Access Form (Appendix G).**

1) Request for Clinical Rotation at UCMC

Requests are placed directly into mCE. Request one group of students for one specified period of time per placement request. A confirmation will be sent to the school's clinical coordinator with approved clinical rotations and instructions. Email questions regarding placements to NursingStudents@uchicagomedicine.org.

Requests for clinical rotations are to be submitted no later than 3 months prior to the upcoming term/semester on the 1st of the month.

- Spring (January-May): Due by October 1st
- Summer (May-August): Due by February 1st
- Fall (August-December): Due by April 1st

2) Faculty/Nursing Clinical Instructor/Nursing Student Signature Attestation

All attestations are completed in mCE. Students and instructors attest that they have reviewed and/or completed the following:

- General Information & Policy 1254 Student Nurses (Handbook)
- Standards of Behavior – Our Values (Handbook)
- Emergency/Safety Procedures – Staying Safe at Work (CBT)
- UNIVERSAL PRECAUTIONS & Personal Protective Equipment (PPE) – Infection Control Annual Training (CBT)
- SUMMARY OF THE HIPAA PRIVACY & SECURITY RULES – HIPAA Privacy and Security Training for New Employees (CBT)
- HAZARDOUS COMMUNICATION & WASTE MANAGEMENT PROGRAM – Hazard Communication and Waste Annual (CBT)
- Fall Prevention & Post Fall Management (Handbook)
- Electronic Health Record: Epic (CBT/training with the Epic Team)

3) UCMC Education Agreement Requirement

Complete Agreement Requirement Checklist located in mCE. "Faculty Member" information is mandatory for the instructor, even if the Faculty Member is an employee at UCMC. Additional notes about each requirement:

- Tuberculosis Screening: Required annually for students.
  - ***NEGATIVE HISTORY*:** Documentation of 2 TB skin tests is required **IF** the student is assigned to UCMC for > 3 months. One must be within the past 12 months and one must be within 3 months of start date. If the assignment is ≤ 3 months, one TB skin test within 12 months of the start date is required. Placement of the 2nd TB skin test must be at least 7 days after placement of the 1st TB skin test.
  - QuantiFERON®-TB Gold test (QFT-G) is acceptable in lieu of TB skin testing. QFT-G testing must be within 3 months of the start date if the assignment is > 3 months. If the assignment is ≤ 3 months, the QFT-G must be within 12 months of the start date.
  - ***POSITIVE HISTORY*:** Documentation of + TB skin test and Chest X-ray. Chest X-ray must be within 3 months of the start date. Please note: those with a history of BCG vaccination without + TB skin test documentation are not exempt from TB testing.

- Urine Drug Screen: 8, 9, or 10 panel drug screen required once within 1 year of the clinical start date for pre-licensure students. *Instructors only need an 8, 9, or 10 panel drug screen once at the start of first rotation at UCMC (can be requested again if needed).
- Copy or proof of **Illinois RN license** for all Clinical Instructors (Group and Capstone)
- BLS/CPR Requirement: Current BLS/CPR is required through the American Heart Association. Search and find a course at https://atlas.heart.org/home or this can be completed at the UChicago Simulation Center for a fee, for more information visit: https://simulation.uchicago.edu/
- Nail Check: Artificial nails are prohibited at UCMC. Nail check may be completed by the school or a self-check may be completed to attest that artificial nails are not present at UCMC.
- Required Immunizations:
  - It is our policy to accept documentation of titers indicating immunity or documentation of vaccination – 2 rubeola, 2 mumps, 2 varicella, or one rubella. We do not require (or perform) post-vaccination titers with the exception of hepatitis B. We accept documentation of hepatitis B vaccine. If the student declines vaccination, we would like a declination on file. Post vaccination titers are not required but highly recommended. Occupational Medicine can supply the result date of any test to current UCMC employee/nursing students upon individual request. Due to employee UCMC confidentiality issues, Occupational Medicine is not allowed to give out information on any employee to another department. It is the responsibility of the UCMC employee/nursing student to provide his or her nursing school with the UCMC Occupational Medicine information needed to fill out the compliance documentation required by UCMC.
  - Must submit proof of immunity (titer) OR documentation of vaccination for Rubeola (measles), Mumps, Rubella, and Varicella (chicken pox).
  - TDAP within the past 10 years required.
  - Hepatitis B vaccine strongly recommended for Nursing Students. Must submit proof of immunity (titer) OR documentation of vaccination. If declined, vaccine waiver must be submitted through Occupational Medicine.
  - Influenza: All students and instructors conducting clinical rotations between October and March must show proof of having had the current season's influenza vaccine (September 1 and March 31). If applicable, medical or religious/spiritual exemption requests must be submitted and approved through Occupational Medicine.

4) Student Computer Access Form (Appendix G)

- This excel form is available to Clinical coordinator/school liaison as a supporting document in mCE when making a clinical request and entails necessary information to grant nursing student access to Absorb (training modules) and Epic (electronic medical record)
- Clinical coordinator/school liaison: Utilize the excel version of Appendix G only. Type the student information directly in with no extra spacing exactly as instructed on the form with all fields completed and information verified as correct. Do not send as a PDF.

- **Student(s)/instructor must be compliant in mCE prior to submitting Appendix G**. Clinical coordinator/school liaison attests that the student(s) and instructor(s) are compliant in mCE in accordance with UCMC's clinical requirements outlined in the Affiliation Agreement, Education Agreement Requirement, and Faculty/Nursing Clinical Instructor/Nursing Student Attestation Signature Form, and you have verified that the information is correct. Attest that the student(s) and instructor *will be* in compliance with computer based education and additional orientation or training needed prior to the clinical start date and prior to any patient care and you will/have verified that all information is correct.
- Return the form by email to NursingStudents@uchicagomedicine.org at least three (3) weeks prior to the start of the rotation.
    - **If forms are submitted less than three (3) weeks prior to the start of the rotation, access to the electronic medical record cannot be guaranteed by a specific date or time.*
    - *Per UCMC's human resources department, it is required to submit students' personal security information. Feel free to send paperwork in encrypted email for security purposes BUT **do not send in PDF format**.*

5) **Objectives and Syllabus for course**, include specific duties and tasks to be performed by the student. This should be provided to the unit/unit manager on the designated unit(s) at the start of the clinical rotation.
   Student's Activities: The students' assignment and medication administration times should be communicated to the charge nurse and primary nurses.

Important notes about rotations and requests:

- A total of six (6) nursing students per clinical rotation are permitted on all units (Adult, Pediatric, and Family Birth Center (OB)) at one time.
- Schools may request up to 12 students total per semester/term. Students would rotate by weeks with a max of 6 onsite per day. A schedule of the rotations must be submitted to UCMC. A semester/term is defined by Spring, Summer, and Fall.

Pre-licensure nursing students conducting Clinical Role Transition (CRT)/Capstone clinical at UCMC

The UCMC Capstone experience is a clinical immersion where the student follows the RN preceptor's schedule in the clinical setting. The UCMC capstone student is not approved to complete a project. Nursing school clinical coordinators for CRT/Capstone Nursing Student are to complete the following specific to capstone students:

1) Request for Capstone Clinical Rotation at UCMC

Requests are placed directly into mCE for CRT/Capstone clinical.

- Capstone placements are day and night shift at UCMC (7am-730pm, 11am-11pm, or 7pm-730am). Capstone students follow the preceptor's schedule (UCMC guarantee set schedules for certain designated days each week).
- An equal number of day and night placements will be granted to each school (for example: 3 day shift preceptors and 3 night shift preceptors will be provided to each school requesting capstones - if requesting all day shift capstones, the school may receive 3 day shift preceptor placement total placements due to the day shift limitation).

2) **Faculty/Nursing Clinical Instructor/Nursing Student Signature Attestation** and ***Education Agreement Requirements*** are completed in mCE as above.

3) ***Student Computer Access*** **Form** (Appendix G)
Once Capstone placements are confirmed, school coordinator must submit to UCMC a final list of students matched with the unit/preceptor they have been placed with along with the Appendix G by email. All Capstone students can be placed on the same Appendix G. Unit location of each student is required to provision access. **Appendix G is submitted once the coordinator has verified student compliance in mCE** at least 3 weeks in advance of start date.

4) School coordinator will initiate communication with assigned preceptor and patient care manager regarding student assignment, student schedule (dates/times), course syllabus, and clinical expectations. School coordinator/clinical instructor will forward Capstone Badge Pickup and Capstone Informational Email to assigned student for them to review roles and responsibilities. Capstone student will coordinate shifts with assigned preceptor in advance.

For all pre-licensure students (clinical groups and capstones):

School coordinator submits only Student Computer Access Form (Appendix G) to Nursingstudents@uchicagomedicine.org at least 3 weeks in advance of the clinical start date. All other forms are now submitted electronically in mCE and available to UCMC.

Observational Experiences

- Observation opportunities within the nursing student groups are currently on hold and students should remain on the home unit they were assigned to with the clinical instructor.
- Any individual who would like to shadow a nurse is invited to register to be an observer through the NursingStudents@uchicagomedicine.org email. Observations take place outside of the nursing student experience and can be requested on any of our units in Comer, Mitchell, CCD, or Women's Care for up to 12 hours. Placing an observation request does not guarantee approval, all experiences must be approved by the unit leader once the request is placed. Approved observation experiences are hands-off, no patient contact is permitted.

UCMC Sponsored Nursing Class Attendance

- UCMC sponsored classes are reserved for UCMC staff. Students are unable to attend these offerings. Virtual opportunities (i.e.- Absorb offerings) are permitted.

Pre-licensure student Responsibilities

- Arrive on time. If rotation begins at change of shift, be ready for shift report
- Wear UCMC issued photo ID badge on upper torso
- Clean, neat and professional appearance
- No artificial fingernails
- Long hairstyles should be worn with hair pulled back
- No cell phone use on unit
- No food, drink or school bags allowed in patient care areas
- Debrief RN when leaving unit and communicate return time
- Students must not enter a patient's room or perform patient care until they have received report from the nurse

Instructor Responsibilities for Pre-Licensure Nursing Students

- **Instructors new to UCMC or the unit assigned must arrange for an orientation and tour with the Clinical Nurse Educator (CNE) for the unit** at least two weeks prior to rotation start date and complete the instructor orientation checklist by the CNE. This includes instructors who are also UCMC employees.
  **Failure to do so could result in a delay in the start date of the clinical rotation.
- The clinical instructor must provide a cell phone number for urgent or emergent patient care questions.
- Please note that if a clinical instructor is also employed at UCMC in any capacity, he/she cannot act in the clinical instructor role during his/her UCMC work hours.
- Provide the patient care unit with a copy of the clinical course objectives.
- Provide a schedule of students' placements and medication administration times to the charge nurse and/or primary nurse.
- Orient students to unit: vital signs, dirty supply room, monitors, patient rooms, IV pumps, identify crash cart location, supply room
- Arrive at least thirty minutes early to clinical and check in with charge nurse
- Identify which patients are assigned to which students on the daily patient/RN assignment sheet
- ALL medications administered and procedures performed by students must be supervised by instructor & documented in real-time under instructor's Epic log-in.
- Medications should be obtained from Omnicell by the staff RN assigned to the patient and given to the nursing instructor or nursing student in the presence of the nursing instructor for administration to the patient
- When documenting on medications administered by nursing student, instructor will state in "comments" box, "medication administered by (student's name) in presence of instructor"
- Communicate with unit management with changes in the clinical rotation schedule (i.e. cancelling a day or late arrival)
- Instructors on in-patient adult and pediatric areas will wear school scrub uniform or business attire, covered by school issued lab coat. Instructors in Women's Care areas will wear hospital issued scrubs with "instructor" ID badge visible
- Sign-off note in narrative section of patient's chart must be documented. Please utilize the SmartPhrase in Epic under "CLINICALINSTRUCTORSIGNOFF" that contains the required verbiage

Pre-licensure Student & Instructor Computer-Based Training (CBT):

- Once the school has completed all requirements in mCE, the student groups are provisioned access. Each student will receive an email notification stating that a UCHAD/Absorb Learning Management System account has been created on their behalf. Absorb access may take up to 3 days from receiving UCHAD account. Instructor will receive an email about instructor/student badge pick-up instructions and additional information helpful for the upcoming clinical.
- If student/instructor does not receive an email with UCHAD account information, call the service desk at 773-702-3456 to obtain his/her UCHAD log on/password.
- Each student and instructor will access Absorb to complete the REQUIRED Computer Based Modules (CBTs) at a remote location (home computer or school computer). *NOTE that DUO 2 Factor account is required. The modules must be completed prior to the start of their clinical rotation. (Instructions on Absorb: See Appendix H)

- STUDENTS: Required **Nursing Students Curriculum** CBTs Includes:
  - Staying Safe at Work Annual
  - Hazard Communication and Waste Annual
  - Infection Control Annual: Infection Control Comprehensive Training for Direct Patient Care
  - HIPAA Privacy and Security Training for New Employees CBT
  - One Epic Nursing Students / Nurse Externs Virtual Training CBT
- INSTRUCTORS: Required **Clinical Nursing Instructor Curriculum** CBTs Includes:
  - Staying Safe at Work Annual
  - Hazard Communication and Waste Annual
  - Infection Control Annual: Infection Control Comprehensive Training for Direct Patient Care
  - HIPAA Privacy and Security Training for New Employees CBT
  - Clinical Instructor Orientation CBT Annual
  - *Epic is dependent on user experience (see next section)*

- You may be auto enrolled in other modules, only the modules listed above need to be completed on an annual basis if still at UCMC. If you are a UCM employee, you may need to search in Absorb to find the modules.
- After the required training is completed, each student/instructor is to contact the service desk at 773-702-3456 to obtain their Epic log on and password allowing them access to the electronic medical record. After these modules are complete, students are able to document in Epic.

Epic – Electronic Documentation Educational Requirements for Instructors

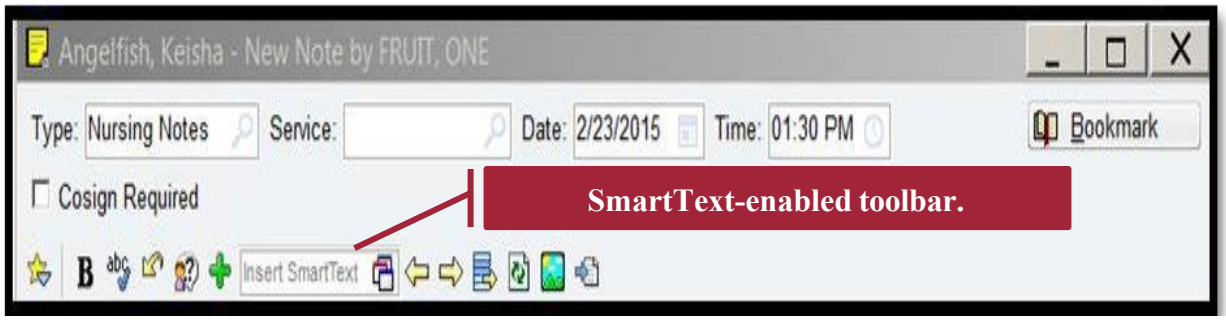
- Instructor Epic Training:
  - Additional Epic Training is required for Clinical Instructors (consistent with UCMC required staff nurse training). Epic training must be attended/completed by any faculty member new to UCMC prior to start of clinical rotation.
  - Content covers system functionality:
    - Medication documentation
    - Processing provider orders
    - Utilization of electronic flow sheets
    - Creation of electronic progress notes
    - Data retrieval
  - For all Epic Training Requests: Contact UCMC IT Service Desk @ 773-702-3456 (Monday - Friday 8am - 5pm) stating "***Inpatient Nursing Clinical Instructor Epic Training Needed."*** It is required to place ticket for both inexperienced/experienced Epic users. An Epic Educator will reach out to determine what training is needed. You will receive an email to coordinate your training from the Epic Educator. Once your training date has been established, you will receive an email containing details of the training.
  - If you have internal UCMC access: you can alternatively submit a ticket via the UCMC IT Self-Service portal @ Epic Training Request - Service Portal (service-now.com)
  - Instructors who are employed as RNs at UCMC may not need to participate in Epic training. UCMC RNs who are clinical instructors will not

receive a new Epic login, instructor documentation is completed under UCMC RN login.

- All other questions/issues should be directed to the UCMC IT Self-Service portal @ Home Page - Service Portal (service-now.com)

NURSING INSTRUCTOR/PRECEPTOR UTILIZING SMART PHRASES FOR CO-SIGNING EPIC DOCUMENTATION:

- The Epic system utilizes a collection of "shorthand" abbreviations which assist users to enter documentation in an efficient and standard manner. These abbreviations are known as "SmartPhrases" (aka "Dot Phrases"). SmartPhrases insert an entire pre-written template or patient data into a note using a single keyword. A SmartPhrase was created to assist Clinical Instructors/Preceptors to fulfill the documentation standards for co-signing student nurses notes at The University of Chicago Medicine. In addition to completing a SmartPhrase designed for Nursing Clinical Instructors/Preceptors in Epic's Notes Activity, Clinical Instructors/Preceptors are also required to add a statement to the comment field in the Medication Administration window in the MAR Activity.
- It is the expectation that ALL undergraduate nursing instructors utilize the smart phrases when documenting in Epic and follow the step-by-step process (below) for documenting eMAR activity.
- **SmartText-Enabled Fields:** SmartPhrases can be used in several areas of a **patient chart, including Progress Notes, Patient Instructions, and Care Plan notes.** In SmartText-enabled fields, you will see the following toolbar options:

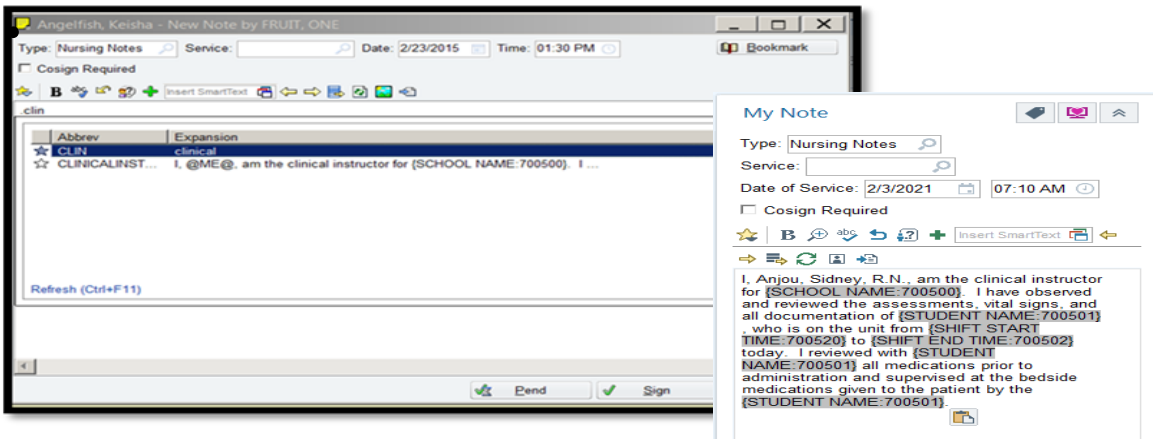


Step-by-Step

1. In the Notes Activity, in the "Type" field select Nursing Note.
2. Type a **.** (period), then the first few letters of the phrase into the body of the note. Epic displays a pop-up menu of matching phrases. The more you type, the narrower the matching results.

Example: Typing ***.clin*** will display a list of SmartPhrases starting with the word clinical.

- Select the **CLINICALINSTRUCTORSIGNOFF** SmartPhrase.
- Double-click the abbreviation from the menu, or press Enter on your keyboard.
- The phrase is applied to the note. See sample below:



Post-licensure (Graduate) Nursing Student Form Requirements

Registration for the following: Post Licensure Program Student Classifications outlined on the following pages =

- ADN RN to BSN RN
- LPN to RN
- Clinical Nurse Educator
- Nursing Education
- Clinical Nurse Leader
- Clinical Nurse Specialist
- Leadership
- MSN
- Nurse Executive
- Nursing Informatics
- Wound/Ostomy
- Nursing Research
- Quality Improvement (QI) Project
- Doctor of Nursing Practice (DNP) Project: student must be a UCMC Employee

Clinical Nurse Practitioner & Certified Nurse Midwife Students= registration outlined in Appendix C in this handbook

The school coordinator or student must complete the following items in mCE.

1) **Request for Clinical Rotation at UCMC**
   Requests are placed in myClinicalExchange (mCE). Email questions regarding placements to NursingStudents@uchicagomedicine.org. The request will be initially approved or denied in mCE and then the school/student can submit the rest of the required documentation into mCE.
2) **Post-Licensure Preceptor Request:** See Appendix B for options.
3) **Faculty/Nursing Clinical Instructor/Nursing Student Signature Attestation**
   All attestations are completed in mCE. Students and instructors attest that they have reviewed and/or completed the following:
   - General Information & Policy 1254 Student Nurses (Handbook)
   - Standards of Behavior – Our Values (Handbook)
   - Emergency/Safety Procedures – Staying Safe at Work (CBT)
   - UNIVERSAL PRECAUTIONS & Personal Protective Equipment (PPE) – Infection Control Annual Training (CBT)
   - SUMMARY OF THE HIPAA PRIVACY & SECURITY RULES – HIPAA Privacy and Security Training for New Employees (CBT)
   - HAZARDOUS COMMUNICATION & WASTE MANAGEMENT PROGRAM – Hazard Communication and Waste Annual (CBT)
   - Fall Prevention & Post Fall Management (Handbook)
   - Electronic Health Record: Epic (CBT/training with the Epic Team)

4) UCMC Education Agreement Requirements:

Please complete Agreement Requirement Checklist located in mCE. Information is mandatory, even if the student is an employee at UCMC. Additional notes about each requirement:

- Tuberculosis Screening: Required annually for students.
  - ***NEGATIVE HISTORY*****:** Documentation of 2 TB skin tests is required **IF** the student is assigned to UCMC for > 3 months. One must be within the past 12 months and one must be within 3 months of start date. If the assignment is ≤ 3 months, one TB skin test within 12 months of the start date is required. Placement of the 2nd TB skin test must be at least 7 days after placement of the 1st TB skin test.
  - QuantiFERON®-TB Gold test (QFT-G) is acceptable in lieu of TB skin testing. QFT-G testing must be within 3 months of the start date if the assignment is > 3 months. If the assignment is ≤ 3 months, the QFT-G must be within 12 months of the start date.
  - ***POSITIVE HISTORY*****:** Documentation of + TB skin test and Chest X-ray. Chest X-ray must be within 3 months of the start date. Please note: those with a history of BCG vaccination without + TB skin test documentation are not exempt from TB testing.
- Urine Drug Screen: 8, 9, or 10 panel drug screen required once within 1 year of the clinical start date.
- BLS/CPR Requirement: Current BLS/CPR is required, must be through the American Heart Association. You can search and find a course at https://atlas.heart.org/home or this can be completed at the UChicago Simulation Center for a fee, for more information visit: https://simulation.uchicago.edu/
- Nail Check: Artificial nails are prohibited at UCMC. Nail check may be completed by the school or a self-check may be completed to attest that artificial nails are not present at UCMC.
- Required Immunizations:
  - It is our policy to accept documentation of titers indicating immunity or documentation of vaccination – 2 rubeola, 2 mumps, 2 varicella, or one rubella. We do not require (or perform) post-vaccination titers with the exception of hepatitis B. We accept documentation of hepatitis B vaccine. If the student declines vaccination, we would like a declination on file. Post vaccination titers are not required but highly recommended. Occupational Medicine can supply the result date of any test to current UCMC employee/nursing students upon individual request. Due to employee UCMC confidentiality issues, Occupational Medicine is not allowed to give out information on any employee to another department. It is the responsibility of the UCMC employee/nursing student to provide his or her nursing school with the UCMC Occupational Medicine information needed to fill out the compliance documentation required by UCMC.
  - Must submit proof of immunity (titer) OR documentation of vaccination for Rubeola (measles), Mumps, Rubella, and Varicella (chicken pox).
  - TDAP within the past 10 years required.
  - Hepatitis B vaccine strongly recommended for Nursing Students. Must submit proof of immunity (titer) OR documentation of vaccination. If declined, vaccine waiver must be submitted through Occupational Medicine.
  - Influenza: All students and instructors conducting clinical rotations between October and March must show proof of having had the current season's influenza vaccine (September 1 and March 31). If applicable, medical or religious/spiritual exemption requests must be submitted and approved through Occupational Medicine.

5) **Student Computer Access Form** (Appendix G)**:**
   - This form is located in mCE and entails necessary information to grant nursing student access to Absorb (training modules) and Epic (electronic medical record)
   - All post-licensure nursing students who are NOT UCMC employees **and** will need access to Epic (electronic medical record) must enter student information in the first line in this form
   - If the post-licensure nursing student is also a UCMC employee, they do **not** need to complete this form and the form can be waived (whether the student needs Epic access or not)
   - Completed form should be uploaded into mCE

6) The post-licensure student must provide **proof of liability insurance if not supplied by the school**

7) Copy or proof of **Illinois RN license**

8) Clinical rotations in the Neonatal Intensive Care Unit (NICU) require proof of current **Neonatal Resuscitation Program** (**NRP)** card**.**

Note: If the student is also a UCMC employee:

- The student cannot conduct student clinical time at the same time as when working at UCMC as a nurse. The student clinical time is in addition and separate time from when working at UCMC as a nurse
- Clinical rotations (Masters or DNP or ADN to BSN) that involve direct patient care cannot be conducted on the same unit where the student also works as a UCMC employee and cannot have a clinical preceptor that the student reports to as a UCMC employee
- Clinical rotations (Masters or DNP or ADN to BSN) that do <u>not</u> involve direct patient care can be conducted on the same unit where the student also works as a UCMC employee with appropriate permissions and can have a clinical preceptor that the student reports to as a UCMC employee
  - For example: Quality Improvement Project or Research

<u>Guidelines for Post-Licensure Students with Preceptors</u>

- Preceptors must be a UCMC employee and working in their UCMC role when precepting post-licensure students
- Prior to clinical practicum start
  - Affiliation must be current in mCE
  - Provide course syllabus/practicum guidelines/objectives and faculty contact information to preceptor
- 1st week of clinical practicum:
  - Meet/communication with faculty/course instructor, student, and preceptor to discuss plan/review proposals/objectives/expectations/requirements
  - Determine timeline and establish clinical hour schedule approved by student and preceptor
- Communication regarding student progress between preceptor and faculty/course instructor should be at least twice upon completion of clinical practicum

Post-licensure Student Education Requirements:

- Once the student has completed all requirements in mCE, system access will be requested. The student and preceptor will receive an email notification stating that a UCHAD/Absorb Learning Management System account has been created on their behalf. Absorb access may take up to 3 days from receiving UCHAD account.

- Prior to the student's first clinical rotation, the student should call the service desk at 773-702-3456 to obtain UCHAD log on and password

- If completing this education from a remote location (home computer or school computer) *NOTE that DUO 2 Factor account is required. The modules must be completed prior to the start of their clinical rotation. (Instructions on obtaining access: See Appendix H)

- The student will access Absorb to complete the REQUIRED **Nursing Student Curriculum** education:
  - ***Staying Safe at Work Annual***
  - ***Hazard Communication and Waste Annual***
  - ***Infection Control Annual: Infection Control Comprehensive Training for Direct Patient Care***
  - ***HIPAA Privacy and Security Training for New Employees CBT***
  - ***One Epic APN and Physician Assistant (PA) Student Training Track-*** after this Epic training has been completed, the student will have the ability to access the medical records to document as a student. If access to the medical record is not needed, this module does not need to be completed. *APN students needing APN Epic access will need to search and self-enroll in this module.

- You may be auto enrolled in other modules in Absorb, you only need to complete the applicable modules listed above on an annual basis if still at UCMC.

- If you are a UChicago employee, you may need to search in Absorb verify annual completion or to self-enroll in the modules.

- Instructions on ***Creating Notes*** and ***Sending Notes to be Co-signed*** in the Epic medical record are found in Appendix J

- If you have internal UCMC access (student is also a UCMC employee): You will not receive a new Epic login for APN access. Dual access will be provided.

Often nursing students are required to conduct quality improvement (QI) or evidence-based practice (EBP) projects for degree completion. While we make every effort to support nurses' requests to conduct projects at UCMC, appropriate procedures must be followed to ensure patient privacy and safety is protected, permissions are received to share data outside of the organization, and resources are available to support the project. This document guides nursing students in the process to obtain approvals for a QI or EBP school project *BEFORE* it is initiated. Be sure to build in time for these approvals and for possible delays. Students may reference the *UBC Project Checklist* tip sheet for guidance on UCMC processes as a resource.

Step 1. Secure Student Status. All students who wish to complete a QI or EBP project for a school requirement must be registered as a student at UCMC. Your school must have a current academic affiliation with UCMC. Information for student registration and academic affiliation status, email Nursingstudents@uchicagomedicine.org.

Step 2. Obtain Leader Support. Meet with the unit manager and director to discuss your project and request support; determine if your project is in alignment with unit/organizational goals, if it is feasible to conduct in the allotted time, and if resources are available for the project. Identify other individuals who need to endorse the project (e.g. clinical experts, representatives of areas impacted, other disciplines) and seek their support.

Step 3. Develop a Proposal for the Project.

Content to include (may include more if required for school):

- Purpose of the project
- Why the project is important, the problem it addresses
- Population involved
- What you propose to do (would like to implement)
- Outcomes you expect the project will have
- Whether/how you plan to evaluate the project (data you plan to collect/analyze)
- Plan for managing the data (how you will collect and store it, who you will share the data with)
- The names of your preceptor at UCMC and your academic advisor at your College of Nursing
- Anticipated timeline
- References

***Note:** employees **may not** conduct project work during UCMC employed work time if the project is related to their current role.

Step 4. Obtain Care Center Approvals to Conduct Project. Propose your project plan to unit leadership; the unit director will have final care center approval and should approve of the project. Also, a clinical expert should review your proposal if it impacts patient care (e.g. nurse educator, advanced practice nurse, physician). Concerns/questions must be addressed prior to initiating the project.

Step 5: Obtain Organizational Approval to Share Data. Per UCMC policy *A09-08, Determination Of Quality Improvement Status* No data can be collected or shared outside of UCMC without organizational approval, including for school. Any student who wishes to collect data (e.g. surveys of employees or patients, quality metrics, practice audits, health record information) for a QI or EBP project, regardless of employee status, must obtain approval to share quality data outside of UCMC/BSD before the project can be started. Please see the Determination of Quality Improvement Application on the website for the Center for Healthcare Delivery Science and Innovation (https://hdsi.uchicago.edu/) for more information regarding submission and approvals.

*****Note*****

- **Students may only collect de-identified patient data** see "**Student requests for Patient Data**" below. Refer to UCMC policy *A05-22 Use and Disclosure of Limited Data Set and De-identified Information* on the intranet to obtain a comprehensive list of all eighteen (18) identifiers that must be removed for a dataset to be considered de-identified.
- Students may not conduct chart reviews or collect data that contains identifiers.
- Preceptor must collect de-identified data to provide the student. The student may not collect data independently (Acres requests, Epic chart review/Slicer Dicer, MD Clone).
- Approvals for a project by a unit Director and/or through the Center for Healthcare Delivery Science and Innovation do not guarantee resources for acquiring or extracting data.

Circumstances to consider for your project to be successful:

- **Do** take on projects that enhance or build on institutional priorities as described in the Annual Operating Plan, Clinical Effectiveness Priority Metrics, or additional nursing quality metrics.
- **Avoid** taking on a project that is inter-dependent upon other institutional roll-outs or services. For example, a build of a flowsheet in Epic is essential for your project to move forward. Hospital operational priorities and pace of implementation may be faster or slower than your school timeline and as a result negatively impact your ability to complete your project.
- **Do** choose a preceptor whose degree aligns with the degree you are pursuing and preferably has knowledge in the content of your project. You may also include a clinical mentor/expert on your project if needed.

Please direct questions to Nursingstudents@uchicagomedicine.org

Determination of Quality Improvement Status
Tip Sheet

This tip sheet is intended to guide Nursing employees and Nursing employee/students through the Quality Improvement Determination (QID) process.

To watch a brief tutorial about the QID Submission process, start here: QID Submission Tips for Nursing Employees and Students Video

All healthcare quality improvement projects that will be published or publicly presented outside of the University of Chicago Affiliated Covered Entity ("UCMC ACE") or the UCMC System Organized Health Care Arrangement (OHCA) as defined in UCMC Privacy Policy A05-42 ACE and OHCA Designation (e.g., at national meetings or in peer-reviewed journals, presentation to or sharing of data such as other UChicago schools like Booth, Harris) are required to have approval via formal Determination of Quality Improvement status prior to being shared externally.

A QID form must be submitted and approval received prior to submission of abstracts or initial drafts of manuscripts. Students must be registered as a UCMC student prior to submitting for QID. To register as a student, contact Nursingstudents@uchicagomedicine.org

QID forms for students should be reviewed by your preceptor prior to submission.

Additional resources regarding QID are available:

- Policy A09-08: Determination of Quality Improvement Status
- Center for Healthcare Delivery Science and Innovation (HDSI) website.

To access the Quality Improvement Determination form click here

To complete the QID form as accurately and completely as possible, follow the below tips for filling out the form.

Opening questions:

If any of your responses to the initial questions indicate your project is likely to be human subject research – **STOP**

- **For students**: consult your preceptor regarding your project.
- **For employees**: contact the Department of Nursing Research at NursingResearch@uchicagomedicine.org

When selecting your department, either select *Nursing* or *Nursing: DNP Student*

Employees who are conducting student projects need to indicate they are a student and indicate a student is part of the project team.

Project description (detailed enough to understand the major points of the project):

Your project description should answer the following questions:

- What is the purpose of the project?
- Why is the project important (what problem will be addressed)?
- Where is the project being done (name of unit/clinic/area) or population involved?
- What do you propose to do (what is your intervention)?
- How will the intervention be implemented?
- What data is being collected and how is it being collected (how are you measuring the results of your intervention)?

Note: Reviewers may not be familiar with the patient population and care your project addresses. Acronyms should be spelled out the first time they are used.

For student projects, this should not be a copy of your school proposal.

Describe why you believe this project is quality improvement and not human subject research. Please include a few reasonably related references:

Describe why you believe the project is quality improvement (QI), and not Human Subject Research. Many applicants can describe why a project is not Human Subject Research but we want to hear from you why you believe your project is QI. This is <u>not a definition</u> of quality improvement; <u>it is why you believe</u> your project is QI.

Words/phrases to consider in your response include: evidence-based practice, established standards, improve standard of care on the local level or whatever unit/clinic/area the project is being implemented.

Two or three references need to be included. These are references (evidence) related to your project purpose/interventions. Do not include references that define human subject research or quality improvement.

If you could not disseminate these results outside of UCMC/BSD, would you conduct the work? How would it differ from what you plan now?

If you are a student, it is OK for you to say no and indicate that you would need to identify another project since a project is required to complete your degree.

Student Requests for Patient or UCMC Confidential Data

1. There must be a master education agreement in place in accordance with policy HR1010 Education Agreement for a student to request use of patient information.
2. All students must complete an approved HIPAA Privacy and Security training offered through the UCMC Privacy Program prior to the request.
3. If request is approved, students will be allowed to utilize de-identified patient data, and The UCMC supervisor should work with the student to review policy A05-22 Use and Disclosure of Limited Data Set and De-identified Health Information.
4. No patient data will be collected or shared outside of UCMC without approval and/or a signed patient authorization.
5. Clinical Research is defined by the Department of Health and Human Services as, "a systematic investigation, including research, development, testing, and evaluation, designed to develop or contribute to generalizable knowledge." Human subject research is governed by the Institutional Review Board (IRB) and other applicable policies. Research must follow all institutional security policies and HIPAA regulations for protecting information, including ensuring that appropriate legal and business associates agreements are in place prior to sharing any individual or identifiable information outside of the institution (e.g. presentations at meetings, poster presentations, abstracts, and publications).
6. Quality improvement projects do not incorporate human subject research and these requests are handled by The Center for Healthcare Delivery Science and Innovation. This includes requests to collect data for the purpose of quality improvement (e.g. surveys, quality metrics, clinical practice audits, health record information) that the individual may want to share outside of the institution.
7. There is not a guarantee that data requests, research, or quality improvement will be approved and fulfilled.
8. The student will not make the determination for themselves whether their request may be quality improvement or human subject research.
9. Questions regarding the privacy and security of patient health information and data should be directed to the Privacy Program at hpo@bsd.uchicago.edu or 773-834-9716.

Procedure:

1. Student will discuss request for patient data with direct supervisor and obtain approval.
2. If applicable, student will discuss request for patient data with clinical department leadership and obtain approval.
3. In a very rare circumstance, when a student has requested to use patient data that is not fully de-identified and the supervisor is in agreement, the request is sent to the Chief Privacy Officer or designee to review and approve. If approved, the student will obtain a patient signed authorization for the use and disclosure of the information, and the signed authorization is sent to Health Information Management (HIM) for scan into the patient medical record.

4. Once request for patient data from the Epic medical record or other UCMC applications is approved, the direct supervisor will complete the official request through ACRES: https://hub.uchicagomedicine.org/dept/dna/SitePages/ACRES.aspx. If the supervisor already has access to fully de-identified data, an ACRES request is not necessary and the supervisor can provide the aggregate data directly to the student.
5. If the student is requesting to participate in clinical research, upon data request approval, the student will contact the UCMC Office of Clinical Research and all research will then be approved by the Institutional Review Board. Refer to N1247 Clinical Research Involving Nursing Staff and/or Nursing Care
6. If the student is requesting review for a quality improvement project, the individual will complete the Determination of Quality Improvement Application. The completed application should be submitted to: https://hdsi.uchicago.edu/qi-determination/.
7. All completed ACRES data requests will be provided back to the direct supervisor, and the supervisor can provide the aggregate data directly to the student.

MD Clone Software cannot be accessed by students to obtain project related data. Support for de-identified data obtained from MD Clone can be requested through mentors or preceptors.

REDCap Support Guidelines

What is REDCap: REDCap (Research Electronic Data Capture) is a HIPAA compliant, secure web application for building and managing online surveys and databases. REDCap was developed by an informatics team at Vanderbilt University with ongoing support from National Center for Research Resources and National Institute of Health grants. REDCap was designed to address common problems for academic biomedical researchers hoping to use electronic databases

Where is REDCap located: We can access REDCap at the University of Chicago via this link: https://redcap.uchicago.edu/. You must log in with your UCHAD/BSDAD account.

When to use REDCap: REDCap is designed to capture research, EBP, and QI data while maintaining confidentiality and compliance requirements. Therefore, REDCap is ideal for capturing and protecting potentially identifiable patient-level data. If you expect to collect information for your research/EBP project, REDCap could be utilized.

Who can help with REDCap: The Center for Research Informatics (CRI) offers online resources, in-person seminars, and individual working sessions to help you use REDCap better. Information on these resources can be found here: http://cri.uchicago.edu/redcap-training/. If you have questions regarding REDCap, please contact redcap@uchicago.edu

Doctor of Nursing Practice (DNP)

Student Project Development and Implementation Process

To watch a brief tutorial about the process, start here: DNP Student Project Development and Implementation Video

In order to implement a DNP student project at UChicago Medicine (UCMC), the student:

1. Is employed by UCMC and/or UChicago.
2. Meets all the criteria for practicing as a post-graduate student by registering through nursingstudents@uchicagomedicine.org and myClinicalExchange. Your school must have current affiliation with UCMC.
3. Must have a preceptor at UCMC with a terminal degree (DNP, PhD, MD, other).
4. Must have support by the Director of the clinical area where the project will take place and/or the patient population which will be affected by the project. Students may reference the *UBC Project Checklist* resource for guidance on UCMC processes.
5. Receives Determination of Quality Improvement (QID) in order to share student work outside of UCMC: Center for Healthcare Delivery Science and Innovation (HDSI) website.

UCMC supports DNP students in the following ways:

- Provide guidance related to student registration process in myClinicalExchange.
- Connect DNP students with possible mentor/preceptor if needed.
- Help to identify an appropriate DNP student project that brings value to the organization and is aligned with UCMC's Annual Operating Plan (AOP), leading to sustainment of the initiative.
- Provide guidance through the QID process and review DNP student QID submissions.
- Provide as needed guidance or advisement.

What is a DNP Project: The focus of the DNP project is to produce…"a tangible and deliverable academic product that is derived from the practice immersion experience and is reviewed and evaluated by an academic committee. The final DNP product documents outcomes of the student's educational experiences, provides a measurable medium for evaluating the immersion experience, and summarizes the student's growth in knowledge and expertise."

Why We Do It: We identified an organizational need for DNP student support and oversight, including oversight of the QID process. UCMC will be working to generate metrics to identify all DNP student projects at UCMC and to disseminate information in the UCMC nursing annual report. UCMC looks to assist moving forward and the sustainment of DNP student projects, ultimately translating evidence to nursing practice.

Organizational Approval to Share Data: Per UCMC policy *A09-08, Determination of Quality Improvement Status* no data can be collected or shared outside of UCMC without organizational approval, including for school. Any student who wishes to collect data (e.g. surveys of employees or patients, quality metrics, practice audits, health record information) for a QI or EBP project, regardless of employee status, must obtain approval to share quality data outside of UCMC/BSD before the project can be started. See the Determination of Quality Improvement for more information regarding approvals.

1. **Students may only collect de-identified patient data**. UCMC policy *A05-22 Use and Disclosure of Limited Data Set and De-identified Information* to obtain a comprehensive list of all eighteen (18) identifiers that must be removed for a dataset to be considered de-identified.
2. Students may not conduct chart reviews or collect data that contains identifiers without the explicit approval of the Privacy Program.
3. Preceptor must collect de-identified data to provide the student. The student may not collect data independently (Acres requests, Epic chart review/Slicer Dicer, MD Clone).
4. Approvals for a project by a unit Director and/or through the Center for Healthcare Delivery Science and Innovation do not guarantee resources for acquiring or extracting data.

Circumstances to Consider For Your Project to Be Successful:

- **Do** take on projects that enhance or build on institutional priorities as described in the Annual Operating Plan, Clinical Effectiveness Priority Metrics, or additional nursing quality metrics. Watch a brief video on: DNP Student Project Topic Suggestions Video
- **Avoid** taking on a project that is inter-dependent upon other institutional roll-outs or services. For example, a build of a flowsheet in Epic is essential for your project to move forward. Hospital operational priorities and pace of implementation may be faster or slower than your school timeline and as a result negatively impact your ability to complete your project.
- **Do** choose a preceptor whose degree aligns with the degree you are pursuing and preferably has knowledge in the content of your project. You may also include a clinical mentor/expert on your project if needed.
- **Avoid** choosing a preceptor from outside UCMC or who may have a conflict with providing oversight to you (e.g. your manager, or your employee)
- **Avoid** projects that are already part of their regularly assigned work towards a requirement for school.

Frequently Asked Questions (FAQ)

Question: What if my school does not have a current affiliation with UCMC?
Answer: A contract for affiliation between the school and UCMC will have to be established prior to any student activity at UCMC. Contact nursingstudents@uchicagomedicine.org

Question: I am not employed by UCMC, can I implement my DNP student project at UCMC?
Answer: Not at this time. Currently only UCMC employees can implement their DNP student projects at UCMC.

Question: If I'm only doing my DNP student project, why do I need a preceptor?
Answer: While implementing your DNP student project at UCMC, you are functioning as a student. Therefore you will need a doctorally prepared clinical preceptor at UCMC. Because this is a doctoral project focused on nursing practice it is preferred to have a preceptor who has a doctoral degree in this order DNP, PhD (nursing focus), MD, other.

Question: What if my school already provides a doctorally prepared nurse as part of my project committee?
Answer: At UCMC for DNP student projects we require a doctorally prepared nurse to precept the DNP student.

Question: I am or plan to enroll in a DNP program, what resources are available to me?
Answer:

1. Policy HR403: Tuition Assistance Program
2. Tuition Reimbursement Program: EdAssist
3. Center for Healthcare Delivery Science and Innovation (HDSI)
4. Preceptor Data Requests: Analytics Request System (ACRES)
5. Policy N1247: Clinical Research Involving Nursing Staff and/or Nursing Care
6. Student Registration Site: myClinicalExchange

Question: I wish to implement my DNP student project at UCMC, what do I need to do?
Answer: Ensure your school has a current affiliation with UCMC. Register as a student through nursingstudents@uchicagomedicine.org.

Question: What type of data can be obtained and used for a DNP student project?
Answer: In short, for DNP student projects-no request for Protected Health Information (PHI) will be approved.

Question: Is CITI training required at UCMC in order to carry out the DNP Student Project?
Answer: CITI training is not required by UCMC in order to carry out the DNP Student Project.

Reference

American Association of Colleges of Nursing. (2006). The Essentials of Doctoral Education for Advanced Nursing Practice. https://www.aacnnursing.org/Portals/42/Publications/DNPEssentials.pdf

Doctor of Nursing Practice Student
Quality Improvement Determination (QID) Checklist

DNP Quality Improvement Determination (QID) Checklist

1. To prepare for QID submission, the Doctor of Nursing Practice (DNP) Student will:
   a. ☐ Watch the video: QID Process Overview for DNP Students Video
   b. ☐ Complete DNP Student Project Support Request here (follow the link)
   c. ☐ Completes the student registration process at nursingstudents@uchicagomedicine.org
      i. Identify a project preceptor at UCMC
      ii. Ensure school affiliation is on file
      iii. The DNP Student cannot initiate their DNP project until the QID is approved
2. The DNP Student will submit their request for Determination of Quality Improvement. The student and their project preceptor review the QID process and develop the QID request:
   a. ☐ About QI Determination here
   b. ☐ QID Request Submission form is located here
      i. For "Department" choose "Nursing: DNP Students"
   c. Student QID will NOT be approved until step 1(c) is completed and verified
3. The QID submission will be assigned to a group of designated reviewers (review team).
   a. The review team (which consists of a Clinical Nurse Specialist and a DNP/PhD final reviewer) will review the submission and approve or deny.
      i. If submission is denied, the student will receive feedback and may need to resubmit.
      ii. The student's preceptor cannot sign-off on student's QID
   b. If the review team has concerns, the team may consult additional reviewers.
      i. i.e. feasibility to get data, and/or access to a specific population
      ii. i.e. requesting sensitive data such as Press Ganey
      iii. i.e. if the team is concerned that the project may be research, the team may consult with the Nursing Research team
4. QID Outcome
   a. ☐ QI Determination sign-off approved and the student is notified
   b. If project is determined to be research, the student will follow the Institutional Review Board (IRB) Process at UCMC.
5. After QID approval, the DNP Student
   a. ☐ Initiates project under guidance of project preceptor and school advisors (faculty)
   b. ☐ Cannot retrieve patient data from patient charts, must follow organizational policies
   c. ☐ Have a plan for sustainment for the initiative at UCMC upon completion
   d. ☐Be willing to present the project to UCMC colleagues upon completion (dissemination)

Action items are indicated by the checkbox (☐) which is intended for the individual to mark as completed for their own reference.

myClinicalExchange

In our continuing efforts to mitigate risk, streamline processes, and optimize cost while improving productivity, accuracy, and quality, The University of Chicago Medicine has chosen to adopt myClinicalExchange as our web based automated tool to operate, administer and manage our student clinical placement program.

myClinicalExchange will allow you and your staff to perform the following tasks in an efficient and cost-effective manner with little training.

- Request clinical placement at our organization and view the request status.
- Manage compliance and ensure students have completed their clinical placement on-boarding documentations for our organization.
- Administer and manage your student's participation at our student clinical placement program.

myClinicalExchange will allow your students to manage their entire participation at our student clinical placement program. They will have the ability to:

- View their clinical placement schedule.
- Complete, upload, and submit their clinical onboarding requirements.
- Consent to documents as required by your organization.
- Complete their clinical placement survey on-line.

Each student and/or instructor will be charged a subscription fee.
This fee can be paid for by either the school or student and/or instructor.

- Student 6 Month Subscription - $20.00 plus tax
- Student 12 Month Subscription - $39.50 plus tax
- Instructor Compliance 12 Month Subscription - $21.50 plus tax (Please confirm with University of Chicago Medicine on which programs require Instructor Compliance.)

If you as the school choose to cover the cost for your student(s) and/or instructor(s), please reach out to mcesupport@healthstream.com. Once you are set up for billing, please do not advise your student(s) and/or instructor(s) to register, this will cause duplicate accounts to be created. The roster process that you will follow will create and provide payment to their account. All they will need to do is follow the login directions that are sent to them after they are scheduled to the rotation. Once your configuration for roster upload is completed by our Onboarding team, they will provide you with instructions on the steps to follow.

If you already have an account with myClinicalExchange, the only thing we need you to do is update your checklist. Please reach out to mcesupport@healthstream.com to ensure you have the proper compliance requirements for University of Chicago Medicine. If you do not currently use myClinicalExchange, please complete the BSF (Basic Setup Form) and send it to mcesupport@healthstream.com. Please note that Academic Coordinators who will be submitting requests need to create new accounts via the BSF and not via the Instructor Registration link via the website.

UCMC related questions? Contact: Nursingstudents@uchicagomedicine.org

POST-LICENSURE PRECEPTOR REQUESTS

Option 1: Post Licensure Students seeking student experiences with a UCMC Preceptor for Clinical Nurse Practitioner or Certified Nurse Midwife programs are submitted via this link: APN Student Request Form

Option 2: Post Licensure Students seeking student experiences with a UCMC Preceptor with specialty roles (MSN, DNP, Research, Education -see list on page 15) are submitted using this form by sending the form to: nursingstudents@uchicagomedicine.org

Date requested: _____

Student Name Student's school email address	
Name of School Attending and Affiliation Agreement Verified	
Program enrolled	
Type of Preceptor requested (MSN, Pediatric, Wound, Ambulatory, etc.)	
Preceptor requirements (indicated per school)	
Timeframe of clinical rotation (Please indicate specific dates)	
Number of hours to complete	
UCM employee? Current position and unit	

Submitting a request does not guarantee you a preceptor

Clinical Nurse Practitioner & Certified Nurse Midwife Student Registration Process

- Once a preceptor is identified complete the Student Registration Form: https://app.smartsheet.com/b/form/019dd1afee9c74a99a17d649c2942f90

- Contact for any questions: APPstudents@uchicagomedicine.org

Note: If the student is also a UCMC employee:

- The student cannot conduct student clinical time at the same time as when working at UCMC as a nurse. The student clinical time is in addition and separate time from when working at UCMC as a nurse
- Clinical rotations that involve direct patient care cannot be conducted on the same unit where the student also works as a UCMC employee and cannot have a clinical preceptor that the student reports to as a UCMC employee
- Clinical rotations that do not involve direct patient care can be conducted on the same unit where the student also works as a UCMC employee with appropriate permissions and can have a clinical preceptor that the student reports to as a UCMC employee

HOW TO ACCESS NURSING STUDENT TRAINING MODULES

Summary

Take your required module training through the University of Chicago Medicine's Absorb Learning Management system. Before attempting the steps in this document, make sure you have the following:

- Your UCHAD/Absorb ID and password.
- Absorb access may take 3 days or longer after initial student processing (UCHAD acquisition).
- Problems with UCHAD or Absorb access, call the Service Desk at 773-702-3456, or on campus extension 2-3456.

> **Note:** If you do not know this information, please make sure your REQUIRED student forms have been submitted for processing. This is done by the school clinical coordinator or the post-licensure student nurse.

Step-by-Step

1. Go to https://webapps.uchospitals.edu/Citrix/uchicagoapps1Web/
2. Click on Two-Factor Authentication Enrollment https://cnet.uchicago.edu/2FA/index.htm
   - Enroll your devices for the Duo 2 Factor Authentication
   - Once Two-Factor Authentication has been established, Logon for Citrix using your UCHAD ID and password to log in
   - If you have problems signing up, call the Service Desk at 773-702-3456, or on campus extension 2-3456.

   > **Note:** Duo 2 Factor is required to access many UCMC systems, including Absorb Learning Management System and Citrix Clinical Desktop

3. Login for Citrix using your **UCHAD** ID and password.
4. Accept the Duo Push to your registered phone/device

> **Note:** For first time logging in, follow the instructions on the screen to install the required Citrix software on your workstation.

5. Click the Absorb Learning Management icon.

6. Search the module you are looking for (for example: ***Nursing Students Curriculum)*** under ***Catalog*** i3c5on:

Note: Students/instructors may not be pre-enrolled into required CBTs and will need to self-enroll into the training modules.

7. ***ALL students/instructors will need to complete the applicable MANDATORY CBTs:
   - **Staying Safe at Work Annual**
   - **Hazard Communication and Waste Annual**
   - **Infection Control Annual: Infection Control Comprehensive Training for Direct Patient Care**
   - **HIPAA Privacy and Security Training for New Employees CBT**
   - **For pre-licensure students only: One Epic Nursing Students / Nurse Externs Virtual Training CBT**
   - **For post-licensure APN students only: One Epic APN and Physician Assistant (PA) Student Training Track**
   - **For clinical instructors only: Complete Clinical Instructor Orientation CBT and Epic Training: Contact UCMC IT Service Desk @ 773-702-3456 (Monday - Friday 8am - 5pm) stating "Inpatient Nursing-Clinical Instructor Epic Training Needed."**
8. After you pass your Epic training, please wait at least 2 days to contact the Service Desk at 773-702-3456 if you still are unable to access Epic.
9. Remote access to Epic will not be granted for any nursing students and/or instructors.

Arr.tbulatory & Inpatient Providers

Creating Notes

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Step-by-Step - Inpatre111lt Notes

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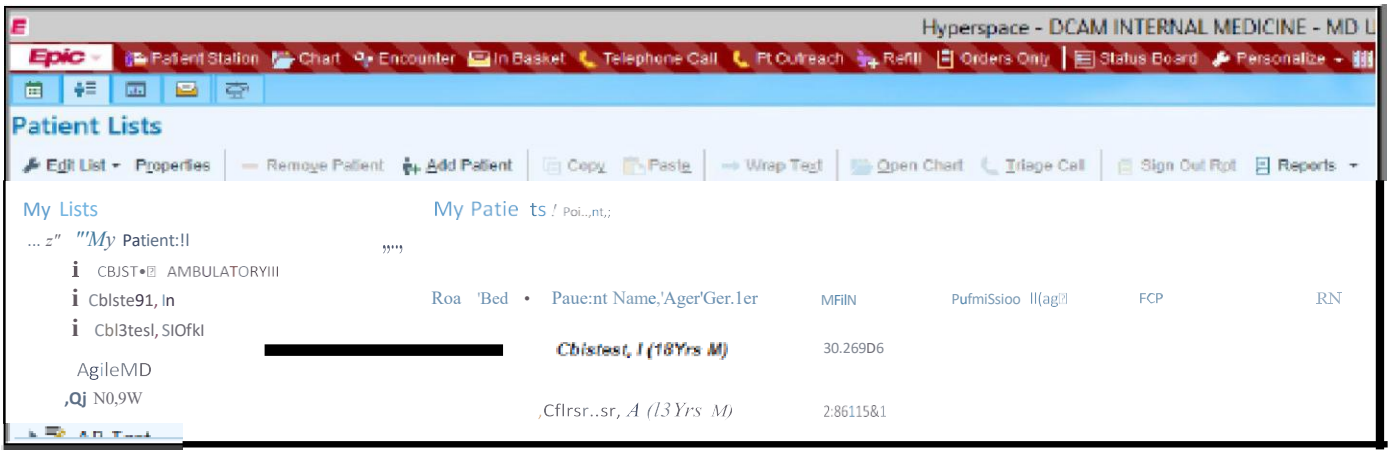

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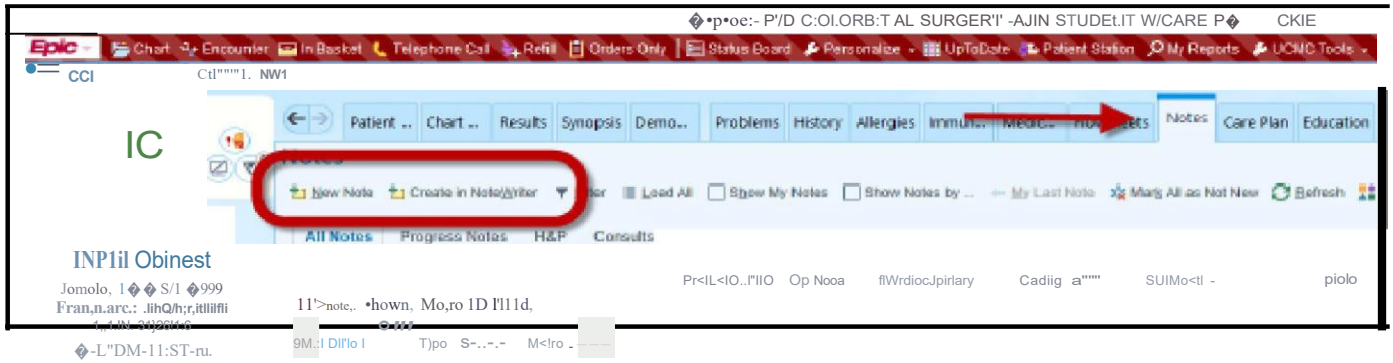

Creating Notes

Step-by-Step - A.tuibruatoi:y Notes

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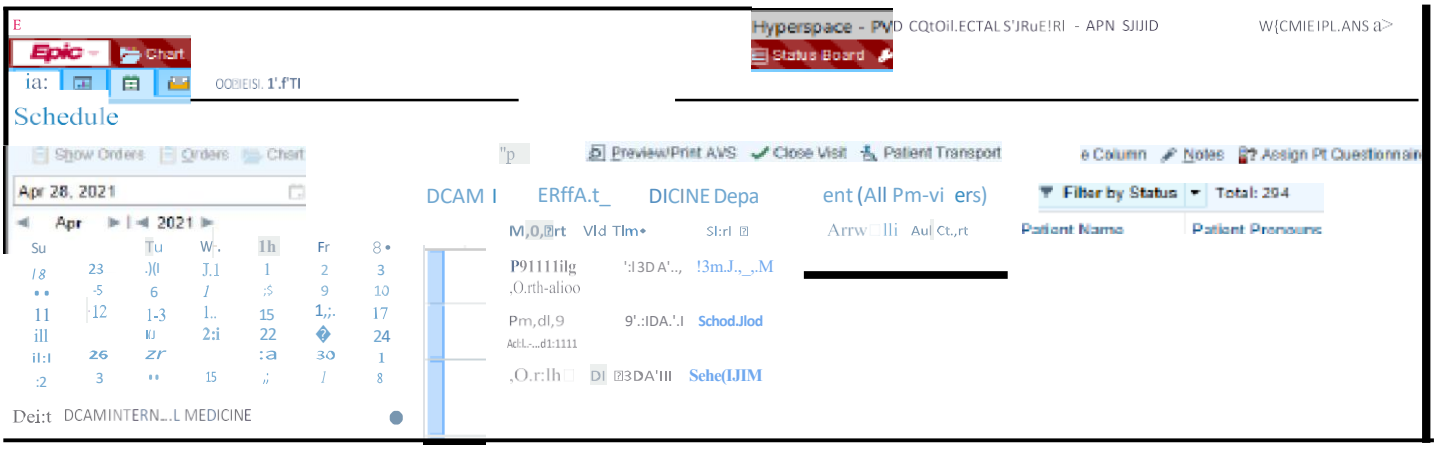

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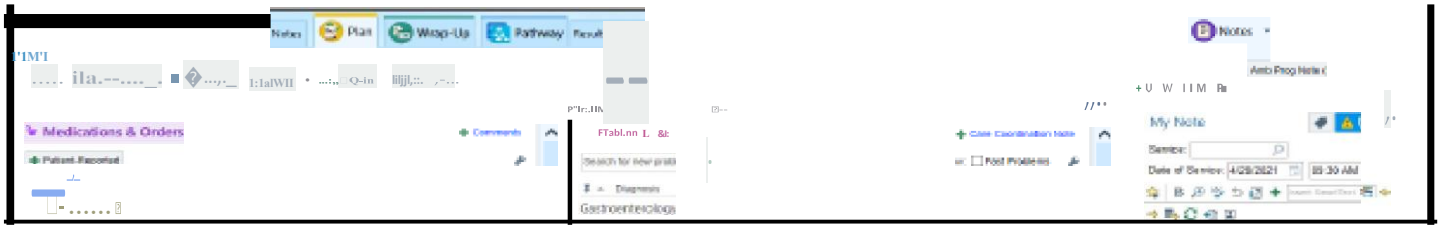


Trainees/Students

Sen Notes to be Cosigned

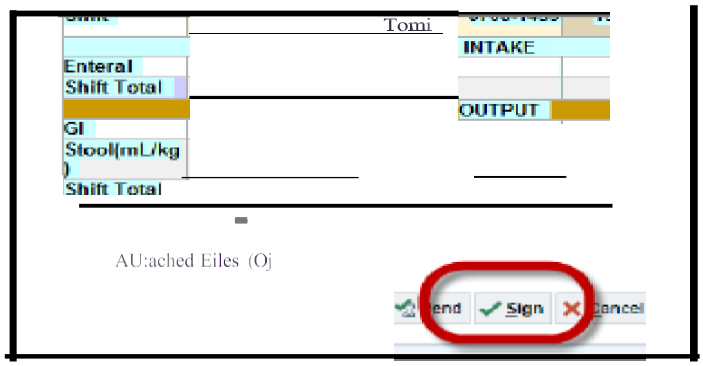
Su:rnmary

' otes written by trainees (res:identslfelio!iVS) m smdents need to be sent to thcic alte:nrung provider.. o:r preaeptrn:s **to** cosign The pcoc.ess to identify the note iis different fm inpatients vec.ses outpatients. The steps below outline each optiion.

Step-by-Step - Inpatient Notes

1. . Create yollll note as usuat The top, ec:tion of tihe note :mc:ludes an opti.on to mdlicate OiJsign. **Requ:iJred.** Click the ohec:kbox. Once clicked, a Oosi◆ern·box. becomes available. Identify the person :responsible fo:r cosigning }'Olli" note.

2. i.gn your Note. When you sign, the note is sent to the provider's Cosiigu Notes fu Basket folda:.



Step-by-Step - Outpatient Notes

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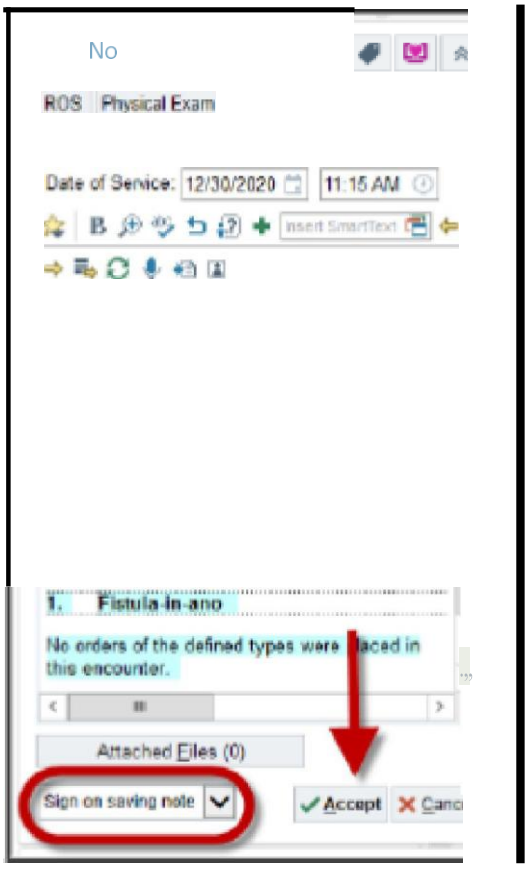

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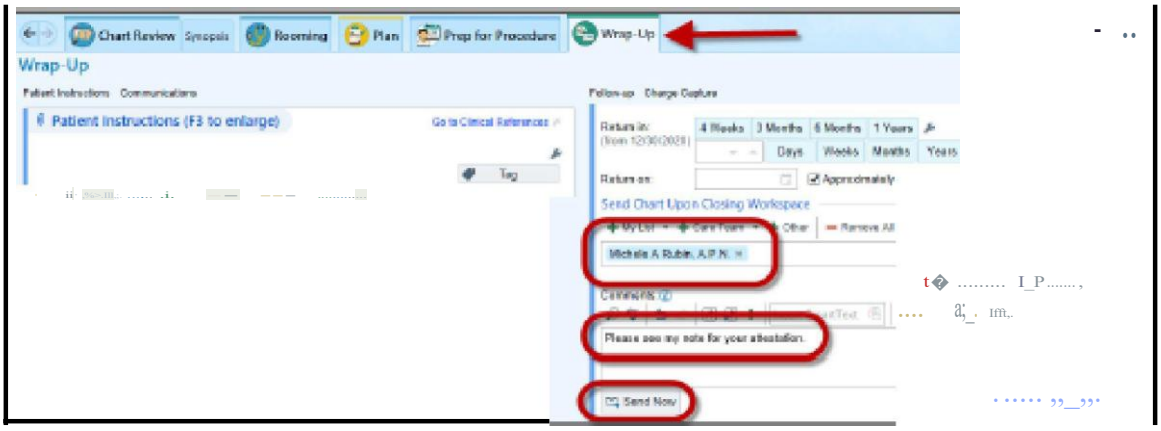


Do=&#65533; \'r:fiim!J 1

REVIEW OF IMAGES & STUDIES
Images and diagnostic studies were reviewed and relevant information is discussed in the assessment and plan

AS
Andrea Ambulatory is a 34Yrs old female patient.

The University of Chicago Medical Center -Application Process

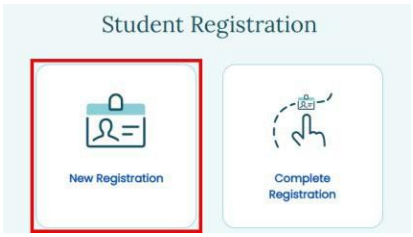
Self- Pay Student Registration and Payment

Before proceeding with the steps provided in this document, please confirm with your Academic Coordinator that students will be responsible for the subscription fee of their own myClinicalExchange account. **If your Coordinator states that another party will be responsible for the fee, *do not follow the steps in this document***. Instead, please encourage your Coordinator to submit a support ticket for additional guidance.

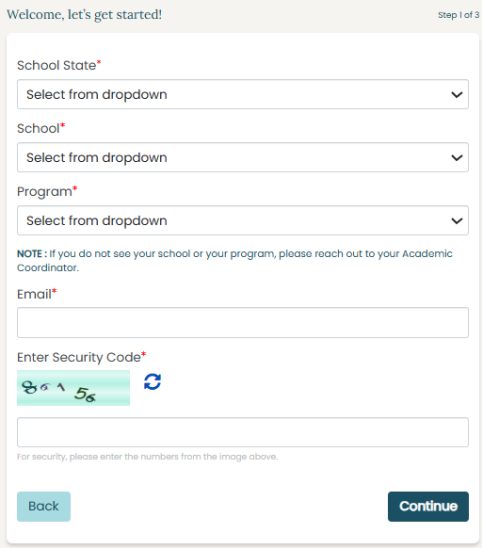
1. Please navigate to https://www.myclinicalexchange.com/MainPage.aspx by either following this link or copy/pasting it into your web browser. Please register from your computer and not from a cell phone. The most recent version of Chrome is recommended.

2. In the upper right corner of the homepage, click **Registration>Students** from the drop-down menu.

3. Click New Registration.



4. Complete Step 1 of 3



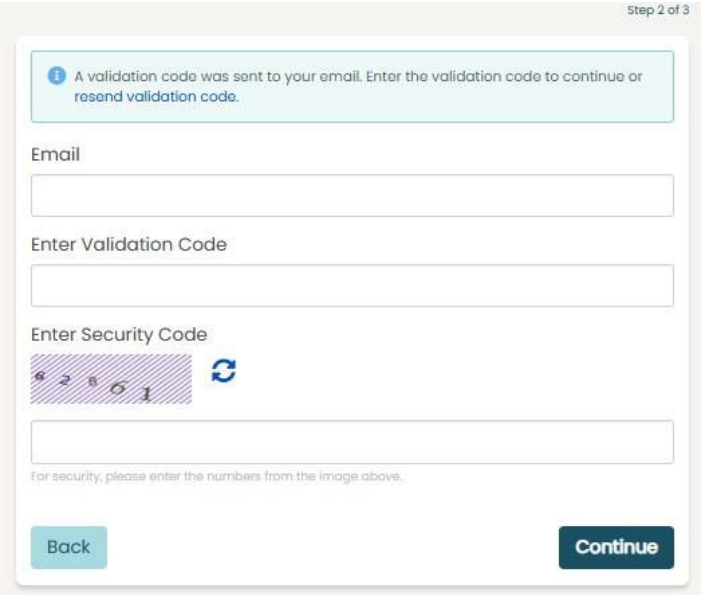
1. Select School State
2. Select School
3. Select Program
4. Enter school-provided email address*
5. Enter displayed Security Code
6. Click Continue

* The system will send a validation code to the email address. You may use a personal
e-mail address if your School does not

Upon clicking **Continue**, a validation code with be sent to your email from donotreply@myclinicalexchange.com. Please check your inbox for the validation code. If you do not see your validation code in your inbox, check your junk or spam folder. If you cannot locate the email:

- Click **Resend Validation code**
- If the email is not in your inbox, junk, or spam folder, reach out to your IT department to allow-list @myclinicalexchange.com

5. Complete Step 2 of 3:



1. Email will populate with your email address
2. Enter the Validation Code that you received via email
3. Enter displayed Security Code
4. Click Continue

6. Complete Step 3 of 3 which contains five sections of information.

- Complete Section 1: Demographic Information I. **First Name**: Your legal first name.
  II. **Last Name**: Your legal last name.
  III. **Date of Birth**: Your date of birth (no one under the age of 13 is allowed to register)
  IV. **Gender**: Select from drop-down
  V. **SSN**: Your full social security number with no dashes. If you do not have an SSN check the box next to "I don't have a SSN."
  VI. **Address**: Your physical place of residence.
  VII. **City**: The city in which you reside.
  VIII. **State**: The state in which you reside.
  IX. **Zip**: Enter the zip code associated to your address.
  X. **Mobile**: The best contact number you can be reached at. Note that this phone number will also be an option for myClinicalExchange to send password resets.

- Complete Section 2: School Enrollment Details
  I. **School State**: Please select the state your Academic Institution is located in. This is not a required area. However, it does assist in the data filtering process.

II. **School**: Select the name of your Academic Institution.
III. **Program**: Select the program you in which you are enrolled at your Academic Institution. Please confirm with your academic coordinator the program in which you should be enrolled.
IV. **Planned Graduation**: Select the Month and the Year.
- **Month**: Select the month of graduation
- **Year**: Enter the year of graduation

• Complete Section 3: Communication Consent
I. **Open to be contacted for job opportunities?**: Select your preference.

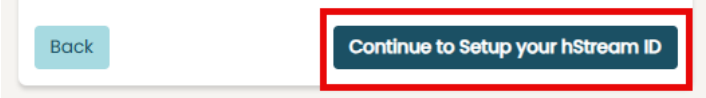
• Complete Section 4: Emergency Contact Person
I. **Name**: Enter your Emergency Contact's first and last name.
II. **Relationship**: Enter their relationship to you.
III. **Phone**: The best contact number they can be reached at.

• Complete Section 5: Login Details
I. **Login ID**: The email you entered at the beginning of this process will populate in this area.
II. **Password**: Enter in your password. Note that the password requirements are a minimum of 8 characters, at least one letter (upper & lower case), number, special character. Special characters include the characters above 1-8 on your keyboard: !, @, #, $, %, ^, &, *
III. **Confirm Password**: Re-enter your password.

• Complete **Terms of Service**: You must agree to the terms of service to proceed and complete your registration.

7. Scroll up to the top of the form and scroll through the completed form to be sure that all required fields have been completed. Typical fields to double-check include:
- Planned Graduation Year: Be sure that the year has been entered
- Mobile phone number
- All fields with a *

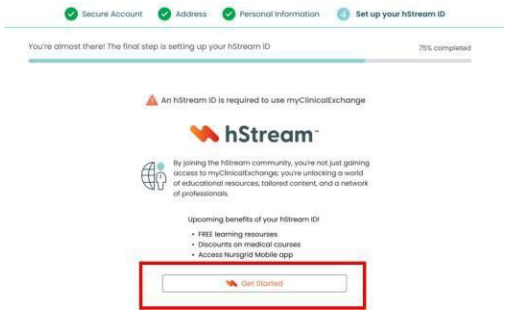
8. Click **Continue to Setup your hStream ID** to complete the Activation of your profile.



• If you cannot proceed, review the form to ensure that all required fields have been completed.

9. Your Activation is now complete. Now, the last step: Set up your hStream ID

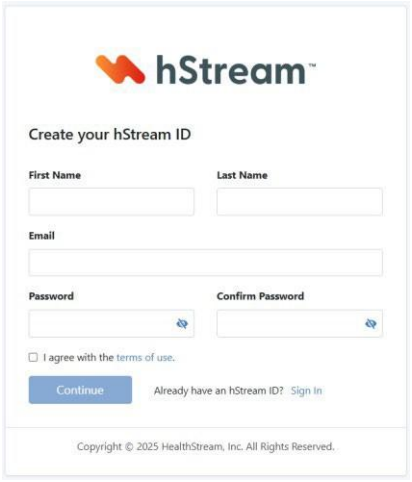
10. Click **Get Started**.



Enter your email address on the next screen:

- If an existing hStream ID is found, you'll be prompted to enter your password
- If no hStream ID exists, you'll follow the steps below

11. Create your hStream ID



a. Enter hStream ID information:
   i. First Name
   ii. Last Name
   iii. Email (personal email address is recommended for your hStream ID)
   iv. Password
   v. Confirm Password
   vi. Review and check the box next to "I agree with the terms of use."

b. Click **Continue**

12. Verify your hStream ID
   a. A verification code is sent to your hStream ID email address.
   b. Enter the Verification Code
   c. Click **Continue**

   You will see a Success! You have registered notification

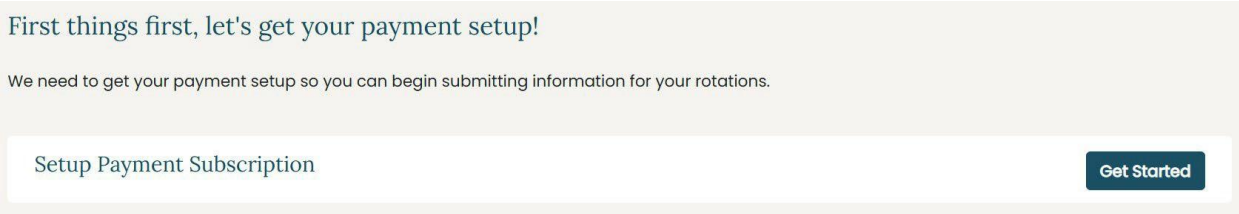
13. Click **Continue.**

14. You will be prompted to log in to hStream with your newly created hStream ID credentials
    a. Enter your hStream ID email address
    b. Enter the password you just created for your hStream ID
    c. Click **Continue**
    You will now see **Profile Setup Complete**!

15. Click "Continue to Home"

16. Once you are logged completely into your account, you will see an option to Pay for Subscription.

17. Click **Get Started**



18. Choose the subscription length

19. Select the payment option of your choice (PayPal, Pay Later, Debit or Credit Card)

20. Enter your payment information.

21. You will be sent a receipt from PayPal. Please keep this for your records.

Congratulations! You have now registered and paid for your myClinicalExchange account. You can let your coordinator know that you are ready to be scheduled to your rotation.

Frequently Asked Questions:

I was not able to complete my registration. How do I proceed? Go to https://myclinicalexchange.com/mceRegisterMainPage.aspx Click "Complete Registration"

I was able to complete my registration but did not complete my hStream ID creation. How do I proceed?
Go to https://myclinicalexchange.com/studentlogin Click "Activate Account"

How do I add my mobile number to my hStream account?
Check your email for your "This is your hStream ID" notification. Click **manage your account**. Log in to hStream with your hStream credentials. You'll be prompted to add your mobile phone number. This allows you to receive password resets for hStream via your mobile phone number.

For all other inquires: E-mail mCEsupport@healthstream.com. Please provide your name, the email address associated to your account, your school, and a brief description of the issue you're experiencing. Include screenshots where applicable.

UI- Health Center

HOSPITAL CORE ORIENTATION

Appendix N

UI/UIC Health and Hospital

Welcome to the University of Illinois Hospital and Health Sciences System!

The University of Illinois Hospital and Health Sciences System (UI Health) is dedicated to providing world-class care and service in an accessible, compassionate, and healing environment. We each play a critical role in helping to succeed in our mission while putting our patients first.

We have embarked on an exciting journey to enhance the way we interact with and serve our patients and their families, our providers, and our employees. Throughout delivery of the “UI Health Experience,” we are striving to become:

- **The best place to receive exceptional care and service** — providing a new standard of service by employing service-oriented individuals who see it as their privilege to exceed the expectations of every patient, by treating them with the utmost care, compassion and respect.
- **The best place to work as an employer of choice** — attracting and retaining highly skilled and passionate employees who are focused on providing world class health care and building a culture of teamwork, recognition, celebration and professional and personal growth.
- **The best place to deliver healthcare as a provider of choice** — creating an environment in which providers enjoy positive, collaborative relationships with nurses and other caregivers and who strive to change the way care is delivered.

It is a pleasure to welcome you as a new employee of UI Health.

Signed,

Your UI Health Leadership Team

Table of Contents

Introduction and Orientation Objectives

The ***University of Illinois Hospital and Clinics*** is committed to providing a comprehensive, job specific orientation for every staff person working within the Hospital - including employees, students and agency staff. The purpose in developing the ***'Hospital Core Orientation Manual'*** (for paid and non-paid students and Agency staff) is to familiarize you, the student and/or Agency staff, with the Hospital's core organizational values, policies and procedures and regulatory compliance practices and to ensure that you have all of the tools to successfully and safely carry out your responsibilities within the Hospital. The information found in this manual complies with the orientation requirements as outlined in the Hospital Policy and Procedure (HR 1.03) and all other applicable policies and procedures at the University of Illinois Hospital and Clinics as of August 2024. The Hospital responds to changing regulatory requirements and operational needs as necessary. For this reason, the information published in this manual is subject to change. If you have any questions pertaining to this orientation material, please follow-up with your supervisor/preceptor. In the event your supervisor/preceptor is unable to answer questions to your satisfaction, your supervisor will direct you to the appropriate individual and/or department.

The information presented in this manual is consistent with the information presented to new employees at our New Employee Orientation. All of the topics outlined in the manual are posted with additional detail on the Human Resources website.

Please carefully review all of the information found in the manual.

For additional information or assistance regarding any component of your UI Health Hospital Core Orientation, please contact:

Employee Experience Team

engageuih@uic.edu

UI Health

The University of Illinois Hospital Health Sciences System (UI Health) provides comprehensive care, education, and research to the people of Illinois and beyond.

What was once known as the University of Illinois Medical Center is now part of a system that brings together the University of Illinois vast health sciences resources into one powerful organization. Our hospital, ambulatory clinics, seven health sciences colleges, and research scientists are under one banner. By sharing one vision, we can better provide the benefits of our research, the knowledge of our faculty physicians and the advantage of advanced technology to every patient who walks through our doors.

Overview:

- 438-bed tertiary care hospital
- 30+ outpatient clinics
- 11 federally qualified health centers
- Seven health science colleges that contribute to the development, and training, of all healthcare professionals in Illinois
- UI Health faculty researchers are among the most funded by the National Institute of Health in the Chicagoland area
- Largest living intestinal donor transplant program
- One-in-six Illinois doctors is a graduate of the College of Medicine and UI Health doctors practice in almost every county in Illinois
- The College of Medicine annually trains approximately 2,500 medical students and residents
- The College of Pharmacy, one of only three state-supported pharmacy schools, is nationally ranked in NIH funding and has an outstanding clinical focus through its division of pharmacy practice
- The College of Dentistry is one of three dental schools in the state
- The first World Health Organization Collaborating Centre of Nursing and Midwifery Development in the US is here at the University of Illinois

Our Mission, Vision and Values

Mission

To advance health for everyone through outstanding clinical care, education, research and social responsibility.

Vision

Shaping the future of healthcare through innovative and advanced clinical care.

Values

ICARE

Inclusion: We believe diversity is our strength and do not tolerate discrimination in any form. We recognize and celebrate differences and uniqueness amongst our patients, staff, and faculty to ensure that everyone feels valued and respected.

Compassion: We will treat our patients and their families with kindness and compassion and strive to better understand and respond to their needs.

Accountability: We will hold ourselves accountable as an organization and as individuals to act ethically and responsibly in everything we do, to be excellent stewards of our natural and financial resources and to be transparent in our actions. We will make every effort to reduce waste in all forms, including waste that impacts human health.

Respect: We will act with respect, openness and honesty in our dealings with patients, families and coworkers. We will work collaboratively to promote the well-being of the communities we serve and to advance patient care, education and research.

Excellence: We will work as a team to leverage best practices and innovation in providing the highest-quality care for our patients and families. We will devote ourselves to continuously improve in everything we do.

Hospital Safety/Healthy Workplace Culture

The UI Health Leadership promotes optimum behavior by creating an atmosphere where interdisciplinary team collaboration can occur. We support a harmonious environment where all patients and employees treat each other with respect, dignity and honesty. We believe that:

- the manner in which we treat each other contributes to effective communication and maintenance of a professional, safe and effective work environment;
- our interactions can directly impact patient perceptions of our institution and the care they receive as well as, engagement in their care and willingness to choose us as their preferred care provider;
- inappropriate communication can create situations whose errors are more like to occur;
- all individuals have the right to be treated with respect, courtesy and dignity;
- verbal communication shall be respectful in tone and content that promotes high standards of professionalism at all times. All work-related communication with patients, visitors, customers, clients and co-workers shall be restricted to the common language of English.
- all practitioners and employees are expected to refrain from disruptive, abusive or otherwise inappropriate behavior towards, patients, employees, visitors and other practitioners.

UI Health strives to maintain a work environment free from intimidating demeaning, abusive or disruptive behavior. 'Disruptive Behavior' is defined as conduct that intimidates others working in the organization to the extent that quality and safety are compromised. Disruptive/unacceptable behavior undermines a healthy work environment that supports patient safety and teamwork. This behavior interferes with effective communication among all members of the healthcare team and negatively impacts performance and favorable outcomes.

A Hospital 'Professional Code of Conduct' has been developed (see hospital policy LD 4.13 below) and every Hospital staff is expected to read/review the policy on an annual basis. Any recipient of disruptive behavior should report the behavior/incident in the CORS occurrence system (available through the hospital's intranet) or the compliance hotline (866-665-4296). All reports will remain confidential. A report will be sent to the responsible supervisor in the chain of command for follow-up in a similar fashion to a patient occurrence report. The Risk and Safety Department will monitor disruptive behavior events through the CORS system for tracking and trending purposes.

Click here to review policy LD 4.13 Code of Conduct.

Safety on Campus

The mission of the University of Illinois Police Department is to promote and maintain public security and order. Some of our objectives are:

- To protect and safeguard people
- To protect the university property from criminal activity
- To foster on the part of the public a feeling of security and well being
- To promote and preserve civil order

Services:

- UIC SAFE App is a free personal security tool that provides students, faculty and staff with added safety on campus. The app's user-friendly interface allows users to easily connect with friends and family to share their location in real-time as they walk. Download it from the App Store (iOS) or Google Play (Android).
- Night Ride – provides transportation to university employees, students, visitors and other authorized individuals between university facilities and points of public transportation or resident facilities within a designated area. This service is available 10:00pm – 7:00am every day
- Student Patrol – offers a walking escort between university buildings and campus. Call 312-996-2830, 24 hours a day, 7 days a week.
- StarTel Emergency kiosks – instant alarm that connects you to the alarm center
- Subscribe your cell phone to receive text message alerts. An immediate SMS text alert will be sent in case of a serious crime in progress, a weather emergency, or other urgent situation. Log in to http://sms.accc.uic.edu from any computer to subscribe your phone.
- Watch your UIC email account for Urgent and Official email messages.

For more information, please contact:
UIC Police
On Campus 5-5555
Off Campus 312-355-5555
https://police.uic.edu

Accreditation and Clinical Compliance

The University of Illinois Hospital & Clinics are accredited by The Joint Commission. The Joint Commission (TJC) accredits and certifies more than 20,000 health care organizations and programs in the United States. Their accreditation is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards, and to continuously improve health care for the public.

Areas of focus include:

- National Patient Safety Goals
- Leadership
- Patient Rights
- Nursing
- Medical Staff
- Performance Improvement
- Infection Prevention
- Provision of Care
- Medication Management
- Human Resources
- Life-Safety
- Environment of Care
- Emergency Management
- Information Management
- Record of Care
- Transplant Safety
- Waived Testing

The Accreditation & Clinical Compliance Department assists the hospital and clinics to integrate these standards into ongoing operations and policies to support patient and employee safety. The Accreditation Team is a resource to all staff and our contact information and resources are on the hospital intranet.

Contact the Accreditation & Clinical Compliance team with any regulatory needs related to The Joint Commission, Centers for Medicare and Medicaid Services (CMS) Conditions of Participation, or the hospital and clinics policy process.

For more information, please contact:
Accreditation & Clinical Compliance Team
Phone: (312) 996-3363

Hospital Mandatory Regulatory Compliance Training
Empowers Learning Environment
(Paid Students)

Every new paid Student must receive orientation on the key elements of Infection Control, Patient Safety, Fire Safety, & Emergency Management prior to staff provision of care, treatment, and services.

These regulatory compliance courses are taken to maintain compliance with The Joint Commission Standards, Hospital Policy and Procedures, OSHA and other Federal Regulations. Additionally, Paid Students must complete these regulatory compliance courses on an annual basis.

Paid Students will receive e-mail notification of the Regulatory Compliance training along with instructions on Empowers login and help desk procedures. The Empowers learning environment can be accessed via a Quick Link on the hospital intranet. **Upon receiving the email notification, please login to complete the courses as soon as possible – these must be completed within 7 days of hire.**

Accessing EMPOWERS

1. **Visit UI Health Intranet and choose Empowers in Quick Links section.**
2. **Login using the SSO Login.**
3. **Hover over to your pending tasks and click on open: Big 8 New Hire Compliance Program-FY24.**
4. **To start completing your mandatory training, click on the Activate button, and the course will launch. There is no order for you to take the training, however, you must complete all the courses within the curriculum.**

When taking your EMPOWERS Big 8 Compliance Modules, an 80% or higher on each module is required to successfully pass and receive credit. If not achieved, you will need to retake them.

For additional information or assistance regarding Empowers, please contact:

IS Help Desk: 312-413-7717 or submit a Help Desk ticket on the Empowers site

Policy LD 1.03 Ethical Principles to Guide Hospital Practices

NO. LD 1.03 Click here to read the policy
APPROVAL DATE: September 6, 2023
EFFECTIVE DATE: September 8, 2023

SUBJECT: Ethical Principles to Guide Hospital Practices

OBJECTIVE

The University of Illinois Hospital and Clinics (Hospital), promotes and provides guidance for all healthcare personnel to act in an honest and ethical manner, abide by all applicable laws and regulations, and adhere to all policies of the Hospital, Healthcare System, and University. Leadership has a responsibility to conduct business with integrity, to act responsibly, and to be accountable for their decisions and actions made on behalf of the Hospital. Leadership will provide an environment where healthcare personnel can feel comfortable raising concerns and reporting actual or potential instances of wrongdoing without the fear of retaliation.

DEFINITIONS

For the purpose of this policy the following definitions apply:

Healthcare Personnel- All Hospital staff (as defined below) and including credentialed practitioners, residents, and fellows.

Individuals who provide care, treatment, or services for or on behalf of the University of Illinois Hospital and Clinics including, but not limited to:

- permanent and non-permanent workers.
- agency personnel.
- contracted personnel (clinical and non-clinical, skilled/professional); and
- volunteers

POLICY

All Healthcare Personnel are responsible to act in an ethical, respectful, and professional manner consistent with the principles outlined in this policy as well as with other applicable laws, organizational policies, including but not limited to LD 4.13 Code of Conduct, and the Hospital's mission (LD 1.01 Mission, Vision and Values, University of Illinois Hospital & Clinics).

Click here to review policy LD 1.03 Ethical Principles to Guide Hospital Practices.

False Claims Act

In 1986, Congress rejuvenated a Civil War-era law – *False Claims Act* – adding amendments to strengthen it and creating incentives for private citizens with evidence of fraud to commit their time and resources to supplement the government's efforts. As a result, a powerful public-private partnership for uncovering fraud against the government was put into play. A 'false claim' is a claim that cheats the government. It can be charging for tests and procedures never performed, performing unnecessary medical procedures in order to get increased reimbursement, double-billing for tests, billing Medicaid or Medicare for procedures that should have been charged to a research grant, doctoring time records, winning a contract through kickbacks and bribes, forging a physician's signature to gain government reimbursement, and many other acts of omission and commission.

In 2005, President Bush signed the Deficit Reduction Act of 2005. This act requires that, by January 1, 2007, Medicaid providers shall:

*(A) Establish **written policies** for all employees of the entity and of any contractor or agent of the entity, **that provide detailed information about the False Claims Act**, administrative remedies for false claims and statements, any State laws pertaining to civil or criminal penalties for false claims and statements, **and whistleblower protections** under such laws, with respect to the role of such laws in preventing and detecting fraud, waste, and abuse in Federal health care programs.*
*(B) Include as part of such written policies, **detailed provisions regarding the entity's policies and procedures for detecting and preventing fraud, waste, and abuse**; and*
*(C) "Include in any **employee handbook** for the entity, **a specific discussion of the laws** described in subparagraph (A), the rights of employees to be protected as whistleblowers and the entity's policies and procedures for detecting and preventing fraud, waste, and abuse."*
***Steps already have been taken to meet all of these requirements.** The Hospital Compliance Program and its policies are described at the Hospital Compliance web site. University Policies can be found by visiting Ethics Office Policies.*

HIPAA Privacy/Security

The Health Insurance Portability & Accountability Act of 1996 (HIPAA) was designed to prevent inappropriate use and disclosure of an individual's health information and to require organizations which use health information to protect that information and the systems which store, transmit, and process it.

Under HIPAA, the patient's health information is restricted to individuals who have a need to know, a reason to know or permission for access to such data/information. The Hospital has identified individuals responsible for the monitoring and administration of security and privacy of all protected health information (PHI) - Privacy Officer (312-355-5650) and Security Officer (312-355-4583).

Access to PHI is role defined. Certain categories of employees have unlimited access (i.e., Nurses, Physicians, Pharmacy Staff and Therapists). Remember – unlimited access is not equivalent to authorized access. You must always have a need to know, a reason to know or permission to access patient data/information.

Access to PHI is based on:

- Need to Know (Clinical)
- Reason to Know (Administrative)
- Permission to Know - written authorization to access patient information is obtained from the patient, designated family member or patient representative

Privacy/Confidentiality Best Practices:

- Remain mindful of the presence of others when discussing patient care.
- Do not disclose patient information to visitors without the patient's authorization.
- If a visitor is not authorized to obtain patient information, keep information as general as possible.
- Ensure that patient data is password protected – all communication including phone, in person and written.
- Ensure printed patient information is secure when being transported. Carry documentation face down or in a manner that ensures that patient data is not visible

HIPAA Sanctions:

Employees and students found to have violated HIPAA will be disciplined in accordance with the ***Hospital's*** policies. The type of sanction imposed will depend on the intent of the individual as well as the severity of the violation – IM 4.17 HIPAA Sanctions Policy. Sanctions, including civil/criminal prosecution and/or monetary fines, may be imposed to the individual and/or the ***Hospital*** for violation of patient confidentially/privacy. Sanctions may include:

- Monetary compensation to the Individual for any damages arising as a result of a breach of confidentiality.
- Disciplinary Action up to and including termination or any other penalties as necessary.

Reporting Privacy/Security Breaches

Notify the Privacy Office or your Department Security Contact (DSC) of a suspected HIPAA violation and provide:

- Date and time of suspected violation
- Detailed description of suspected violation

Addendum H: UIH Confidentiality Agreement Employee/Volunteer/Student

For additional information or assistance regarding Health Information Management at the University of Illinois Hospital and Health Sciences System, please contact:

Health Information Management (M/C 772)
833 S. Wood Street, B52

Chicago, Il 60612-7209

Phone: (312)996-6874
Fax: (312/413-8014

UIC Office for Access and Equity

The Office for Access and Equity (OAE) is a problem-solving, consultative resource for UIC's faculty, staff and students. OAE has one goal: to eliminate, prevent, and remedy any behavior that undermines the pursuit of educational excellence.

OAE offers wide-ranging services to the University, including investigation of discrimination and harassment, affirmative action planning, dispute resolution services, and disability accommodations. In its work, OAE represents the University campus to federal and state agencies as well as to the higher education community. They collaborate in the development of the campus' Affirmative Action Plan, and assist in the recruitment and retention of women, men and women of color, persons with disabilities, and other under-represented groups.

In addition, the OAE staff provide training on sexual misconduct, equal employment opportunity, the Americans with Disabilities Act, and other related topics as requested. They also provide technical advice on concerns regarding discrimination and harassment; counsel faculty, staff, and students who believe they may have been subjected to harassment or discrimination; and conduct inquires and investigations.

Sexual Harassment and Sexual Misconduct

Sexual Harassment includes any unwanted sexual gesture, physical contact or statement that is offensive, humiliating, or that interferes with a required job, academic, and/or career opportunity at the University. Sexual harassment may take the form of *quid pro quo* or *hostile environment*.

1. *Quid pro quo*
   "This for That" – request for sexual favors in exchange for job benefits or opportunities*;* looks at whether there is a tangible job action; there must be a power dynamic for quid pro quo harassment to exist.
2. *Hostile environment*
   Severe or pervasive conduct that interferes with an individual's work and/or academic performance or creates an intimidating hostile or offensive work or academic environment.

Behaviors that contribute to a hostile environment include:

- Unfulfilled threats to impose a sexual quid pro quo
- Discussing sexual activities
- Telling off-color jokes
- Unnecessary touching
- Commenting on physical attributes
- Displaying sexually suggestive pictures
- Using demeaning or inappropriate terms, such as "babe"

UIC's Sexual Misconduct Policy prohibits unwelcome sexual harassment, sex discrimination, or other forms of sexual misconduct in the classroom, office and other work locations. This policy applies to all University activities, including off premises when individuals are engaged in University related business or University sponsored events. Under the Sexual Misconduct Policy, all employees are considered to be "Responsible Employees" with the authority and responsibility to report Sexual Misconduct to the Office for Access and Equity.

Age Discrimination in Employment Act (ADEA)

Federal law (ADEA), state law and UIC policy all prohibit discrimination based on age. ADEA applies to individuals 40 years and older.

Americans with Disabilities Act (ADA)

Prohibits discrimination against qualified individuals because of their disabilities or handicap:

- In employment
- Participation in academic programs
- Receiving services offered to the public
- Denying access to building or services

Duty to provide a reasonable accommodation to an otherwise qualified individual:
Any change in the work environment or in the way things are customarily done, which is not unduly burdensome that enables an individual with a disability to enjoy equal employment opportunities.

Protected Categories: Other Laws and Policies
The University's Non-Discrimination Statement includes several other categories:

- Age (40 and over)
- Ancestry
- Arrest Record
- Citizenship Status
- Color
- Disability
- Genetic Information
- Marital Status
- Military Status
- National Origin
- Pregnancy
- Race
- Religion
- Sex
- Sexual Orientation
- Unfavorable Military Discharge

OAE has the responsibility to investigate and advise on internal complaints of discrimination and harassment; grievances (may include allegations of discrimination); and informal disputes (supervisor's right/responsibility to intervene in co-worker disputes).

University of Illinois Non-Discrimination Statement
ADA Employee Accommodation Policy
UIC Prohibition of Sex Discrimination, Sexual Harassment, and Sexual Misconduct

Dispute Resolution Services (DRS)

Conflict is inevitable in both our personal and professional lives. It can occur when two or more persons have different opinions, beliefs, wants and/or needs. Workplace conflict is common when employees of various backgrounds and leadership styles emerge. Conflict may result in damage to interpersonal relationships, group dynamics impacting the team and productivity of the organization when left unaddressed.

The Office for Access and Equity can assist in addressing conflict through the services offered by Dispute Resolution Services (DRS) including the following:

- **Consultation –** Private conversations with faculty, staff, or students to explore concerns and identify options seeking potential remedies.
- **Facilitation –** Assist parties in reaching agreeable solutions to workplace issues or concerns.
- **Mediation –** This service is *voluntarily* elected by the parties and facilitated by trained Mediators who meet jointly with the parties to assist them in reaching an amicable agreement to resolve their conflict.
- **Training –** Conflict Resolution, Engaging Environment, DRS Overview Presentation

All of these services are designed to bring parties to mutually agreeable resolution before conflict escalates into formal time-intensive grievances, charges, or costly litigation.

Some common causes of conflict:

- Interpersonal conflict
- Inappropriate or lack of communication
- Toxic work environments/climates
- Lack of clarity with job expectations, responsibilities, or roles

For additional information or assistance with the equal opportunity, affirmative action, and discrimination or harassment policies and procedures of the University of Illinois, and Dispute Resolution please contact:

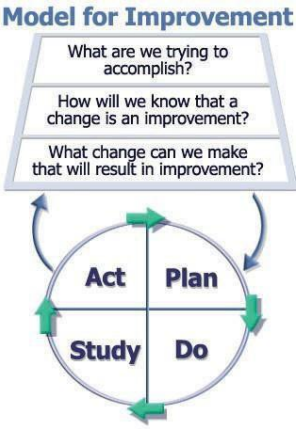
Office for Access and Equity
(M/C 602)
809 South Marshfield Avenue
Chicago, IL 60612-7207
Phone: (312) 996-8670

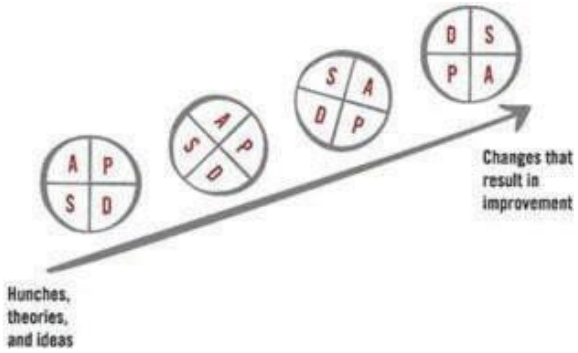
https://oae.uic.edu/

Quality Performance & Improvement

UI Health has an organization-wide Quality & Safety Plan. The primary goal of the plan is continual improvement of the quality, safety, efficiency, and effectiveness of patient care, processes, and services. The University of Illinois Board of Trustees has ultimate responsibility and legal authority for the quality and safety of care, treatment, and services provided by UI Health. The Office of the Vice Chancellor for Health Affairs, hospital management, and the organized medical staff comprise the interdependent leadership components of our enterprise. The Quality & Safety Strategy & Leadership Steering Committee (QSSL) provides overall leadership, direction, and oversight of UI Health's quality and safety priorities, performance, and action plans.

The ***Model for Improvement*** is the improvement approach UI Health uses to develop improvement plans, set aims, identify project-level measures, identify sponsors and stakeholders, develop change ideas to be tested, and direct the overall improvement effort.





The ***Plan-Do-Study-Act (PDSA)*** model is used to test ideas. The specific components of the PDSA model include:

P = Plan what you want to improve.
D = Do a test to see how well your idea works.
S = Study the results of your test and then act accordingly. What does the data tell you to do?
A = Act to roll out improvements, or adapt your plan and try again, or abandon the plan and develop a new one.

Ask your preceptor what quality indicators have been established for your area and how you can improve quality. Additional information is also available on the Intranet at the Quality Performance & Improvement website.

For additional information and assistance regarding Quality at UI Health, please contact:

Lorna Kaitei, Director, Quality Performance & Improvement
Phone: Email: lkaitei@uic.edu

Patient Safety & Risk Management

Modern healthcare is a high-risk, error-prone activity. According to recent studies, 300,000 to 400,000 patients die each year as a result of medical errors. The purpose of the Patient Safety & Risk Management program at UI Health is to identify clinical risks and analyze processes for improvement, as well as to facilitate a culture of safety and accountability. The primary functions of the program include:

- Administering the patient safety event reporting system;
- Conducting Root Cause Analyses (RCAs) for high-harm and sentinel events, near misses, and events with multifactorial systems issues;
- Recommending system process improvements and partnering with UI Health leaders to facilitate implementation;
- Facilitating disclosure of clinical errors and supporting involved patients, families, and staff;
- Providing risk consultation services regarding patient care and clinical service line issues;
- Supporting UI Health's implementation of Joint Commission National Patient Safety Goals; and
- Presenting Patient Safety and Risk Management education programs.

What is a patient safety event?

Patient Safety Event includes all incidents involving the clinical care of a patient in a medical facility that results in unanticipated patient harm that is not related to the natural course of the patient's illness or underlying condition, or which may potentially adversely affect the quality of care, service delivery, and operations of UI Health. A patient safety event can be, but is not necessarily, the result of a defective system or process design, a system breakdown, equipment failure, or human error. Patient safety events also include adverse events, no harm events, near miss events, and unsafe conditions.

What do I report to Risk Management?

UI Health staff and physicians, including agency staff and students, should report any event involving a patient, employee, or visitor that results in harm or has the potential to cause harm. This includes patient safety events, near misses, and disruptive behavior.

Please call us directly in the event of actual harm, potential harm or near miss situations. Our office hours are 8:00 am – 5:00 pm, Monday – Friday**. The general phone line is 312-996-3912**. This phone is generally answered by a 'live' staff member. In the event that this does not occur, **please remember the Patient Safety Hotline is available 24/7 and that number is 312-413-4775**. You must leave a voicemail message to activate the hotline pager. In the rare event that your hotline call is not promptly returned, please contact the Administrator on Call (AOC) at 312-519-3402. The AOC also has access to Patient Safety & Risk Management team members' personal contact numbers.

Patient Safety Hotline: x3-4RSK (312-413-4775)

For additional information and assistance regarding UI Health's Patient Safety & Risk Management program, please contact:

Rhonda Perna, BSN, RN, MBA, JD, CPHRM, CHC
Director, Patient Safety & Risk Management
Phone: (312) 996-0920 Email: rperna@uic.edu

Infection Prevention

Hand Hygiene

The most effective way to prevent infections is by cleansing your hands. It is important that you clean your hands by washing with soap and water for at least 20 seconds or using the alcohol hand rub **before** and **after** contact with a patient or the patient's environment, and after glove removal. Click here to read policy IC 1.03 Hand and Nail Hygiene.

Standard Precautions

Standard Precautions are implemented in the care of ***all*** patients (hospitalized and outpatient) to protect health care workers from infectious microorganisms.

- In order to practice Standard Precautions, **personnel protective equipment (PPE)** is available for you to wear. PPE must be worn if contact with blood and body fluids is anticipated. PPE includes gowns, gloves, and masks with eye protection and is located on all patient care areas. There is no eating or drinking allowed in any patient care areas to help prevent the spread of germs.
- Click here to read policy IC 2.02 Standard and Transmission Based Precautions, Use of Personal Protective Equipment.

Isolation Precautions

- ***Transmission Based Precautions*** are used in addition to Standard Precautions to prevent transmission of germs spread by droplets, contact, or air.

- ***Vaccination:*** Provided by Uiversity Health Service (UHS), annual Flu vaccine, TDaO Vaccine – (Tetanus, Diphtheria and Pertussis), Hepatitis B Vaccine – free of charge, a 3 shot series, Covid 19 Vaccine.

- ***Droplet Precautions***: microorganisms are spread by large droplets propelled a short distance (usually 3-5 feet) through the air via coughs, sneezes, while suctioning patients, etc. The droplets must reach the eyes, nasal mucosa, or mouth of a susceptible person to cause transmission.
  - A patient in Droplet Precautions should be placed in a private room or at least 5 feet from any roommate.
  - Healthcare workers must wear a mask with fluid shield if within 5 feet of the patient. A gown is required if respiratory secretions will contaminate clothing.

- ***Contact Precautions***: microorganisms are spread by contact with dry skin or environmental surfaces (door knobs, linens, equipment, bed rails, etc).
  - A patient in Contact Precautions should be placed in a private room.
  - Healthcare workers are required to wear gloves upon entering the room. A gown should be worn if clothing will touch the patient or environment. Both gown and gloves should be removed prior to leaving the patient's room.
  - Hand hygiene must be performed after removing protective clothing & before leaving the patient's room or upon leaving the room, using alcohol hand rub (located on the wall outside patient rooms).
  - Healthcare worker should leave all personal items (pens, papers, stethoscope, etc.) outside the patient's room.

- ***Contact-Plus Precautions***: Used primarily for patients with new onset of diarrhea and who are known or suspected to have Clostridium difficile diarrhea ("C diff" or CDD). Contact-Plus Precautions are also indicated for patients with Norovirus. Contact-Plus Isolation should be initiated for any patient for whom testing for Clostridium difficile, Norovirus, Rotavirus and Candida auris is ordered at the time that the order is placed.
  - A patient in Contact-Plus Precautions must be placed in a private room.
  - Healthcare workers are required to wear gloves upon entering the room. A gown should be worn if clothing will touch the patient or environment. Both gown and gloves should be removed prior to leaving the patient's room.
  - Hand hygiene: Hand hygiene with soap and water is more effective than using alcohol hand rub when caring for patients who have diarrhea.
  - Bleach-only cleaning of the environment with daily cleaning of high touch surfaces is required for patients in Contact-Plus Precautions.
  - The healthcare worker should leave all personal items (pens, papers, stethoscope, etc.) outside the patient's room.

- ***Aerosol Contact Precautions:*** Gown, Glove, Face shield with N-95 Respirator/PAPR

- ***COVID Precautions:*** Monitor your health for signs and symptoms of Covid – contact UHS if you are not feeling well. Screen your patients for signs and symptoms of COVID, follow Aerosol Contact Precautions listed above.

- ***Airborne Precautions***: microorganisms are spread by breathing in small droplets that are suspended in the air.
  - A patient in Airborne Precautions must be placed in a private negative-pressure room with the door closed.
  - Healthcare workers must wear an N-95 respirator. Note: healthcare workers caring for patients in Airborne Precautions must have medical clearance by University Health Service (UHS) and be fit-tested for the N-95 respirator.

- Click here to read policy IC 2.03 Tuberculosis Isolation of Patients.

Click here to read policy IC 2.04 Multiple Drug Resistant Organism (MDRO)

Exposure to a Patient's Blood or Body Fluid

While working with a patient, you could get exposed to that patient's blood and body fluids through puncture or a splash to your eyes, nose, or mouth. If this happens, go to the nearest sink and wash the site where the exposure occurred. If the exposure was to mucous membranes, flush with water for a full 15 minutes. Next, find out the name of the patient from whom the body fluid came. Report this exposure to your instructor or preceptor.

- **Important**: You must go to University Health Service (or the Emergency Room if the exposure happens outside of normal business hours) for further follow-up and treatment (as indicated) and to complete an occurrence report within 2 hours.
- **Click here to review policy IC 4**.02 Management of Employee Post Exposure to Blood and Body Fluids

Your Health

- You must be immune to measles, mumps, rubella, and varicella (chicken pox) to do your clinical rotation at UI Health. You should provide documentation of this immunity to your instructor or preceptor.
- You must be free of Tuberculosis infection. (See Appendix E)
- The best rule of thumb is, if you are sick, or have a fever or diarrhea, do not come to work in patient care areas until you are feeling well again.
- If you develop any communicable diseases such as pertussis (whooping cough), do not come to work with patients in clinical areas until you have been cleared by University Health Service.

Addendum C: Infection Control Basics – Personal Protective Equipment
Addendum D: Infection Control Basics – Bloodborne Pathogen Standard
Addendum E: Tuberculosis Control – How To Protect Yourself and Others

For additional information and assistance regarding UI Health's Infection Prevention & Control program, please contact:

Phone: (312) 996-8953, pager 3707
Email: infectionprevention@uic.edu

Emergency Preparedness/Fire Safety

Reporting An Injury – Report all on the job injuries, reporting injuries notifies the Environmental Health and Safety Office of the occurrence and begins the Worker's Compensation process.

- Occupational Injuries are reported using the First Report of Injury Form located on the Environmental Health and Safety webpage.
    - This must be completed within 24 hours of the injury.
- Seek treatment at University Health Services during normal business hours and the Emergency Department during off hours.

Needle Safety **-** Report ALL needle sticks

- Never recap a needle
    - Once a needle is uncapped dispose of it whether it's been used or not in a sharps container.
- Contact Environmental Services when you have a sharps container that needs to be picked up.

Back Injury Prevention – Don't be afraid to ask for help

- Ask for help if the item you need to lift is:
    - It's too big to responsibly grasp
    - Oblong and awkward to hold
- Use shelving and step ladders to ensure that you're grasping items that are central to your core and you're not reaching outward.
    - Keep items as close your person as possible

Watch Your Step **-** Falls happen:

- When we don't clean up and when we don't look where we are going
- If you see something, clean it up or place a yellow tent over the spill if you cannot
    - If you see a spill, call 6-3688 and report it

Electrical Safety

- Do not use extension cords.
    - Power strips cannot be used to power patient care equipment
- Red Outlets are for patient care use only.
    - Additional outlets can be installed by submitting a work order

Hazardous Chemicals

- Safety Data Sheets for all hazardous chemicals at UI Health are maintained on the hospital intranet under the Hospital Resources Tab
    - These contain general safety information including personal protective equipment recommendations, signs and symptoms of exposure, and chemical data

UIC Smoking Policy

- Smoking is not allowed in any building on the UIC campus or on the campus itself
    - If caught smoking, UIC PD will issue a citation

Fire Safety
In the event of an activated fire alarm:

R Rescue anyone in danger "Code Red;" Don't endanger yourself
A Activate the alarm
C Close all doors
E Extinguisher the fire or Evacuate to a safe location

If you must extinguish a fire:

P Pull the pin
A Aim the nozzle: At the base of the fire
S Squeeze the handle
S Sweep back and forth

What does the fire alarm sound like?

- Tones – In the Hospital & EEI, the hospital alarm system will tell where the alarm was activated
- Horns – In OCC and all other buildings

Fire Drills- Know your evacuation route

Listen to the alarm

- Determine the location
- Fill out an observer's form

Disaster Preparedness

All personnel working for the Hospital may be called upon for assistance during an activation of the Emergency Operations Plan (EOP). Some events that could cause activation of the EOP may necessitate the evacuation of patients, staff and visitors. During these incidents, it is very important that personnel who are called upon for assistance are familiar with the EMP and the tasks they may need to perform to safely evacuate patients, visitors, staff, medical equipment, medical supplies and medical records.

Additional references include:

University of Illinois Hospital Disaster Manual available in every department and online at http://employee.hospital.uic.edu

- Unit specific Internal Disaster Plan available on each respective unit

Emergency Codes

- **Code Red – Fire**
  Listen for location and respond appropriately
- **Code Helper – Evacuation**
  1 person from each unit
- **Code Pink – Infant Abduction**
  Observe hallways
- **Code Cerner – Computer**
  Manual entry and logging of patient care
- **Code Silver – Armed Intruder**
- **Code Decon – ER Emergency**
  Decon Team report to the ER

Key Phone Numbers

6-3688 - Environmental Services	Building related problems
5-5555 - UIC Police & Chicago Fire Dept.	Anytime there is danger
6-SAFE – Environmental Safety Emergency	Environmental Health & Safety Office (Emergency)
6-7233 – Hospital Safety Question	Environmental Health & Safety Office

For additional information or assistance regarding safety or environmental control issues at the University of Illinois Hospital, please contact:

Phone: (312) 413-3700

Patient Rights & Responsibilities

Patients have the right to:

- Considerate and respectful care
- Information about your treatment and healthcare team
- Make decisions about your care
- Be comfortable and safe
- Privacy and confidentiality

The responsibilities of the patient consist of:

- Providing accurate and complete health information
- Asking questions
- Making informed decisions
- Participating in care and treatment or expressing refusal of treatment

Patients are also responsible for following key rules at the hospital. These rules include:

- respecting rights and property of other patients and staff,
- helping limit noise and visitors,
- remaining on unit,
- complying with the hospital and campus smoke-free policy,
- providing accurate information for billing and fulfilling financial obligations.

Patient & Guest Experience / Hospitality Operations

The mission of the Patient & Guest Experience Office (PGXO) is to provide personalized assistance that exceeds the expectations of patients, families, and guests. UI Health's PGXO has dedicated resources and comprehensive programs that enhance the patient and guest experience, while also improving clinical outcomes, including:

- Patient Experience Navigators to provide assistance with questions, concerns, and requests
- CONDITION H (HELP) to respond to patient concerns about their care

For more information, please contact: Patient & Guest Experience Office Office: 312.996.0761 or visit our Intranet page.

Patient Rights and Responsibilities

As our patient, you have the right to: ACCESS

• Contact and speak with the physician or other practitioner who has primary responsibility for your care, treatment and service.
• Communicate and receive a timely response to your complaints without fear of reprisal.
• Health Social Work assistance to access child and adult protective and advocacy services.

RESPECT and DIGNITY

• Be treated as an individual, with unique needs and desires.
• Receive courteous and respectful care free from all forms of physical, verbal, emotional, or sexual abuse, exploitation, harassment or neglect.
• Be assured of the confidentiality of your medical record.
• Access and request changes to your medical record.
• Information regarding who your health information has been shared with according to law and regulation.
• Confidential discussions, consultations, examinations and treatments in a setting that provides as much privacy as possible taking reasonable precautions.
• Have your personal privacy respected.
• Make informed choices about your care and treatment.
• The right to refuse treatment and be informed by the healthcare team of anticipated outcomes of that refusal.
• Information about advance directives. The Hospital will provide resources to assist you in preparing a living will or power of attorney upon request.

COORDINATION of CARE

• Know who is in charge of your care.
• Know the identity of doctors, nurses and others involved in your care and to know when they are students, residents or other trainees.

PHYSICAL COMFORT and SAFETY

• Receive care in an environment that is clean, comfortable and safe; free from neglect, exploitation and abuse.
• Receive a timely response to your pain with the goal of maximizing your comfort and functionality.
• Restraints or seclusion used only when necessary for the safety and well-being of you and others and when less restrictive measures have been determined to be ineffective.
• Symptom treatment, pain management and patient and family support to maintain psychological and spiritual well-being (applies to terminally ill patients).
• Refuse or restrict visitors.

SUPPORT

• Express concerns, be listened to and receive appropriate responses without fear of reprisal.
• Accommodations for your religious/spiritual beliefs and preferences that do not interfere with your well-being or treatment plan.
• Visitors including but not limited to a spouse, a domestic partner (including a same sex partner), another family member or friend.
• A support individual of the patient's choice to be present during the course of stay when it is medically/therapeutically possible, safe, and does not infringe on the rights and safety of others.
• Access to family and friends outside the hospital through visits, calls or letters.
• Option of notification of family member, friend or physician of your hospital admission.
• Access to the Ethics Consult Service to help you in exploring issues and options in making healthcare decisions.

INFORMATION, EDUCATION and COMMUNICATION

• Free and confidential language services to patients and companions whose preferred language is not English to ensure effective communication regarding patient care information and education.
• Information needed for you to give informed consent, regarding your diagnosis, treatment, likely outcome, benefits and risks, treatment options and expected course of treatment/recovery in a language you understand.
• Information on clinical trials affecting your care and treatment. You have the right to refuse to participate and refusal will not affect your care and treatment.
• Read carefully to understand and ask questions about any form before signing.
• The opportunity to participate in, understand and ask questions about diagnosis, treatment, care plan and discharge.
• Receive an itemized bill and an explanation of charges in a language you can understand.
• Receive a copy of your medical record (at your expense) after discharge.
• Receive copy of Bill of Rights and Responsibilities upon request.

Patient Responsibilities

• Provide complete and accurate information about your current and past state of health, including past illnesses, hospitalizations and medications you are taking.
• Provide us a copy of your advance directives.
• Ask questions when you do not understand what we are saying or asking you to do.
• Follow the treatment plan as agreed upon with your healthcare team.
• Leave valuables at home and bring only necessary items for your hospital stay such as glasses, dentures, hearing aids. We are not responsible for lost valuables and personal belongings.
• Assist us in maintaining a safe environment by informing us if you observe unsafe conditions or practices.

• Treat healthcare personnel and other patients and families with respect and dignity.
• Respect the rights and property of healthcare personnel and other patients and families.
• For your safety and well-being, remain on the clinical unit.
• Support our healing environment through shared consideration and respect by using civil language and displaying civil conduct.
• Aggressive behavior will not be tolerated.

The University of Illinois Hospital provides the opportunity for all patients to express their concerns about the quality of care or service they have received through a complaint/grievance mechanism. The Hospital has established a process for the prompt review, investigation and resolution of patient complaints and grievances. The patient or their representative can contact the Patient and Guest Experience Office at 312-355-0101 to file a grievance. The Hospital also has the obligation to disclose the name of the state agency to which the patient may take a grievance.

Illinois Department of Public Health
Central Complaint Registry
525 W. Jefferson Street
Springfield, IL 62761
Phone: 800-252-4343

The Joint Commission Office of Quality Monitoring
One Renaissance Boulevard
Oakbrook Terrace, IL 60181 Phone: 800-994-6610

Language Support Services (LSS)

We are committed to the elimination of health disparities and providing quality language interpretation and translation services to all of our patients. We believe that language services are a crucial piece of the UI Health Experience and strive to provide an exceptional experience to all. The department's primary goal is to deliver language support to UI Health patients, their families and health care providers. LSS provides immediate access to over 200 languages, including American Sign Language (ASL).

The Language Support Services Office provides the following:

- In house interpretation (Spanish and Polish)
- Telephonic Medical Interpreters (Available 24/7) by dialing 6-LANG (6-5264)
- Video Healthcare Interpreters (VRI) or using the Audio Remote Interpreter (VRI)
- Onsite agency Healthcare Interpreters (for the languages that are not available in house)
- Documents Translation

All interpretation and translation services for the hospital and the clinics have to go through the LSS office. In person interpretation may be available for patients who meet specific clinical criteria including inability to view VRI screen or use the phone, end of life diagnosis discussions, or other criteria as approved by the Language Support Services. To request an interpreter, please complete this request form and for rush requests (less than 48 hours), please call LSS at 3-2820.

If your department needs translation services for clinical documents, patient information, marketing, web materials, call center scripting, telephone prompts or other types of documents, please complete this form.

*The Language access provisions of the **Affordable Care Act (ACA) Section 1557** has been updated to require the use of **qualified interpreters** and restrict the use of untrained family members and friends, minor children and untrained bilingual staff as medical interpreters. These are no longer guidelines; they are enforced regulations.*

Thank you for honoring our patients with the best possible care and for utilizing our professional language resources as we aid our families and providers with their communication needs.

For more information, please contact:

Language Support Services

- **Phone: 312- 413-2820**
- **Hours: Monday-Friday, 8:00am – 5:00pm**
- **Email:** lss@uic.edu

Addendum A: Non-Discrimination Statement

The commitment of the University of Illinois to the most fundamental principles of academic freedom, equality of opportunity, and human dignity requires that decisions involving students and employees be based on individual merit and be free from invidious discrimination in all its forms.

The University of Illinois will not engage in discrimination or harassment against any person because of race, color, religion, sex, national origin, ancestry, age, order of protection status, genetic information, marital status, disability, sexual orientation including gender identity, unfavorable discharge from the military or status as a protected veteran and will comply with all federal and state nondiscrimination, equal opportunity and affirmative action laws, orders and regulations. This nondiscrimination policy applies to admissions, employment, access to and treatment in the University programs and activities.

University complaint and grievance procedures provide employees and students with the means for the resolution of complaints that allege a violation of this statement. Members of the public should direct their inquiries or complaints to the appropriate equal opportunity office.

For the Chicago campus, Caryn A. Bills, Associate Chancellor, Office for Access and Equity (Title IX, ADA and 504 Coordinator), 717 Marshfield Building, M/C 602, 809 South Marshfield Avenue, Chicago, Illinois 60612-7297, (312) 996-8670, cabw@uic.edu.

Addendum B: Reaffirmation Statement

The University of Illinois at Chicago strives for a diverse community reflective of our urban environment. Diversity is evident in our student body and extends to our faculty and all levels of administration and staff. UIC adheres to the principles of equal employment opportunity and nondiscrimination in all aspects of employment, including recruitment, hiring, promotion and development of our employees. Our hiring and employment policies are devised to promote this commitment. Administrators, faculty and staff share responsibility for promoting equal opportunity and nondiscrimination in the workplace and academic environment. UIC's commitment to diversity is critical to our mission of advancing access to excellence and success in academic programs, research and healthcare.

UIC is committed to creating and maintaining a community that recognizes and values the inherent worth and dignity of every person, while fostering an environment of mutual respect among its members. As such, University policy prohibits unlawful discrimination or harassment of any member of the campus community pursuing their academic goals or in employment, including recruitment, selection, promotion, transfer, merit increases, salary, training and development, demotion, and separation on the basis of race, color, religion, sex, national origin, ancestry, age, order of protection status, genetic information, pregnancy, marital status, disability, sexual orientation including gender identity, unfavorable discharge from the military or status as a protected veteran. This commitment is expressed in the University Nondiscrimination Statement available online.

The Office for Access and Equity (OAE) under the leadership of Caryn Bills, Associate Chancellor, is responsible for assuring campus compliance in matters of equal opportunity, affirmative action, and

nondiscrimination in the academic and work environment related to University policy, and applicable federal and state laws, including Title IX, the ADA and Section 504. Additionally, OAE offers Dispute Resolution Services to assist with conflict in the workplace.

As always, your commitment to a respectful living, learning, and working community is acknowledged and appreciated.

If you have questions or concerns, please contact Caryn A. Bills, Associate Chancellor, Office for Access and Equity, 717 Marshfield Building, M/C 602, 809 South Marshfield Avenue, Chicago, Illinois 60612-7297, (312) 996-8670, oae@uic.edu.

Addendum C: Infection Control Basics - Personal Protective Equipment

What is Personal Protective Equipment?

Personal protective equipment (PPE) is equipment you wear to protect yourself from exposure to potentially hazardous materials. The Bloodborne Pathogens Standard refers to PPE as equipment that protects your skin, mucous membranes, and personal clothing from contamination with blood, body fluids, secretions, or excretions. Examples of PPE include: gloves, fluid-resistant gowns, masks, impervious aprons, lab coats, protective eyewear, mouthpieces, resuscitation bags or other ventilation devices.

Gloves

When to wear gloves

Gloves should be worn when your hands may come in contact with blood, body fluids, secretions, excretions, mucous membranes or non-intact skin. Gloves should not be worn in non-patient care areas (e.g. public hallways).

Single-use gloves

In general, non-latex gloves can be used for most patient care and laboratory activities. These gloves are designed as single-use items, are available in various sizes, and should be discarded after use. If gloves tear or are punctured during use, remove them as soon as possible, wash hands, and put on a new pair of gloves.

Reusable gloves

Utility or work gloves may be available for heavier tasks, such as hauling waste, housekeeping, or working with chemicals. These gloves may be reused but should be cleaned and disinfected after each use and stored in a sanitary fashion. If cracks or other breaks in integrity occur in these gloves, they should be discarded. Carefully remove reusable gloves in a manner so that your hands do not touch the contaminated surfaces of the glove. Wash hands after the gloves are cleaned and disinfected. Store gloves in select area(s) as per department policy.

Glove allergies

UI Health supplies latex-free gloves for employee use. If you have allergies or special requirements, contact your supervisor to discuss options available.

Skin lesions and gloves

Skin lesions such as cuts, sores, or scrapes on your hand should be covered with a dressing or bandage before you put on gloves.

Removal of gloves

Gloves should be removed from your hands in a way that decreases the likelihood of your skin or mucous membranes being exposed to blood, body fluids, secretions, or excretions. For single-use gloves, first point your hands downward and away from your face, and then grasp the outside of the cuff with the opposite gloved hand. Remove that glove slowly by turning it inside out. Gather the removed glove into the palm of the gloved hand. Then slip a ungloved finger underneath the cuff on your other hand, and roll that glove inside out over the other glove. Discard the used gloves into the appropriate waste receptacle and wash hands.

Handwashing / Hand Hygiene

After gloves have been removed, use an alcohol-based hand rub product, or wash hands with soap and water. **The use of gloves does not replace the need for appropriate hand hygiene.** Gloves do not completely protect your hands from becoming contaminated either during use or during removal.

Fluid-Resistant Gowns and Aprons

Barrier Gowns / Impervious gowns

Barrier gowns or impervious gowns/aprons should be worn anytime there is a reasonable likelihood that splattering of blood, body fluids, secretions, or excretions may occur. This is particularly true in circumstances when exposure to large amounts of blood is anticipated (e.g., trauma situations, labor and delivery, surgery). The gown should be worn so that it ties in the back. After use, it should be removed in a manner that does not contaminate your clothing or skin.

The gowns used in outpatient areas are disposable and should be discarded in the trash. Gowns used for patient care in the hospital are laundered after each use. These gowns should be placed into the linen hamper after use.

If blood, body fluids, secretions, or excretions penetrate your gown, or if torn, it must be removed/ contained as soon as possible. Exposed skin surfaces should be washed with soap and water.

Masks and protective eyewear

Protective eyewear and a mask must be worn when it can be reasonably anticipated that blood, body fluids, secretions, or excretions will splash or splatter into your eyes, nose, or mouth (mucous membranes). Goggles or safety glasses with solid side-shields and paired with a mask are one choice. Alternatively, you could wear a face shield or full-face visor. Personal prescription eyeglasses, without solid side-shields, do not provide adequate eye protection. Safety glasses or goggles should not be worn without a mask. Reusable protective eyewear and visors should be appropriately disinfected after use.

Resuscitation devices

Unprotected mouth-to-mouth resuscitation should never be performed; a mouth shield or a mechanical device (e.g. ambu bag) should be utilized.

Removal of PPE

PPE should be removed when you complete the task for which you put it on. PPE must be removed when you leave the area in which exposure was anticipated. PPE should not be worn in public areas such as hallways.

Questions?

Refer to the Exposure Control Plan in your Infection Control Manual, which is accessible at http://www.hospital.uic.edu under the UI Hospital tab “Infection Control and Isolation”.

Questions not addressed in this document can by answered by any Infection Prevention & Control team member. The Director of Infection Prevention & Control can be reached at 312-996-8953.

Addendum D: Infection Control Basics – Bloodborne Pathogen Standard

What is the bloodborne pathogen standard?

The Bloodborne Pathogen Standard (29 CFR 1910.1030) was published in 1991 by the Occupational Safety and Health Administration (OSHA) to protect employees from acquiring bloodborne diseases while at work.

To whom does the standard apply?

This standard applies to anyone who has reasonably anticipated exposure to bloodborne pathogens as a result of performing his/her job duties.

What is the exposure control plan?

The Exposure Control Plan is UI Health's plan for implementing the Bloodborne Pathogen Standard. It is located in the Infection Control Manual available on the hospital intranet and contains information on the following topics:

1. **Standard precautions**
2. **Engineering controls**
3. **Work practice controls**
4. **Personal protective equipment.**
5. **Hepatitis B vaccine**
6. **Housekeeping**
7. **Labeling of biohazard material**
8. **Post-exposure follow-up**
9. **Education and training**

What is a bloodborne pathogen?

A bloodborne pathogen (BBP) is an infectious agent that can be present in human blood and other body fluids and that is able to cause disease in humans. Some examples are Hemorrhagic Fever, Hepatitis B virus (HBV), Human Immunodeficiency virus (HIV), and Hepatitis C virus (HCV).

Where are bloodborne pathogens found?

The following fluids may contain bloodborne pathogens:

1. Blood and blood products
2. Semen and vaginal secretions
3. Cerebrospinal fluid
4. Synovial fluid
5. Peritoneal fluid
6. Pericardial fluid
7. Amniotic fluid
8. Saliva (in dental procedures)
9. Any unfixed human tissue or organ
10. Any body fluid visibly contaminated with blood

The following excretions usually do **not** contain bloodborne pathogens:

1. Feces
2. Urine
3. Sputum
4. Sweat

How do I decrease my risk of acquiring bloodborne diseases at work?

1. **Follow Standard Precautions**
   Standard Precautions (formerly called Universal Precautions) mean you assume that all blood, body fluids, secretions, excretions, mucous membranes, and non-intact skin are potentially infectious, regardless of whether or not you know the patient has a disease.

2. **Use Engineering Controls**
   Engineering controls are physical or mechanical systems that UI Health provides to eliminate hazards at their source. Examples include self-sheathing needles, sharps disposal containers, biosafety cabinets, and autoclaves.

3. **Apply Work Practice Controls**
   Work practice controls are the way you do your job to decrease your risk of being exposed. Some examples include hand washing, not recapping needles, and not eating or drinking in patient care areas or areas where equipment and specimens are handled.

4. **Use Personal Protective Equipment (PPE)**
   PPE is equipment that protects your skin, mucous membranes, and personal clothing from contamination with potentially infectious material and includes the following: gloves, masks, gowns, aprons, lab coats, protective eyewear, face shields, mouthpieces, resuscitation bags or other ventilation devices. You should wear the appropriate PPE for the task. For example, if splattering of blood or body fluid is anticipated, you should wear gloves, a fluid-resistant gown, and a mask with protective eyewear or a face shield. If PPE becomes torn or otherwise damaged during use, remove it as soon as possible and wash the affected site.

5. **Obtain the Hepatitis B Vaccine**
   The Hepatitis B vaccine is available free of charge at University Health Service (UHS). It comes in a series of three injections at 0, 1, and 6 months. Approximately 90 percent of people who obtain the vaccine series develop immunity to the Hepatitis B virus. The primary side effect of the Hepatitis B vaccine is soreness at the injection site. You should obtain the vaccine if you may be exposed to BBP during your regular job activities. If you refuse to obtain the vaccine, you must sign the Hepatitis B Declination Form. You may, however, at a later date, change your mind and obtain the vaccine.

6. **Perform Good Housekeeping**
   Clean and disinfect all surfaces and equipment that have contact with blood or body fluids. Use tongs, two pieces of cardboard, or a brush and dust pan to pick up broken glass - **never use your hands!** Items that are grossly soiled with blood or other body fluids are potentially infectious for BBP and should be placed into red bags. “Grossly soiled” means the body fluid can be released either in liquid or dried form from the object that is being discarded. Sharps and glass should be discarded into puncture-resistant sharps disposal containers.

7. **Label Biohazard Materials and Locations**
   Containers that contain biohazard material should be appropriately labeled with the international biohazard sign:

or the color red (e.g., red bags). Areas that handle biohazard material, such as laboratories, should have a biohazard label at the entrance to the laboratory. Any equipment that is contaminated with BBP and is being sent to an outside agency for servicing should be labeled “Contaminated” or with a biohazard label.

8. **Follow post-exposure protocol**
   When your skin or mucous membranes are exposed to blood or other fluids that may contain BBP, you must act STAT:
   - **S- Scrub** If you stick your finger, scrub the site. If you splash blood into your eye, flush your eye with running water for at least 15 minutes.
   - **T- Tell** your supervisor that you have been exposed. This is an emergency and you will need to leave your work area to seek treatment after patient care is transferred to a colleague.
   - **A- Ask** your supervisor or the patient’s physician to have the patient’s blood drawn, if the source-patient of the exposure is known.
   - **T- Treatment** Seek follow-up care and treatment at University Health Service (UHS). If UHS is closed, go to the Emergency Department.

9. **Educate yourself on the standard**
   Complete annual required mandatory education. Learn the engineering and work practice controls in your area. If you have questions about a certain work practice or engineering control, ask your supervisor for additional information or training.

Addendum E: Tuberculosis Control – How to Protect Yourself & Others

What is TB?

Tuberculosis (TB) is an infection caused by the bacterium *Mycobacterium tuberculosis* (MTB).

How is TB spread?

TB is spread through the air when a person with active respiratory TB disease (e.g in the lungs or throat) coughs, sneezes, speaks, or sings. Infection occurs when a nearby susceptible person inhales the MTB, and the bacteria reach the tiny air sacs (alveoli) of the lungs and begin to grow. Infection can occur at any body site (e.g., kidneys, bone, brain) but usually occurs in the lungs. TB in other parts of the body is not infectious.

How does infection differ from disease?

People infected with TB who are not sick have latent TB infection (LTBI) and can't spread TB to others. MTB is in the body, inactive, and the immune system has contained it. The person may have a positive TB skin (PPD) test or a positive blood assay for MTB (BAMT). People with LTBI can develop active TB disease when their immune system weakens if they did not have proper treatment. If the person does develop active disease, they may then be infectious.

Who is at increased risk of infection?

- People who are homeless
- Substance abusers (IV drug users, alcoholics)
- People with weakened immune systems (e.g. those with diabetes mellitus, cancer, the elderly)
- Persons living in institutional settings (correctional facilities, shelters, nursing homes, etc.)
- Persons from countries where active TB disease is common (Asia, Africa, the Caribbean, Latin America, Middle East, Eastern Europe)

Who is at highest risk of developing active TB?

Individuals with a weakened immune system (children <4 years of age, the elderly), because the bacteria can't be contained by the immune system and it begins to grow. Certain medical conditions (e.g. diabetes, cancer, kidney disease, HIV) and treatments (corticosteroids, organ transplant, etc.) can weaken the immune system.

How do I identify persons with active TB?

Symptoms of TB depend on the site of infection. Active respiratory TB is the most infectious form and can include the following symptoms:

- Prolonged (3 weeks), productive (wet) cough
- Hemoptysis (coughing up blood)
- Chest pain
- Weakness or fatigue
- Unexplained weight loss
- Fever
- Chills
- Night sweats

Patients with any or all of the **symptoms** should be suspected of having active TB disease and should receive further medical evaluation.

What TB screening tests are available?

- The TB skin test: Injection of fluid called tuberculin or PPD (purified protein derivative) into the skin, in the lower part of the arm. The test is read in 2-3 days by looking for a reaction (induration).
- Quantiferon-TB® Gold (QFT-G): Measures the immune system's reaction to TB proteins mixed with blood. This type of test is a blood assay for MTB (BAMT) and the methodology used at UI Health.

A positive reaction for either test does not indicate active TB disease and further testing will need to be performed.

How is TB diagnosed?

Diagnosis of active TB disease is made based on the medical history, symptoms, screening test results, chest x-ray (CXR) results, and sputum culture and/or smear results.

A CXR is used to detect chest abnormalities that may suggest or rule out pulmonary TB. Typical CXR findings include an infiltrate or cavity (an area with millions of bacteria) in the upper lobe or superior segment of the lower lobe of the lungs. The CXR of an HIV-infected person with TB may be atypical; it may even appear clear.

Positive smears do not confirm a diagnosis of TB, but they do indicate the presence of Mycobacterium species (the MTB family). Growth of MTB in culture is the only definitive diagnostic test for TB.

Three consecutive negative smears of respiratory secretions are required to take a patient out of Airborne Precautions. Specimens should be gathered at least 8 hours apart, with one of the specimens being an early morning specimen. To obtain a good specimen, patients should be instructed to breathe and cough deeply. The smear results are generally available within 24 hours.

Patients with symptoms, a cavitary lesion on CXR, positive smear results, and MTB growing in culture are highly infectious because they are spreading large amounts of bacteria into the air with each cough. The more MTB there is in the lungs, the higher the amount of bacteria seen on a specimen smear. People with negative smear results may not be as infectious. The number of MTB present in sputum at any given time can be different, so **a patient should have at least three negative sputum specimens before TB infectivity can be ruled out. MTB is a slow-growing organism that can take 2-6 weeks to grow in a culture.**

Once I identify someone as having TB, how do I stop it from spreading?
Prompt identification, Airborne isolation, and treatment of persons with active TB disease are the best ways to control the spread of TB.

When TB is suspected, a patient should be placed in an **Airborne Isolation** room, also known as a negative pressure room. These pressurized rooms prevent the spread of MTB (that is hanging in the air) from floating into hallways and rooms. Regular private rooms can be temporarily used as Airborne Isolation rooms by using portable high efficiency particulate air (HEPA) filters that help clean the air.

In waiting areas, persons with a cough should be separated from other patients and visitors. If TB is suspected in the outpatient setting, a surgical mask should be placed on the patient and the patient should be placed in a private examination room with the door closed.

In the inpatient setting, a patient with suspected TB should be placed in **Airborne Isolation**. Both doors of the isolation room must be kept closed. If there are no negative pressure rooms available, the patient may be temporarily placed in a private room with a **portable HEPA filter** (available from Respiratory Services).

Patients with confirmed TB must be placed in a negative pressure room. Airborne Isolation requires that all healthcare personnel entering the room wear a fit-tested **N95 respirator**. Employees unable to wear an N95 respirator must use a powered air-purifying respirator (**PAPR**). Patients must wear a surgical mask if required to leave the room. All **cough-inducing or aerosol-producing procedures** (sputum induction, bronchoscopy, etc.) performed on suspected or confirmed TB patients must be done in a negative pressure room.

Patients should be started on appropriate anti-TB treatment. Whenever possible, a four-drug therapy should be initiated. Patients should be instructed on the importance of complying with treatment. If it is suspected that a patient will not comply with therapy once discharged, **directly observed therapy** (DOT) should be considered. Contact the Infection Prevention & Control Department, or the patient's clinician may contact the Chicago Department of Public Health for information related to DOT.

What do I do if I am exposed to TB?

Persons who have had prolonged, unprotected exposure to TB (e.g., persons who have shared the same airspace with another who has active TB disease where neither person was wearing a mask) should contact the Infection Prevention & Control Department and University Health Service (UHS). A TB Screen Test will be performed at the time of exposure (baseline) and another test will be done 8-12 weeks later (after exposure). All UI Health employees who are TB Screen Test-negative must repeat the test at least annually. Some employees who work in high-risk areas may be required to have a TB Screen test every 6 months. Employees who are newly identified as TB Screen Test-positive will be given a medical evaluation that includes a CXR to evaluate the presence of active disease and may be offered prophylactic anti-TB therapy. Persons who are TB Screen Test-positive should monitor themselves for symptoms of active TB disease and complete a TB Signs & Symptoms Questionnaire from UHS every 6 months.

What if I have further questions about TB?

Additional information about controlling the spread of TB can be found in the "Tuberculosis Prevention and Exposure Control Plan" located in the Infection Control section of the Hospital Policy Manual accessible online at http://intranet.uimcc.uic.edu/SitePages/Home.aspx under Departments, select "Infection Control."

Questions?

Questions that are not answered within this plan can be addressed to any of the Infection Control Practitioners in the Infection Prevention & Control Department. For a list of department contacts, please visit Infection Control on the hospital intranet.

Summary of Methods to Control Known or Suspected Active TB Disease

- **Identify** symptomatic persons
- **Isolate** symptomatic persons
- Wear N95 **respirators** when entering the room of any patient with known or suspected TB
- **Treat** patients with appropriate anti-TB drug therapy
- Comply with routine and post-exposure **TB Screen Tests**

Addendum F: Hospital / UIC Campus Resources

Hospital Website
UiHealth.Care

History of the Hospital, Mission, Vision and Values, and Organizational Chart

UIC Human Resources
Benefits, Training and Testing

UIC Children's Center
Provides full-day early childhood care for preschool children to faculty, students, and staff

University Library
Access to research materials, periodicals and inter-library loans

Empowers
Accessible through QuickLinks of Hospital Intranet
Computer based Training and Learning

Office for Access and Equity

UIC Transportation / Shuttle / Red Car

University Health Services
Pre-employment screenings, Fit for Work and Wellness checks

UIC Directory

Student Recreation Center

Holiday Schedule

Parking Services

University of Illinois at Chicago

Addendum G: University Of Illinois Statement Of A Drug-Free Workplace

1. The University of Illinois is committed to maintaining a drug-free workplace in compliance with applicable state and federal laws. The unlawful possession, use, distribution, dispensation, sale or manufacture of controlled substances is prohibited on University premises. Violation of this policy may result in the imposition of employment discipline as defined for specific employee categories by existing University policies, statues, rules, regulation, employment contracts, and labor agreements. Any employee convicted of a drug offense involving the workplace shall be subject to employee discipline or required completing satisfactorily a drug rehabilitation program as a condition of continued employment.

2. The illegal use of controlled substances can seriously injure the health of employees, adversely impair the performance of their responsibilities and endanger the safety and well-being of fellow employees, students and members of the general public. Therefore, the University encourages employees who have a problem with the illegal use of controlled substances to seek professional advice and treatment. A list of sources for drug counseling, rehabilitation and assistance programs may be obtained from the Human Resources Department, University Health Service, or the Employee Assistance Service. Employees may obtain this information anonymously either through self-referral or at the direction of their supervisor. Employees who are engaged in work under a federal contract may be required to submit to test for illegal use of controlled substances as provided by the law or regulations of the contracting agency.

3. As a condition of employment, employees are asked to abide by this statement. In addition, those employees working on a federal contract or grant must notify their supervisor if they are convicted of a criminal drug offense occurring in the workplace within five days of the conviction. The University will notify the granting or contracting federal agency within 10 days of receiving notice of a conviction of any employee working on a federal contract or grant when said conviction involves a drug offense occurring in the workplace. A copy of this statement shall be given to all employees assigned to a federal con tact or grant.

4. This statement and its requirements are promulgated in accordance with the requirements of the **Drug- Free Workplace Act of 1988** and shall be interpreted and applied in accordance with this law and the rules and regulations promulgated pursuant thereto.

Addendum H: University of Illinois Hospital Confidentiality Agreement Employee/Volunteer/Student

As an employee/volunteer/student at University of Illinois, you may have access to “Confidential Information”. The purpose of this agreement is to help you understand your obligations regarding confidential information.

Confidential information is protected by Federal and State laws, regulations, including HIPAA, the Joint Commission on Accreditation of Healthcare Organizations standards, and strict University policies. The intent of these laws, regulations, standards and policies is to insure that confidential information will remain confidential - that is, that it will be used only as necessary to accomplish the purpose for which it is needed.

As an employee/volunteer/student, you are required to conduct yourself in strict conformance with applicable laws, standards, regulations and University polices governing confidential information. Your principal obligations in this area are explained below. You are required to read and to abide by these rules. Anyone who violates any of these rules will be subject to discipline, which might include, but is not limited to, termination of employment or expulsion from the University. In addition, violation of these rules may lead to civil and criminal penalties under HIPAA and potentially other legal action.

As an employee/volunteer/student, you may have access to confidential information, which includes, but is not limited to, information relating to:

- Medical record information (includes all patient data, conversations, admitting information, demographic information and patient financial information).
- Protected Health Information (PHI) as defined by HIPAA includes, but is not limited to, names, all geographic subdivisions; all elements of dates (except year) for dates directly related to an individual, telephone numbers, fax numbers, electronic mail addresses, social security numbers, medical record numbers, health plan beneficiary numbers, account numbers, certificate/license numbers, vehicle identifiers, device identifiers and serial numbers, web universal resource locators (URLs), internet protocol (IP) address numbers, biometric identifiers, including finger and voice prints, full face photographic images and any comparable images; and any other unique identifying number, characteristic, or code.
- Employee information (i.e., social security number, employment records, and disciplinary actions).
- University information (i.e., financial and statistical records, strategic plans, internal reports, memos, contracts, quality and peer review information, and communications).
- Computer programs, client and vendor proprietary information, source code, and proprietary technology.

Employees, who have access to electronic medical record in accordance with their job responsibilities may access, view and print their own medical record for the duration of their employment or for the duration of the period that they retain the position that provided them access to electronic medical record. For copies of information not in electronic medical record, employees are required to contact the HIM Department. The Director of HIM is not responsible for actions taken on information printed and released by Hospital employees.

NOTE:

Employees with this level of access are not permitted to access the medical records of their children, spouses, relatives or friends. Such access is considered a breach of patient privacy and is subject to disciplinary action. Employees who do not have access to electronic medical record must contact the HIM Department to request copies of their medical records.
In the event that you do have access to confidential information, you hereby agree as follows:

- You will only use confidential information/data as needed/necessary to perform your duties as an employee/volunteer/student affiliated with the University.
- You will not in any way divulge, copy, release, sell, loan, review, alter or destroy any confidential information/data except as properly authorized within the scope of your professional activities affiliated with the University.
- You will not misuse confidential information/data or be careless with it.
- You will safeguard and will not disclose your computer password or any other authorization that allows you to access confidential information/data. The University reserves the right to monitor access to the network, including your account, if deemed appropriate.
- You accept responsibility for all activities undertaken using your assigned access code and/or any other authorizations.
- You will report activities by any individual or entity that you suspect may compromise the confidentiality of information. The University will make all attempts possible to keep good faith reports confidential. However, absolute confidentiality cannot be guaranteed.
- You understand that your obligations under this Agreement will continue after your affiliation with the University terminates.
- You understand that any of your access privileges to confidential information/data are subject to periodic review, revision, and, if necessary, modification and/or termination.
- You understand that you have no right or ownership interest in any confidential information/data.
- The University may at any time revoke your access code, or any other authorization that allows you to access confidential information/data.
- You will be responsible for your misuse or wrongful disclosure of confidential information and for your failure to safeguard confidential information/data or your password or any other authorization that allows you to access confidential information/data.
- The University may take disciplinary action against you up to and including termination or expulsion from the University in the event you violate this Confidentiality Agreement. In addition, the University may initiate legal action including but not limited to civil litigation or criminal prosecution.
- You understand the University reserves the right to monitor and record all network and application activity including e-mail, with or without notice, and therefore users should have no expectations of privacy in the use of these resources.

ACKNOWLEDGEMENT OF MANDATED REPORTER STATUS

I, _____, understand that when I am employed as a
(Employee Name)

_____, I will become a mandated reporter under the
(Type of Employment)
Abused and Neglected Child Reporting Act [325 ILCS 5/4]. This means that I am required to report or cause a report to be made to the child abuse and neglect Hotline number at 1-800-25-ABUSE (1-800-252-2873) whenever I have reasonable cause to believe that a child known to me in my professional or official capacity may be abused or neglected. I understand that there is no charge when calling the Hotline number and that the Hotline operates 24-hours per day, 7 days per week, 365 days per year.

I understand that in an effort to help mandated reporters understand their critical role in protecting children by recognizing and reporting child abuse/neglect, DCFS administers an online training course entitled **Recognizing and Reporting Child Abuse: Training for Mandated Reporters**, available 24 hours a day, seven days a week.

I further understand that the privileged quality of communication between me and my patient or client is not grounds for failure to report suspected child abuse or neglect, I know that if I willfully fail to report suspected child abuse or neglect, I may be found guilty of a Class A misdemeanor. This does not apply to physicians who will be referred to the Illinois State Medical Disciplinary Board for action.

I also understand that if I am subject to licensing under, but not limited to, the following acts: the Illinois Nursing Act of 1987, the Medical Practice Act of 1987, the Illinois Dental Practice Act, the School Code, the Acupuncture Practice Act, the Illinois Optometric Practice Act of 1987, the Illinois Physical Therapy Act, the Physician Assistants Practice Act of 1987, the Podiatric Medical Practice Act of 1987, the Clinical Psychologist Licensing Act, the Clinical Social Work and Social Work Practice Act, the Illinois Athletic Trainers Practice Act, the Dietetic and Nutrition Services Practice Act, the Marriage and Family Therapy Act, the Naprapathic Practice Act, the Respiratory Care Practice Act, the Professional Counselor and Clinical Professional Counselor Licensing Act, the Illinois Speech-Language Pathology and Audiology Practice Act, I may be subject to license suspension or revocation if I willfully fail to report suspected child abuse or neglect.

I affirm that I have read this statement and have knowledge and understanding of the reporting requirements, which apply to me under the Abused and Neglected Child Reporting Act.

_____
Signature of Applicant/Employee

_____
Date

CANTS 22
Rev. 5/2019

Acknowledgement of Orientation Completion

I acknowledge that I have reviewed and understand the content outlined in this Student/Agency Orientation Handbook.

Instructions:
- Initial below in the column next to each subject heading discussed and /or reviewed.
- Sign and date this 'Acknowledgement' document.
- Sign and date DCFS Acknowledgement of Mandated Reporter Status
- Submit the original documents to your supervisor – to be maintained in your personnel file.
- Retain a copy of the document for your records.

Introduction & Orientation Objectives

The University of Illinois Hospital and Health Sciences System (UI Health)

Our Mission, Vision and Values

Hospital Safe/Healthy

Workplace Culture Code

of Conduct Policy

Safety on Campus

Accreditation and Clinical Compliance

Hospital Mandatory Regulatory

Compliance Training Code of Ethics

False

Claims

Act

HIPAA

Privacy/

Security

University of Illinois Office for Access

and Equity Quality Performance &

Improvement

Patient Safety & Risk

Management Infection

Prevention & Control

Emergency

Preparedness/Fire Safety

Patient Rights &

Responsibilities

Patient & Guest Experience / Hospitality Operations

_____ _____
Student/Agency Staff Signature Date Student/Agency Staff Name

_____
Printed

_____ _____
Supervisor's Signature Date

Clinical unit: ___Dates of clinical rotation: _____to _____C

UI Health Human Resources | UIC

Waiver & Release and Confidentiality Agreement

In consideration of my voluntary participation in an educational program to be conducted at the University of Illinois Hospital & Health Sciences System, 1740 West Taylor Street, Chicago, IL 60612 (the "Facility") and
_____(Student/Observer Name),
_____(address),
_____(City),_____(State)_____(Zip Code)("Self"), which will involve observing healthcare providers and patients of the Facility, and informational and instructional sessions at the School, the undersigned, on his/her own behalf, or if applicable, on behalf of his/her minor child or ward, and for each of their respective heirs, legatees, personal representatives, and all those claiming by or through them, does hereby discharge, release, and hold harmless The Board of Trustees of the University of Illinois, its trustees, agents, volunteers, servants, employees, and each of their successors and assigns, from all claims, actions, losses, damages, or expenses for personal or bodily injury (including death) and property loss or damage incurred by him or her or arising out of or in connection with his or her participation in the educational program at the Facility and the School.

I further understand and agree that all identifiable patient information, including without limitation the name of a patient and the fact that he or she is being treated by Facility, is strictly confidential and may not be disclosed by me for any reason. I may not access, copy or maintain any such confidential patient information, in either hard copy or electronic form, and if I improperly or inadvertently violate this obligation, I shall immediately report the violation to the person(s) supervising me at the Facility or School. I also understand that any failure to comply with these confidentiality provisions will result in my immediate termination from the educational program. These obligations shall survive termination of this Agreement;

☐ I am age 18 or over and I have read, understand and agree to this Waiver & Release and Confidentiality Agreement.

Signature of Participant _____

Printed name: _____

Date: _____

☐ I am under age 18. My parent or legal guardian named below has signed and agreed to this Waiver & Release and Confidentiality Agreement.

Consent and Release on Behalf of Minor

I am the parent or legal guardian of the above named minor. I certify that I have read and understand the foregoing Waiver and Release and Confidentiality Agreement. I voluntarily agree to the terms of this document on behalf of my child or ward, a minor, and I consent to my child's/ward's presence in the Facility and School and his/her participation in the educational program at these locations.

Signature of parent or legal guardian: _____

Printed name: _____

Date: _____

Declination Statement

UI Health Human Resources | UIC

Hepatitis B Declination Statement (Agency & Non-Paids)

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine; however, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine I continue to be at risk of acquiring hepatitis B, a serious disease. If, in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series by scheduling an appointment with University Health Services.

School/Agency: _____ Printed Name: _____

Signature: _____ Date: _____

THE UNIVERSITY OF ILLINOIS HOSPITAL AND CLINICS
Chicago, Illinois
NO.: HR 1.05
PAGE: 4 of 204

UI Health Onboarding Checklist: External Affiliates – Students

Instructions: Please complete the required UIH onboarding items listed. Once all items are complete, please submit the checklist and below documents to your institution

- ☐ Review the UI Health Core Orientation Manual
- ☐ Sign Mandated Reporter Status in the Core Orientation Manual on page 43. *The school is responsible for attesting to the accuracy and retaining this document for at least 5 years.* (school to keep form)
- ☐ Sign the Orientation Checklist in the Core Orientation Manual on page 44. *The school is responsible for attesting to the accuracy and retaining this document for at least 5 years.* (school to keep form)
- ☐ Sign the Waiver and Release and Confidentiality Agreement. *Please email to* ssoto@uic.edu
- ☐ Review Dress Code and Appearance Policy.
- ☐ Review Hand and Nail Hygiene Policy.
- ☐ Certified background check and sanctions check (includes the OIG List of Excluded Individuals and Entities (LEIE), the Excluded Parties Listing Service (EPLS), the Specially Designated Nationals List (SDN) and the Illinois Department of Health and Family Services (HFS) Office of Inspector General (OIG) sanction list and a Nationwide Healthcare Fraud & Abuse Scan, US Patriot Act Terrorism Check and Nationwide Sex Offender Registry) * *must be conducted within 12 months of the rotation start date*
- ☐ 9-panel drug screen for: Amphetamines, PCP, Cocaine, Methamphetamine, Barbiturates, Benzodiazepines, Opiates, Propoxyphene and Methadone* *must be conducted within 12 months of the initial rotation start date*
- ☐ TB: PPD, Chest X-ray or QuantiFERON-TB Gold *needs to be submitted annually to your institution*
- ☐ CPR / BLS card must be current *needs to be submitted annually to your institution*
- ☐ Flu Vaccine *needs to be submitted annually to your institution*
- ☐ MMR, Varicella, Hepatitis B (declination statement available for Hepatitis B)
- ☐ Proof of health insurance coverage
- ☐ Proof of professional liability insurance (if applicable)
- ☐ Epic access required: **Yes or No**
- ☐ Preferred Preceptor: _____
- ☐ Preferred unit: _____
- ☐ Review and complete attestation of Student- UI Health Clinical Placement Orientation PowerPoint

Please ensure your institution has all complete information including complete legal name, date of birth, and the last 4 digits of the social security number. This information is used to create University Identification Numbers (UIN) and Network Identification (NetID) for Epic access.

Covid Vaccine no longer a requirement

Even if you are an employee of UI Health, you must complete all documents and ensure background and drug screen are conducted within 12 months of the initial rotation start date

UNIVERSITY OF ILLINOIS HOSPITAL AND CLINICS
MANAGEMENT POLICY AND PROCEDURE

NO: HR 1.05
APPROVAL DATE: November 11, 2025
EFFECTIVE DATE: November 17, 2025

SUBJECT: Dress Code and Appearance Policy

OBJECTIVE

To provide guidelines of the University of Illinois Hospital & Clinics ("Hospital") Healthcare Personnel with a focus on meeting patient care needs and expectations in addition to regulatory or legal requirements of professionalism and hygiene in accordance with the standards.

DEFINITIONS

For the purpose of this policy, the following definitions apply:

Professional Attire: Employees are the most important representatives of our organization. Dressing professionally refers to wearing uniforms, business/business casual clothing, and accessories appropriate for a professional healthcare workplace. Appearance should be mindful of our patients' preferences and provide confidence in the care provided.

Hospital Healthcare Personnel: Individuals who directly or indirectly provide or participate in care, treatment, or services for or on behalf of the University of Illinois Hospital & Clinics and all its locations, or who interact with patients or families including but not limited to, permanent and non-permanent workers, agency personnel, contract personnel (clinical/non-clinical and skilled/professional), volunteers, credentialed practitioners, residents, and fellows.

Direct Patient Care: Includes health care professionals, diagnostic staff, and nutritional services employees.

Skilled Professional/Non-Clinical: Information services, housekeeping, groundskeepers, facility management staff, transportation staff, security.

First contact areas: Service locations where patients and guests first interact with the hospital; includes all reception, registration, and information desk areas.

Soiled garments: Clothing of any kind which has become visibly soiled or contaminated by blood or other body fluids in the course of patient care.

Uniforms: Clothing which is determined by Hospital Leadership and defined for consistency of appearance within a unit.

Hygiene: Refers to maintaining the body's cleanliness.

UNIVERSITY OF ILLINOIS HOSPITAL AND CLINICS
MANAGEMENT POLICY AND PROCEDURE

POLICY

This policy is in effect during an employee's or healthcare personnel's working hours. Professional attire, uniforms, and hygiene must demonstrate the Hospital's high standards for clinical excellence, safety, and care. Hospital employees and healthcare personnel will dress in a manner that conveys professionalism and is appropriate for their job function. Managers and supervisors are responsible for interpreting and enforcing dress and grooming standards in their work areas. Individual departments are authorized to establish standards of cleanliness, grooming and dress for employees under their direction in their departmental policies, provided that these standards are fully understood and are uniformly and consistently enforced. Individual departmental policies must be reviewed by Hospital Human Resources prior to implementation.

The Hospital may allow themed or decorative clothing to recognize certain holidays, seasons, and events*. Employees will be able to dress accordingly on the designated day(s), as long as it does not compromise patient care or safety. Safety concerns are paramount when applying this policy in both office and non-office environments. Non-compliance may result in disciplinary action.

PROCEDURE

A. General

1. Hospital Identification Badges (ID) must be worn by all Hospital healthcare personnel on the upper torso with name, title and picture clearly visible and in accordance with the hospital's ID policy (HR 3.05 Identification of Persons Visiting or Performing Duties within the University of Illinois Hospital and Clinics). Badge buddies will be displayed if they have been provided.
2. White lab coats should be worn in the Hospital and clinics only by clinical staff. Employees prohibited from wearing white lab coats include support staff, non-clinically trained staff, and staff not involved in direct patient care.
3. Undergarments should be discreet, avoiding visible exposure.
4. Hosiery and shoes should be appropriate for the work environment, clean and in good repair.
5. Jewelry should be appropriate, professional, and safe for a clinical environment. Jewelry (including pins) should not display any political affiliation.
6. Clothes should be clean and appropriate for a professional and clinical environment.
7. Direct supervisors have the discretion to require that an employee cover (e.g., long sleeve shirt, gloves, etc.) any tattoo(s) or combination of tattoos that could be reasonably perceived ** as offensive.
8. Full head coverings, other than religious, part of a uniform, or for medical reasons is not appropriate.
9. Hair should be clean in appearance. In patient contact situations, long hair must be pulled back to prevent contact with the patient, equipment, or supplies. Facial hair should be clean and professional in appearance.
10. Personal and oral hygiene should be appropriate for a professional and clinical environment.
11. Employees required to wear uniforms must comply with relevant uniform guidelines.

UNIVERSITY OF ILLINOIS HOSPITAL AND CLINICS
MANAGEMENT POLICY AND PROCEDURE

12. Scents of any sort (examples: perfume, smoking) should be indiscernible.
13. Nails and hand hygiene should adhere to policy IC 1.03 Hand and Nail Hygiene.

The following example of unacceptable apparel is not exhaustive but is provided as guidelines and for illustration:

a) T-shirts, shorts, athletic apparel (examples include jogging and/or sweat suits, sweatshirts, or sweatpants), tops with hoods.
b) Revealing clothes: sheer clothing, low necklines or clothing that reveals the chest or back.
c) Denim jeans and/or denim in appearance.
d) Clothing with inappropriate language or reasonably perceived ** as offensive design printed on it.
e) Logos from other vendors or healthcare organizations.
f) Clothing (including lanyards) that displays any political affiliation.

*Divisional or executive leadership may designate a day in which designated, or all staff may wear a shirt with wording specific to this organization (i.e.,: participation in St. Baldrick's event, organization participation in a community event, etc.).

**Concerns over "reasonably perceived" will be escalated to, and determined by, employee relations.

B. Direct Patient Care— Direct patient care personnel must adhere to federal and state regulations and guidelines, which include but are not limited to: Occupational Safety and Health Administration (OSHA), Food and Drug Administration (FDA), Centers for Medicare & Medicaid Services (CMS), and Illinois Department of Public Health (IDPH), regarding care delivery in the clinical setting for patient care, treatment, and services. The same professional standards as set forth in the dress code policy and guidelines above will be adhered to.

1. University of Illinois Hospital & Clinics will determine employees' scrub apparel and reserves the right to determine a particular color of scrub apparel.
2. Restricted area scrub uniforms provided by the Hospital are property of the Hospital and are not to be removed from the facility.
    a) A full-length buttoned lab coat with UIH identification badge (ID) must be worn over restricted area scrub wear when outside the restricted areas.
3. Scrub uniforms purchased by the employee should conform to general dress code standards. Scrubs designated for restricted areas and other printed wording are unacceptable. See LD 3.08 Authorization, Use and Distribution of Scrub and Lab Coat Apparel for definition of Restricted Areas.
4. Healthcare personnel providing direct patient care will dress in a manner that conveys professionalism during all direct patient care activities.
    a) Credentialed providers, residents, and fellows are encouraged to wear business professional attire with a white coat. They can alternately wear scrubs (preferably with a white coat) while in the inpatient, procedure area, emergency room, or when moving between inpatient and outpatient setting within a given day. Scrubs should be in the blue to green palette (outside of restricted area scrubs).
        1) As providers enter or leave the building before or after a

shift (prior to or after patient care responsibilities), they are not held to the above requirements as this time is outside of working hours and this policy does not apply outside of working hours.

2) When on-call and coming into the hospital for emergent care of a patient, the above guidelines can be waived.

b) RNs will be required to wear uniforms in a black color with the UI Health logo embroidered.

1) Long sleeve shirts or undershirts that are worn under scrubs must be solid black or white (free of any print).
2) Nursing scrub jackets must match the designated uniform color with the UI Health logo embroidered.
3) Psychiatric nursing staff may wear business appropriate attire as an alternative to a scrub uniform while providing direct patient care. All business appropriate attire worn by psychiatric staff must conform to the general dress code standards listed in this policy. Any clothing or apparel worn in psychiatric settings must pose no additional risk to patients.
4) Certified medical assistants, medical assistants, nurse technicians, behavioral interventionists, patient safety attendants, and emergency medical technicians will be required to wear scrub uniforms in a hunter green color.
5) Long sleeve shirts or undershirts that are worn under scrubs must be solid hunter green or white (fee of any print).
6) Scrub jackets must match the designated uniform color.

5. All other clinical patient care providing employees (not mentioned above) who choose to wear scrubs will be required to wear a scrub color allowable from the UI Health blue or green color palette. Scrub top and bottom must be the same color. Scrub jackets must match the designated uniform color.
6. Childcare departments (e.g., Pediatric unit, PICU, Family Medicine, and Child and Youth Center) may choose to wear a printed scrub top with uniform pants of the designated color, provided it conforms to the general dress code standards listed in this policy.
7. Shoes must be closed-toed and are always to be worn, according to OSHA safety requirements.
8. Soiled garments must not be worn in public areas including the cafeteria.
9. Nails and hand hygiene should adhere to policy IC 1.03 Hand and Nail Hygiene.

Key Words none

References
Hospital Management Policy and Procedure
HR 3.05 Identification of Persons Visiting or Performing Duties within the University of Illinois Hospital and Clinics

IC 1.03 Hand and Nail Hygiene
LD 3.08 Authorization, Use and Distribution of Scrub and Lab Coat Apparel

Addendum none

Rescission Date
April 2024
July 2021
October 2018
December 2015
October 2010
October 2007
October 2004
July 2003
December 2001
December 1998
December 1995

Reviewed by

Policy Owner-Director, Employee Relations

THE UNIVERSITY OF ILLINOIS HOSPITAL AND CLINICS
Chicago, Illinois

CLINICAL PLACEMENT ORIENTATION FOR STUDENTS

Susan C. Vonderheid, PhD, RN
Sheree Reyes, BSN, RN
Nicole Dziedzic

UI Health | UIC

2026

ORIENTATION OBJECTIVES

- Introduce the Mission, Vision and Values at UI Health
- Describe the orientation process, clinical placement requirements, instructions for completing the onboarding process and obtaining student id badges
- List additional tips for a successful clinical experience

MISSION AND VISION AT UI HEALTH

Mission

To advance healthcare for everyone through outstanding clinical care, education, research, and social responsibility

Vision

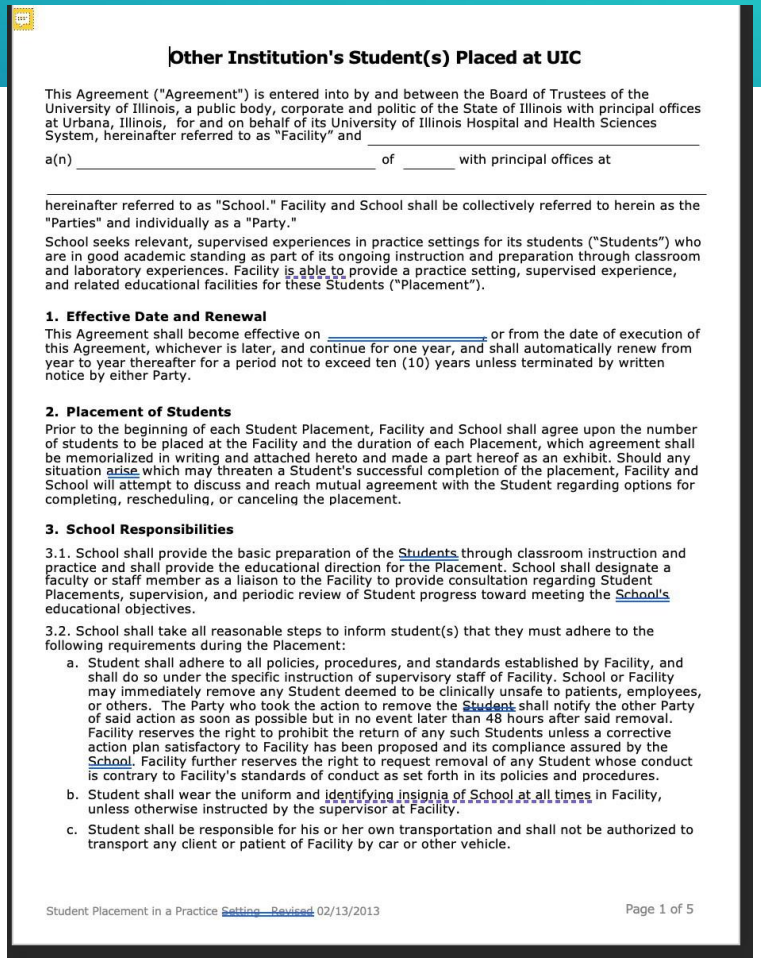
Shaping the future of healthcare through innovative and advanced clinical care

Inclusion: We believe diversity is our strength and do not tolerate discrimination in any form. We recognize and celebrate differences and uniqueness amongst our patients, staff, and faculty to ensure that everyone feels valued and respected.
Compassion: We will treat our patients and their families with kindness and compassion and strive to better understand and respond to their needs.
Accountability: We will hold ourselves accountable as an organization and as individuals to act ethically and responsibly in everything we do, to be excellent stewards of our natural and financial resources and to be transparent in our actions. We will make every effort to reduce waste in all forms, including waste that impacts human health.
Respect: We will act with respect, openness and honesty in our dealings with patients, families and coworkers. We will work collaboratively to promote the well-being of the communities we serve and to advance patient care, education and research.
Excellence: We will work as a team to leverage best practices and innovation in providing the highest-quality care for our patients and families. We will devote ourselves to continuously improve in everything we do.

CLINICAL PLACEMENT PROCESS

AFFILIATION AGREEMENT

- Needs to be current through the end of placement period
- If new or expired, may take 4 to 6 months to process



Other Institution's Student(s) Placed at UIC

This Agreement ("Agreement") is entered into by and between the Board of Trustees of the University of Illinois, a public body, corporate and politic of the State of Illinois with principal offices at Urbana, Illinois, for and on behalf of its University of Illinois Hospital and Health Sciences System, hereinafter referred to as "Facility" and _____

a(n) _____ of _____ with principal offices at

_____

hereinafter referred to as "School." Facility and School shall be collectively referred to herein as the "Parties" and individually as a "Party."

School seeks relevant, supervised experiences in practice settings for its students ("Students") who are in good academic standing as part of its ongoing instruction and preparation through classroom and laboratory experiences. Facility is able to provide a practice setting, supervised experience, and related educational facilities for these Students ("Placement").

1. Effective Date and Renewal

This Agreement shall become effective on _____, or from the date of execution of this Agreement, whichever is later, and continue for one year, and shall automatically renew from year to year thereafter for a period not to exceed ten (10) years unless terminated by written notice by either Party.

2. Placement of Students

Prior to the beginning of each Student Placement, Facility and School shall agree upon the number of students to be placed at the Facility and the duration of each Placement, which agreement shall be memorialized in writing and attached hereto and made a part hereof as an exhibit. Should any situation arise which may threaten a Student's successful completion of the placement, Facility and School will attempt to discuss and reach mutual agreement with the Student regarding options for completing, rescheduling, or canceling the placement.

3. School Responsibilities

3.1. School shall provide the basic preparation of the Students through classroom instruction and practice and shall provide the educational direction for the Placement. School shall designate a faculty or staff member as a liaison to the Facility to provide consultation regarding Student Placements, supervision, and periodic review of Student progress toward meeting the School's educational objectives.

3.2. School shall take all reasonable steps to inform student(s) that they must adhere to the following requirements during the Placement:

a. Student shall adhere to all policies, procedures, and standards established by Facility, and shall do so under the specific instruction of supervisory staff of Facility. School or Facility may immediately remove any Student deemed to be clinically unsafe to patients, employees, or others. The Party who took the action to remove the Student shall notify the other Party of said action as soon as possible but in no event later than 48 hours after said removal. Facility reserves the right to prohibit the return of any such Students unless a corrective action plan satisfactory to Facility has been proposed and its compliance assured by the School. Facility further reserves the right to request removal of any Student whose conduct is contrary to Facility's standards of conduct as set forth in its policies and procedures.

b. Student shall wear the uniform and identifying insignia of School at all times in Facility, unless otherwise instructed by the supervisor at Facility.

c. Student shall be responsible for his or her own transportation and shall not be authorized to transport any client or patient of Facility by car or other vehicle.

Student Placement in a Practice ~~Setting - Revised~~ 02/13/2013 Page 1 of 5

CLINICAL PLACEMENT REQUESTS AND REQUIREMENT FORM DEADLINES

Requests:

- FALL: **July 1st**
- SPRING: **November 1st**
- SUMMER: **April 1st**

Requirements Form:

- FALL: **August 11th**
- SPRING: **December 15th**
- SUMMER: **May 5th**

**All requirements are to be sent directly to your academic institution and they will send to UI Health Coordinator for approval.*

**Any requirements sent to UI Health coordinator directly by student will not be reviewed, your academic institution is to review all requirements*

***** Failure to comply with all the requirements by the deadline date may result in the cancellation of the***

clinical placement.

REQUESTING A CLINICAL PLACEMENT: NON-UIC STUDENTS

- Students should request placement through academic institution *at least 3 months* prior to clinical start date
- This ensures student has time to obtain all requirements

If UI Health employee, have your institution send an initial request with the subject title: ***Clinical Placement Request*** and the following information:

- Student name
- Program: (MSN, BSN, DNP, CNA)
- Clinical rotation start and end dates
- Requested Preceptor: (The individual who has agreed toprecept)
- Project required: Yes or no
- Clinical unit/ Department location
- Student UI Health Employee: Yes or No

Attach Syllabus of the course

Attach affiliation agreement

Attach current COI (general and professional liability coverage)

This process is not applicable to UIC students. All UIC placement requests need to be sent directly to UIC College of Nursing.

UI HEALTH ONBOARDING CHECKLIST

- Students must complete checklist prior to clinical start date

UI Health Onboarding Checklist: External Affiliates – Students

Instructions: Please complete the required UIH onboarding items listed. Once all items are complete, please submit the checklist and below documents to your institution

- ☐ Review the UI Health Core Orientation Manual
- ☐ Sign Mandated Reporter Status in the Core Orientation Manual on page 43. *The school is responsible for attesting to the accuracy and retaining this document for at least 5 years.* (school to keep form)
- ☐ Sign the Orientation Checklist in the Core Orientation Manual on page 44. *The school is responsible for attesting to the accuracy and retaining this document for at least 5 years.* (school to keep form)
- ☐ Sign the Waiver and Release and Confidentiality Agreement. *Please email to* ssoto@uic.edu
- ☐ Review Dress Code and Appearance Policy.
- ☐ Review Hand and Nail Hygiene Policy.
- ☐ Certified background check and sanctions check (includes the OIG List of Excluded Individuals and Entities (LEIE), the Excluded Parties Listing Service (EPLS), the Specially Designated Nationals List (SDN) and the Illinois Department of Health and Family Services (HFS) Office of Inspector General (OIG) sanction list and a Nationwide Healthcare Fraud & Abuse Scan, US Patriot Act Terrorism Check and Nationwide Sex Offender Registry) * *must be conducted within 12 months of the rotation start date*
- ☐ 9-panel drug screen for: Amphetamines, PCP, Cocaine, Methamphetamine, Barbiturates, Benzodiazepines, Opiates, Propoxyphene and Methadone* *must be conducted within 12 months of the initial rotation start date*
- ☐ TB: PPD, Chest X-ray or QuantiFERON-TB Gold *needs to be submitted annually to your institution*
- ☐ CPR / BLS card must be current *needs to be submitted annually to your institution*
- ☐ Flu Vaccine *needs to be submitted annually to your institution*
- ☐ MMR, Varicella, Hepatitis B (declination statement available for Hepatitis B)
- ☐ Proof of health insurance coverage
- ☐ Proof of professional liability insurance (if applicable)
- ☐ Epic access required: **Yes or No**
- ☐ Preferred Preceptor: _____
- ☐ Preferred unit: _____
- ☐ Review and complete attestation of Student- UI Health Clinical Placement Orientation PowerPoint

Please ensure your institution has all complete information including complete legal name, date of birth, and the last 4 digits of the social security number. This information is used to create University Identification Numbers (UIN) and Network Identification (NetID) for Epic access.

Covid Vaccine no longer a requirement

Even if you are an employee of UI Health, you must complete all documents and ensure background and drug screen are conducted within 12 months of the initial rotation start date

STUDENT REQUIREMENTS

Legal name, date of birth and the last 4 digits of the SSN for each student and instructor

Certified background check and sanctions check (includes Nationwide Healthcare Fraud & Abuse Scan, US Patriot Act Terrorism Check and Nationwide Sex Offender Registry) *

9 panel drug screen for: amphetamines, PCP, cocaine, methamphetamine, barbiturates, benzodiazepines, opiates, propoxyphene and methadone*

Immunizations or Titers:

- Measles, Mumps, Rubella
- Varicella
- Hepatitis B or Hepatitis B declination on file
- Annual Influenza Vaccination
- Tetanus (optional)

STUDENT REQUIREMENTS (CONTINUED)

TB: PPD, Chest X-ray or QuantiFERON-TB Gold

CPR / BLS card: Up to date and on file

Epic access required (yes/no)

Project required (yes/no)

See Requirements Form for full list of information needed.

CLINICAL PLACEMENT APPROVAL PROCESS

Clinical placement request to be approved when:

- ✓ Affiliation agreement is current
- ✓ COI is current
- ✓ UI Health onboarding checklist complete
- ✓ All requirements received from academic affiliate
- ✓ Preceptor is available
  - Please include name of preferred preceptor in initial request email
- ✓ Project approved by Dr. Susan Vonderheid (vonde.uic.edu)

* Not completing requirements can delay clinical start date for both UIC and external affiliates.

** Non-UIC UI Health employees are not guaranteed placement due to capacity limits.

UI HEALTH ORIENTATION PROCESS

UI HEALTH ORIENTATION PROCESS: OVERVIEW

- Students Complete:
  - ✓UI Health Core Orientation Manual
  - ✓Epic modules located in Empowers, a learning management system (if Epic access is required)
  - ✓Required documents signed

- UI Health Clinical Placement Coordinator to provide:
  - ✓UI Health student and instructor badge
    - Still required for those who are UI Health employees
  - ✓UIN and NetIDs for Empowers and Epic access
    - If having issues with Epic, please call help desk 312-413-7717.

UI HEALTH ORIENTATION PROCESS: OVERVIEW

Students Submit:

- ✓Signed acknowledgement of Mandated Reporter Status (school)
- ✓Signed acknowledgement of Orientation Complete (school)
- ✓Signed Waiver and Release and Confidentiality Agreement (UI Health)
- ✓UI Health onboarding checklist

Final CLEARANCE to be on-site will be approved by
UI Health's Clinical Placement Coordinator

CORE ORIENTATION MANUAL

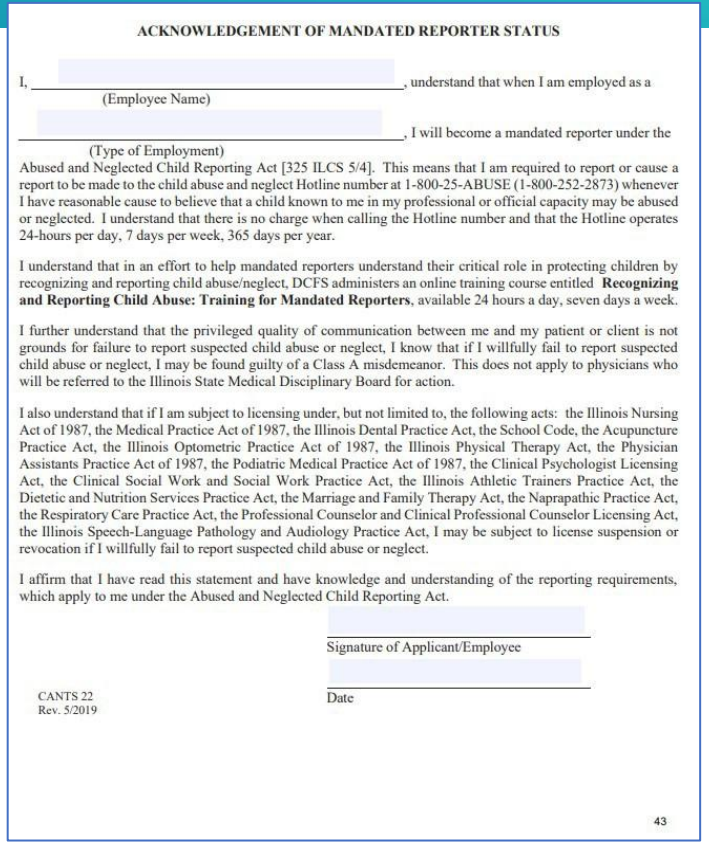
HOSPITAL CORE ORIENTATION

Updated July 2026

Table of Contents

CORE ORIENTATION MANUAL: MANDATED REPORTER STATUS

- Complete and submit to academic institution for retention
- Page 43
- School to retain for a minimum of 5 years.



ACKNOWLEDGEMENT OF MANDATED REPORTER STATUS

I, _____, understand that when I am employed as a
(Employee Name)

_____, I will become a mandated reporter under the
(Type of Employment)

Abused and Neglected Child Reporting Act [325 ILCS 5/4]. This means that I am required to report or cause a report to be made to the child abuse and neglect Hotline number at 1-800-25-ABUSE (1-800-252-2873) whenever I have reasonable cause to believe that a child known to me in my professional or official capacity may be abused or neglected. I understand that there is no charge when calling the Hotline number and that the Hotline operates 24-hours per day, 7 days per week, 365 days per year.

I understand that in an effort to help mandated reporters understand their critical role in protecting children by recognizing and reporting child abuse/neglect, DCFS administers an online training course entitled **Recognizing and Reporting Child Abuse: Training for Mandated Reporters**, available 24 hours a day, seven days a week.

I further understand that the privileged quality of communication between me and my patient or client is not grounds for failure to report suspected child abuse or neglect, I know that if I willfully fail to report suspected child abuse or neglect, I may be found guilty of a Class A misdemeanor. This does not apply to physicians who will be referred to the Illinois State Medical Disciplinary Board for action.

I also understand that if I am subject to licensing under, but not limited to, the following acts: the Illinois Nursing Act of 1987, the Medical Practice Act of 1987, the Illinois Dental Practice Act, the School Code, the Acupuncture Practice Act, the Illinois Optometric Practice Act of 1987, the Illinois Physical Therapy Act, the Physician Assistants Practice Act of 1987, the Podiatric Medical Practice Act of 1987, the Clinical Psychologist Licensing Act, the Clinical Social Work and Social Work Practice Act, the Illinois Athletic Trainers Practice Act, the Dietetic and Nutrition Services Practice Act, the Marriage and Family Therapy Act, the Naprapathic Practice Act, the Respiratory Care Practice Act, the Professional Counselor and Clinical Professional Counselor Licensing Act, the Illinois Speech-Language Pathology and Audiology Practice Act, I may be subject to license suspension or revocation if I willfully fail to report suspected child abuse or neglect.

I affirm that I have read this statement and have knowledge and understanding of the reporting requirements, which apply to me under the Abused and Neglected Child Reporting Act.

_____
Signature of Applicant/Employee

_____
Date

CANTS 22
Rev. 5/2019

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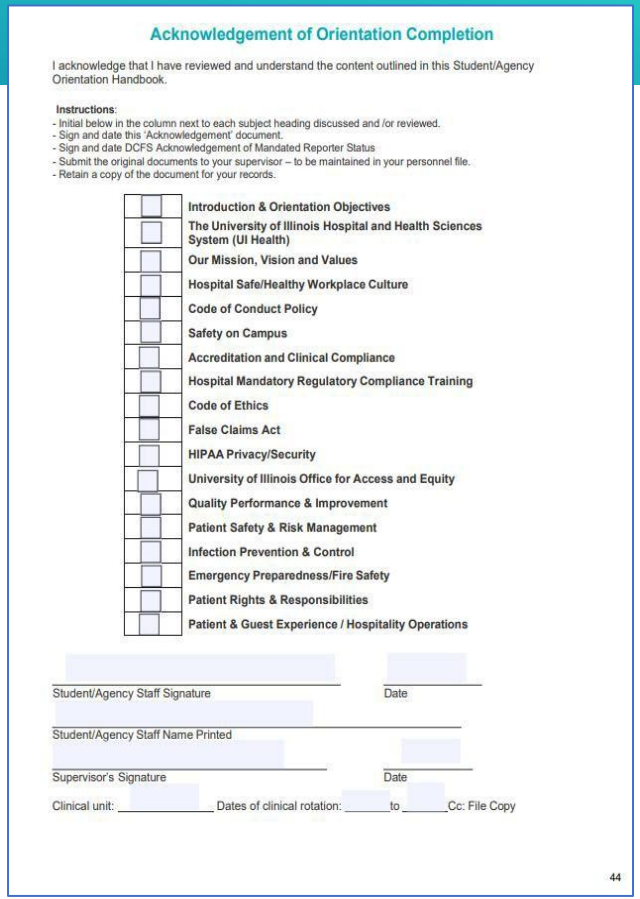
CORE ORIENTATION MANUAL: ACKNOWLEDGEMENT OF COMPLETION

Complete and submit to academic institution for retention.
Page 44

School to retain for a minimum of 5 years.

Supervisor signature to be signed by faculty



Acknowledgement of Orientation Completion

I acknowledge that I have reviewed and understand the content outlined in this Student/Agency Orientation Handbook.

Instructions:
- Initial below in the column next to each subject heading discussed and /or reviewed.
- Sign and date this 'Acknowledgement' document.
- Sign and date DCFS Acknowledgement of Mandated Reporter Status
- Submit the original documents to your supervisor – to be maintained in your personnel file.
- Retain a copy of the document for your records.

	Introduction & Orientation Objectives
	The University of Illinois Hospital and Health Sciences System (UI Health)
	Our Mission, Vision and Values
	Hospital Safe/Healthy Workplace Culture
	Code of Conduct Policy
	Safety on Campus
	Accreditation and Clinical Compliance
	Hospital Mandatory Regulatory Compliance Training
	Code of Ethics
	False Claims Act
	HIPAA Privacy/Security
	University of Illinois Office for Access and Equity
	Quality Performance & Improvement
	Patient Safety & Risk Management
	Infection Prevention & Control
	Emergency Preparedness/Fire Safety
	Patient Rights & Responsibilities
	Patient & Guest Experience / Hospitality Operations

Student/Agency Staff Signature _____ Date _____

Student/Agency Staff Name Printed _____

Supervisor's Signature _____ Date _____

Clinical unit: _____ Dates of clinical rotation: _____to _____Cc: File Copy

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WAIVER AND RELEASE AND CONFIDENTIALITY AGREEMENT

- **Review and Sign** Waiver & Release and Confidentiality Agreement
- Each student signs a Waiver & Release and Confidentiality Agreement
- Submit to UI Health Clinical Placement Coordinator for retention.

UI Health Human Resources | UIC

Waiver & Release and Confidentiality Agreement

In consideration of my voluntary participation in an educational program to be conducted at the University of Illinois Hospital & Health Sciences System, 1740 West Taylor Street, Chicago, IL 60612 (the "Facility") and _____(Student/Observer Name), _____(address), _____(City),_____(State)_____(Zip Code)("Self"), which will involve observing healthcare providers and patients of the Facility, and informational and instructional sessions at the School, the undersigned, on his/her own behalf, or if applicable, on behalf of his/her minor child or ward, and for each of their respective heirs, legatees, personal representatives, and all those claiming by or through them, does hereby discharge, release, and hold harmless The Board of Trustees of the University of Illinois, its trustees, agents, volunteers, servants, employees, and each of their successors and assigns, from all claims, actions, losses, damages, or expenses for personal or bodily injury (including death) and property loss or damage incurred by him or her or arising out of or in connection with his or her participation in the educational program at the Facility and the School.

I further understand and agree that all identifiable patient information, including without limitation the name of a patient and the fact that he or she is being treated by Facility, is strictly confidential and may not be disclosed by me for any reason. I may not access, copy or maintain any such confidential patient information, in either hard copy or electronic form, and if I improperly or inadvertently violate this obligation, I shall immediately report the violation to the person(s) supervising me at the Facility or School. I also understand that any failure to comply with these confidentiality provisions will result in my immediate termination from the educational program. These obligations shall survive termination of this Agreement;

☐ I am age 18 or over and I have read, understand and agree to this Waiver & Release and Confidentiality Agreement.

Signature of Participant _____

Printed name: _____

Date: _____

☐ I am under age 18. My parent or legal guardian named below has signed and agreed to this Waiver & Release and Confidentiality Agreement.

Consent and Release on Behalf of Minor

I am the parent or legal guardian of the above named minor. I certify that I have read and understand the foregoing Waiver and Release and Confidentiality Agreement. I voluntarily agree to the terms of this document on behalf of my child or ward, a minor, and I consent to my child's/ward's presence in the Facility and School and his/her participation in the educational program at these locations.

Signature of parent or legal guardian: _____

Printed name: _____

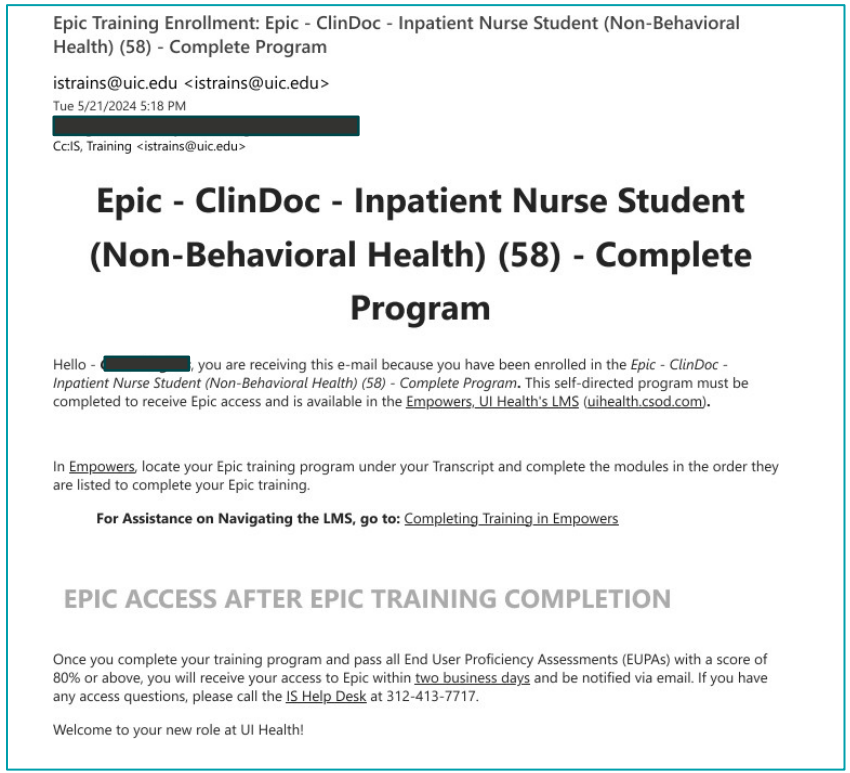
Date: _____

EPIC AND EMPOWERS INFORMATION

- An ARF (access request form) will be placed upon confirmation of placement and approval of requirements
  - UIC College of Nursing coordinators will complete all requests, for any questions, please reach out to UIC
- If having issues with Epic, please call the help desk at 312-413-7717
- Epic learning modules are in Empowers, UI Health's Learning Management System
  - Epic student modules will need to be completed prior to obtaining access

If student is UI Health employee, they will still require student access. *Using employee access is not allowed.*

EPIC MODULE – EMAIL CONFIRMATION



Epic Training Enrollment: Epic - ClinDoc - Inpatient Nurse Student (Non-Behavioral Health) (58) - Complete Program

istrains@uic.edu <istrains@uic.edu>
Tue 5/21/2024 5:18 PM
[redacted]
Cc:IS, Training <istrains@uic.edu>

Epic - ClinDoc - Inpatient Nurse Student (Non-Behavioral Health) (58) - Complete Program

Hello - [redacted], you are receiving this e-mail because you have been enrolled in the *Epic - ClinDoc - Inpatient Nurse Student (Non-Behavioral Health) (58) - Complete Program*. This self-directed program must be completed to receive Epic access and is available in the Empowers, UI Health's LMS (uihealth.csod.com).

In Empowers, locate your Epic training program under your Transcript and complete the modules in the order they are listed to complete your Epic training.

For Assistance on Navigating the LMS, go to: Completing Training in Empowers

EPIC ACCESS AFTER EPIC TRAINING COMPLETION

Once you complete your training program and pass all End User Proficiency Assessments (EUPAs) with a score of 80% or above, you will receive your access to Epic within two business days and be notified via email. If you have any access questions, please call the IS Help Desk at 312-413-7717.

Welcome to your new role at UI Health!

- Please check your email prior to clinical to complete Epic modules assigned.
- Epic accounts are fully activated only after completion of all assigned Epic training.
- This is applicable for BSN, MSN, and DNP students.
- Students that are UI Health employees will still need to complete *Epic student modules.*

UI HEALTH STUDENT BADGE

- Clinical placement coordinator will submit for a student badge
- UIC College of Nursing coordinators will submit for student badges
- Student and Instructor will receive confirmation email to pick up badge

(All student and instructor badges have a green banner regardless of unit/service line. IF your student badge has a different color banner, please contact UI Health Student Placement)

ID Badge Office Location

Student Center West

828 S Wolcott Ave Suite 242 (2nd floor),

Chicago, IL 60612

Even if a student is a UI Health employee, a student badge is needed.

UIC STUDENT EPIC AND BADGE INFORMATION

- UIC College of Nursing coordinators are responsible for submitting *all* UIC student ARFs and badge requests
- Applicable for BSN, MSN, DNP, and PhD students
- Please reach out to your designated UIC College of Nursing Coordinator with questions regarding this process
- Students do not have badge access
  - ✓Your badge is merely to let patients and employees know you are a student

PARKING

- **Paulina Street Parking Structure**
  915 S. Paulina St.
  Visitor, Patient, and Card Access
- **Wood Street Parking Structure**
  1100 S. Wood St.
  Visitor, Patient, and Card Access
- **Parking Rates**
  - Weekday Rates: over 5 hours: $15
  - Weekend/Evening Rates: 3 hours: $9
- **CTA**

Pink Line Polk Stop

Bus Stops:

#12: Roosevelt and Wood

#157 Taylor and Paulina

#7 and #157 Polk Pink Line station

#50 Damen and Taylor

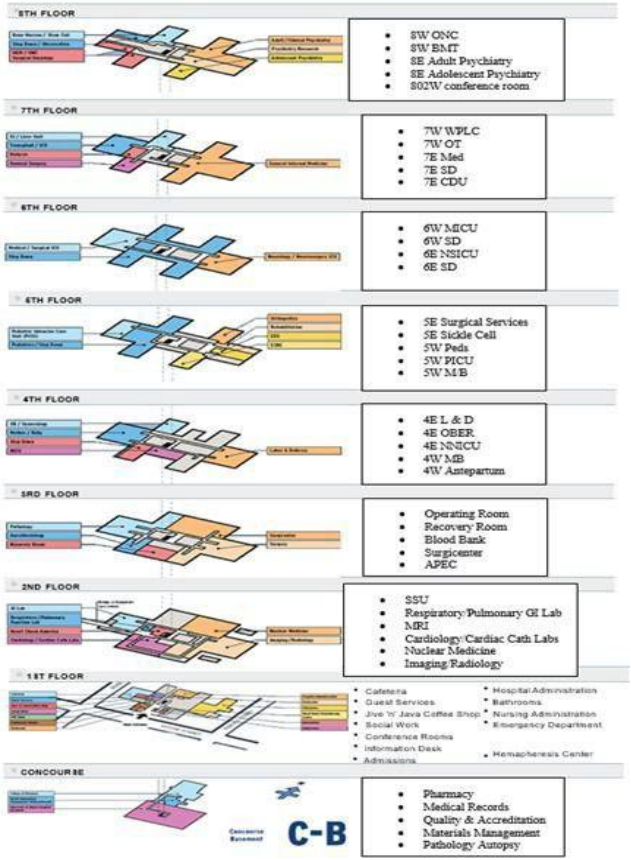
- **Valet Parking**
  - Outpatient Care Center (OCC)
    1801 W. Taylor St.
    Chicago, IL 60612
  - Speciality Care Building (SCB)
    1009 S. Wood St.
    Chicago, IL 60612
  - Hematology/Oncology Clinic
    1818 W. Taylor St.
    Chicago, IL 60612
  - UI Health
    1740 W. Taylor St.
    Chicago, IL, 60612
- **Valet Hours**
  Monday to Friday: 6:30 am to 6:30 pm
- **Valet Rates**
  Patients/Visitors: $9
  Non-patients/Vendors: $20

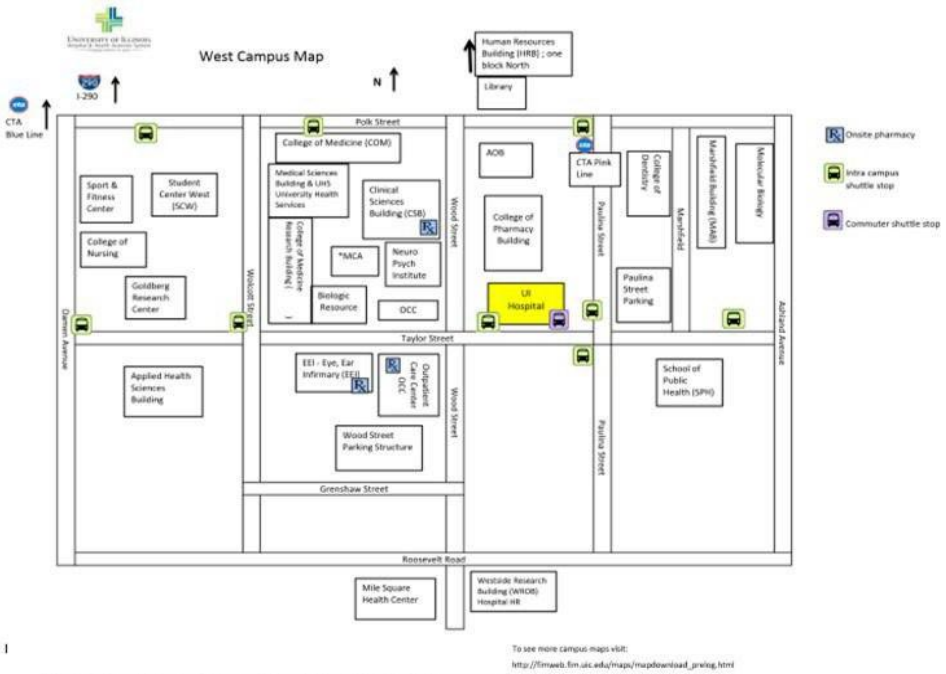
PARKING – REQUIRES UIC BADGE

Wood St. Garage (Parking Office)

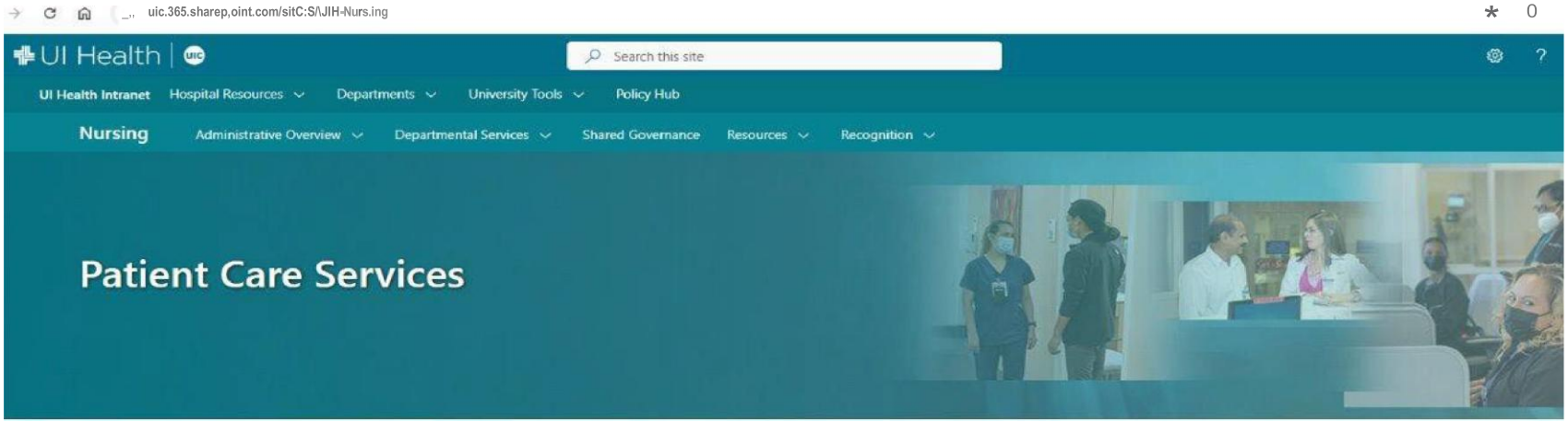
Paulina Garage

MAPS


5TH FLOOR
• 5W ONC
• 5W BMT
• 5E Adult Psychiatry
• 5E Adolescent Psychiatry
• 502W conference room
7TH FLOOR
• 7W WPLC
• 7W OT
• 7E Med
• 7E SD
• 7E CDU
6TH FLOOR
• 6W MICU
• 6W SD
• 6E NSICU
• 6E SD
6TH FLOOR
• 5E Surgical Services
• 5E Sickle Cell
• 5W Peds
• 5W PICU
• 5W M/B
4TH FLOOR
• 4E L & D
• 4E OBER
• 4E NNICU
• 4W MB
• 4W Antepartum
3RD FLOOR
• Operating Room
• Recovery Room
• Blood Bank
• Surgicenter
• APEC
2ND FLOOR
• SSU
• Respiratory/Pulmonary GI Lab
• MRI
• Cardiology/Cardiac Cath Labs
• Nuclear Medicine
• Imaging/Radiology
1ST FLOOR
• Cafeteria
• Guest Services
• Jive 'n' Java Coffee Shop
• Social Work
• Conference Rooms
• Information Desk
• Admissions
• Hospital Administration
• Bathrooms
• Nursing Administration
• Emergency Department
• Hemapheresis Center
CONCOURSE
C-B
• Pharmacy
• Medical Records
• Quality & Accreditation
• Materials Management
• Pathology/Autopsy


West Campus Map
N
I-290
CTA Blue Line
Human Resources Building (HRB) ; one block North
Library
Polk Street
College of Medicine (COM)
Sport & Fitness Center
Student Center West (SCW)
College of Nursing
Goldberg Research Center
Medical Sciences Building & Univ. University Health Services
College of Medicine Research Building
Clinical Sciences Building (CSB)
*MCA
Neuro Psych Institute
Biologic Resource
OCC
Wood Street
Wolcott Street
Damen Avenue
AOB
College of Pharmacy Building
UI Hospital
CTA Pink Line
Paulina Street
College of Dentistry
Marshfield
Marshfield Building (MAB)
Molecular Biology
Paulina Street Parking
Ashland Avenue
Taylor Street
Applied Health Sciences Building
EEI - Eye, Ear Infirmary (EEI)
Outpatient Care Center OCC
Wood Street Parking Structure
School of Public Health (SPH)
Grenshaw Street
Roosevelt Road
Mile Square Health Center
Westside Research Building (WROB) Hospital HB
Onsite pharmacy
Intra campus shuttle stop
Commuter shuttle stop
To see more campus maps visit:
http://fimweb.fim.uic.edu/maps/mapdownload_prvisg.html
*MCA = Medical Center Administration; Training room B8 is located within the MCA building. Disclaimer: map not to scale

HOSPITAL NURSING WEBSITE



Chief Nursing Officer

Hughes-Dillard, **Tiesa**

:tlief Nursino OHtcer

l"ies.a Hugfles Dillard, DNP. MBA, RN, NEA-BC

How I see the Chief Nursing Officer (CNO) serving Nursing at UI Health?

I began this journey as a CNO with a vision to elevate nursing excellence at UI Health. loday, I remain committed to the vision of keeping quality, safety, and service at the heart of our mission and continue to drive our excellent patient care outcomes. Through unprecedented challenges, I **have witnessed our nursing team's remark.able resilience, compassion, and determination. It is. an** honor to advocate for these iricredJble professionals and to support them as they lead the way in transforming healthcare. our journey tow,ud Magnet recognition stands as a testament to our collective dedication.

Together, we will continue elevating the nursing profession at UI Health and ensuring that our palienl5 and community receive the best possible care. Working w,th such an ext,aordina,y team is a privilege, and I look forward to the future we will create together.

MAGNET RECOGNIZED

4MII:RICAN NUA:S.IIS

Nurses' Week 2026 Schedule

-IL
71F

ADDITIONAL INFORMATION

INSTRUCTOR LED AND PRECEPTED STUDENT EXPECTATIONS

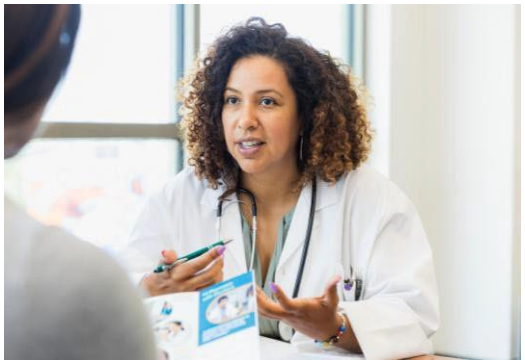
- Students and faculty will receive a unit-based orientation on arrival
- Students are not to reach out to unit directors unless told by clinical instructor
- Nursing students at all levels (DNP, MSN, BSN) are NOT allowed to enter orders. Only a credentialed and privileged practitioner can enter orders in EPIC, or if in a staff nurse role, nurses under the credentialed provider's name
- Students assigned in NICU will receive a unit-based orientation manual

STUDENT EXPECTATIONS: INSTRUCTOR AND PRECEPTOR LED BSN/MSN

- Students need to arrive 30 minutes before start of shift – please be **on time**
- Shoes should be closed-toe
- Students are required to wear scrubs or school approved attire while on the units
- Units may be cold - wear lab coat or school approved jacket
  - No hoodies allowed
- Student badges are to be worn above the waist and visible
- Ensure students have the following:
  - Stethoscope
  - Pen/pencil
  - Pocket sized paper/notebooks
- Minimal unsecured storage space on units

STUDENT EXPECTATIONS: DNP AND PHD

- Business casual or school approved attire
- Units may be cold - wear lab coat or school approved jacket
  - No hoodies allowed
- Student badges are to be worn above the waist and visible
- Minimal unsecured storage space on units



HIPPA

- IM 4.17 HIPAA Sanctions Policy
- Ensure students understand that access does **not** give them the right to look at charts unless relevant to patients in their care

- Be mindful around others when discussing patient care.
- Do not disclose patient information to visitors without the patient's authorization.
- If visitor is not authorized to obtain patient information, talk with your preceptor/instructor.
- Keep printed patient information secure when being transported.

SAFE PATIENT HANDLING AND MOBILITY

- Students are expected to communicate with nurse or nurse tech to discuss the mobility plan for a patient.

- Students **are not allowed** to mobilize patients without assistance and/or training from unit-based staff or educator

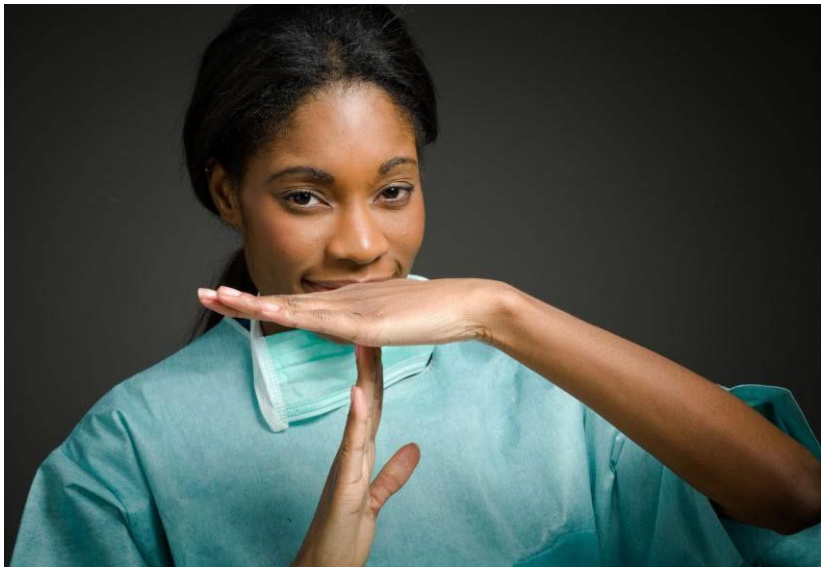
PATIENT SAFETY

- Students report safety events to preceptor or faculty

- Students can report patient safety and reporting safety events

Patient Safety Hotline: x3-4RSK

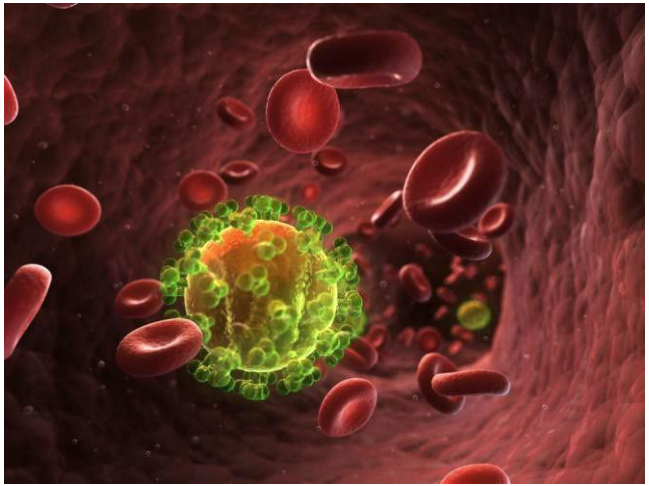
(312-413-4775)



INFECTION PREVENTION

- Hand hygiene is essential for patient safety

- Different types of precautions:
  - Standard precautions
  - Droplet precautions
  - Contact-plus precautions
  - Airborne precautions (students and instructors are to refrain from airborne rooms)



LANGUAGE SUPPORT SERVICES

- In house interpretation (Spanish and Polish)
- Telephonic Medical Interpreters (Available 24/7) by dialing 6-LANG (6-5264)
- Video Healthcare Interpreters (VRI) or using the Audio Remote Interpreter (VRI)
- Onsite agency Healthcare Interpreters (for the languages that are not available in house)
- Documents Translation

THINGS TO REMEMBER

- Faculty need to be present unless clinicals are preceptor-led.

- At the end of the placement both students and UI Health staff will have an opportunity to evaluate the experience and identify areas for improvement.

QUESTIONS?

Thank you for completing clinical at UI Health!

Contact Information for Nursing Clinical Placement:

Sheree Reyes, BSN, RN

Clinical Practice and Professional Development

ssoto@uic.edu

Contact Information for Non-Nursing Clinical Placement:

Nicole Dziedzic

Clinical Rotations Coordinator

ndzied2@uic.edu

clinrotations@uic.edu

Scan QR code to complete the attestation

https://forms.office.com/Pages/ResponsePage.aspx?id=R80C4lZ6qkuZ4-O3Gnx33bRJHlQ-2UFNjOlyGIWoUjVUQjIxSzdKRldURVhRM0ZVOVRZUDNDTUhSTC4u

Appendix N

Advocate HealthCare

Advocate Hospital and Clinics

NURSING STUDENT CHECKLIST

This checklist will help guide your onboarding including myClinicalExchange (mCE), Network ID, Workday as a new or returning nursing student and should be completed prior to the first clinical day.

NEW STUDENTS

- ☐ **mCE:** Create an account in myClinicalExchange. Once your school adds you to a rotation, complete all compliance and documents so that you have a "thumbs up" in the system 2-3 weeks before start date.
- ☐ **Network ID/Epic:** Activate your network ID when you receive the email and set up your password.
- ☐ **Workday:** Check your email (including spam or junk) for Workday login/password details. You will receive two emails – one when the account is created and one with the initial password.
  - ☐ Complete all required modules in Workday. See the Step 2 document for required modules and self-enroll in any unassigned ones. Be prepared to show your instructor your completed transcript on the first day of your clinical rotation.

RETURNING STUDENTS (HAD A CLINICAL ROTATION AT ADVOCATE / AURORA)

- ☐ **mCE:** Complete compliance and documents in myClinicalExchange so you are "thumbs up" at least 2-3 weeks before start date.
- ☐ **Network ID/Epic:** Change the password for your network ID.
- ☐ **Workday:** Check your email (including spam or junk) for Workday reactivation.
  - ☐ Log into Workday and complete annual regulatory modules. If they have not been assigned to you, refer to the Step 2 document for the list and self-enroll.

STUDENTS WHO ARE ALSO EMPLOYEES

- ☐ **mCE:** Complete compliance in myClinicalExchange so you have a "thumbs up" at least 2-3 weeks prior to start date. You are not exempt from this, but can choose the options "waived, I am an employee."
- ☐ **Network ID/Epic:** You will not get a new network ID. You will get a unique Epic ID for your student role. The password is the same as your employee password.
- ☐ **Workday:** Use your employee Workday account to complete all the required student modules. Any modules that you completed as an employee do not need to be repeated.
  - ☐ See the Step 2 document for required modules and self-enroll in any unassigned ones.
- ☐ Please let us know if your employment status changes during the rotation as this may impact your access.

POST-LICENSURE STUDENTS COMPLETING PROJECTS – ADDITIONAL STEPS

- ☐ Carefully review our project page on the student website.
- ☐ Complete our eIRB process using our guide. This is in addition to any school IRB requirements.

ALL STUDENTS

- ☐ Refer to our student website Nursing & MA Student Clinical Placement | Aurora Health Care.
- ☐ To access any locked documents on the website, contact your school clinical placement coordinator or our shared email at ASC-ClinicalAffiliations@aah.org for the password.
- ☐ At the **end** of the semester, complete the student survey in mCE.