College of Nursing and Health Care Professions
Undergraduate Field Experience Manual
2017-2018
Letter from the Dean

Dear Students,

Welcome to the clinical component of your program. The following Undergraduate Field Experience Manual describes student expectations related to clinical preparedness and successful achievement of clinical outcomes. This procedural document is intended to augment the policies contained in the University Policy Handbook. Students should read and become familiar with the University Policy Handbook for general University policies, in addition to reviewing the specific sections of admission, progression, and graduation policies for the CONHCP program in which you are enrolled.

It is the intent of the CONHCP to assist in developing a more consistent field experience for all undergraduate students independent of their field assignment or preceptor. This consistency revolves around appropriate supervision, regular formal and informal feedback, and consistent assessment of students’ clinical proficiencies among other topics and skills. This is an on-going process and we look to each of you and your respective professional and life experiences to aid us in shaping the undergraduate field experience so that it reflects both GCU’s and CONHCP’s missions of developing outstanding future health care professionals. While advisors and faculty are available to guide students with respect to the requirements, students ultimately bear the responsibility of their education and their career.

If you have any questions about the clinical requirements of your program please contact your assigned Office of Field Experience Specialist. They are a valuable resources to guide you through the clinical requirements of your program.

Lisa G. Smith PhD, RN, CNE
Dean, Professor
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Grand Canyon University
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The College of Nursing and Health Care Professions Administration and Faculty welcome you to the clinical component of the program. Below are some College Administration contact information:

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**Office of Field Experience**

Grand Canyon University College of Nursing and Health Care Professions faculty and the Office of Field Experience (OFE) placement team will partner to secure clinical sites and preceptors based upon specialty and location. The assigned placement specialist and clinical faculty advisor carefully monitor each placement to ensure they meet GCU’s high academic standards. The OFE will determine if all of the application requirements necessary to begin the field experience courses have been met. Additional responsibilities of the OFE Counselor are as follows:

- Ensure that students understand the nature of the clinical or practicum experience and the expectations involved.
- Assist in ensuring all required health and safety documents and site requirements have been met.
- Be available to counsel students as situations dictate.
- Communicate with the field experience instructors and faculty as necessary.

**Office of Field Experience Director**

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## Version Record

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<th>Updated</th>
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<td>7/18/16</td>
<td>● Clarification in RN-BSN program versions</td>
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<td>● Lab and simulation expectations</td>
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<td>● Updates to BSN Pre-licensure Curriculum and hours</td>
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<td>● Removed policy information (See University Policy Handbook)</td>
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**Notice:** Reference the latest edition of this manual available at gcu.edu/conhcpofe as policies are subject to change.
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General Guidelines for Undergraduate Field Experiences

This document provides undergraduate students in College of Nursing and Health Care Professions programs the information they need to complete their clinical or practicum requirements. Information contained in this document is to be used in conjunction with the policies outlined in the University Policy Handbook and the Academic Catalog. This document’s purpose it to accompany those documents and provide more information on the processes for the clinical undergraduate programs including:

- Programs with Clinical Hours
  - Bachelor of Science in Nursing (Pre-Licensure)
  - Bachelor of Science in Athletic Training

- Programs with Practice Immersion Hours
  - Bachelor of Science in Nursing (RN-BSN)

Essential Functions of Students

The athletic training and nursing professions require significant physical, mental, and behavioral skills. The essential functions listed below describe what students must be able to do to meet the requirements of being an athletic trainer or a nurse (R4-19-201.I).

<table>
<thead>
<tr>
<th>Categories</th>
<th>Essential Functions</th>
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<td>Motor/Physical Strength</td>
<td>A student must be able to: Possess the physical strength and mobility to safely carry out nursing procedures (lift 50 lbs) and provide routine and emergency care and treatment to clients of all ages in all assigned health care settings.</td>
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<tr>
<td>Perceptual/Sensory</td>
<td>A student must be able to: Use their senses to make accurate clinical assessments and judgments.</td>
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<tr>
<td>Math</td>
<td>A student must be able to: Accurately calculate medication/solution dosages and any needed information specific to client care.</td>
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<tr>
<td>Behavioral/Interpersonal</td>
<td>A student must be able to: Develop mature, sensitive and effective therapeutic relationships with individuals, families and groups of various social, emotional, cultural and intellectual backgrounds; adhere to GCU policies, procedures and requirements as described in the college catalog, student handbook, and course syllabi; and demonstrate ethical behavior, including adherence to professional and student university honor codes.</td>
</tr>
<tr>
<td>(Stability)</td>
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<tr>
<td>Communication</td>
<td>A student must be able to: Communicate effectively and accurately in English using speech, reading, writing, language skills, and computer literacy. Use of appropriate nonverbal communication is also essential.</td>
</tr>
<tr>
<td>Problem Solving/Critical</td>
<td>A student must be able to: Collect, analyze, prioritize, integrate, and generalize information and knowledge to make sound clinical judgments and decisions to promote positive client outcomes.</td>
</tr>
<tr>
<td>Thinking</td>
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</tr>
<tr>
<td>Punctuality/Work Habits</td>
<td>A student must be able to: Adhere to classroom and clinical schedules, complete classroom and clinical assignments, and submit assignments in a timely manner.</td>
</tr>
<tr>
<td>General Health</td>
<td>A student must be able to: Work in an environment that puts one at risk for infection and meet all health and safety requirements to perform client care in assigned clinical facilities.</td>
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</table>

Student Professional Dispositions

One important aspect of the student experience is the fulfillment of professional dispositions—ways of working, thinking, and interacting with others—in three areas: Professionalism, Work Ethic, and Communication Skills. In order to support student development and have clear expectations in these areas CONHCP lists the following key dispositions. Failure to demonstrate these dispositions through behaviors at any point in the program may jeopardize students’ continuation in the program. Students are expected to monitor their development of these professional dispositions, beginning now and continuing throughout their career. The ability to reflect on personal growth, strengths, and challenges is a central characteristic of effective people working in health care. These disposition statements do not replace the University Code of Conduct.

Communication Skills

1) Demonstrate appropriate, professional, respectful verbal communication
2) Demonstrate appropriate, professional, respectful written communication
3) Demonstrate a disposition toward inquiry and problem solving
4) Work collaboratively with students, faculty, and professionals
5) Demonstrate consistently positive attitudes toward learning and/or teaching
6) Accept responsibility for decisions and actions
7) Establish and maintain mutually respectful interactions
8) Demonstrate understanding of university/program organizational chart by communicating “need to know information” to individuals according to the chain of command

Work Ethic
1) Demonstrate regular attendance
2) Demonstrate punctuality
3) Complete work in a timely manner
4) Demonstrate organizational skills
5) Know and observe all pertinent policies and procedures
6) Demonstrate a disposition toward personal ownership of learning and professional development

Professionalism
1) Demonstrate a commitment to work with clients, their families, students, faculty, and staff in appropriate, professional, and respectful ways
2) Demonstrate an awareness of community, state, national, and world contexts that have an impact on the profession and the learning process
3) Treat everyone fairly, equitably, and respectfully
4) Accept constructive criticism and adjusts performance accordingly
5) Express and demonstrate interest in and enthusiasm for teaching/learning
6) Adapt to new and diverse teaching/learning situations
7) Adapt to differences among people including differences of SES, gender, age, ability, sexual orientation, race, ethnicity, religion, language, etc.
8) Maintain confidentiality about all student, client, faculty, and staff records unless disclosure serves a professionally compelling purpose or is required by law
9) Demonstrate discretion when discussing colleagues, faculty, field sites, and personal information
10) Respect the points of view of others
11) Contribute meaningfully, appropriately, professionally, and respectfully to discussions by asking questions, giving opinions, and listening to others
12) Project an appropriate professional appearance in professional settings
13) Project an appropriate professional and respectful demeanor
14) Be open to leadership and opportunities for growth
15) Understand and practice professional ethical standards
16) Recognize personal at risk behavior: Behavioral choice that increases risk where risk is not recognized, or is mistakenly believed to be justified
17) Recognize personal reckless behavior: Behavioral choice to consciously disregard a substantial and unjustifiable risk
18) Acts overall in a manner that furthers the interests of others (enlightened self-interest): Enlightened self-interest refers to the understanding and trust that what a person does to enhance another's quality of life enhances one's own quality of life to a similar degree. More simply put, it is the idea that "what goes around comes around"
19) Utilize social media responsibly, avoiding issues regarding privacy and confidentiality by not communicating information regarding your clinical experiences or documents contained in a client record.

Professional Boundaries
Professional codes of conduct are the foundation for caring relationships. These relationships exist primarily during the student’s education within the timeframe of their enrollment in the nursing program. These relationships are developed between client-nurse, student-faculty, faculty-faculty, and student-student. The student – client relationship exists within the timeframe of the nursing course. The National Council of State Boards of Nursing has developed a document that provides the basis for understanding the boundaries for such relationships. Students receive a copy of this document in one of the first nursing courses. It is also available at https://www.ncsbn.org/ProfessionalBoundaries_Complete.pdf

Professional Dress
Nursing students have a specific dress code listed below. All other students are expected to dress in business casual attire. All students are expected to present themselves as representatives of Grand Canyon University’s program.
Reports of unprofessional behavior will result in the student being counseled by the faculty and/or the respective Director and initiation of a Code of Conduct form which is subject to review by the College of Nursing and Health Care Professions. Students are expected to follow Grand Canyon University’s official Code of Conduct policy listed in the University Policy Handbook.

**Pre-licensure Student Nurse Uniform Attire**

The student uniform should be worn only for specific scheduled clinical, lab, simulation, or classroom activities.

Any deviations in dress at clinical including simulation lab will result in clinical warning or the student being sent home from clinical and placed on clinical probation. Proper identification MUST be worn at all times in all clinical settings. The uniform and identification requirements of the clinical agency are to be followed.

The uniform consists of:

- Scrubs and scrub jackets may be purchased through the Lopes Shop
  - Wrinkle free purple scrub pants or a skirt below the knees that is purple
  - Wrinkle free purple scrub tops with modest neckline
  - Wrinkle free purple scrub jacket (optional)
- Name Badge, available from the College of Nursing & Health Care Professions. The name badge will show the student’s picture and list their first name, and “Student Nurse”. The name badge must be worn while attending any clinical activity. Name badge will not be worn outside of the clinical agency.
- White or neutral socks or pantyhose are to be worn with the uniform.
- Shoes are to be white leather with white soles and closed heels. Shoe laces must also be white.
- Undergarments should not be visible through the uniform.
- Additional items to be part of the uniform are:
  - Stethoscope with a bell and diaphragm head
  - Penlight
  - Bandage scissors
  - Black and Red pens
  - Goggles/Protective eye wear
  - If a belt organizer is used, it must be white or purple
  - Watch with a second hand
- Optional items:
  - White cotton tee shirts, crew neck or turtleneck, may be worn under uniforms for warmth or modesty.
  - ROTC students may wear their emblem on the uniform top and scrub jacket

**Athletic Training and Pre-Licensure Professional Appearance**

1. When applicable, the clinical facility’s ID must be worn whenever in that facility. Students who do not wear this ID may be asked to leave the facility.
2. Shorts, very short skirts, jeans, tank tops, tube tops, see-through clothing, exercise clothes (acceptable for athletic training when appropriate), and open-toed shoes are not acceptable attire in any clinical agency.
3. Hair should be clean, neatly groomed, pulled-back, and off the shoulder. A natural hair color is required with no purple, blue, etc. Beards or mustaches, if worn, should be neatly trimmed.
4. Only clear or neutral nail polish may be used if desired. Fingernails should be neatly trimmed and free of cracked nail polish. Acrylic nails or any other nail enhancements are not permitted.
5. Permitted jewelry is: one pair of studded earrings, a watch, a plain ring band. No other visible jewelry is acceptable including tongue rings or other facial jewelry. Clear spacers may not be worn in place of facial piercings. Tattoos and any other body art should be covered where possible. Students are directed to follow the agency guidelines when in specified areas such as nursery, labor and delivery, and operating room.
6. Perfume, after-shave lotion, and heavy makeup are not acceptable in the clinical area.
7. Gum chewing is not acceptable.
8. Clothing worn in course activities not requiring student uniform should adhere to professional standards.
   - Women: wrinkle free slacks (dress pants), skirts (mid-calf to about two inches above the knee), blouses, shells, cardigans, blazers or dresses, shoes that cover the entire foot.
   - Men: wrinkle free dress pants, button down shirts, polo shirts (short sleeved shirts with a collar), blazers, shoes that cover the entire foot.
   - Do not wear:
     - Denim material
     - Anything that is see-through, short, tight, or shows too much skin
     - Flip-flops or tennis shoes
9. Cell phone use is not permitted at the nurse’s station or in client rooms. Students are expected to follow agency guidelines and clinical instructor directions regarding appropriateness of cell phone usage in the clinical setting.
Healthcare Specific Regulations

HIPAA Guidelines

As health care providers, one of the covered entities, nurses must be knowledgeable about the various aspects of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). CONHCP offers this guidance below for those persons to ensure compliance with those requirements and asks that all students sign the HIPAA/FERPA confidentiality Agreement. Students are required to do the following:

- Sign the HIPAA Confidentiality Agreement before any involvement in a clinical agency.
- Know and adhere to a clinical site’s privacy and procedures before undertaking any activities at the site.
- Maintain at all times the confidentiality of any client information, regardless of whether the identifiers listed in the “Do not” section of these guidelines have been removed.
- Promptly report any violation of those procedures, applicable law, or CONHCP’s confidentiality agreement by a CONHCP student, faculty or staff member to the appropriate CONHCP clinical instructor or faculty member.
- Understand that a violation of the clinical site’s policies and procedures, of applicable law, or CONHCP’s confidentiality agreement will subject the student to disciplinary action.

Students are not to do the following:

- Discuss, use or disclose any client information while in the clinical setting or outside of clinical unless it is part of the clinical setting.
- Remove any record from the clinical site without the prior written authorization of that site.
- Disclose any information about a client during the clinical assignment to anyone other than the health-care staff of the clinical site.
- Use client information in the context of a learning experience, classroom case presentation, class assignment, or research without attempting to exclude as much of the following information as possible:
  - Names
  - Geographical subdivisions smaller than a state
  - Dates of birth, admission, discharge, death
  - Telephone and fax numbers
  - E-mail addresses
  - Social security numbers
  - Medical records or account numbers
  - Certificate/license numbers
  - Vehicle or device numbers
  - Web locators/Internet protocols
  - Biometric identifiers
  - Full face identifiers
  - Any other unique identifying number, characteristic, or code
  - All ages over 89
  - Access any client information unless client is clinical assignment.
  - Disclose any personal health information to any entity not requiring PHI for health care purposes without their consent.

OSHA Guidelines

Please review OSHA training for Healthcare training at this OSHA site. Students should review all topics across the ribbon including: Culture of Safety, Infectious Disease, Safe Patient Handling, Workplace Violence, Other Hazards, and Standards/Enforcement.

FERPA Guidelines

Students should refer to the University Policy Handbook for the FERPA policy. Students must complete the HIPAA/FERPA Form prior to starting clinical.

Transportation/Travel to Clinical Sites

Course faculty and the administrator work to put together clinical rotations using a combination of agencies that would provide a varied experience for the students in accordance with the course objectives. When students join the profession, they will be working in different types of settings over their career. Exposure to those settings now, will make them comfortable and competent regardless of which setting they choose to apply to and be employed by.

Agencies that accept nursing students for learning experiences have restrictions based on the number of students that each agency can accommodate at one time and the days that the agency is available to host students. These agencies are providing mentoring and teaching as part of their professional commitment to supporting the next generation of nurses, but they are not paid for their time or
obligated to serve. Therefore, sometimes it takes a combination of agency placements to meet the required clinical hours, and they may be some distance away.

Students must provide their own transportation to the clinical sites and other off campus locations which may be required for nursing class or clinical experiences. Clinical sites may be within a 100 mile radius of the program location. GCU, in conjunction with these agencies, makes every attempt to minimize the distance that students travel to their clinical experience, but sometimes additional travel is unavoidable. Attending clinical can be challenging, the students’ learning experience is a valuable one and will guide their future as a well-prepared professional.

**Student Travel**

Athletic Training students are required to provide their own transportation to these clinical rotation sites, and must be supervised by a Clinical Preceptor (CP). Travel time may not be logged for clinical contact hours. Please see the student driver waiver in the University Policy Handbook for more information.

Providing or obtaining transportation to and from the clinical sites and paying for all associated costs (i.e. fuel, parking, permits, etc.) is the responsibility of the student.
Bachelor of Science in Nursing (Pre-licensure)

The following section provides information on the Bachelor of Science in Nursing (Pre-licensure) program, specifically. This section contains information regarding the clinical experiences that students must adhere to, in addition to the policies explicit in the University Policy handbook.

BSN Pre-licensure Clinical Placements

All students in the BSN pre-licensure program are assigned an OFE Counselor and will be scheduled for an appropriate Level 1, Level 2, Level 3, and Level 4 clinical experiences to align with progression of didactic courses which form the core of the program. The Counselor will work with students to ensure all health and safety and site required documents are verified and on file prior to clinical placement. It is the student’s responsibility to work to complete these requirements timely to ensure successful placement. Students will typically be notified a minimum of a month in advance of the beginning of clinical assignments. Transition to Practice Residency is a different process that is competitive and requires a preceptor. Students will be sent information on this program during their Level 3 experience.

myClinicalExchange (mCE)

Clinical rotations in Arizona are reserved using mandatory database systems that all users must register for and participate in as part of regional pre-licensure nursing education management processes. Students are required to complete an online orientation program as part of their clinical education experience. Students onboard for clinical experiences through OFE or myClinicalExchange (mCE), a web-based automated tool used to operate, administer, and manage clinical placements. Students cannot be entered into a clinical rotation unless they are registered in mCE. mCE uses a Pay-Pal system to charge individuals for setting up their account. Each student will be charged a fee of $35 per year plus the Pay-Pal transaction fee of $1.50. The year begins with the date the mCE profile is first created. Each student will create their own account by going to the following link: https://register.myclinicalexchange.com. Students should take immediate action upon receiving this notification. mCE assists in placing students for valuable learning experiences. If students require any additional information, they should contact their OFE Counselor.

Clinical Experiences for RN Programs

A registered nursing program shall provide clinical instruction that includes, at a minimum, selected and guided experiences that develop a student's ability to apply core principles of registered nursing in varied settings when caring for:

- Adult and geriatric clients with acute, chronic, and complex, life-threatening, medical and surgical conditions;
- Peri-natal clients and families;
- Neonates, infants, and children;
- Clients with mental, psychological, or psychiatric conditions; and
- Clients with wellness needs.

A nursing program may utilize simulation in accordance with the clinical objectives of the course.

Skills Laboratory and Simulation Experience

Skills is an inclusive term for psychomotor skills that includes rationale, critical thinking, physical assessment, and drugs and solutions. The Skills Lab is where students will be introduced to new skills, be expected to practice, and be evaluated on their skills. Simulation activities will be integrated throughout the curriculum.

As students progress through their nursing program, they will spend time in the skills lab each semester, whether they are learning new skills, reviewing previously learned skills, or being evaluated in preparation of clinical. Simulation activities will be a key component of all these elements, whether it is using a simple task trainer, a complex full bodied simulator, or a peer. Critical thinking is encouraged by incorporating the rationale for the learning objectives as well as understanding the nursing assessments and responsibilities that accompany these skills. Evaluation is a continuous process utilizing peer evaluations, course skills testing and clinical experiences. The lab and simulation faculty and staff collaborate with the course faculty to coordinate nursing theory and clinical labs.

Students have the opportunity to practice independently, with peers and with faculty to develop nursing skills. How much time students dedicate to practice is dictated by how quickly they learn and by the difficulty level of the skills. Practice is completed on students’ own time and testing may either be on their own time or during scheduled class/clinical time (course dependent). Currently there is no mandatory time requirement for practice; therefore, it would be beneficial to include lab practice time into their weekly schedules.

The skills lab is an integral part of the students’ nursing education, where they have the opportunity to overcome their own fears and insecurities while working with a variety of task trainers, simulators, and actual hospital equipment. By using the provided equipment...
and supplies, students are able to simulate a clinical environment where they have the ability to learn and practice safely without causing harm to their clients. The clinical setting is not a practice setting.

The primary goal of the skills lab is to provide an environment for students to become competent with their nursing skills and thereby becoming a safe practitioner while working towards excellence in nursing.

**Student Skills and Simulation Lab Responsibilities**

1. The skills lab is an extension of students’ clinical and academic programs. Therefore, all the same requirements for maintaining professional behaviors in both clinical and academic settings apply (i.e., dress and behavior, etc).
2. No food or drink – may cause damage to equipment
3. No children - risk of injury from equipment
4. No cell phones during testing or in student work areas (Please turn phones off) – Can be very distracting to students when testing & practicing. Photographs and video-taping is prohibited during skills lab or simulation.
5. Students are required to wear their student ID at all times while in the lab and follow the recommended dress code of the college.
6. Respect lab personnel and equipment at all times.
7. Review and check lab schedules for open and closed times (posted outside of lab areas)
8. Review the course syllabus for due dates and late assignment policies.
9. Failure to meet deadlines may result in failure to meet course objectives.
10. Review all skills guidelines for each check-off.
11. Practice/Testing areas: Follow directions/signs for use of lab space and equipment. Ask for directions and for location of practice or testing equipment.
12. Students may be assigned equipment for their own use during the semester for certain classes. If they are assigned equipment from the skills lab, it is their responsibility to keep this equipment (i.e. Cath kit or IV tubing) intact and to bring it with them to practice. When they are finished with the supplies for the semester, they are to be returned to the lab.
13. If at any time a student’s equipment becomes faulty, it must be returned to the lab for disposal and for replacement.
14. Do not move simulation equipment or simulated parts (“manikins”) without the help of lab personnel.
15. Do not use betadine on human simulation equipment (“manikins”).
16. Use beds for practice and testing purposes only.
17. Report any malfunctioning, unsafe, or damaged equipment to lab personnel.
18. If students are aware that they have a latex allergy, or suspect that they do, it is their responsibility to notify skills lab personnel. Non-latex gloves and equipment is available upon request.

**Pre-licensure General Health and Safety Requirements**

Students are expected to take measures to maintain their personal health so as not to jeopardize themselves or any client with whom they come in contact. Students who are accepted into the programs must show evidence of the CONHCP required immunizations and diagnostic procedures as required by the clinical agencies utilized. At any time, a student may be required to receive a medical examination if deemed necessary by the faculty for the wellbeing of the student and/or the clients.

As students are in contact with clients in a variety of health situations, it is imperative that they maintain protection against communicable illnesses. In addition, students must meet agency health requirements to enter clinical course work. Students are responsible for updating BLS, personal health insurance, TB screening and Tetanus immunizations when needed. Students will not be allowed to participate in clinical experiences unless all agency and GCU requirements are current. Any student that falls out of compliance due to expired documentation will immediately be restricted from clinical participation until renewed documentation is provided and coinciding faculty will be notified. Missing clinical may jeopardize a student being successful in the program. All students will be contacted early in their program by the Office of Field Experience and provided guidance on the proper submission of required health and safety documentation.

Students will adhere to all guidelines for Standard Precautions within the clinical agencies.

*Required Prior to Starting BSN Clinical Coursework*

Upon acceptance into the nursing program, and prior to starting the major coursework and clinical phase of the program, students must complete the following:

1. Sign the Health Insurance Portability and Accountability Act (HIPAA) Confidentiality Agreement before any involvement in a clinical setting.
2. Attend College of Nursing and Health Care Professions training or an approved in-classroom clinical instruction on requirements relating to patient privacy.
4. Provide the following health information to the Office of Field Experience at least two weeks before the semester start date where the student will begin their clinical coursework. Some requirements will need to be updated after the initial screening/immunization. Please refer to the Guidelines for Undergraduate Field Experience Manual for additional information.
   - Health history
- Physical exam
- Current health insurance coverage
- Proof of immunization and/or immunity:
  - Tuberculosis (TB) screening
  - MMR (measles, mumps, rubella)
  - Varicella Zoster (VZV)
  - Tetanus-Diphtheria-Pertussis (Tdap)
  - Influenza
  - Hepatitis A (recommended; not required)
  - Hepatitis B (recommended; a signed waiver is required if the vaccination series is not completed or declined by the student)
- Submit a Professional Rescuer CPR course completion card through an approved CPR provider. Online-only courses will not be accepted. The certification has to remain current throughout the program.
- Submit an Arizona Department of Public Safety Fingerprint Clearance card.

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<tr>
<th>Vaccination Requirement</th>
<th>Details</th>
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<tr>
<td><strong>Tuberculosis (TB)</strong> For continued enrollment – required annually</td>
<td>Initial Tuberculosis testing must be a 2-step PPD (repeated PPD). If the first PPD is negative, a second skin test is required within 7 – 21 days. Subsequent tuberculosis testing is a one-step PPD repeated annually. The skin test reaction should be read between 48 and 72 hours after administration. A patient who does not return within 72 hours will need to be rescheduled for another skin test. A TB test is valid for one year. TB records must be current and on file. For positive skin tests, an annual symptoms checklist is required and date of positive conversion provided. CXRs will be required only if the clinical site requests this. A chest x-ray is valid for 5 years. The QuantiFERON®-TB Gold blood test may be accepted in lieu of the PPD. The PPD is not contraindicated for anyone including pregnant women, persons who are HIV-infected, or persons who have been vaccinated with BCG. Evaluation will be made on an individual basis.</td>
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<tr>
<td><strong>MMR: Measles, (Rubeola), Mumps, Rubella</strong></td>
<td>Students must show proof of immunity (lab evidence indicating positive MMR titers). It is not sufficient to report having had any of these illnesses or vaccinations as a child. Titors must indicate adequate protection. Equivocal results are considered negative. Students that do not have evidence of immunity will need two doses of MMR vaccine, separated by at least 28 days. If you have a medical condition which does not allow current immunization, then you may sign a waiver and upload it into your student portal to document your medical exception. Evaluation will be made on an individual basis.</td>
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<tr>
<td><strong>Tetanus- Diphtheria- Pertussis (Tdap)</strong> For continued enrollment - required 10 years from date of last vaccine.</td>
<td>Documentation of Tetanus-Diphtheria with Acellular Pertussis vaccination administered within the past 10 years. If you have a medical condition which does not allow current immunization, then you may sign a waiver and upload it into your student portal to document your medical exception.</td>
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<tr>
<td><strong>Influenza (Flu)</strong> For continued enrollment - required annually.</td>
<td>Flu vaccines are available from late September through early May. Students are required to have a current flu vaccine on file in order to enter the clinical setting. Influenza vaccine is required annually. If you have a medical condition which does not allow current immunization, then you may sign a waiver and upload it into your student portal to document your medical exception.</td>
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<tr>
<td><strong>Hepatitis B</strong></td>
<td>Hepatitis B vaccine (3 doses), Hepatitis B Waiver, or blood titers are required. A lab confirmation must be presented (see below) if using blood titers. You will be required to repeat the vaccine series if there is no immunity. If you have repeated vaccination series and completed a second titer and the results are still negative, equivocal, or borderline, then you may sign a waiver for this disease. A waiver is required if vaccine not administered. If you have a medical condition which does not allow current immunization, then you may sign a waiver and upload it into your student portal to document your medical exception. Evaluation will be made on an individual basis.</td>
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**DPS Fingerprint Clearance Card**

For continued enrollment: Unexpired card required.

Arizona: The FP Clearance card must be submitted prior to beginning the program for all new students. This is not a copy of your actual fingerprints. See the Department of Public Safety for forms &/or questions: http://www.azdps.gov/Services/Fingerprint/

When requesting a fingerprint clearance card, please ask for a "Healthcare Student" card (which encompasses criminal and sex offender checks performed at the federal and state levels). In other words, per the Fingerprint Clearance Card application, students are to indicate that they are Health Sciences Students and Clinical Assistants (ARS 15-1881). When completing the Fingerprint Clearance Card application, please list Grand Canyon University (and its address) as the sponsoring agency.

New Mexico: New Mexico students will not be required to complete their fingerprinting before beginning their BSN clinical course work. New Mexico students must complete their fingerprinting, simultaneously with their background check, prior to starting their level 1 BSN clinical courses; this may not be done earlier. The New Mexico fingerprinting and background check is only good for a 12 month period as set forth by the New Mexico Department of Health. Students whose fingerprints and background checks expire will be required to pay an additional $73.

**Varicella (Chicken Pox)**

Students must show proof of immunity (lab evidence indicating positive varicella titers). Documentation of history of chicken pox or varicella vaccinations are not sufficient. If not immune (negative titer results), student must be vaccinated with two doses of Varicella vaccine, separated by at least 28 days. If you have a medical condition which does not allow current immunization, then you may sign a waiver and upload it into your student portal to document your medical exception. Evaluation will be made on an individual basis.

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**Protocol for Puncture Wounds and Exposure to Blood or Bodily Fluids:**

- Incidents involving any type of needle stick or body-fluid exposure must be reported to the Preceptor/Clinical Faculty/Facility immediately. The clinical faculty will then notify the course faculty and Program Director.
- All students should observe the protocol for safe needle usage when practicing or performing parenteral injections, IV starts, blood draws, or using syringes, or performing any invasive procedure as part of a skills check-off, or in a clinical setting. The student should follow the protocol for needle usage at the agency where clinicals are being held.

**Uncontaminated Needle Stick or Intact Skin Exposure**

A student who accidentally punctures him/herself with an uncontaminated needle or is exposed to blood or bodily fluid that is an intact skin exposure should:

- Wash the area immediately and thoroughly with soap and water
- Follow up with the Canyon Health Center or own Primary Care Provider or other facilities listed on the resource page who will make a determination of Tetanus immunization status and give appropriate prophylaxis or referral for appropriate prophylaxis.
- Complete a student puncture wound incident report (available from the CONHCP) to be filled out by the student and the supervising faculty or instructor who was present during the incident. A copy of this report will be given to the Program Director and College Administrator, and placed in the student’s file.
- Counseling referral and other referrals can be arranged through the health center.
- If student is outside Maricopa County, the Program Director must be contacted for specific information related to resources for medical treatment.
Contaminated Needle Stick or Non-Intact Skin or Mucous Membrane Exposure

If the exposure is via a contaminated needle or if a bodily fluid exposure to non-intact skin, or to mucous membranes the student should continue with the following:

- Wash the skin area immediately with soap and water. If exposure is to mucous membranes, flush area with water immediately.
- Report the incident to their clinical preceptor/faculty/supervisor.
- Immediately seek medical attention. If in an acute care setting, always follow agency guidelines. This may include reporting to either Occupational Health or the agency Emergency Department.
- If student is in the community setting and an agency Occupational Health Center or Emergency Department are not available, the student may report to the Health and Wellness Center on GCU Main Campus if it is between the hours of 8 am – 5 pm, Monday-Thursday or between 8 am – 12 pm on Friday. The Health and Wellness Center’s number is 602.639.6215.
- In the event that this incident occurs in the community setting, when the Health and Wellness Center is not open, GCU recommends that students seek immediate treatment at an Urgent Care or Physician’s Office equipped to treat contaminated needle stick injuries. If follow up visits are required they may schedule them at the Health and Wellness Center on GCU Main Campus. Counseling referral and other referrals can be arranged through the Center.
- If student is outside of Maricopa County, please contact the Program Director for specific information related to resources for medical treatment.
- Student puncture wound incident report (available from the CONHCP) will be filled out by the student and the faculty or instructor who was present during incident. A copy of this report will be given to the Program Director and College Administrator to be placed in the student’s file.
- Financial responsibility for testing and recommended care following an exposure rests solely with the student. This could include testing, evaluation, treatment, and counseling.
- If students have questions about the appropriate medical treatment, the Centers for Disease Control and Prevention recommend that they call a 24 hour assistance line at 1.888.448.4911 (Clinicians’ Post Exposure Prophylaxis Hotline).

Tuberculosis Exposure Plan

According to the CDC, "It is important to know that a person who is exposed to TB bacteria is not able to spread the bacteria to other people right away. Only persons with active TB disease can spread TB bacteria to others."

"Some people develop TB disease soon (within weeks) after becoming infected, before their immune system can fight the TB bacteria. Other people may get sick years later, when their immune system becomes weak for another reason. Many people with TB infection never develop TB disease." http://www.cdc.gov/tb/topic/basics/exposed.htm

Students will not be held from clinical experiences unless they have an active TB infection, not TB disease. Active TB is determined by the use of TB screening and confirmation by qualified health care providers/professionals based on symptoms of active TB. Tuberculosis (TB) exposure potential is defined as any exposure to the exhaled or expired air of a person with suspected or confirmed TB disease. A high hazard procedure involving an individual with suspected or confirmed TB disease is one that has the potential to generate potentially infectious airborne respiratory secretions such as aerosolized medication treatment, bronchoscopy, sputum induction, endotracheal intubation, and suctioning. Workplaces with inherent exposure potential to TB disease:

1. Health care facilities
2. Corrections facilities
3. Homeless sheltersclinics for homeless
4. Long term health facilities
5. Drug treatment centers
6. Post-exposure Procedure

When a Tuberculosis (TB) exposure occurs, the involved student will report the incident to the clinical instructor and the appropriate administrative staff at the involved institution or agency.

a) The student will be counseled immediately and referred to his or her personal health care provider, the local Health Department, or the Canyon Health and Wellness Center.

b) A baseline Tuberculosis Skin Test (TST) should be administered as soon as possible after the exposure.

c) Frequency of follow-up TSTs will be performed per provider protocol. A TST performed 12 weeks after the last exposure will indicate whether infection has occurred.

d) A student with evidence of new infection, (TST conversions) needs to be evaluated for active TB. Even if active TB is not diagnosed, prophylactic therapy for latent TB is recommended.

e) A student with a previously documented reactive TST need not be retested but should have a baseline symptom screen performed following the exposure and repeated 12 weeks after the exposure. If the symptom screen is positive a chest x-ray is required.

f) Any active case of TB must be reported to local Health Department.

A student diagnosed with active pulmonary or laryngeal TB may be highly infectious and will not be able to attend class or clinical experiences until he/she is noninfectious.
1. In order to return to school the student will need to provide documentation from the health care provider that he/she is noninfectious. The documentation needs to include evidence that:
   1. The student has received adequate therapy for a minimum of 2 weeks.
   2. The cough has resolved, and the student is not experiencing chest pain, hemoptysis, fever or chills.
   3. The results of three consecutive sputum acid-fast bacilli (AFB) smears collected on different days are negative.
   4. Note: The Health and Wellness Center can perform TST, but will refer the student to local Health Department for treatment and AFB testing if indicated.

   a) Documentation and Financial Responsibility
      a. After the student returns to school and remains on anti-TB therapy, periodic documentation from their health care provider is needed to show that effective drug therapy is being maintained for the recommended period and that the sputum AFB smear results remain negative.
      b. The student is responsible for all costs related to the exposure incident.
      c. The student’s health records will be maintained in a confidential file within the College of Nursing & Health Care Professions.

Performance Evaluations by Faculty and Preceptor

Clinical Evaluation of Pre-licensure Nursing Students

The preceptor for Transition to Practice (TTP) experiences evaluates the performance of the student and provides that feedback to the Director of the Pre-licensure Program and/or course faculty. If the faculty or preceptor indicates the student’s performance is unsatisfactory on any given day, the preceptor will initiate an informal conference with the student. This informal conference will provide the student with constructive feedback to assist them in on-going improvement in clinical practice.

- Should the student’s performance continue to be unsatisfactory, the preceptor will notify the Director of the Pre-licensure Program and/or course faculty who will assist the clinical preceptor in formulating a written plan explaining areas of concern and behaviors necessary to correct these deficiencies. This process will be completed by mid-rotation, if possible, so the student has time to improve. The course faculty will issue an Early Alert after communicating with the clinical preceptor to acknowledge the preceptor’s concerns and develop a written remediation plan.
- The Course Faculty and/or College Administrator will receive a copy of the written incident report and remediation plan. A copy of the written plan will be placed in the student’s record.
- If the conditions of the Early Alert are not met by the student by the last clinical day, the student’s clinical performance will be unsatisfactory on the final evaluation and the student will receive a failing grade. At any time if a student’s clinical performance in a clinical course indicates an inability to perform at a safe and/or professional level of practice, the clinical faculty and clinical preceptor, in consultation with the C Course Faculty, will assign a failing grade regardless of the point in time such a decision is made. In such case, the student will ineligible to continue in the course.
- If midterm and final evaluations indicate course competencies are not being met, students may be required to complete remediation as determined by clinical faculty and the College Administrator.

After Completing the BSN Pre-Licensure Program

Students are to follow the Graduation Requirements policy found in the University Policy Handbook. http://www.gcu.edu/Policy-Handbook.php

Licensure Examination

In order to be eligible to take the National Council of State Boards of Nursing Examination for Professional Licensure after graduation, students must have completed the BSN program of study and hold a diploma. No exceptions are made to this policy.

Students are responsible for applying to take the National Council License Examination – Registered Nurse (NCLEX-RN) exam for professional licensure through the State Board of Nursing.

The registered nurse licensing requirements are the exclusive responsibility of the State Board of Nursing (Arizona: Nurse Practice Act, A.R.S., Sections 36-1601 et. seq.; New Mexico: Nurse Practice Act, Chapter 61, Article 3, NMSA 1978) and must be satisfied independently of any requirements for graduation from the University. Historically, College of Nursing & Health Care Professions graduates have been successful on the licensure examination. Satisfactory performance on the licensure examination is the responsibility of the graduate and not guaranteed by the College of Nursing & Health Care Professions.

Professional Nurse Qualifications

Section 32-1632 of the Arizona State Board of Nursing Statutes, Chapter 15, Article 2 – Licensing states, “An applicant for a license to practice as a graduate, professional or registered nurse shall file with the board a verified written application accompanied by the prescribed fee and shall submit satisfactory proof that the applicant:

- Completed the basic professional curriculum in approved professional nursing program and holds a diploma or degree from that program.
• Received an absolute discharge from the sentences for all felony convictions five or more years prior to the date filing an application pursuant to this chapter, if applicable.

In New Mexico, per 16.12.2.10 – Licensure Requirements for Registered Nurses and Practical Nurses.
Bachelor of Science in Nursing (RN to BSN)

Practice Immersion Experiences Hours

Practice immersion is an essential component of the post-licensure BSN educational program that combines scholarly activities with practice environment experiences designed to provide in-depth, application-based learning for all students. Practice experiences are designed to help students build and assimilate knowledge for baccalaureate level practice. Practice immersion hours are gained through real world application-based course assignments or approved independent study assignments that are based on current course objectives.

In the practice immersion experience, students will integrate and synthesize didactic learning into the practice environment which is customized to meet their personal and professional goals. Practice experiences are also designed to help students achieve specific learning objectives related to the Baccalaureate Essentials (AACN, 2008) which align with GCU’s RN-BSN Outcomes.

Students are expected to reflect upon and critically think about practice experiences and integrate scholarly reading, educational offerings, and clinical experience to develop case reports that demonstrate increasingly complex and proficient practice with the assistance of a practice mentor who helps them navigate the organization/practice setting. Practice immersion experiences can include a wide variety of sites where they practice, however this boundary must be clearly and distinctly different from current clinical practice. If students are currently functioning in a nursing practice role, they may be able to complete their practice immersion hours in their place of employment, but they will be expected to demonstrate baccalaureate-level practice.

Gaps in learning experiences and professional growth to meet RN-BSN program outcomes are identified using the Individual Success Plan (ISP) and shared with the student’s course mentor. Individual arrangements are made by the student to enhance and expand the practice immersion experience. Practice immersion settings may include ambulatory, inpatient, outpatient, long-term rehabilitative, and subspecialty care. All experiences are logged into the ISP which will be uploaded into the LMS.

Direct client care is not the primary focus of the post-licensure BSN program since basic nursing skills were acquired in the pre-licensure program. Incorporated into this practice immersion experience are hours related to the student’s unique area of interest that support the capstone. The following activities are some examples of time that can be applied toward practice immersion hours, so long as they meet the practice immersion objectives listed in the next section:

- Time spent participating in a population health improvement initiative in a community setting.
- Qualifying course assignments, which have a Practice Hours Portfolio statement in the syllabus information.
- Practice immersion hours are assignment-linked and will be recorded as time logs into LoudCloud at the same time that each qualifying assignment is submitted.

Practice immersion hours do not include:

- Time spent in seminars/conferences that are counted toward a course in which students receive credit
- Time spent traveling to and from seminars/conferences
- Time spent in CE programs
- Time meeting with mentors/faculty/documenting hours
- Non-qualifying course assignments, i.e., those that do not have a Practice Hours Portfolio statement in the syllabus information

Practice Immersion Objectives

The goals of the practice immersion experience is to apply the learning from the student’s research, community health, and leadership courses:

- Demonstrate and apply knowledge of factors to consider when planning to work with a chosen community.
- Demonstrate and apply knowledge of approaches that will facilitate engagement of the community.
- Demonstrate and apply knowledge and skills required to work constructively with communities.
- Demonstrate and apply knowledge related to engagement of organizational leadership and change agents.
- Demonstrate and apply knowledge related to disseminating project findings/data with organizational leadership and change agents.
- Demonstrate and apply knowledge related to completing an evidence-based project to impact population health outcomes.
- Demonstrate and apply Healthy People 2010 principles related to completing an evidence-based project to impact population health outcomes.

These settings may include but are not limited to:

- Schools
- Worksites
- Health care facilities
- Communities
Each setting provides opportunities to reach people using existing social structures. This maximizes impact and reduces the time and resources necessary for program development.

Educational and community-based programs encourage and enhance health and wellness by educating communities on topics such as:

- Chronic diseases
- Injury and violence prevention
- Mental illness/behavioral health
- Unintended pregnancy
- Oral health
- Tobacco use
- Substance abuse
- Nutrition
- Physical activity
- Obesity prevention

**Worksite Practice Immersion Hours**

Practice immersion will facilitate the student’s professional practice goals as well as meet student learning objectives of the BSN program. The site for the practicum is determined in accordance with the student’s interest, skill level, and geographic needs, as well as availability of sites and mentors. Students may be exposed to a variety of clinical settings and have opportunities to interact with professionals from a variety of disciplines. Students may complete their practice immersion hours in their workplace setting as described below. Conditions for approving the worksite for practice immersion experiences include:

- Program goals
- If the placement will permit accomplishment of learning goals
- If the student is doing an evidence-based project appropriate for BSN level study
- Change in current practice
- If the student can identify how his/her practice has changed while incorporating the RN-BSN competencies
- If the project represents a change in the system or leadership activity to improve care
- Clear boundaries
- If the student is in a department other than his/her current work environment
- If boundaries are made clear and agreeable to the faculty, manager, mentor and student

Students may consider their practice immersion hours and practice at their worksite an advantage, allowing them to “give back” to their agency by improving practice. Project ideas are successful when they come from the organization and have buy-in. *Students should ask what the practice problems are within his or her organization and find an evidenced based solution as their intervention. Please note this must be an applied community health AND leadership experience meeting the Practice Immersion Objectives listed in the section above. Worksite setting that do not meet the leadership and community objectives are NOT permitted. If the student chooses to continue to use their worksite regardless of this notification, they are at risk of not earning practice immersion hours and will be required to find another site to complete their EBP.*

**Selection Criteria for Practice Immersion Mentors**

Students will identify, with the input and approval from the course faculty, a mentor for their practice experience. If they have more than one practice location for their practice immersion experience, additional mentors and practice immersion contracts (MOU or affiliation agreement) may be needed and students will work with OFE to ensure proper site clearance documents have been submitted.

Mentors must be a licensed nurse at or above the level of the program either by holding a license in that state that is in good standing, holding multistate license in a compact state, or if practicing in a federal facility, hold a license that is in good standing.

Faculty members of the program:

- Together with the student, identify mentors that possess clinical expertise sufficient to accomplish the goals of the mentorship;
- Supervise the clinical instruction, and
- Maintain accountability for student education and evaluation.

A mentor must:

1. Be a professional nurse with a BSN degree or higher
2. Have three years of direct client care and be willing to complete a mentor evaluation and student evaluations as required
3. Not be relatives or personal friends
4. Sometimes it is not possible to have a mentor that is within the system or organization due to the nature of the organization. In that case, the other criteria must be met.
5. Be on-site, except in the case of an independent practice. In that case, the other criteria must be met and the mentor must be nearby. The line between current employment and practice immersion hours and projects must remain clear to the organization, the mentor, the faculty, and the student. Students must be able to demonstrate the achievement of the BSN competencies, regardless of whether they are in their current place of employment or a different practice setting.

Prior to the beginning of the practice immersion experience, all required information from the approved mentor must be uploaded into the LMS classroom by the student. All required documents (current CV, licenses etc.) must be uploaded and completed prior to starting any hours by the student’s mentor.

The course faculty communicates with the mentor during the course. The ISP will be reviewed and evaluated by the course faculty before practice immersion hours are sought. Lines of communication with the mentor and course faculty will be established, if needed. Expected student outcomes and the evaluation process will be reviewed and approved by course faculty. Telephone conferences will be held as needed to monitor and evaluate the student’s progress as needed. If there is any concern regarding individual student progress, communication with the mentor may be initiated by either the mentor or supervising course faculty.

**Selection Criteria for Practice Immersion Sites**

Students are responsible for securing their own practice site according to their areas of personal and professional interest. Students are encouraged to identify their practice site, which should be selected a minimum of 4-6 months in advance of placement to ensure all necessary approvals are completed. If the practice site requires an Affiliation Agreement please contact the OFE.

The practice site must be an unpaid position. Students are encouraged to select a practice site that can provide the required facilities and practice experts for their growth. The practice site may be a health care system, a public health agency, a clinic, or other community health setting.

**When a Mentor Agrees to Serve**

Once a mentor has agreed to serve in the role, the student must complete and submit the Qualified Mentor Form to their faculty for approval in the LoudCloud classroom immediately so that practice experiences can begin in a timely manner. Delays in identifying and completing the appropriate paperwork may result in difficulties in successfully completing the course. The student is responsible for obtaining all signatures and paperwork submission. Course faculty will approve all sites and mentors according to student learning needs and specific course objectives. Prior to the start of the field experience, a copy of the mentor’s license and certification, and an abbreviated CV must also be on file in the LMS classroom for faculty approval. Agencies sometimes require an Affiliation Agreement, if that is the case the student should contact the OFE as soon as they are aware.

**Affiliation Agreements**

If an MOU is not accepted by the preceptor or site, the College of Nursing and Health Care Professions must have a facility contract with the site prior to the student beginning field experiences. An Affiliation Agreement must be obtained for each site the student plans to utilize. It is the student’s responsibility to give OFE their sites coordinator information, so that the OFE can work directly with leadership at the facility to obtain the signed legal contract. **Please remember this is not a contract when submitted for approval.** It is only a planning form that begins the process of securing the final agreement with the OFE to ensure liability coverage. Failure to complete the form accurately and entirely can slow this process and may prevent the student from beginning the clinical experience on time.

If a current agreement is not already in place, the legal contract will be sent directly to the preceptor’s agency from the OFE. Completing new facility agreements are extremely time consuming and the Affiliation Agreement must be in place at least four weeks prior to the course start date. **Please allow at least four to six months for a new agreement to be finalized.** Once an Affiliation Agreement has been finalized, students will be notified via email and provided the details of the clinical placement.

Some facilities may have specific requirements for documentation for a placement. Students are to work with both the facility and OFE to ensure all requirements are met (e.g. a hospital may require a background check different from the original background check and has the right to specify their own institutional requirements that are not within the control of the University).

Please note that some programs require students to carry more liability insurance than the amount provided by the College of Nursing and Health Care Professions. **Students will be expected to obtain a private policy to make up the difference.** For nurses: the Nurses Service Organization provides professional liability insurance options through their website at [http://www.nso.com/professional-liability-insurance/nurse-coverage.jsp?refID=iiWW1GWi&gclid=CKzqu6Ds6acCFQxlt7AodJWkrQ](http://www.nso.com/professional-liability-insurance/nurse-coverage.jsp?refID=iiWW1GWi&gclid=CKzqu6Ds6acCFQxlt7AodJWkrQ).
Roles and Responsibilities

Mentor, Student, and Faculty Responsibilities

Mentors are in the field with the students and oversee, along with faculty, their practice experiences. All students also work with a College of Nursing and Health Care Professions faculty who reviews all of their documentation and evaluations and works with the students to ensure they are progressing in the program. Along with the mentors, faculty members perform evaluations of students.

Mentor Responsibilities

- Orient student to the clinical site and agency policies. Discuss with student the preferred method for communication with mentor and/or clinic site.
- Review with student the site’s client population, most frequent diagnoses and procedures commonly performed, if applicable.
- Discuss mentor and agency expectations.
- Facilitate an informal collaborative and mutually respectful environment in which to learn.
- Promptly communicate to faculty regarding issues of concern or unsafe practice.
- Review the objectives of the course and student’s learning objectives to determine the type of learning opportunities that will enhance the student’s learning. Direct the student to resources and evidence based readings and areas for quality improvement.
- Provide regular feedback to improve the student’s knowledge and skills.
- Provide a variety of appropriate learning experiences. If available, encourage participation in interdisciplinary team meetings.
- Facilitate student’s progressive independence in knowledge and skills by supporting the student’s autonomy.
- Share expertise, tools, and references that will aid the student in role transition. Provide time to mentor student learning by answering questions and reviewing material.
- Facilitate professional advanced education socialization.
- Final evaluations must be completed by the mentor and reviewed with the student. (Student’s final grade will be awarded by the course faculty based on a summative evaluation in addition to classroom performance).

Student Responsibilities

- Integrate personal learning objectives with course objectives.
- Ensure MOU or Affiliation Agreement has been approved. The student may then contact approved clinical preceptor and determine the schedule for the field experience.
- All immersion hours must be completed during the specified course.
- Develop and share course objectives and learning needs with mentor and discuss strategies to meet them.
- Adhere to professional attire that is in accordance with site requirements.
- Maintain professional behavior in the setting at all times.
- Demonstrate increasing competency.
- Function in the role of the professional role under the supervision of the mentor incorporating evidence-based practice guidelines.
- Complete mentor and site evaluations.

Faculty Responsibilities

1. Approve all mentors within the LMS Classroom.
2. Complete at least three phone conferences and/or email communications, and document Complete and document communication with student and clinical mentor regarding student’s performance and requirements of specific clinical rotation at end of semester, and as needed.
3. Feedback must be shared with the student. Documentation of student feedback should take place 24-48 hours after the discussion and shared with the course faculty in the Individual Forum.
4. Assist student and mentor to optimize clinical learning environment.
5. Communicate with student as needed throughout the course.
6. Provide preferred method of communication and be available answer questions or concerns regarding the student’s practice immersion experience.
7. Review and approved (or not-approve) all student/mentor evaluations before issuing grade related to evaluation entries in LoudCloud classroom.
8. Communicate with the student if there are concerns about the student’s clinical performance. Issue an Early Alert for borderline or unsatisfactory academic or professional behaviors.

Logging Practice Immersion Hours

The Individual Success Plan is used to track practice immersion hours. This must be signed by the student’s mentor the first week of class and prior to the end of the course to verify all hours have been met. All practice immersion assignments will have a practice portfolio statement in the syllabus.
Capstone/Practicum Programmatic Assessments

The Individual Success Plan (ISP) requires collaboration with the course faculty in the first week to establish a plan for successful completion of mutually identified and agreed upon specific deliverables for the student’s programmatic requirements. ISPs are intended to guide students in developing their own learning plan over the 10-week course. Programmatic requirements are: (1) completion of required 100 practice immersion hours, (2) completion of work associated with program competencies, (3) work associated toward completion of the student’s EBP Project. ISPs are submitted to the LoudCloud classroom. The template can be located in the LMS classroom.
Athletic Training Clinical Course Expectations

Program Mission, Goals and Objectives

Program Mission Statement
The mission of the Grand Canyon University Athletic Training Educational Program is to prepare superior quality athletic training professionals while teaching them to become global citizens, critical thinkers, effective communicators and responsible leaders by providing academically challenging, values-based curriculum from the context of our Christian heritage.

Program Goals and Objectives
1. Program Goals
2. To prepare competent entry level Athletic Trainers in the cognitive, psychomotor, and affective learning domains
3. To provide a student focused educational environment that, while meeting the professional requirements of athletic training, is capable of meeting a student's individual needs with concern and flexibility
4. To challenge students to academic excellence and optimize student's abilities in the cognitive, psychomotor, and affective learning domains
5. To encourage students to think critically, analyze situations, learn to solve problems, adapt to situations, and challenge others to optimal skills and abilities
6. To assist students in their Christian faith journey and in how to apply that faith, with its moral and ethical tenets, in the profession of athletic training
7. To encourage students to prepare for entry into high schools either as full time athletic trainers or as teacher-athletic trainers
8. To prepare students for any role or employee setting as defined by the state of Arizona athletic training practice act
9. To offer various clinical education experiences for students to understand employment opportunities and make contact for possible employment

2. The objectives of Grand Canyon University Athletic Training Education Program are to provide the athletic training students with exceptional learning experiences to gain the knowledge and practical skills required to be a highly competent, functional and well-rounded athletic trainer, including ability to:
1. Identify specific injuries and illnesses and provide the appropriate immediate care
2. Plan and implement a risk management and injury prevention program for various sports
3. Evaluate and distinguish various injuries
4. Establish proper usage of various therapeutic modalities
5. Design therapeutic exercises for rehabilitation of injuries
6. Differentiate between various pharmaceuticals and their uses
7. Organize and provide administration of an athletic training program
8. Design research and gain the ability to develop professionally
9. Intervene when necessary concerning psychosocial events
10. Counsel athletes in general nutrition and ergogenic aids

ATrack Student Instructions

Our program uses the NATA system called ATrack. ATrack is an online database that manages our ATP student data. In order to begin clinical courses, students must become an NATA member which allows them to use ATrack. To become a member and enroll in ATrack, students must download the “First Time Student Member” form. Note: This form must be completed at the time of initial enrollment. If the first time student enrolls without using this form, their status cannot be changed.

Once students receive their membership number, they will log in to www.atrackonline.com at the bottom right corner. Once logged in, students will click on “my portfolio” in the left hand column. There, they will find the forms that are for them to complete in “available forms” area. The first form students will complete on week 1 is the initial clinical rotation visit check sheet. Students will be required to type in all of the information on the form. Students will also be required to document their time at their clinical site. This documentation will be verified by their preceptor. Students will only have one week to enter their time. After one week, the submission for time is closed and their hours will not count.

Athletic Training Preceptor and Site Evaluation by Student

Students must evaluate the site and/or the preceptor/mentor at the end of the course. These evaluations are imperative and provide necessary feedback for future placements with the preceptor/mentor/site. The evaluations are found and completed in ATrack. These evaluations are not shared with the preceptor/mentor since a formative/summative assessment is not the intent of these evaluations.
Athletic Training General Health and Safety Requirements

The following information indicates the specific health requirements for undergraduate clinical program admission and continuous enrollment. Guidelines are based on the Center for Disease Control guidelines, Morbidity Mortality Weekly Report. Students are expected to take measures to maintain their personal health so as not to jeopardize themselves or any client with whom they come in contact. Students who are accepted into the programs must show evidence of the Athletic Training required immunizations and diagnostic procedures. In addition, students must meet agency health requirements to enter clinical course work. At any time, a student may be required to receive a medical examination if deemed necessary by the faculty for the well-being of the student and/or the clients.

As students are in contact with clients in a variety of health situations, it is imperative that they maintain protection against communicable illnesses. Students are responsible for maintaining all progression requirements, including all health and safety documents, as stated in the University Policy Handbook. Students will not be allowed to participate in clinical experiences unless all agency and GCU requirements are current. Any student that falls out of compliance due to expired documentation will immediately be restricted from clinical participation until renewed documentation is provided and coinciding faculty will be notified. Missing clinical may jeopardize a student being successful in the program. All students will be contacted early in their program by the Office of Field Experience and provided guidance on the proper submission of required health and safety documentation.

Students will adhere to all guidelines for Standard Precautions within the clinical agencies.

Communicable Disease Policy

Reference the University Policy Handbook for the Communicable Disease Policy. Blood-borne Pathogen Policy

Athletic Training Students in the clinical phase of the ATP will undergo annual Blood-borne Pathogen education (pathogen and infection control) at Grand Canyon University during ATS orientation at the start of each academic year. Clinical sites are responsible for providing accessibility to their sites blood-borne pathogen policy and exposure plan. Students will have access to and utilize appropriate blood-borne pathogen barriers, access to and utilize proper sanitary precautions, and access to appropriate biohazard disposal equipment and procedures at each clinical site.

Protocol for Puncture Wounds and Exposure to Blood or Bodily Fluids:

- Incidents involving any type of needle stick or body-fluid exposure must be reported to the Preceptor/Clinical Faculty/Facility immediately. The clinical faculty will then notify the course faculty and Program Director.
- All students should observe the protocol for safe needle usage and disposal when practicing or performing skills that involve using syringes, lancelets, or any other procedure that involves an invasive intervention. The student should follow the protocol for needle usage at the agency where clinical rotations are being held.

Intact Skin Exposure or Uncontaminated Needle Stick

A student who accidentally punctures him/herself with an uncontaminated needle or is exposed to blood or bodily fluid that is an intact skin exposure should:

- Wash the area immediately and thoroughly with soap and water
- Follow up with the Canyon Health Center or own Primary Care Provider or other facilities listed on the resource page who will make a determination of Tetanus immunization status and give appropriate prophylaxis or referral for appropriate prophylaxis.
- Complete a student puncture wound incident report (available from the CONHCP) to be filled out by the student and the supervising faculty or instructor who was present during the incident. A copy of this report will be given to the Program Director and College Administrator, and placed in the student’s file.
- Counseling referral and other referrals can be arranged through the health center.
- If student is outside Maricopa County, the Program Director must be contacted for specific information related to resources for medical treatment.

Non-Intact Skin or Mucous Membrane Exposure or Contaminated Needle Stick

If the exposure is via a contaminated needle or if a bodily fluid exposure to non-intact skin, or to mucous membranes the student should continue with the following:

- Wash the skin area immediately with soap and water. If exposure is to mucous membranes, flush area with water immediately
- Report the incident to their clinical preceptor, faculty/CEC, and program director.
- Immediately seek medical attention. If in an acute care setting, always follow agency guidelines. This may include reporting to either Occupational Health or the agency Emergency Department.
- If student is in the community setting and an agency Occupational Health Center or Emergency Department are not available, the student may report to the Health and Wellness Center on GCU Main Campus if it is during normal operating hours. The Health and Wellness Center’s number is 602.639.6215.
- In the event that this incident occurs in the community setting, when the Health and Wellness Center is not open, GCU recommends that students seek immediate treatment at an Urgent Care or Physician’s Office equipped to treat contaminated needle stick injuries. If follow up visits are required, they may schedule them at the Health and Wellness Center on GCU Main Campus. Counseling referral and other referrals can be arranged through the Center.
• If student is outside of Maricopa County, please contact the Program Director for specific information related to resources for medical treatment.
• Student puncture wound incident report (available from the CONHCP) will be filled out by the student and the faculty or instructor who was present during incident. A copy of this report will be given to the Program Director and College Administrator to be placed in the student’s file.
• Financial responsibility for testing and recommended care following an exposure rests solely with the student. This could include testing, evaluation, treatment, and counseling.

If students have questions about the appropriate medical treatment, the Centers for Disease Control and Prevention recommend that they call a 24 hour assistance line at 1.888.448.4911 (Clinicians’ Post Exposure Prophylaxis Hotline).

Athletic Training Student Responsibilities and Code of Conduct

1. Act in a professional manner, consistent with the NATA code of ethics, regarding dress, speech, body language, and client confidentiality at all clinical sites.
   a. Students are expected to wear their GCU ATP student name tag at all clinical sites.
2. Adhere to the GCU ATP clinical attendance and tardiness policy. More information on this policy can be found in the University Policy Handbook.
3. Abide by the clinical site’s policies and procedures manual
4. The student’s clinical responsibilities vary with the clinical site and level of the student. This is dependent upon the level of formal instruction they have received. Students are required to meet with the clinical supervisor to discuss their specific responsibilities no later than the first day of the clinical rotation.
5. Complete all clinical coursework including, but not limited to: proficiencies, EBP’s, Discussion Forums, etc..
6. Informing the clinical preceptor and faculty of any questions or concerns regarding the clinical rotations or clinical site.
7. Informing the clinical preceptor and faculty of any violations of local laws, state laws, federal laws, policies and procedures of the clinical site and/or the ATP, and/or the NATA’s Code of Ethics.
8. Informing the program director and clinical instructor/supervisor if his/her health status changes.
   a. Specifically, students are asked to report injuries or illnesses that would prevent their ability to continue meeting the ATP’s Technical Standards.
   b. Also, students are expected to notify the program director and clinical instructor if they develop a communicable disease or illness that could be contracted by a client or athlete that the student is in contact with.
   c. In the event that an ATS acquires an injury or illness that she/he believes is directly related to their involvement at an affiliated clinical rotation site, the student is required to report the injury or illness to the clinical supervisor/instructor and program director immediately. The clinical supervisor/instructor and the program director will then determine a course of action.
10. Initiate instruction and assessment of the current knowledge, skills, and clinical abilities designated by the CAATE.
11. Initiate instruction and opportunities to develop clinical integration proficiencies, communication skills and clinical decision-making during actual client care.
12. Initiate assessment of clinical integration proficiencies, communication skills and clinical decision-making during actual client care.
13. Regular communication with the appropriate faculty.
14. Presence during an annual site visit by GCU’s Clinical Coordinator or GCU program faculty.

Clinical Requirements

Clinical Site Specific Orientation

All students must be familiar with the clinical sites prior to client care. This includes the following site specific information.
• Venue specific EAP’s
• BBP Policy and Equipment
• Policy and Procedures
• Therapeutic Equipment Safety Check
• Determine Clinical Schedule

Clinical Time

The Athletic Training Program requires students to complete at a minimum of 10 hours per week up to a maximum of 20 hours per week in clinical courses to achieve at least 900 hours in the clinical program. This policy is consistent with federal work-study policy. Students must have a minimum of one day off in every seven-day period. Students are responsible for submitting their assigned clinical hours within the first week of classes.
Student Clinical Supervision

Supervision Policy
As an athletic training student, it is important to understand and comply with appropriate boundaries in the practice of athletic training clinical skills. These boundaries protect the student, the client and the profession. In compliance with the Commission on the Accreditation of Athletic Training Education (CAATE), the GCU ATP Supervision Policy is that “Students must be directly supervised by a preceptor during the delivery of athletic training services. The preceptor must be physically present and have the ability to intervene on behalf of the athletic training student and the patient.”

Student Work Policy
Athletic Training Students (ATS) are not certified athletic trainers and will not be used in the place of a certified athletic trainer. Students will not receive any monetary remuneration during this education experience, excluding scholarships. After demonstrating proficiency, athletic training students may be permitted to undertake those specific defined activities with appropriate supervision, direction, and job description.

Preceptor
A preceptor is a licensed healthcare professional who is affiliated with the GCU ATP and provides professional supervision and education to program students. Students will be assigned to a preceptor by the ATP.

Direct supervision
Direct supervision means that the preceptor is physically present and has the ability to intervene on behalf of the athletic training student and the patient. Direct supervision is required during the delivery of athletic training services. This direct supervision does not preclude a student’s ability to learn and exercise key skills such as critical thinking or clinical decision making. Preceptors should allow students appropriate autonomy to engage in critical thinking and decision-making in a suitable environment. Supervision must be adequate to ensure that each patient receives competent and quality care, as well as to ensure compliance with Arizona Statutes and CAATE standards.

Clinical experience
Clinical experiences are educational experiences for the ATS that involve patient care and the application of athletic training skills under the supervision of your assigned preceptor. Clinical experiences generally occur at practices, games or during clinical coverage. When in a supervised clinical experience situation, the student can, at the discretion of the preceptor, perform all skills that have been previously instructed and evaluated.

Clarification of Athletic Training Services
During the delivery of athletic training services does not mean that the student and preceptor are physically inseparable every instant, only during patient care. The preceptor may need to step outside the facility (e.g. to answer a call or respond to an injury), and likewise a student may need to leave the facility (e.g. to prepare water coolers). If an injury/emergency occurs during a clinical experience while the preceptor is not physically present to directly supervise, the student should notify (call/radio) the preceptor immediately, and may provide basic first aid and CPR until the preceptor arrives. The student may not perform evaluations, treatments, or determine return to play without direct supervision.

Use of skills outside of supervised clinical experience
An ATS may not travel with a team without supervision even in the role of “first aider”, or open up the Athletic Training Room to provide treatment to a patient when a preceptor is not present. To do so is a violation of professional standards and Arizona State law (R4-49-402 and ARS 32-4121). In circumstances not affiliated with a university clinical experience, the student assumes the role of a voluntary citizen with emergency responder (first aid and CPR) training. If a situation arises in a student’s private life that necessitates the use of emergency responder skills, the student’s decision to act (or not act) is completely voluntary and the student is responsible to stay within the scope of practice of an emergency responder.

Example:

<table>
<thead>
<tr>
<th>Acceptable Skills</th>
<th>Unacceptable Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute injury first aid treatment (e.g. controlling bleeding, POLICE, splinting)</td>
<td>Application of modalities (other than ice/heat)</td>
</tr>
<tr>
<td>Monitoring ABC’s, performing rescue breathing and/or CPR as necessary</td>
<td>Performing an orthopedic evaluation or any rehabilitation procedures</td>
</tr>
<tr>
<td>Acceptable Skills</td>
<td>Unacceptable Skills</td>
</tr>
<tr>
<td>-------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Activating the emergency medical system</td>
<td>Return to play decisions regarding an athlete</td>
</tr>
<tr>
<td>Any situation where the athletic training student’s presence takes the place of a licensed healthcare professional is <strong>unacceptable</strong></td>
<td>(e.g. athletic training student hired to provide first aid services at an athletic camp without a licensed athletic trainer present)</td>
</tr>
</tbody>
</table>

When in doubt about their role or responsibility, the student should request clarification from an ATP faculty member. If faced with an emergency situation where clarification cannot be sought, the student should first abide by all applicable state laws, and then consider the ethical and moral principles of both the athletic training profession and Christian faith. Afterward, the student should document the incident and report it to the Program Director immediately.

If the student experiences violations of this policy within their clinical experience site (e.g. their preceptor leaves them unattended) the student MUST report the incidence to the Clinical Coordinator and/or Program Director immediately.