

POLICY TITLE: STUDENT CLINICAL REQUIREMENTS PART ONE

Policy

The School of Nursing (SON) is committed to ensuring that all nursing students entering clinical sites for educational opportunities are compliant with Joint Commission and Center for Disease Control guidelines for personnel providing nursing care. This policy establishes processes for implementation of verification of clinical requirements in order for students to have the opportunity to participate in clinical education. These requirements are mandated by the clinical affiliates and are set forth in the clinical affiliation agreements. Part Two of this policy will pertain to the annual clinical training requirements.

Procedure

Goals

1. All clinical eligibility requirements will be obtained by SON applicants prior to admission and submitted to a secure outside entity that has been contracted to provide collection, compilation, and tracking services for the SON.
2. Students will be held accountable for complying with the clinical eligibility requirements prior to admission, prior to each semester of enrollment, and throughout their program of study. Failure to achieve and maintain compliance may result in delayed admission, course registration holds, academic penalty, course failure, and/or inability to progress.
3. Each clinical affiliate will be provided with a report of all clinical requirement data for students who are scheduled to rotate in their facilities upon the request of the course faculty.

Guidelines

1. Screening of immunization is required by the Texas Department of Health Texas Administration Code Title 25 Part 1 Chapter 97 Subchapter B Rules 97.61-.97.72. <http://www.dshs.state.tx.us/immunize/forms/6-103.pdf>. Failure to adhere to the guideline is a violation to the Texas Administrative Code Title 25 Part 1 Chapter 97 Subchapter B Rules 97.61-.97.72.
2. If additional vaccines during vaccine-preventable disease outbreaks such as the flu vaccine are instituted by the individual practicum sites or by the State of Texas, students will be required to comply.

3. Many clinical affiliates require clinical readiness compliance to be current at the beginning of the clinical experience and to extend through the entire semester. Students can be held to this additional standard at any time during the program. The outside collection agency will send frequent reminders regarding this requirement to all students via email. Students cannot request clinical placements that do not have additional requirements.

4. All SON applicants will be required to **submit evidence of compliance with each of the SON Clinical Requirements** as listed in this policy prior to the program application deadline in order to be considered for admission. The SON **will not** receive original documents.

In addition, all students will be responsible for maintaining compliance with the SON Clinical Requirements at the beginning of each semester of enrollment. In the event that a student does not meet the requirements at any time during the program, delayed admission, course registration holds, academic penalty, course failure, and/or inability to progress may occur. Failure to remain compliant during the program is considered a breach of professional behavior.

5. Students will receive directions regarding accessing the secure data collection agency process via the SON website as well as via written communications related to program inquiries, advisement, and admissions.

6. RN to BSN and MSN students must have an unencumbered Texas RN license upon admission and to participate in any clinical rotation.

7. Prior to participating in any clinical rotation, students must submit the Student Declaration for Criminal Background Checks and Drug Screens on the form enclosed as Attachment A.

SON Clinical Requirements

A. Immunizations

Table 1 Immunizations Required for SON

Immunizations	Requirements
Varicella (Chickenpox)	Any one of the following: <ul style="list-style-type: none"> • Series of 2 vaccinations at least 30 days apart. • laboratory report of positive varicella titer
Mumps	Any one of the following: <ul style="list-style-type: none"> • 1 dose on or after 12 months of age. • laboratory report of proof of serologic immunity to mumps
Measles (Rubeola)	Any one of the following: <ul style="list-style-type: none"> • Students born on or after January 1, 1957 must have 2 doses on or after 12 month of age, with each dose at least 30 days apart. • laboratory report of positive titer test
Rubella	Any one of the following: <ul style="list-style-type: none"> • 1 dose on or after 12 months of age • laboratory report of proof of serological immunity to rubella
	*2 MMRs OR some combinations of 2 Measles, 1 mumps and 1 Rubella vaccination (e.g. 1 MMR and 1 Measles shot fulfill the requirement). Students born before 1956 may only require 1 MMR.
T-dap	<ul style="list-style-type: none"> • 1 dose within the last 10 years (Td does not meet this requirement)
Hepatitis B	Any one of the following:

	<ul style="list-style-type: none"> • 3 dose regimen. (First dose must be received prior to program admission). Dose 2 and Dose 3 must be received at 30 days and 6 months respectively. • Positive Hepatitis B antibody titer
Hepatitis C	<p>To be compliant, students must provide a signed attestation form as evidence of Hepatitis C compliance.</p> <p>OR</p> <p>A “negative” Hepatitis C blood titer (anti-HCV is enzyme immunoassay (EIA) or enhanced chemiluminescence immunoassay (CIA))</p> <p>IF this screen titer is “positive”, then a second titer is required: (HCV RNA PCR) which must be negative.</p>
Tuberculosis Skin Test (PPD)	<p>Any one of the following:</p> <ul style="list-style-type: none"> • Every 12 months evidence of a negative PPD skin test • Yearly chest x-ray report that is negative for TB disease (evidence of BCG does not meet this requirement)
Meningococcal, Bacterial	All entering students less than or equal to 30 years old.

B. Background Check

1. Upon application, and at their own expense, all students will be required to undergo a criminal background check. Pre-licensure students will be required to undergo a criminal background check through the Texas Board of Nursing (TxBON). Licensed nurses will be required to undergo a criminal background check through a company designated by the SON, and the company will provide the criminal history results directly to the student, the SON and the clinical affiliate (upon the clinical affiliate’s request). Students must provide his or her criminal history results to the clinical affiliate prior to participating in any clinical rotation

2. Any student convicted of or who receives adjudication for any criminal offense prior to program admission or while in the program, will be required to submit a Declaratory Order to the Texas Board of Nursing. The student must receive a Board Order from the TxBON that states the student is eligible for initial licensure or licensure renewal prior to program entry or progression. Additionally, a positive criminal history may result in not being eligible to participate in clinical rotations, which could result in failing to complete the SON academic program.

C. CPR

1. All students must submit a non-expired copy of CPR certification prior to the program application deadline. Students must be certified in one of the following classifications of CPR approved by the SON.
 - CPR for Health Care Provider (BLS), American Heart Association
 - CPR for the Professional Rescuer, American Red Cross
2. Online certification will not be accepted. Students will be responsible for maintaining bi-yearly compliance with the CPR requirements throughout their program at their own expense. In the event that a student does not meet the requirements at any time during the program, a course registration hold will be implemented until the requirement is met.

D. Health Insurance

1. All students enrolled in the SON must carry health insurance at their own expense, and provide a copy of the policy or insurance card prior to program admission.
2. Students will be responsible for maintaining compliance with the health insurance requirements throughout their program. In the event that a student does not meet the requirements at any time during the program, a course registration hold will be implemented until the requirement is met.

E. Malpractice Insurance

All students are provided with malpractice insurance through the University for clinical education while enrolled in a clinical course.

F. Drug Screen

1. Upon application, and at their own expense, all students will be required to undergo a urine drug screen test through a company designated by the SON and the company will provide the drug screen results directly to the student, the SON and the clinical affiliate (upon the clinical affiliate’s request). All students must provide his or her drug screen test results to the clinical affiliate prior to participating in any clinical rotation.
2. At the discretion of any SON faculty member or clinical affiliate employee based upon suspected drug use of a student, a student may be required to submit to a subsequent drug screen test through a company designated by the SON and the company will provide the drug screen results directly to the student, the SON and the clinical affiliate (upon the clinical affiliate’s request). The student who is required to submit to a subsequent drug screen test must provide his or her drug screen test results to the clinical affiliate prior to being allowed to continued participation in the clinical rotation.
3. Positive drug screen results will result in not being eligible to participate in clinical rotations, which could result in failing to complete the SON academic program.

G. Annual Clinical Passport

All students will be required to demonstrate basic clinical safety knowledge, including HIPAA training, annually via the Annual Clinical Passport Training Module (described in Clinical Requirements Part Two Policy). Evidence of satisfactory compliance will be submitted to the outside tracking entity as described in Part Two of this policy.

REVISION LOG

Revision Number	Approval Date	Description of Changes
1	7/10/13	Initial version
2	8/19/14	Policy Updated: Procedure – paragraph 2; guidelines – paragraph 3, 4
3	11/4/14	Insertion of Hep C criteria under Immunization section.

Approved by SON Faculty Council, 08/19/2014

Approved by Dean Kathryn Tart: Kathryn Tart

Date: 11/5/2014

Attachment A
University of Houston-Victoria
School of Nursing

Student Declaration for Criminal Background Checks and Drug Screens

I recognize and understand that prior to participating in any clinical rotation through the University of Houston-Victoria School of Nursing (“SON”) program, I must undergo certain training and testing, including submitting to a drug screen and criminal background check at my own expense. I further understand that some clinical affiliates may not allow me to participate in a clinical rotation if I have a criminal background or if I failed to pass a drug screen, which could result in my failure to complete my SON academic program. Although the SON does not conduct the criminal background checks or drug screens or make determinations as to the clinical rotations based on the outcome of my criminal background check or drug screen, the SON may be required through its affiliation agreements with clinical affiliates to certify that its students have submitted to a criminal background check and drug screen test. As a result, by signing my name below, I declare and attest that I have completed a criminal background check and drug screen. I further declare and attest that prior to participating in any clinical rotation, I will provide the results of the criminal background check and drug screen to the clinical affiliate for the clinical affiliate to analyze whether I am eligible to participate in the clinical rotation. I further declare and attest that should the clinical affiliate require the criminal background check and drug screen results be submitted directly from the third parties who conducted my criminal background check and drug screen, that I will promptly contact the third parties to get this accomplished. I recognize and understand that failure to provide my criminal background check and drug screen results to the clinical affiliate prior to my participation may result in my withdrawal from the clinical rotation, which could result in my failure to complete my SON academic program.

Printed Name

_____/_____
Signature Date

Signature of Parent or Guardian if under 18