



ORIENTATION HANDBOOK **FOR STUDENT NURSES**

ACADEMIC YEAR 2024-2025

TABLE OF CONTENTS

General Information	2
Patient Care and Safety	4
Parking	14
Appendices A: HIPAA Education	15
Appendices B: Kentucky Children’s Hospital Handbook	19
Appendices C: UK HealthCare Ambulatory Services	27



WELCOME

Welcome to Chandler Hospital, Kentucky Children’s Hospital and Good Samaritan Hospital. We are excited to welcome you and look forward to being part of an exciting educational experience for each of you. UK HealthCare nursing takes pride in providing exceptional care to patients and their families. In order to continue this tradition, we are committed to our mission of providing high-quality educational opportunities for students.

Gwen Moreland, DNP, RN, NE-BC
Chief Nurse Executive
UK HealthCare



MESSAGE FROM **NURSING PROFESSIONAL DEVELOPMENT**

Nursing professional development (NPD) is a vital phase of lifelong learning in which nurses engage to develop and maintain competence, enhance professional nursing practice, and support achievement of career goals (ANA, 2000).

At UK HealthCare, the department of Nursing Professional Development is committed to facilitating the ongoing professional development of nurses to support lifelong learning, advance professional nursing practice and optimize patient outcomes. We are dedicated to the highest standards of quality and safety in patient care and the ongoing pursuit of evidence-based practice and practice improvement.

In addition, we strive to employ best practices in learning and development, the principles of



shared governance in nursing practice, and the development of values consistent with the Magnet Recognition Program.[®] We share the university's mission of excellence in education in an environment supportive of diversity and inclusiveness.

Welcome to UK HealthCare – we look forward to having you here!

- Kathy Isaacs, PhD, RN, NEA-BC
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ukhealthcare.uky.edu/doctors-providers/nursing/nursing-education/faculty-orientation



MESSAGE FROM **NURSE RECRUITMENT**

A variety of jobs are available to nursing students, including Nursing Care Assistant on-call positions and Clerical Assistant positions. Interested candidates may apply in person at the Nurse Recruitment office by filling out a short application. Excellent pay and a variety of shift options are available.

Additionally, nursing students may apply for SNAP (Student Nurse Apprentice Program) which takes place during the summer break. Applications for this student opportunity are usually available in January. Welcome, and please stop by the Recruitment Office at Waller Avenue any time.

UK HealthCare Office of Nurse Recruitment
Waller Healthcare Annex, Suite 108
115 Waller Avenue
Lexington, KY 40508
859-323-5851
toll free 800-233-5851

This reference guide has been developed to orient and ensure that all students assigned to UK HealthCare have the information necessary to perform their responsibilities within this environment. An orientation will be provided to all undergraduate students by their faculty. Preceptors will provide the orientation for graduate students. This written guide outlines general information and basic procedures and is designed as a supplement to the general orientation session.

Please read this information carefully. If you have additional questions, please notify your instructor, preceptor or Nursing Staff Development.

PATIENT CARE AND SAFETY

Patient Rights & Responsibilities

At UK HealthCare, the patient has a right to:

- Receive care, no matter their religion, sex, race, disability, sexual orientation or gender identity.
- Know what's medically wrong and how we can help them get better. We'll also tell them the things they'll need to know when they get home so that they can stay well.
- Know the names of their doctors and nurses.
- Feel safe here and ask questions if they have concerns.
- Say "no" to anything we suggest.
- Not be involved with research unless they want to be involved.
- Receive help with pain.
- Have their religious beliefs respected.
- Have their regular doctor or a family member notified that they're in the hospital.
- Have their choices about end-of-life decisions respected.
- Be treated politely and with consideration.
- Have their privacy respected.
- Know about any rules that might affect them or their family.
- Receive a copy of their medical records; request amendment to their records and request list of disclosures to their records.
- Have their questions about any costs or bills answered at any time.
- Complain about anything without worry. If they do not want to talk to their doctor or nurse, please contact Customer Relations at 859-257-2178.

At UK HealthCare, the patient has a responsibility to:

1. Tell us everything we need to know about their condition and history.
2. Do what their doctor recommends or tell the doctor why they don't want to follow the recommendations.
3. Be considerate of the people with whom they come in contact.
4. Take part in making their hospital stay safe; be an active and involved part of their health care team.
5. Provide their health insurance information or ask us about other options available to assist them with their payments.
6. Let us know if they have legal papers about end-of-life decisions, such as a living will or advance directives. Tell a nurse if they want to make a living will or advance directives. Contact the Department of Patient & Family Services for more information at 859-323-5501.

PATIENT CARE AND SAFETY

LIVING DIREcT VALUES

DIVERSITY	INNOVATION	RESPECT	COMPASSION	TEAMWORK
<p>We foster a people-centered environment inclusive of all. We will always:</p> <ul style="list-style-type: none"> • Respect differences of opinions. • Acknowledge the expertise of everyone. • Promote cultural sensitivity and social awareness. • Recognize unconscious biases and overcoming barriers. 	<p>We embrace continual learning and improvement to drive positive change. We will always:</p> <ul style="list-style-type: none"> • Be visionary with a passion for discovery. • Continuously improve quality, safety and service. • Commit to being safe and error-free. • Achieve optimal outcomes with our expertise, research and resources. 	<p>We value our patients and families, our community, our co-workers, ourselves, and the resources entrusted to us. We will always:</p> <ul style="list-style-type: none"> • Foster a people-centered environment. • Demonstrate professional behavior and ethics. • Practice stewardship in resource management. • Commit to honesty, transparency, dependability, confidentiality and trust. 	<p>We express empathy for the needs, thoughts, and feelings of those we serve and with whom we work. We will always:</p> <ul style="list-style-type: none"> • Show kindness to everyone. • Do our best to relieve suffering. • Promote healing and well-being. • Embrace patient- and family-centered care. • Encourage a welcoming and caring environment. 	<p>We cultivate meaningful relationships to create positive outcomes. We will always:</p> <ul style="list-style-type: none"> • Share information to optimize value. • Be accountable for our actions. • Embrace inter-professionalism during care delivery. • Include and empower all members of the team.

The hospital values its patients, visitors, employees, volunteers and students. As a result, sexual harassment and/or abusive, obscene, derogatory, or profane language are prohibited. In addition, please refrain from jokes or other behavior that may be offensive to others. The hospital asks that professionals and students refrain from expressing personal problems, frustrations or negative comments. Remember: You are on display at all times and represent the profession of nursing and UK HealthCare whenever you are here.

Cultural Awareness

There are many ways to learn about each patient’s specific needs. Depending on the patient and your job, it may be appropriate to:

- Ask the patient questions (and talk with their family).
- Look around for clues, such as what the patient wears or keeps in their room, or how they act around others.
- Check with a supervisor for information.

See [Policy HP08-06](#) for UK HealthCare: Cultural or Religious Impact on Patient Care

Each Patient is Unique

Always keep in mind that:

- Growth and development follow general patterns. But every person grows and develops in their own unique way.
- Not every member of a cultural group may share all of its values, beliefs or practices.
- A patient may appear similar to you, but still be different from you in certain ways.
- Avoid stereotyping a patient – consider all the factors that may affect his or her care needs.

PATIENT CARE AND SAFETY

Hospital Policies and Procedures

The following references and resources are available on the UK intranet at: www.hosp.uky.edu/careweb

- Hospital Policies
- Nursing Policies
- Nursing Protocols (under Nursing Policies)
- Nursing Continuing Education

If you need to find out information about an investigational drug, ask a nurse on the unit to assist you.

Confidentiality

Faculty and students must maintain the confidentiality of all patient medical records and information. All students will be subject to the University of Kentucky's Governing Regulations Part I regarding confidentiality of information. Agency's students must agree not to disclose such information to other persons unless UK has given its express written consent. UK agrees to make available such information to students for their use during regularly scheduled clinical rotations, provided those records may not, under any circumstances, be removed from UK without UK's express written consent. Any breach of patient confidentiality will result in termination of the clinical rotation of the students and/or faculty member involved. Students and faculty are cautioned to maintain patient confidentiality at all times. Clinical experiences should not be discussed using social media or personal emails. Please refer to UK HealthCare policies related to information security and the use of mobile, personal and other devices.

Dress Code

The hospital has a dress code designed to ensure that appropriate image, infection control and safety are maintained. *No artificial nails are allowed.* The Department of Nursing has established a dress code that is consistent with hospital policy and the needs of the department. (Policies: A09-085 and NU09-12).

Uniforms or scrubs are worn when caring for patients.

Any time students come to the hospital to review a chart in preparation for caring for a patient or to interview the patient, proper business street clothes must be worn. *No jeans, shorts or other similar type of casual clothes are allowed.* Storage space is very limited: Please bring as little as possible, and do not bring valuables into the facility.

Identification

To create a safe environment for our patients, staff and students, all students must wear a UK ID badge when in the clinical setting. Faculty will advise every student of the badge policy for UK HealthCare.

Smoking Restrictions

All areas of the University of Kentucky campus, including the medical campus, are smoke free. Smoking is not allowed in any of the hospital parking areas for employees or patients; this includes all Visitor Parking Garages and the K Lot at Kroger Field.

Communication Channels

Each department/area has developed channels of communication that allow staff to access and exchange essential information. The information outlined below is designed to facilitate communication of key information for your assignment at the facility.

PATIENT CARE AND SAFETY

Registered Nurse

- The patients you are assigned to during your clinical experiences will also be assigned to a staff nurse.
- This nurse will provide you with a report on the patient if your clinical begins after the unit report.
- Students should communicate any questions they have about their patient(s) or any problems their patient(s) may be having to the staff nurse.
- Students should give the staff nurse a report on their patient(s) prior to leaving the unit.
- The staff nurse will serve as a resource to facilitate communication with other departments and services.
- Students should communicate patient related and staff/hospital related concerns to their instructor.

Infection Control

Hand Hygiene: The cleansing of the hands by hand washing or through the use of antiseptic hand wash, alcohol-based hand rub, and/or surgical hand hygiene/antisepsis.

Each employee, medical staff member and house staff of UK HealthCare is responsible for proper hand hygiene.

The Threshold Rule: All health care workers must practice effective hand hygiene every time they “cross the threshold” of the patient’s room or bed space area, regardless of whether or not the intention is to actually touch the patient.

Effective Hand Hygiene:

- Includes washing with soap and water or alcohol-based hand sanitizer.
- Soap and water: When hands are visibly soiled, after using the restroom, before eating, or when caring for a patient with suspected or confirmed *Clostridium difficile*.
 - o Wet hands, use enough soap to cover hands, rub hands together for 15 seconds, rinse hands, dry with a paper towel and turn off faucet with a paper towel.
- Alcohol-based sanitizer: Used in situations where hands are not soiled with dirt or contaminated with blood or other organic material.
 - o Apply a dime to quarter size portion of sanitizer into hand (enough to coat all surfaces of the hands and fingers) and rub all over hands until dry.
- Nails
 - o Should be short enough to allow for thorough cleaning underneath them.
 - o Should not be long enough to tear gloves.
 - o Should never be artificial.
 - o Only CLEAR polish permitted. Nail polish, if applied, shall be freshly applied and free of chips
 - o An approved lotion is provided in all nursing care areas, which is compatible with other handwashing products used at UK HealthCare.

Infection Prevention and Control Information

Hospital staff follows standard precautions when caring for patients. If the patient is on other infection control precautions, isolation signage will be posted on the patient’s door.

Follow infection prevention and control measures as posted on the door to the patient’s room. See the nurse to obtain personal protective equipment if you must enter the patient’s room or have other contact with the patient.

PATIENT CARE AND SAFETY

If the patient you are assigned needs to be placed in precautions, resource information is on the Infection Prevention and Control sharepoint site via UK's CareWeb intranet.

National Patient Safety Goals

1. Identify patients correctly
 - a. Two patient identifiers (name and date of birth).
 - b. Verification of correct blood with each transfusion.
2. Improve staff communication
 - a. Communicate critical test results in a timely manner.
3. Use medicines safely
 - a. Label ALL medication in cups, bowls and syringes.
 - b. Use caution with patients on blood thinners.
 - c. Record and pass along correct information regarding patient meds.
4. Prevent infection
 - a. Use hand-cleaning guidelines from CDC.
 - b. Use guidelines to prevent infection.
 - c. Use guidelines to prevent infection of central lines.
 - d. Use guidelines to prevent urinary tract infection from catheters.
5. Identify patient safety risks
 - a. Identify patients most likely to commit suicide or self-harm.
6. Prevent mistakes in surgery
 - a. Correct surgery, correct patient, correct body part.
 - b. Mark the patient's body part with their help.
 - c. Use Time Out before surgery/procedure for verification.

Needle Stick Prevention

To avoid a needle stick, **think safety**:

- Place needles and other sharps in a sharps container immediately
- Do NOT recap needles.
- Do NOT place needles in trash or linen.
- Do NOT leave needles in bed or on bedside tables.
- Do NOT overfill sharps container.

Occupational Exposure

An occupational exposure is defined as direct contact with potentially infectious material such as a patient's blood and/or body fluids or instruments that have come in contact with a patient's blood or body fluids. This may occur from a needle stick or cut with a contaminated instrument, a splash, or contact with a break in the skin barrier.

Ancillary/Ambulatory Departments

MRI Safety

All students are expected to adhere to the UK HealthCare policy (DR10-33) regarding MR Safety Education should they have any reason to be in the MRI safety zones #3 and #4.



PATIENT CARE AND SAFETY

Radiation Safety

All students are expected to adhere to the UK HealthCare policies regarding radiation safety should they have exposure to any type of radiation (including pharmaceutical radiation) during their clinical rotation.

Interim Life Safety

Construction Safety

The hospital is constantly undergoing construction or renovation. Whenever a construction or renovation project compromises the life safety systems or poses a significant increase in safety hazards, the hospital implements temporary systems or interim life safety measures (ILSM) to help ensure the safety of its occupants. When an area is operating under ILSM, a sign will be posted.

Hazardous Materials

Depending on your assignment at the hospital, you may use or work around hazardous materials, such as cleaning supplies and chemicals. These materials may adversely affect your health if they are not handled safely and properly.

In the hospital, hazardous materials are labeled to alert staff to the potential dangers. In addition, Material Safety Data Sheets (MSDS), which provide more detailed information about emergency response and spill procedures, are filed in the Hazard Communications Manual in your work area. Your instructor will provide you with information about the hazardous materials with which you may come in contact before you begin your duties.

Medical Waste

Dispose of any waste that is wet with body fluids or blood in a red bag. Do not put other types of waste in the red bags. Large volume liquid wastes, such as chest tubes and suction canisters, are to be placed in the red barrels. Sharps are disposed of in the sharps disposal containers.

Chemotherapy Waste

Place all IV bags and tubing in a ziplocked chemo bag and place it in a specific chemotherapy trash canister. This canister must be double lined with red bags. Needles and other sharps are disposed of in a regular sharps disposal container if they are empty. Syringes with remaining chemotherapy must be disposed of in a separate plastic container labeled "chemotherapy only." Double vinyl gloves or special chemo gloves to administer chemo should be worn for 48 hours after chemotherapy administration when handling blood and body fluids.

In the event of a chemotherapy exposure or chemotherapy spill, notify your instructor and charge nurse and receive instructions.

Electrical Safety

The hospital environment has multiple electrical hazards due to the amount of electrical equipment necessary for patient care as well as being a setting for care of the electrically sensitive patient. This results in a potential for accidental injury, including severe burns to electrocution. The most immediate life-threatening consequence of severe electrical shock is ventricular fibrillation and respiratory arrest.

All electrical equipment used at UK HealthCare must be inspected by Clinical Engineering before it is used. This includes patient, employee and hospital owned equipment. Equipment that is safe to use in patient care areas is tagged with a green sticker and must be within the annual inspection date on the label.

Patient-owned electrical equipment is prohibited in patient care areas except when its use is essential to patient care. Exception: Up-to-date razors and hair care equipment may be used.

PATIENT CARE AND SAFETY

Responsibilities of caregivers when using electrical equipment:

- Make sure inspection sticker is labeled 100 microamps or fewer and is within the inspection date.
- Check the equipment for signs of damage or malfunction. If signs are present, unplug the equipment. Call Clinical Engineering. Complete an orange equipment failure tag.
- Remember that electricity and water do not mix!
- Do NOT touch electrical equipment, plumbing or metal fixtures when touching another appliance.
- If several pieces of equipment are attached to a patient, they should all be plugged into the same group of outlets.
- If equipment blows a fuse, call Clinical Engineering so that they can determine reason.
- All equipment in patient care areas must have a three-prong plug and a three-wire grounding cord. Patients may use radios, etc., using the battery but may not plug into outlets.

Equipment Failure

Inspect medical equipment each time you use it. If you have a problem:

1. Take it out of service.
2. Complete an orange equipment failure tag. Do not change any settings.
3. Call Clinical Engineering and describe problem.
4. Complete a Reportable Occurrence form and include UK property number.

Federal law states that health care facilities must report any incident in which there is reason to believe that a medical device caused or contributed to the death, serious illness or serious injury of a patient.

Incident Reporting

UK HealthCare seeks to provide a safe environment for patients, visitors and employees; the hospital seeks to improve the quality of patient care and to reduce the liability regarding occurrences. In order to accomplish these goals, the hospital requires health care workers to report all unusual occurrences regarding patients, visitors, and employees and to act in compliance with established regulations.

Each occurrence must be reported at the time it is discovered to guarantee that the information is accurate and complete. Faculty and students will be responsible for notifying the unit manager (or designated nurse leader if unavailable) immediately upon recognizing a reportable occurrence. Faculty should also notify the student placement coordinator if an incident report has been filed. Students should communicate patient-related and staff/hospital-related concerns to their instructor.

Reportable incidents include but are not limited to:

- Falls
- Exposures (blood, body fluids, chemical or airborne)
- Sharps injuries (including needle sticks)
- Lacerations
- Contusions
- Back injuries
- Burns
- Equipment malfunction
- Medication errors
- Any variation in standard procedures or practice that increases risk of results in injury
- Verbal or physical assault to an employee, faculty and/or student

PATIENT CARE AND SAFETY

Codes

The hospital uses specific codes to alert staff about hazards or potential hazards in the area or call designated staff to action. These codes are designed to communicate information to those that need it without unduly alarming patients and visitors.

For your information and convenience, a list of pertinent codes is outlined below:

CODE RED: Fire or fire alarm

CODE BLUE/PEDIATRIC CODE BLUE: Cardiac arrest

CODE PINK: Missing infant or child

CODE YELLOW: Community or mass casualty disaster

CODE VIOLET/ASSISTANCE PLEASE: Combative patient

CODE BLACK: Bomb threat

TORNADO WARNING, PHASE II: Tornado has been spotted in area

CODE SILVER: Active shooter

Designated staff members have assigned roles in response to these codes. Ask about your role in these and other response procedures. If the nursing staff provides you with additional instructions, please follow them to ensure your safety and the safety of others.

Fire Prevention and Management – Code RED

If fire, smoke or excessive heat is detected within the hospital, the fire notification system is activated. You will hear chimes over the paging system, followed by the code Code Red and the location of alarm. In addition, the alarm system is activated periodically for fire drills and system testing.

When an alarm is activated, smoke and fire doors throughout the building close. In addition, staff will close doors to patient rooms, clear corridors and implement other response procedures.

Your role in fire response: During your assignment at the hospital, you have a role in fire response. In all cases, your primary role is to ensure the safety of yourself and others in the area.

If you discover a fire in the area: RACE

1. Rescue anyone in immediate danger, if possible.
2. Activate the fire alarm and call 911.
3. Contain smoke/fire by closing door.
4. Extinguish the fire (if possible), and evacuate the area (if necessary). If a full or partial evacuation is necessary, you will be issued instructions over the paging system.

Adult/Pediatric – Code Blue

Dial 3-5200 at Chandler, select option 1 and tell the operator that you are calling Code Blue. Include your name, patient location and what pavilion you are in (Chandler, Pavilion A, Markey Cancer Center, etc.).

Dial 3-5200 at Good Samaritan Hospital, select option 1 and tell the operator that you are calling a Code Blue. Include your name and patient location.

PATIENT CARE AND SAFETY

Infant/Child Abduction – Code Pink

1. Security measures for inpatient infant and children

- To protect the safety of newborns in the Birthing Center and infants and children in Kentucky Children’s Hospital, it is vital that special care be taken to ensure these young patients are released only to the parent or person legally responsible for their care. Review Hospital Policy 01-27, *Infant/Child Security*, for specific guidelines.

**Note: A new infant security system has been installed in the UK Birthing Center. Your instructor will explain some of the particulars of this system to you.*

2. Transporting an infant

- *Be aware that no baby may be transported by anyone not wearing a special yellow ID badge.*

3. Student responsibilities

- Always be aware that there is a risk of a child being abducted. Every unit in the hospital needs to be aware of child abductions, not just staff or students in Kentucky Children’s Hospital or on the OB units. When in the Birthing Center or in Kentucky Children’s Hospital, be observant of individuals loitering, persons in uniform without appropriate identification and any other suspicious individual. Question people without proper identification who they are and why they are on the unit. Direct any suspicions to the charge nurse and to your instructor. If you suspect that an infant or child is missing, immediately notify your clinical instructor, a nurse or the charge nurse.

Bomb Threat Plan – Code Black

- Remain calm, note time and record and prolong conversation.
- Note background noises and any characteristics of the caller.
- Ask caller to describe where the bomb is, what kind of bomb it is and when it is to explode.
- Call 911 and UKPD. UKPD will notify UK Hospital Security Bureau, 3-5156.
- Notify the charge nurse or patient care manager.

Tornado Warning

If a tornado warning is announced:

- Move ambulatory patients away from windows to an inside corridor.
- If a patient cannot be moved, turn them away from the window and cover them with blankets.
- Close all room and fire doors.

Assistance Please – Code Violet

If a patient or visitor becomes combative, you should immediately page for help

1. Call emergency paging at 3-5200.
2. Give the operator your name, phone number and “Assistance Please” location.
3. If the patient or visitor has a weapon, call 911.

Code Yellow – Stand By

If a “Code Yellow” is paged, report immediately to your instructor. Your instructor will notify the charge nurse of how many students are available to help. Stay on the unit to which you are assigned.

If you are doing a preceptorship and your instructor is not available, your preceptor should report your availability to the patient care manager or charge nurse.



PATIENT CARE AND SAFETY



Birthing Center and Kentucky Children's Hospital Symbols

The UK Birthing Center and Kentucky Children's Hospital use the symbol of a butterfly as an indication that someone has suffered a loss of a pregnancy, infant or child. This sign will be placed on the patient's door.

Report

Patients cared for by students are assigned to a staff nurse as well. This nurse will provide you with a report on the patients if your clinical begins after the unit report. You should communicate any questions you have about your patient(s) or any problems your patient(s) may have to the staff nurse. **You should give the staff nurse report on your patient(s) prior to leaving the unit.** We use The Joint Commission sanctioned acronym "S-B-A-R" for safe patient handoff:

- Situation
- Background
- Assessment
- Recommendations

The staff nurse will serve as a resource to facilitate communication with other departments and services.

Health Information Resource Library

The Health Information Library (HIL), commonly referred to as the "Patient Education Library," is in Pavilion A first floor of the hospital near the Information Desk. Education services are provided by a registered nurse patient manager and a patient education librarian. Staff is usually available from 8 a.m. to 4:30 p.m., Monday through Friday. The information library is an excellent resource for you to obtain patient education materials. Hospital nursing units utilize the "Krames on Demand" for inpatient teaching. The intranet website may be accessed at: mc.uky.edu/patiented.

THANK YOU

We hope your clinical experience provides you with many educational experiences that enhance your professional education. We appreciate the opportunity to partner with your nursing school to provide this clinical site for your continued learning.

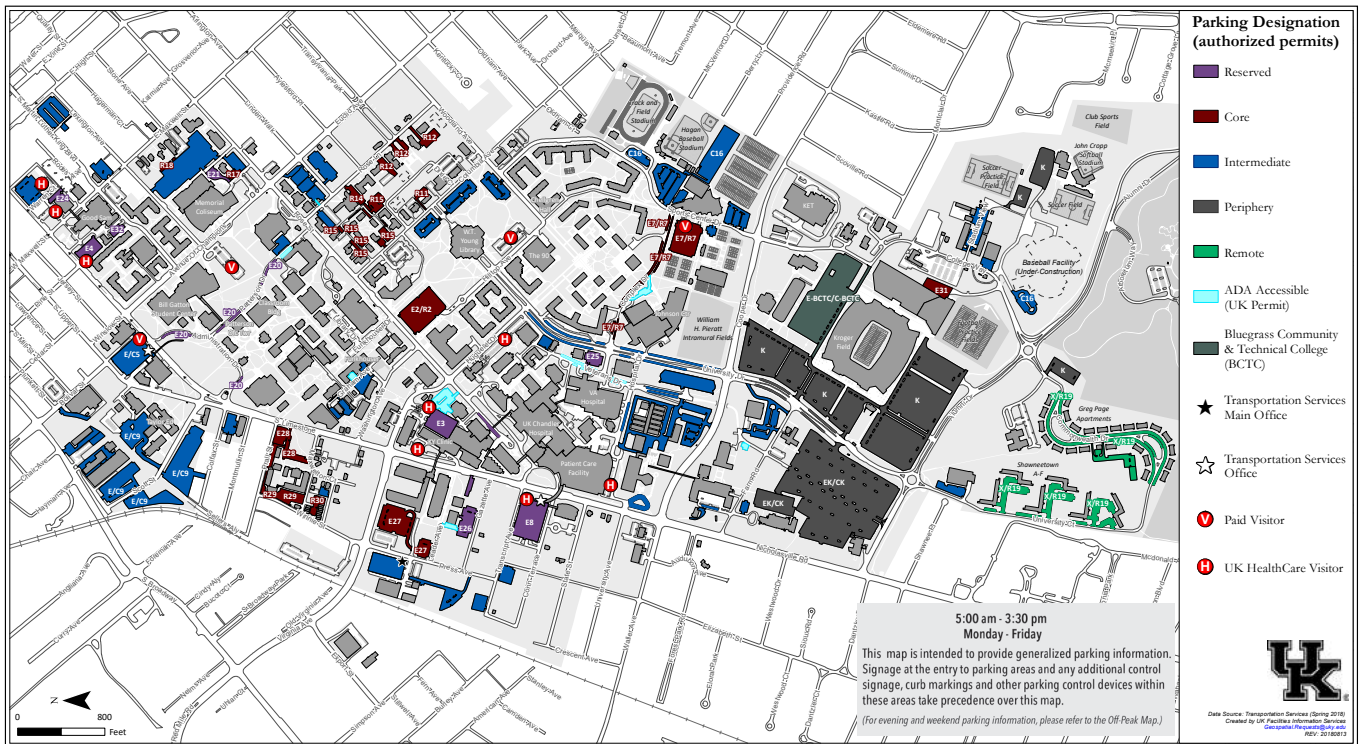
PARKING

Faculty and students are responsible for obtaining a parking pass for UK HealthCare Chandler Hospital, Kentucky Children’s Hospital and Good Samaritan Hospital.


Faculty members are eligible for an E parking permit; non-UK College of Nursing faculty should apply for a “Visiting Professor” parking permit. Permits can be obtained at Parking Structure #6, on the corner of Virginia and Press avenues. Students who plan to drive may apply online for a student parking permit at uky.edu/pts.

Students enrolled at the University of Kentucky follow standard student procedures to obtain parking. Students enrolled in other colleges and universities are required to apply in person at 721 Press Avenue (inside Parking Structure #6, on the corner of Virginia and Press avenues).

Parking is not permitted in any of the hospital/clinic/patient/family parking structures. For more information, the P&TS phone number is 859-257-5757.



APPENDICES A: HIPAA EDUCATION



INTRODUCTION

UK HealthCare complies with the Health Insurance Portability and Accountability Act (HIPAA) because we are a provider of services and are considered a covered entity. Education of HIPAA is a federal requirement and elicits trust from our patients. Please read the overview of HIPAA below and retain this document for reference during observation and learning experiences.

HIPAA BASICS

HIPAA and state law dictates

- Privacy and security of Protected Health Information (PHI).
- Portability of health insurance.
- Simplification of electronic billing.

Purpose of HIPAA

- Protects the privacy of an individual's health information.
- Ensures physical and technical security of an individual's health information.
- Governs the use and disclosure of an individual's health information for treatment, health care billing, research, marketing and other functions.

Patient Benefits of HIPAA

- Patients receive communication on how patient data will be utilized.
- Patients have availability to their patient data.
- Patients are informed if there is a breach of their information.

Protected Health Information (PHI)

- Any oral, written, or electronic individually-identifiable health information collected or stored by a facility.
- Information about an individual's past, present or future physical or mental health condition.
- HIPAA protects all information that can identify a patient in combination with their health information.

HIPAA Privacy Rule

- Patient information is confidential.
- Protects an individual's health information in all forms to include:
 - Written information in all formats.
 - Electronic information (including information from electronic medical records).
 - Information spoken and heard.
 - Information seen.
- Protects an individual's health information past, present, and future.
- Protects individuals living and deceased.

HIPAA Security Rule

- Maintains confidentiality, integrity, availability and privacy of employee, patient, physician, research subjects and University information.
- Applies to all electronic information that is created, communicated, stored or processed.

Examples of Inappropriate Medical Record Access

- Accessing your own medical record (individuals should use personal MyChart access).
- Accessing records of a family member if you are not involved in their care.
- Accessing records to “check on a patient” because you saw a news story about the patient and wanted to see their status.

Social Media and Patient Privacy

- Never share identifiable information about patients on social media.
- Patient related information includes, but is not limited to; photographs of any part of the patient, videos, comments about patients, or other descriptive or identifiable patient information.
- Do not share pictures or content from clinical areas as there could be patients, computer screens, or other patient information viewable in the picture/video.

HIPAA AND YOUR EXPERIENCE

Tips and Best Practices

- Securely store all information (paper and electronic) and never share passwords.
- Sign out of all applications and log off your workstation any time you leave, even temporarily.
- Dispose confidential or protected health information properly by shredding or placing in secured bins.
- Follow guidelines when transmitting information by email, fax, phone, or by other means.
- Never discuss a patient’s medical information in public, even if you think you are alone.

Always Remember

- You are entering an environment that services large volumes of individuals and you are likely to encounter confidential information during your experience.
- You will have some interesting and exciting experiences; you may see well-known individuals; and you may want to share these events with your family and friends, or on social media. However, it is imperative to only speak about your experiences with individuals who have a business related need to know.
- Communicate with general references whenever possible
 - o Example of specific reference: “Jane Doe was referred to a cardiologist.”
 - o Example of general reference: “The patient was referred to a cardiologist.”
- UK Healthcare wants to educate and support our learners; so, ask for help when in doubt.
- **All information regarding an individual’s health care is confidential and should be protected.**

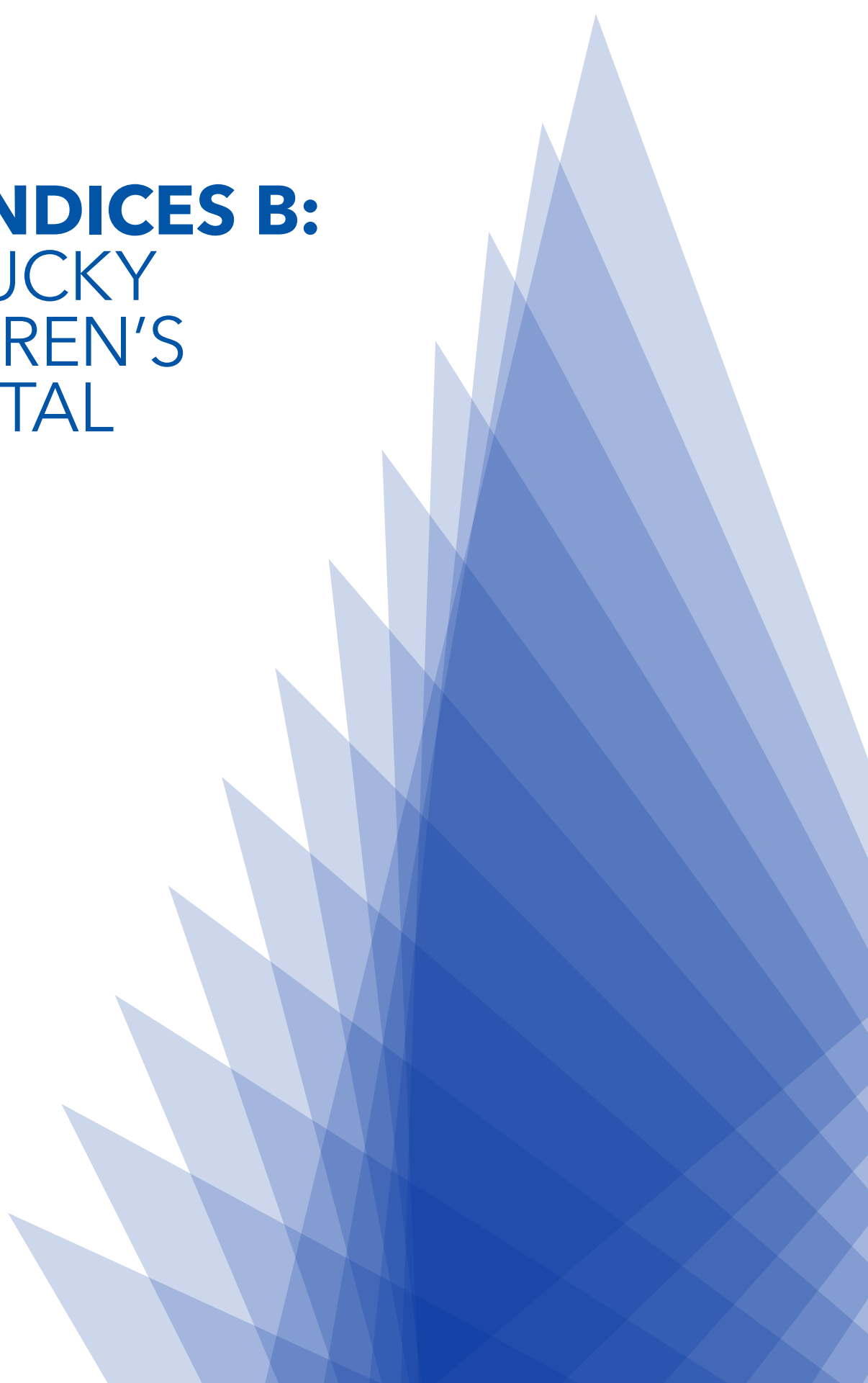
Penalties for Violations

- Disciplinary action by UK Healthcare up to and including dismissal from your observation and/or learning experiences.
- Federal and civil penalties also exist for violations and individuals could be subject to charges.

Methods of Reporting Compliance and Privacy Concerns (3 options)

- Report to your sponsor or preceptor who will investigate the situation.
- Contact the office of Corporate Compliance at 859-323-8002.
- Report anonymously to the ComplyLine at (877) 898-6072 or www.uky.edu/compliance.
 - Please be as detailed as possible because the Comply Line is completely anonymous and only knows the information reported.

APPENDICES B: KENTUCKY CHILDREN'S HOSPITAL



KENTUCKY CHILDREN'S HOSPITAL GUIDELINES FOR NURSING FACULTY

Welcome to Kentucky Children's Hospital (KCH). Our goal is to provide an excellent clinical experience for you and your students. Kentucky Children's Hospital hires new graduate nurses, and the leadership team will happily discuss future employment opportunities with the students.

To help ensure both high-quality care for Kentucky Children's Hospital patients and a meaningful educational experience for nursing students, the following are required before beginning clinical rotations:

- All **new** clinical faculty must meet with the Kentucky Children's Hospital staff development specialist and student placement coordinator.
- **New** faculty who are NOT employed by Kentucky Children's Hospital or who have not worked in Kentucky Children's Hospital for more than one year must orient to the assigned unit(s) and complete the **Kentucky Children's Hospital Clinical Instructor Unit Overview Form**.
 - **New** faculty can anticipate spending 8 to 16 hours on the assigned unit(s) with a nurse preceptor to complete these activities.
 - This documentation must be presented to the student placement coordinator before the first clinical day.
- Faculty with ongoing clinicals at Kentucky Children's Hospital are responsible for communicating with the staff development specialist, patient care manager or assistant patient care manager for updates on any new policies or equipment implemented during the year. Additional training and competency documentation may be required at the discretion of the unit manager.

Clinical faculty should be active in the nursing care of children. Kentucky Children's Hospital has opportunities for nursing faculty to work in on-call positions.

Observational Experience Pediatric ICU/Pediatric Cardiac ICU (PICU/CICU):

- The contact person to help facilitate the placement of students will be the shift's team leader (TL).
- The clinical instructor will bring the student into the unit and work with the TL to find an appropriate assignment/registered nurse for the student to observe. There may be occasions when a nursing student cannot be accommodated for the day, depending on the census and acuity within the PICU/CICU. In this case, the TL will inform the clinical instructor.
- The clinical instructor must leave an emergency contact form with the team leader for the day.
- The student's clinical time within the PICU/CICU is observational only. The student will not provide patient care since the instructor is not present.

Observational Experience in the Neonatal Intensive Care Unit (NICU):

- The contact person to help facilitate the placement of students will be the shift's team manager (TM).
- The clinical instructor will bring the student into the unit and work with the TM to find an appropriate assignment/registered nurse for the student to observe. There may be occasions when a nursing student cannot be accommodated for the day, depending on the census and acuity within the NICU. If this is the case, the TM will inform the clinical instructor.
- The clinical instructor must leave an emergency contact form with the team leader for the day.
- Per policy, no jewelry is allowed below the elbows (for example, rings, watches, bracelets). An initial 15-second hand washing is to be conducted upon entering the unit. Hand sanitizer or hand washing is to be completed when entering/exiting each nursery. Hand sanitizer or hand washing is also to be conducted when going from patient to patient and before/after touching an item in the patient's area. Additionally, no jackets are allowed in the unit, and any long-sleeve shirt must be above the elbow at all times.
- The student's clinical time within the NICU is observational only. The student will not provide patient care since the instructor is not present.

RESOURCE INFORMATION

Overview

Kentucky Children's Hospital is made up of:

- A Neonatal Intensive Care Unit located on the 1st floor of Pav HA with the entrance in Pav A
- A Pediatric Intensive Care Unit/Cardiac Intensive Care Unit on the 4th floor of Pav H
- A Pediatric Progressive Care Unit, 4 North
- Acute Care areas (4 East, 4 West and 6 East in Pav HA)
- An Outpatient/Children's Sedation and Procedural Unit (Ground floor entrance in Pavilion A)
- A Pediatric Sleep Center located on the ground floor entrance in Pavilion A

The Neonatal Intensive Care Unit (NICU) is a 70-bed unit for high-risk neonates, providing Level IV and intermediate care for the newborn. The nurse-to-patient ratio varies from 1:1 to 1:2. We also have a Neonatal Abstinence care unit with nine care-by-parent beds.

The Pediatric Intensive Care Unit (PICU)/Cardiac Intensive Care Unit (CICU) is a 12-bed unit for critically ill children who need constant monitoring and frequent assessment with or without technical life support. Diagnoses in the unit may include trauma and complex medical and surgical conditions, including renal failure, respiratory illness and congenital heart disease. The nurse-to-patient ratio is 2:1, 1:1 or 1:2.

Kentucky Kids Crew is a specialty team providing inter-facility (hospital-to-hospital) critical care transportation for neonatal (newborn) and pediatric patients. Neonatologists and pediatric intensivists direct the team of nurses and emergency medical technicians. Transportation can be either ground/ambulance or flight/helicopter service.

A 12-bed Pediatric Progressive Care Unit is located in the 4 North wing for pediatric patients requiring an intermediate level of care, including frequent monitoring and assessment. The patient population includes telemetry, trauma, medical/surgical care and video epilepsy monitoring. The nurse-to-patient ratio is 1:3.

The 4 East Wing is a 21-bed medical/surgical unit caring for newborn to adolescent patients. The nurse-to-patient ratio is usually 1:3 or 1:4.

The 4 West Wing is a 22-bed unit. Patients with blood disorders or childhood cancers, as well as young adult patients treated with pediatric cancer therapy protocols, are admitted to this unit. Pediatric diabetic patients, as well as general medical/surgical patients aged newborn to 18 years, are admitted to this unit. The nurse-to-patient ratio is usually 1:3 or 1:4.

6 East is an eight-bed pediatric acute care unit directly above 4 East. This unit cares for various acute-level pediatric patients, including post-operative, neurological, behavioral, infectious disease, weight management, orthopedic and primary respiratory care.

The Outpatient/Children's Sedation & Procedural Unit provides care for children who are receiving therapeutic IV infusions or outpatient procedures and other treatments/tests requiring sedation and recovery.

Patient Care Philosophy

Believing in the value society places on children, our goal is to promote the best health and development for all children placed directly or indirectly in our care. The family is the most critical structure in the life of the child. It is the role of the nurse to promote optimum family functioning. Family-centered care provides the structure for planning how to assist each child and family. Parents are encouraged to stay with their children and participate in their child's care to the best of their ability. Information about health care and child development is incorporated into each child's plan of care, and strategies are planned to facilitate learning by the child and family in the most effective way.

Core Concepts of Family-centered Care

Respect and dignity. Health care practitioners listen to and honor patient and family perspectives and choices. Patient and family knowledge, values, beliefs and cultural backgrounds are incorporated into the planning and delivery of care.

Information sharing. Health care practitioners communicate and share complete and unbiased information with patients and families in ways that are affirming and helpful. Patients and families receive timely, complete and accurate information to participate in care and decision-making effectively.

Participation. Patients and families are encouraged and supported to participate in care and decision-making at their chosen level.

Collaboration. Patients and families are also included on an institution-wide basis. Health care leaders collaborate with patients and families in policy and program development, implementation and evaluation; in health care facility design; in professional education; and in the delivery of care.

Adapted from: Johnson, B. H. & Abraham, M. R. (2012). *Partnering with Patients, Residents, and Families: A Resource for Leaders of Hospitals, Ambulatory Care Settings, and Long-Term Care Communities*. Bethesda, MD: Institute for Patient- and Family-Centered Care.

For further information refer to:

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Collaborative Practice

Nursing works with various services to provide coordinated, comprehensive and outstanding care. Staff members are encouraged and supported to participate in quality improvement projects and evidence-based practice studies. Physicians, advanced practice registered nurses, physician assistants, social workers, dietitians, respiratory therapists, pharmacists and physical therapists are some of the disciplines that are essential members of the health care team.

Management

Accountability and responsibility for nursing care are organized within the Children's Service Line. Each unit has a patient care manager and assistant patient care manager who work closely with their staff. A divisional charge nurse is on site 24/7 to facilitate admissions, make decisions regarding bed utilization and coordinate staffing needs. An assistant chief nurse executive and two service directors facilitate quality care across the service line and represent Kentucky Children's Hospital throughout the UK HealthCare Enterprise.

Child Life Program and the Hospital Teacher

Play is an essential part of every child's day and is especially important for the hospitalized child. Assisting in adjusting to a strange environment, coping with stress of illness, and maintaining normal patterns of growth and development are all factors that must be considered. The "play rooms" are considered a safe haven for patients. Procedures, including vital signs and medication administration, are strictly off limits in these areas.

Play opportunities and activities are coordinated through the Child Life program. The Child Life staff are available to assist with pre-procedure preparation of children who are 3 years or older. Fayette County Schools employ a hospital-based teacher as a link between home, school and the hospital.

Kentucky Children's Hospital Health Education Center

The Kentucky Children's Hospital Health Education Center offers a quiet and engaging space for parents, family members, friends and patients away from the bedside. Our experienced staff support the teaching done by the medical care team as families learn about the health problem and its treatment, what they need to do, and why it's important. Free written materials, models and visual media are available for review so families can confidently transition back to their lives at home when ready for discharge. Our hours are currently 10 a.m. to 4:30 p.m., Monday-Friday. We are located in the Kentucky Children's Hospital lobby by the main elevators and NICU entrance.

Pediatric Code Blue and Rapid Response Team

A Pediatric Code Blue is called by pulling the Code Bar (in patient rooms) or pressing the red Emergency button (in support areas) on the nurse call system. To activate the **Pediatric Code** team, dial 3-5200 # 1, and request the Pediatric Code team for the specific location, including the patient room number with prefix (e.g., 4 West or 4 East, HA 4xx or 4 North, N 4xx).

Behavioral Response Team (BERT)

The BERT team comprises a behavioral health specialist, chaplain, divisional charge nurse (DCN), UK HealthCare security (1 or 2), registered nurse and Child Life. The assistance please is for aggressive behaviors, particularly from families and visitors. This can be activated by calling 3-5200, option 2. The assistance please will be announced as an overhead page, so anyone who hears and is available will respond.

Pain in Children

The pediatric nursing staff utilizes several pain assessment tools, specifically for children. Handouts are provided in the Faculty Handbook Addendum. Please refer to these tools and share them with your students.

Patient Confidentiality

Please stress the importance of patient/family confidentiality with students. A consultation room is available for patients, families, nursing staff and physicians to talk privately. Patient charts should be placed in closed chart areas at the pods, and the individual users must log out of the electronic patient records before leaving the computer station. Remind students to refrain from discussing patient care situations in public areas and on social networking sites.

Quiet Time

To promote rest and healing, the Acute Care units observe "Quiet Time" daily between 1:30-3:30 p.m. During this time, hallway lights are dimmed, televisions are off and hallway traffic is minimized. Essential patient care activities continue, including medication administration, scheduled treatments and physician rounding, but routine care should be grouped before or after this period.

Infant/Child Security

To protect the safety of infants and children in Kentucky Children's Hospital, it is vital that special care be taken to ensure these young patients are released only to the parent(s) or person legally responsible for their care. See Hospital Policy 01-27 for instructions in caring for this population.

All units of Kentucky Children's have "restricted access." A UK HealthCare ID badge is required to access these units. Your faculty and student ID badges will be configured in the security office to gain access to these restricted areas.

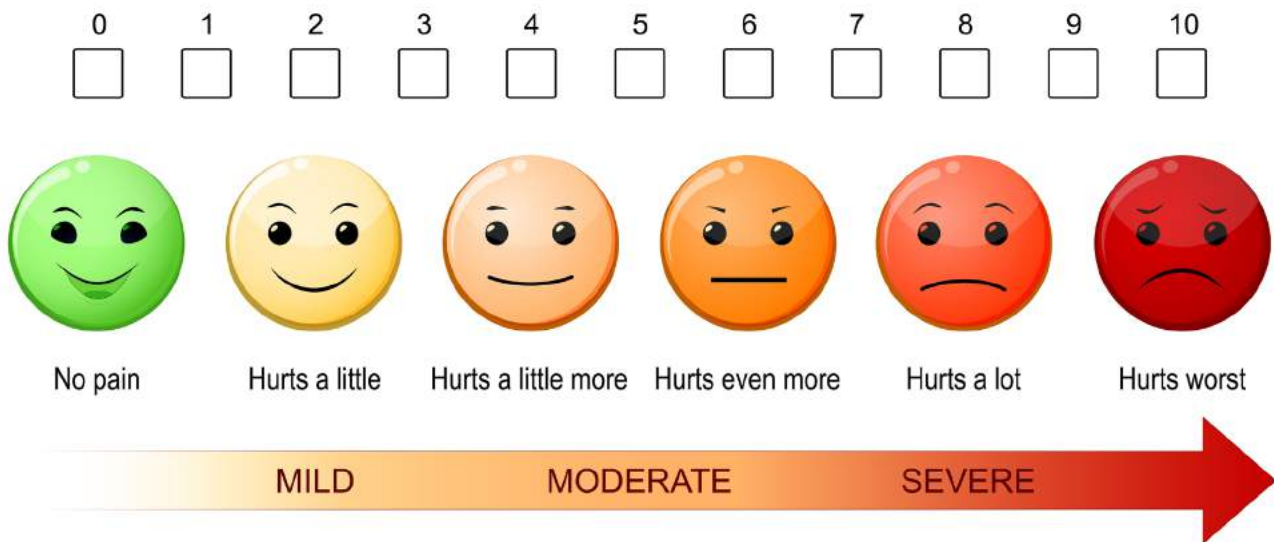
All visitors to Kentucky Children's Hospital must check in at the main entrance of Kentucky Children's Hospital in Pav A to gain access to the units. Parents or guardians of patients are not considered visitors and are given armbands to wear during their child's hospital stay. We encourage all to be vigilant and observant of those without a hospital badge, parent armband or visitor sticker. If someone attempts to enter the unit without the necessary identification, please take them to the Kentucky Children's Hospital main entrance desk.

Always be aware that there is a risk of a child being abducted. Question people without proper identification and ask them to identify themselves, and tell you why they are on the unit. Direct any suspicious activity to the Kentucky Children's Hospital divisional charge nurse (DCN), HA 411. If you suspect an infant or child is missing, immediately notify the DCN and security. A "Code Pink" overhead page indicates that an infant or child is missing. Staff respond by directly observing activity in hallways, stairways and elevators.

Each patient room in Acute and Progressive Care has a supply cart that is accessed by keypad entry. Ask a nurse on the unit for the current access number. **Have a great year and let us know if we can assist you!**

PEDIATRIC PAIN ASSESSMENT TOOLS

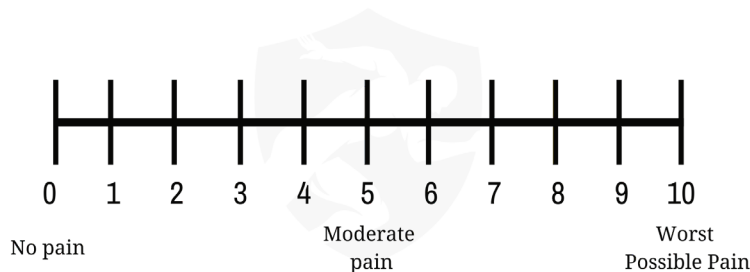
THE PAIN SCALE



Wong-Baker Faces Pain Rating Scale:

1. Point to the faces. Say: "These faces show how much hurt you can have."
2. Ask: "How much hurt do you have now?" If the child seems confused or does not respond, point to face 1 and say, "This face has no hurt." Slide your finger to face 5 and say, "This face hurts as much as you can imagine, although you don't have to be crying to feel this bad."
3. Say: "Pick the face that tells me about your pain right now."
4. Record the number that is under the chosen face in SCM.
5. Intervene if pain is not at an acceptable level and document in SCM.
6. Reassess pain within 60 minutes and document in SCM.

Visual Analog Scale (VAS)



Visual Analog Scale:

1. Show the child the VAS 1-10 scale.
2. Say: "These numbers show how much hurt you have. No. 1 means that you are comfortable and No. 10 means you are having as much pain as you can imagine. You don't have to be crying to feel this bad."
3. Then say: "Pick the number that tells me about your pain right now."
4. Record the number that is chosen in SCM documentation system.
5. Intervene if pain is not at an acceptable level and document in SCM.
6. Reassess pain within 60 minutes and document in SCM.

FLACC Non-Verbal Pain Assessment Scale

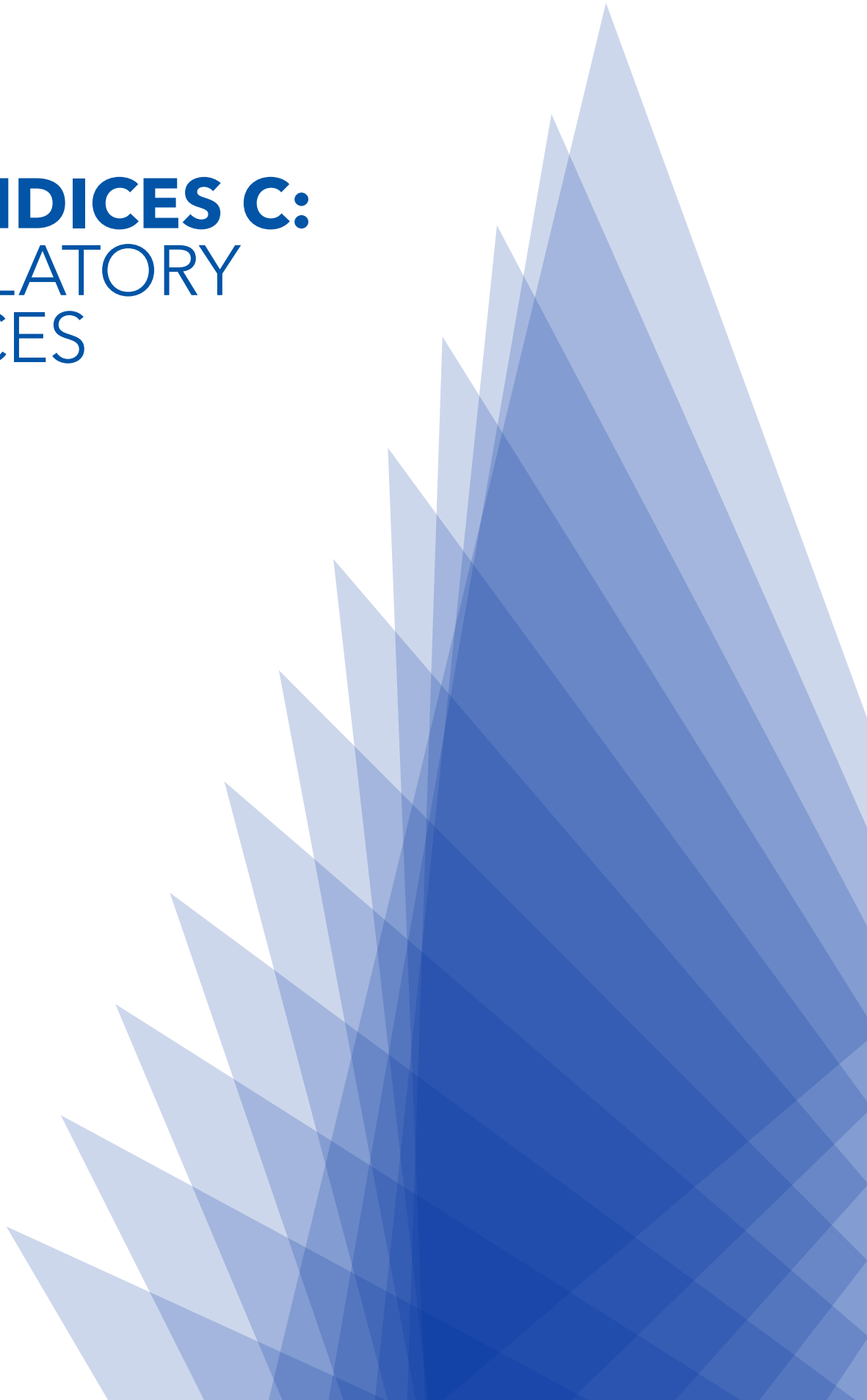
Face	0 No particular expression or smile	1 Occasional grimace or frown, withdrawn, disinterested	2 Frequent to constant frown, clenched jaw, quivering chin
Legs	0 Normal position or relaxed	1 Uneasy, restless, tense	2 Kicking or legs drawn up
Activity	0 Lying quietly, normal position, moves easily	1 Squirming, shifting back and forth, tense	2 Arched, rigid, or jerking
Cry	0 No cry (awake or sleep)	1 Moans or whimpers; occasional complaint	2 Cries steadily, screams, sobs, frequent complaints
Consolability	0 Content, relaxed	1 Reassured by occasional touching, hugging or talking to, distractable	2 Difficult to console or comfort

FLACC Non-Verbal Pain Assessment Scale:

This scale can be used with very young children or children who are unable to speak due to injury, drugs or treatments.

1. Assign a numerical score to the designated observations.
2. Record the score in the designated place in the SCM documentation system. A low total score indicates a low or acceptable level of pain and a high score (maximum score = 10) indicates the most pain.
3. Intervene if pain is not at an acceptable level and document in SCM.
4. Reassess pain within 60 minutes and document in SCM.

APPENDICES C: AMBULATORY SERVICES





AMBULATORY SERVICES

Welcome to Ambulatory Services at the University of Kentucky. With such a vast ambulatory system and a wide variety of primary care and specialty locations, this setting is an excellent opportunity for student nurses.

Introduction

There are many UK HealthCare ambulatory care locations throughout the state. Ambulatory care is both provider-based and non-provider-based and offers many services, including primary and specialty care, rehabilitation, observation, and outpatient surgery.

Leadership

In most cases, ambulatory care staff report to the ambulatory nurse manager. However, staff in ambulatory care without a nurse ambulatory care manager report directly to the practice manager. The chief nurse officer represents Ambulatory Services as well.

Electronic Medical Record

Ambulatory Care uses Epic as the primary Electronic Health Record (EHR). Under no circumstances will the student chart in the EHR utilizing a staff member's login. Practicum/synthesis students will have access to Epic after completing Epic training. A registered nurse will co-sign all student documentation.

Medication Administration

Safe practices must be used when administering medications to patients without barcode medication administration. Medications should be administered under the supervision of a licensed nurse only.

Students should follow the rights of medication administration:

- Right medication
- Right dose
- Right time
- Right route
- Right patient
- Right documentation

Medications prepared in advance and taken into patient exam rooms should be adequately labeled with the medication name, dose, expiration date, and the current date and initials of the person preparing the medication. Before administering medication, the patient's name should be verified, and the patient's armband or barcode on the storyboard should be scanned. See a list of Medication Policies in the Faculty Orientation Handbook.

Point of Care Testing

Point of Care (POC) testing is performed in the ambulatory setting. Accreditation agencies require initial training and ongoing competencies for anyone performing patient testing. Faculty and students without training and competency may not perform POC testing in ambulatory care. Federal regulations also mandate that the person performing testing must be the person documenting results in the medical record. Students should never document on another user's account. Students can shadow and observe trained personnel perform and document POC testing and results.

Emergencies

In a medical emergency within the New Circle Road loop, the first responder should stay with the individual, and staff should call **323-6215** immediately to notify Emergency Dispatch of a medical emergency. UK HealthCare facilities outside New Circle Road loop, Cardinal Hill, Markey Cancer Center, Lexington Clinic AND clinics outside Fayette County should call 911.

Ambulatory Services follows all other UK HealthCare emergency codes. There is no overhead paging system, but a telephone intercom system in ambulatory care may be used to communicate emergency code information.

