

All Faculty Responsibilities

All faculty members are expected to:

1. Review all current faculty and student documents on [Allina Health Student Preparation](#) website for information. This applies even for experienced faculty (to be aware of changes) and for Allina employees who are faculty.
2. Ensure that students have reviewed onboarding and onsite resources and comply with expectations. [Clinical Students and Onsite Faculty Onboarding Requirements](#)
3. When submitting **FINAL Allina Health Roster after all student and faculty requirements are met, send**
 - a. To the site coordinator or for all nursing students send to AllinaAcademics@allina.com
 - b. To [the site parking office email](#) for badges / parking
 - c. If access to medication dispensing cabinets is needed, send roster to [the site Pharmacy inbox](#).
 - d. [See Roster Completion instructions for contact information](#).

Note: Injuries to students or onsite faculty while on site must be reported to department leader. If medical care is needed the student insurance will be billed, not paid for by Allina.

Onsite Faculty Expectations and Preparation (doing site visits in patient care areas, reviewing patient data, or onsite student supervision):

4. Faculty, including those that are active Allina Health employees, are required to complete all faculty onboarding requirements.
5. Group faculty are responsible for the direct supervision of clinical experiences including performance of skills, adequate student competency, documentation, medication administration, etc.
6. All faculty are expected to be competent and knowledgeable with assigned units. Faculty in the clinical environment are expected to have current and appropriate knowledge regarding the assigned unit patient population, unit expectations initiatives and policies.
7. Respiratory Therapy, SRNA, and Nursing faculty should have all students log into the ADC/Omicell on the last day of their clinical experience to minimize problems with access for the next semester.

Additional Nursing Faculty Specific Responsibilities

It is critical that the faculty ensure preliminary and final rosters match the approved placement (dates and specific unit) in TCCP, and that the TCCP number is on the preliminary and final roster. **Additional Onsite Nursing Faculty Expectations:**

- New faculty to a unit **MUST schedule an eight hour shadow/observation shift:** (Required if location is not faculty/employee's home unit):
 - Meet with Charge Nurse, Leader or PCS (Patient Care Supervisor) for:

✓ unit routines	✓ ADC (Omicell)	✓ department specific safety
✓ patient population	✓ unit specific initiatives	✓ documentation
✓ report	✓ policies	✓ use of assignment sheet
✓ equipment		✓ other
- Partner with Charge Nurse to determine student assignments and verbalize what student cares will and Will NOT be performed. See Assignment Sheet.
- Preceptor and patient assignment is prioritized for new hires needs.
- Students **MUST** document all cares provided and medications administered. Faculty or staff **CANNOT** document for a student.
- Divide students as equally as possible between units, if using multiple units.
- Max eight students on unit per faculty (may be less on smaller units).
- Avoid assigning multiple students to one nurse.
- Must be direct communication/report between student/assigned RN.
- Faculty must provide **assignment sheet** on each unit indicating:
 - School name, faculty and cell phone #
 - Students assigned to patient and primary nurse
 - Accountabilities of student and pertinent information
 - List of duties a student cannot perform

NURSING STUDENT TASK LIMITATIONS:

Faculty and preceptors must critically think about the course objectives, what the student's individual level of skill is, and what the faculty/preceptors' level of comfort is with the student completing a skill. **Nursing Students at Allina cannot perform the following skills during their clinical experience:** These tasks require a licensed professional (also applies to MANE students):

- Administer Controlled Substances (also may not remove or document administration of controlled substances)
- Administer Blood
- Administer regular insulin intravenously.
- Program a PCA pump
- Manage Epidural Infusion, Tubing or Pump Settings
- Do EKG or Fetal Monitoring Interpretation
- Take Verbal or Telephone Orders
- Verify Informed Consent
- Advance the plan of care (must be licensed professional)
- Double check medications when two RNs are required
- Do Blood Glucose Monitoring (student may be involved in the critical thinking of what to do with the data, but may **not** perform the task)

There may be additional restrictions at some sites. Please see the site-specific faculty and student document.

Nursing and Respiratory Therapy Students: Medication Administration via the Automated Dispensing Cabinet (ADC) "Omniceil":

- All nursing and respiratory therapy students are required to have their own ADC access code.
- It is not permissible for faculty/staff to remove or administer the medications on behalf of the student. Faculty **WILL NOT** be given access to the ADCs and will not be able to remove/administer medications.
- All medications need to be documented and double checked by a licensed RN/RT (either the faculty or the preceptor) for every medication removed from the ADC by the student.
- Students will need to be fingerprinted on their first clinical day on the assigned ADC. Contact Charge Nurse, Unit Leadership, or site pharmacy if needing assistance with fingerprinting.
- Students are not permitted to administer controlled substances.
- PLEASE NOTE: For access to the ADC, the FINAL roster must be sent by the school to the site pharmacy email (included on page 2 of roster). Please be sure to include the specific unit (i.e. ANW – H8000, United – 2600, etc.). Must include the Allina User ID (A# or D#) and Non-employee ID number (6 or 8 digit number) on the roster. If any of this information is not on the final roster when submitted to Pharmacy, the student will not have access when they start their clinical experience, and may not participate in medication administration.

The Allina Health Omnicell system has an automatic termination function built into it.

- If a student has not accessed an Omnicell cabinet for a period of six months, access is terminated. Access may also be terminated at the end date of each clinical rotation.
- Re-establishing access requires that it be requested again.
- The access "countdown" starts when the student logs into a cabinet. They do not need to be making a medication transaction; the student simply needs to log into a cabinet.
- The suggested process to help alleviate this for a returning student is as follows:
 - Log into the assigned cabinet at least twice during the rotation —
 - i. first day of the rotation
 - ii. last day of the rotation
- If terminated, access has to be requested again after the student arrives onsite.

Clinical Nursing Group Observation Experiences:

- All requests must be approved in TCCP as a Group Observation (Grp-Obs) and linked to a clinical group.
- Observation must be on the same day and time as the clinical group.
- Faculty must be **on-site** and easily accessible if needed during the observation time.
- Faculty do not need to complete an observation/orientation shift to the observation unit, but they do need to know who the leader is and where the unit is located.
- Strictly observation only. Absolutely **no hands-on** during observation time. If hands on is required, must be approved as a preceptor placement – even if the experience is mostly observation.
- The faculty will provide a plan/calendar at the beginning of the rotation to the unit leader indicating which student will be observing which day. Faculty must send a copy to AllinaAcademics@allina.com. The faculty is required to ask the unit leader, how they want to be informed of changes.
- Units have the right to determine how many students they will take during a shift (most only take one student per day).

Additional questions after reviewing [Allina Health Student Preparation](#) site refer to AllinaAcademics@Allina.com.