



# Clinical Requirements

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### **MANDATORY INSERVICES**

Students are required to attend mandatory in-services (face to face at orientation, net learning modules, classroom setting, etc.) on the following topics:

- HIPAA (Health Insurance Portability and Accountability Act)/Compliance
- Health Literacy
- Mandatory Abuse Reporting
- Fire/Safety/Security/Communications
- Hazardous Materials
- Infection Control/Bloodborne Pathogen/TB
- Diversity
- Harassment
- IMPACC
- Radiation Safety (Required of all radiology technology students)
- Students working with UnityPoint Health –St. Luke's electronic medical record keeping system will be assigned computer-based modules as well as be required to complete a class. Any student that does not attend a scheduled class and a makeup session must be scheduled to complete the training requirement may be assessed a charge of up to \$250.
- Other training that is determined mandatory by UnityPoint Health - St. Luke's and/or St. Luke's College

### **B.C.L.S. CERTIFICATION FOR STUDENTS**

All students are required to have Health Care Provider BCLS certification through the American Heart Association prior to the start of clinical courses.

- Certification/recertification of BCLS is the responsibility of the student.
- Courses are offered through St. Luke's College at a reduced student rate.
- Student's BCLS certification will be reviewed at the beginning of each academic year. If the course is not taken at St. Luke's, the students must submit a copy of his or her certification card for documentation.
- BCLS certification is valid for 2 years. Certification must be renewed by the end of the month in which the card was issued. There is NO grace period. Please contact the Student Services Department for exact dates.
- Students without a current BCLS card will not be able to attend clinical until BCLS certification is obtained. Any missed clinical days due to lack of BCLS certification must be made up. This will be scheduled at the discretion of the instructor and the cost will be assumed by the student.

### **HEALTH, DRUG, AND BACKGROUND SCREEN**

An increasing number of health care facilities nationwide are requesting the most current information on a student's health status prior to a clinical rotation in their facility. This can include immunization

records, physical health records, mandatory training records, drug testing results, and background check results. Incomplete immunization records, incomplete training records, failure to pass required background checks and/or failure to pass drug testing could result in a ban from participation in clinical rotations and thus prevent graduation.

All clinical sites require immunization, physical health, and mandatory training records. Newly accepted students or currently enrolled students assigned to clinical sites requesting drug testing and/or background testing will be advised of such a requirement before the onset of the semester. Such students will be required to comply with the testing by a deadline specified by the Department Chairperson.

St. Luke's College utilizes several third party services to conduct required criminal background checks and drug testing. All costs associated with these services may be at the responsibility of the student.

All students are required to furnish written documentation of their immunization records to the Student Health Nurse. For detailed requirements please see Student Health section of the handbook or contact the Student Health Nurse. Failure to provide documentation results in the inability to enroll and/or continue enrollment.

St. Luke's College highly recommends that students receive the hepatitis B series and have a titer drawn. Students must receive either the hepatitis B vaccination series or sign a waiver declining the vaccination.

Requirements are subject to change.

## **CLINICAL AFFILIATES**

Students may be scheduled to participate in learning experiences at a variety of clinical locations including clinical affiliates outside of UnityPoint Health - St. Luke's. The terms of contracts with clinical affiliates may include additional requirements for eligibility. These requirements include, but are not limited to:

- Drug testing
- Additional background checks
- Additional health screen and immunizations

The department chairperson will inform students of these requirements. Any cost associated with fulfilling these requirements may be at the responsibility of the student.

## **INSURANCE COVERAGE**

During approved clinical rotations, students are covered with professional liability insurance as long as they are acting within the scope of their responsibilities. However, personal health insurance is recommended.

## **INFECTIOUS DISEASE STATEMENT**

The student and patient may be at risk for exposure to infectious disease due to the nature of the health care profession. The risk of transmission of infectious disease to the student and patient will be minimized by the implementation of standard precautions in every clinical setting.

A student or patient with a compromised immune system may be at an increased risk of acquiring an infectious disease. Removal of the ill student from the clinical setting is at the discretion of the clinical faculty; students may also be referred to Student Health.

Students will follow the infection control policies of the clinical agency. These policies are subject to change.

## **STUDENT VARIANCE REPORT INSTRUCTIONS**

- A Student Variance Report is to be made out by the student and instructor on any incident involving the student and a patient, employee, visitor, or unusual occurrence (i.e. fire hazards, loss or breakage of expensive equipment).
- When necessary, an Institutional Variance Report is also completed by the student and instructor and submitted to the department Manager within 24 hours. The Manager takes responsibility for submitting it to the appropriate department Office.

## **DRESS CODE**

St. Luke's College follows the personal appearance policy of the Medical Center. The entire policy can be viewed through DocuCenter on the Intranet.

The purpose of a dress code is to provide guidelines for students so that they may optimally reflect professional standards in their appearance. An appearance that is clean, neat and professional is required in all clinical settings and college related activities. A general approach of moderation and good taste should serve as a basis for choices.

Students must adhere to the College and their program of study dress code policies when in uniform for clinical experiences and when representing the College. Other dress code requirements are at the discretion of the faculty.

Clinical uniform will consist of the following:

- Royal blue Cherokee brand scrubs
- White socks and shoes (predominately white, leather or vinyl shoes, toes, and heels must be closed)
- White lab coat
- UnityPoint Health - St. Luke's name tag

## **TRANSPORTATION**

- Students are responsible for providing their own transportation to and from all assigned educational experiences.
- City bus service is available for transport to most in-town clinical sites.
- All students enrolled in the program will have some out of town clinical rotations at some time in their program of study. This will involve out of town travel and may require some overnight stays
- The cost of travel and/or lodging is the student's responsibility.

## **CONFIDENTIALITY OF PATIENT AND HEALTH SYSTEM INFORMATION**

Students of St. Luke's College will comply with the confidentiality of Patient and Health System Information policy of UnityPoint Health- St. Luke's. Students should assume the word 'employee' should be exchanged with 'student' as it pertains throughout the policy which states:

All information regarding patients is legally and ethically considered privileged information. This information is not to be disclosed or used in any way other than as needed for treatment of the patient. Accidental or intentional disclosure, modification or destruction of patient information can result in legal action and/or loss of community credibility, reputation and business or as directed by HIPAA regulations. This confidentiality of patient information continues to exist when the patient also happens to be a co-worker or physician.

Information related to patient and health care is to be treated in a confidential manner. Employees, who are contacted by representatives of the media concerning any proprietary, technological, health care and/or patient information, must refer such calls to the Director of Community Relations who shall then be responsible for coordinating appropriate responses to such inquiries.

Failure to maintain security procedures for handling confidential information is considered misconduct and gross violation can result in immediate termination.

As part of our ongoing compliance program random audits for appropriate access to patient information will be conducted by the Privacy Officer. Potential inappropriate access will be reviewed by the manager and department director for employee or student involved in potential inappropriate access. Such inappropriate access can involve disciplinary action including verbal or written warning, suspension or immediate termination.

The following procedures are to be followed when a violation of confidentiality is discovered:

- When a violation of confidentiality is discovered, it is to be reported to the appropriate department director/manager. The department director/manager will notify the Human Resources Department if this involves an employee.
- The department director/manager is responsible for investigating the circumstances surrounding the violation. Areas to be investigated shall include, but not be limited to, the following:
  - Determining whether the violation was intentional or accidental.
  - The impact upon the Health System (includes public confidence as well as financial impact).
  - The employee's or student's history of previous violations.
  - The department director/manager will review the results of the investigation with a representative of the Human Resources Department prior to any disciplinary action being taken.

#### *Privacy Audits*

- Random privacy audits will be conducted on a routine basis by the Privacy Officer and results reported quarterly to the Compliance Officer.
- Potential inappropriate access identified on the audits will be reported to the Manager and Department Director of the employee involved in the access and investigation of the access will be conducted.
- Manager and Department Director will report back to Privacy Officer the findings of their investigation.
- In the event inappropriate access is confirmed, the manager and/or Department Director will involve Human Resource Director in plan for disciplinary action. Privacy Officer will also notify Human Resource Director of confirmed Privacy violation.

- Employees and students are responsible for all accesses made under their respective computer codes. In the event the employee or student denies entering the record, they will be held accountable for the entries made under their code.
- Disciplinary action will be determined with the assistance of Human Resources. General guidelines for disciplinary action could include:
- Confirmed inappropriate access- written warning to include possible immediate termination for future inappropriate access AND one to three day suspension.
- Probably inappropriate access- (this may include access made with employee code but employee denies access & no previous incidents of inappropriate access.) Written warning to include possible immediate termination for future inappropriate access.
- Repeat inappropriate access- termination.