

Skills Assessment

The goal of the orientation shift is to:

- Review unique needs of patient population on the unit.
- Identify how to access commonly used equipment and supplies on the unit.
- Review the skills within the scope of practice of an Instructor.
- Access resources that support patient care (such as Mosby Nursing Skills, Krames Patient Education, Nursing website Policy page, Micromedex, LexiComp).

Scope of Practice

VBCH provides an opportunity for clinical rotations during a credited course through nursing schools. Clinical Instructors and Preceptors should give feedback regarding the student's progress and review all nursing tasks during the shift.

Scope of Practice:	Outside Scope of Practice:		
Students should be given as many opportunities as possible within their scope of practice. During the rotational experi- ence, students must be accompanied by the Clinical Instruc- tor or Preceptor when they are completing any new skill or one which requires a nursing license.	Due to the need for additional training, certification, and/or nursing licensure the following items are outside the stu- dent nurse's Scope of Practice; therefore the student should not:		
 Activities of Daily Living Administer Medications-Excluding IV push (under the direct supervision of a Clinical Instructor or Preceptor) Documentation (limited to their access and co-signed by the Clinical Instructor or preceptor) Identify evidence-based interventions to prevent hospital-acquired infections and conditions with Clinical Instructor and Patients' Primary Staff Nurse Foley Catheter (Insertion, Care, Removal) Intake and Output Phlebotomy Prime IV fluids Skin Care NG tube insertion Suctioning Vital Signs 	 Administer or Cosign blood and/or blood products Administer IV push medications Remove medications from the Omnicell system Cosign narcotic tracking sheets or controlled drug records Perform Point of Care Testing Obtain or witness consent for surgery, procedures, etc. Independently administer medications of any type Complete independent assessments Change infusion pump settings, titrate drips or manage IVs and infusion pumps without direct supervision. Be responsible and accountable for Braden skin assessments, Medication reconciliation, Falls Risk assessments, or Admission history 		



MEDICAL CENTER

Name:	-
Unit:	_
Date:	

Competency Documentation						
Prevention of harm to Patients/Staff	Performed	Observed	Reviewed	Date and Initials		
Tracheostomy Care/suctioning						
CAUTI guidelines						
Tube feeding and flushes						
Gastrostomy tube care						
Operating Alaris Pump						
Guardrail meds						
Patient identifier						
Trouble shooting Errors						
Patient profiles						
Omnicell:						
Obtaining meds from Omnicell						
Scanning med						
Scanning arm band						
Safe Patient Handling Equipment such as slippery sheets,						
lifts, etc.						
Emergency Response	Performed	Observed	Reviewed	Date and Initials		
Emergency Equipment/Response:						
a. Location of Crash Cart						
b. STAT/RRT 11111						
c. Philips monitor						
Communication	Performed	Observed	Reviewed	Date and Initials		
a. Change of shift handover						
b. Communication of students assignments						
Prevention of harm to Patients/Staff	Performed	Observed	Reviewed	Date and Initials		
Documentation:						
a. Medication administration						
b. Co-signing student entries						
Additional orientation information can be added:						

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MEDICAL CENTER



Name:	-
Unit:	-
Date:	

Competency Documentation Cont'd				
Policies	Reviewed	Date		
Documentation Standards in the Medical Record IM 10-20.20				
CL SOP- Clinical Handover Communication				
Falls Prevention-Adult CL 30-02.09				
Medication Administration MM 10-10.10				
CL SOP Labeling of Laboratory Specimens				
Intravenous Therapy: Peripheral Vascular Access – Adult & Pedi- atrics - CL 30-07.01				
Indwelling Urinary Catheters Insertion, Maintenance, and Discon- tinuation CL 30-15.05				
Protocol– Restraint Order Discontinuation; Restraint/Seclusion Management CL30-04.18				
High Alert Medications MM 10-10.12				
Transport of Patients CL 30-03.05				
Suicide Risk Screening and Management in Non-Psychiatric Units CL 30-04.01				
Signature of Clinical Instructor:				
Signature of Unit Preceptor:				
Unit:				
Date:				

Computer Skills Checklist

Getting to Know eStar

Sign in window

- Select the department and patients you will be caring for

Navigating the patient list reports

- Located below the patient list panel
- Quickly see an overview of the patient
- without opening the chart

Documenting in Flowsheets

- Located below the MAR 'activity'
- Documenting vital signs, I/Os, and ADLs
- Correcting a flowsheet error

Documenting patient education

- Located in the Education 'activity'

Administering Medications

- Located in the MAR 'activity'
- Administering IV medications
- Handling overdue and missed medications
- Communicating with pharmacy



Opening the patient chart

- Upon opening a patient's chart, you will be taken to summary 'activity'
- An 'activity' is a feature in eStar that supports a specific task
- (i.e. Flowsheets 'activity', Chart Review 'activity' etc.)

Cosigning

- Located in the Summary 'activity'
- A clipboard icon with a check mark on it will appear in the patient list panel, next to your patient's name, to alert you to cosign

Documenting LDAs and charges

- Located in the Flowsheet 'activity'
- Adding LDAs
- Removing LDAs

Documenting LDAs and charges

- Located in the Flowsheet 'activity'
- Adding LDAs
- Removing LDAs

Other tips and tricks

- Admitting a patient
- Discharging a patient
- Viewing active orders
- Scanning Breastmilk (4E or 4N patients)
- Completing task and collecting labs