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	 ☑ Connecticut Children's Medical Center □ Connecticut Children's Specialty Group, Inc. □ CCMC Affiliates Inc. 	 Connecticut Children's Foundation, Inc. Connecticut Children's Care Network, LLC New York Children's Medical Provider Services, PC 	
	Provision of Care, Treatment and Services	Date Effective:	June 30, 2024
it 'S	Policy: Student Placements	Date of Origin:	April 01, 1997
	Approved By: Administrative Policy Council	Date Approved:	June 19, 2024

I.Purpose

The purpose of this policy is to describe the process for non-medical student placements at Connecticut Children's Medical Center, including all affiliates and subsidiaries of CCMC Corporation (Connecticut Children's).

II.Policy

It is the policy of Connecticut Children's to minimize risk for harm to patients/students by ensuring that students have the appropriate education, skills and documentation in place prior to their placement. Students are expected to have had the appropriate didactic and lab instruction prior to attempting a new procedure. All procedures will be performed according to Connecticut Children's standards. All entries in the medical record made by students must be co-signed by their clinical instructor or a Connecticut Children's staff member as appropriate to the role. Students and instructors will be required to follow infection control practices and health screenings as outlined by organizational leadership.

III. Inclusion/Exclusion Criteria/Indications/Definitions

A. Definitions

- 1. Student placement a clinical or nonclinical experience that is part of a degree program's course curriculum, other than a medical degree program. The student must receive school credit for this experience.
- 2. Placement Coordinator the individual from the student's school who is responsible for coordinating administrative aspects of the student's placement with Connecticut Children's.
- B. Exclusions:
 - 1. Medical students follow a different process through the Medical Education Office and are not addressed in this policy.
 - 2. Students who are engaging in a clinical or nonclinical experience that is not part of a degree program are processed as volunteers or paid temporary employees, depending on the parameters of their particular experience.
 - 3. Students who are engaging in a limited-duration, shadow/observation only opportunity follow the Observers and Shadow Opportunities policy.
 - 4. Students who do not meet the set prerequisites set forth by the rotation will not be accepted for a clinical placement.

IV. Key Points

A.A Clinical Affiliation Agreement and Certificate of Liability Insurance between the student's school and Connecticut Children's must be in place before a student can begin their placement.



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- B.Student placement forms are required for all students (except undergraduate nursing students) to document preceptor and student access requirements. This is located on the Intranet in the Common Links Directory. This form is to be completed by the Connecticut Children's team member that will be precepting the student(s).
- C.Undergraduate Nursing Students placement request will be managed by the electronic student placement software program.
- D.Students and Instructors will be required to complete the following documentation/forms prior to approval of start date and issuance of student/instructor badge which will be completed in the electronic student placement software program:
 - 1. Review of the Student/Instructor Guide to Connecticut Children's
 - 2. Undergraduate Nursing only: Complete the Connecticut Hospital Association Student Orientation Curriculum and complete the related test with a passing score of 90%.
 - 3. Connecticut Children's Code of Conduct policy/Certification Form
 - 4. Connecticut Children's Protection of Confidential Information policy/Confidentiality Agreement
 - 5. Connecticut Children's Acceptable Use policy/Acknowledgement Form
 - 6. Connecticut Children's Workplace Attire policy
 - 7. Connecticut Children's Student Placement policy
 - 8. Connecticut Children's Patient Bill of Rights Poster
 - 9. Health Screening Form*
 - 10. Proof of flu vaccination and other applicable vaccinations in accordance with current Infection Control requirements*
- 11. Background Check *

*Existing team members will be waived in the electronic student placement software program for requirements already met as a condition of employment

E.Instructors teaching nursing clinical groups will also be required to complete/provide the following, in addition to the documents listed above:

- 1. Medication Administration Test with a passing score of 80%
- 2. Nursing Clinical Instructor Competency, if applicable
- 3. BLS CPR Certification
- 4. CT RN Nursing License
- F.Capstone instructors will be asked to review and provide attestation for the Capstone Instructor Roles and Responsibilities and the Student Placement policy.
- G. Students conducting research as part of their placement will also be required to review/complete:
 - 1. CITI Training
 - 2. EPIC's Clinical Research Confidentiality Agreement (if accessing Care Navigator)

H.Learning & Performance will:

1. Review the required documentation/forms for accuracy in the electronic student placement software program.

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- 2. Maintain communication with the School Placement Coordinator regarding approved clinical slots and traditional/capstone student placements.
- 3. Provide the instructor and student the process required to obtain their badge.
- 4. Complete request for electronic health record access as necessary for role. Note: nursing students have read only access to the electronic health record.
- I.Undergraduate nursing students will be managed with the electronic student placement software program in coordination with the School Placement Coordinator including placement start/end dates, names of student(s), and assigned instructor or preceptor.
- J.Undergraduate Nursing Student Clinical Groups:
 - 1. The Clinical Instructor will:
 - a) Collaborate with the resource nurse or their designee to make student assignments based on:
 - (1) Patient acuity level
 - (2) Patient/family/staff needs
 - (3) Skill level of the student and clinical instructor
 - (4) Learning objectives of the student's clinical rotation
 - b) Complete Observer Acknowledgement Form for students with any planned shadows outside of their assigned location and submit to Learning and Performance.
 - c) Verify student's competence in performing basic skills, e.g., vital signs, ADLS before allowing student to perform them independently.
 - d) Communicate clearly with the patient's nurse regarding medication administration at the beginning of and throughout the shift, Document medications administrated by the student under their direct supervision in the Medication Administration Record.
 - e) Enter any documentation on behalf of the student.
 - f) Provide hand-off report to the unit resource nurse at the completion of the shift and as needed.
 - g) Maintain instructor records within the electronic student placement software program annually.
 - h) Contact unit to communicate any absence or illness or the clinical group
 - i) Report any potential safety concerns or safety events to the unit resource nurse.
 - 2. Nursing Capstone Students:
 - a) Capstone Instructor will communicate information to the Connecticut Children's preceptor regarding clinical rotation objectives and student role responsibilities and scope.
 - b) Absence/illness should be reported to the Capstone Instructor and preceptor.
 - 3. Nursing Student will:
 - a) Perform clinical care skills/procedures appropriate to role and level of instruction

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- b) Perform basic skills independently, although still under the supervision of the clinical instructor or preceptor, once competence has been verified by clinical instructor and/or preceptor
- c) Administer medications and intravenous fluids in accordance with Credentialed Practitioner order and Connecticut Children's policies, under the direct supervision of the clinical instructor through all phases from preparation to administration. Students shall use medication administration references approved by Connecticut Children's Pharmacy Department.
- Report any concerns or issues directly to the clinical instructor and/or preceptor. More information can be obtained from resource nurse or unitbased educator.
- e) Report concerns for illness or injury to clinical instructor immediately. Students that feel ill will be asked to leave the rotation for the remainder of the day.
- f) Absence/illness should be reported to the clinical instructor.
- g) Provide hand-off report to the patient's nurse at applicable times, including breaks and end of shift.

4. Nursing Student will not:

- a) Administer chemotherapy
- b) Administer blood or blood products
- c) Perform phlebotomy
- d) Place a peripheral intravenous line
- e) Flush central venous catheters
- f) Perform dressing changes for central venous catheters
- g) Administer medications via central venous catheters
- h) Perform Point of Care testing (POCT)
- i) Independently administer formula or human milk or provide a double check
- j) Administer medications independently
- k) Administer IV push medications
- I) Titrate IV infusions
- m) Change the syringe, bag or tubing for Epidural infusions, Patient Controlled Analgesia (PCA), or Authorized Agent Controlled Analgesia (AACA)
- n) Perform rectal temperatures without direct supervision
- o) Provide care for patients on Airborne Precautions
- p) Provide care for patients under investigation for COVID 19 or confirmed diagnosis of COVID 19
- q) Transport patients off the unit independently
- r) Have access to the medication or supply dispensing system, unless under special circumstances, such as a Capstone student when requested and approved
- s) Place a patient's cardiorespiratory monitor on stand-by mode without consulting with the patient's nurse



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t) Shadow on units other than those assigned unless prior authorization/approval is received

K. Advanced Practice Provider Students:

- I. APP Program Clinical Rotations
 - a) The Clinical Preceptor will:
 - (1) Make student assignments based on:
 - (a) Patient acuity level
 - (b) skill level of the student
 - (c) Learning objectives of the student's clinical rotation
 - (2) Verify student's competence in performing basic skills, e.g., History taking skills, physical exam skills, documentation, family centered rounding before allowing student to perform them independently.
 - (3) Communicate clearly with the patient's nurse regarding daily plan.
 - (4) Communicate with the attending of record.,
 - (5) Co-sign documentation done by the student.
 - (6) Contact unit to communicate any absence or illness or the clinical group
 - (7) Report any potential safety concerns or safety events
 - b)APP Student will:
 - (1) Perform clinical care skills/procedures appropriate to role and level of instruction
 - (2) Perform basic skills independently, although still under the supervision of the preceptor, once competence has been verified by preceptor
 - (3) Report any concerns or issues directly to the preceptor.
 - (4) Report concerns for illness or injury to preceptor immediately. Students that feel ill will be asked to leave the rotation for the remainder of the day.
 - (5) Absence/illness should be reported to the preceptor .
 - (6) Provide hand-off report to the medical team at applicable times, including breaks and end of shift.

c) APP Student will not:

- (1) Flush central venous catheters
- (2) Perform dressing changes for central venous catheters
- (3) Administer medications via central venous catheters
- (4) Perform Point of Care testing (POCT)
- (5) Independently administer formula or human milk or provide a double check
- (6) Administer medications independently
- (7) Administer IV push medications
- (8) Titrate IV infusions
- (9) Change the syringe, bag or tubing for Epidural infusions, Patient Controlled Analgesia (PCA), or Authorized Agent Controlled Analgesia (AACA)
- (10) Perform rectal temperatures without direct supervision
- (11) Provide care for patients on Airborne Precautions
- (12) Transport patients off the unit independently

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- (13) Have access to the medication or supply dispensing system, unless under special circumstances, such as a Capstone student when requested and approved
- (14) Place a patient's cardiorespiratory monitor on stand-by mode without consulting with the patient's nurse
- (15) Shadow on units other than those assigned unless prior authorization/approval is received
- d)Pre-clinical APP Students
 - (1) May be accepted if they are part of a graduate level APP program in didactic year.
 - (2) Work with preceptor for 2-4 hours every week ongoing through didactic vear
 - (3) Will be allowed to observe preceptor in the daily tasks with patients and take a history with patients
 - (4) Will not be allowed to do a physical exam without preceptor direct supervision
 - (5) Will not be able to provide treatment, handle or operate medical equipment. make recommendations regarding specific patients, provider consultations or make decisions about patient care or document in medical record
- II. Pre-APP Students Extended Shadowing
 - A. Extended shadow requests may be accepted for students participating in an undergraduate pre-PA or pre-APRN program that requires a shadow experience as part of their degree requirements. These students are able to shadow once a week for 2-4 hours max for a duration set up by the program and APP preceptor (about 12 weeks).
 - B. Pre-APP extended shadow students are limited to a strictly observational role, regardless of professional credentials, experience, or education, and will be permitted only to observe the preceptor in their daily tasks with patients.
- III. Pre-APP extended shadow students, regardless of professional credentials, experience, or education, are limited to a strictly observational role and may not:
 - (1) Examine and/or provide treatment to a patient;
 - Take a patient history;
 - (3) Handle or operate medical equipment;
 - (4) Make recommendations regarding specific patients, provide
 - (5) consultations, or make decisions about patient care;
 - (6) Document in the medical record or research records; or
 - (7) Otherwise participate in patient care in any manner.
 - Refer also to the Observers & Shadow Opportunities policy for further information on observation parameters and requirements.
- L.Stipend Funds:



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- 1.If the program will be offering payment to Connecticut Children's as part of the affiliation arrangement:
 - For APRN/PA programs: Any stipend funds will be deposited into the Office of Advanced Practice Provider (OAPP) institutional cost center (# 12031050) and will be used to support Connecticut Children's OAPP education and training activities, and the professional advancement model program.

V. References

VI. Related Documents

Acceptable Use Code of Conduct /Certification Form Connecticut Children's Confidentiality Agreement Observer Acknowledgement Form Observers and Shadow Opportunities Patient Bill of Rights Poster Protection of Confidential Information Student Placement (policy) Student Placement Form Workplace Attire

Document Information

Document Title

Student Placements

Document Description

The purpose of this policy is to describe the process for non-medical student placements at Connecticut Children's

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Approval Information

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