

# **STEIN ACADEMY**

**SCHOOL OF HEALTH, TECHNOLOGY &  
CAREER DEVELOPMENT**

**3610 Milford Mill Rd.  
Baltimore, Maryland 21244**

**CNA/GNA STUDENT**

**CLINICAL INFORMATION  
PACKAGE**

TO: ALL CLINICAL STUDENTS  
FROM: STEIN ACADEMY SCHOOL DIRECTOR

Re: Student Conduct

This is a reminder to all clinical students that you are expected to be of utmost good behavior during your clinical. That means that certain rules and regulations of the school and clinical site has to be upheld. This include, but not limited to the following:

- (1) You must only take instructions from your instructor.
- (2) You must report to the clinical site on time.
- (3) You cannot leave the clinical site at any time without the permission of the instructor.
- (4) You cannot leave for home at the end of the clinical day without proper discharge from your instructor.
- (5) You cannot leave the patient unattended at any time.
- (6) You must dress appropriately for clinical as instructed at the School in white scrubs, white (closed) shoes or sneakers with the school ID. No open shoes, no color trimmings on scrubs, No nose, tongue or lip rings, no bright, multi-colored hair style, no large or dangling ear rings, no long fingernails.
- (7) Absolutely, no use of cell phone or texting in the clinical building!
- (8) You are not allowed to lift or move a patient without (a) the permission of your clinical instructor (b) the presence of your clinical instructor.

(A) Failure to follow any of the rules mentioned above will result in **IMMEDIATE TERMINATION AND DISMISSAL** from the clinical site and from the CNA /GNA program.

Furthermore, you should keep in mind (1) that the assignment of students to patients is the sole duty and responsibility of the clinical instructor. Failure to accept your assignment is unacceptable and will also result in **IMMEDIATE TERMINATION AND DISMISSAL** from the clinical site and from the CNA /GNA program.

(B) Any disruptive behaviors whatsoever, including insubordination or refusal to take orders and/or instructions from the instructor will also result in **IMMEDIATE TERMINATION AND DISMISSAL** from the clinical site and from the CNA /GNA program.

**ZERO TOLERANCE:** There will be zero tolerance for students and/or student conducts that are unprofessional, pose risk and danger to nursing home residents, employees and fellow students and/or violate Stein Academy's student codes of conduct or the rules and regulations of the clinical facility. I, the student whose name and signature appears below also agree to abide by the list of behaviors and consequences listed in the "PROGRAM WARNING/DISMISSAL SLIP" which were read to me and all the students in class.

Name of Student: \_\_\_\_\_

Signature of Student (acknowledging receipt) \_\_\_\_\_ Date: \_\_\_\_\_

**P/S: Reminder! Your Signed Copy is on File**

## Addendum to CLINICAL STUDENT CONDUCT LETTER

### A Reminder! Your signed Copy is on File

I, \_\_\_\_\_ a Stein Academy student assigned to clinical rotation at \_\_\_\_\_

#### Agree to the following:

- (1) I will keep confidential any patient information I come across during my clinical rotation at the clinical site.
- (2) I will follow all the rules of the clinical site as presented to me, or as required by the clinical site.
- (3) I understand that I am not an employee of the clinical site, and can therefore, be asked to leave the premises for violating the rules of the clinical site.
- (4) I will not print or transmit by e-mail, by U.S. mail or any other means, any negative or damaging or slanderous statement about the clinical facility, its staff, administration or patients. Please be aware that your signature is legally binding. In other words, any violations of this agreement will be pursued by legal action from Stein Academy and the clinical site.

Furthermore, I \_\_\_\_\_ also, fully understand, accept and agree that any of the following conducts during clinical will subject me to immediate dismissal or to one/first warning, followed by a dismissal from the facility and the program:

- (a) Using cell phone or texting inside the clinical building\*
- (b) Being disruptive in the clinical site\*
- (c) Being disrespectful to the clinical instructor, staff, or administrators of the clinical site.\*\*
- (d) Refusing to follow instructions or to perform assigned skills clinical\*
- (e) Arriving Late during Clinical or leaving the clinical site before proper dismissal by the instructor.\*\*
- (f) Carrying on private conversation in the clinical building.\*\*
- (g) Cursing or use of profanity, foul, derogatory, or offensive language in clinical facility.\*
- (h) Fighting in clinical facility.\*
- (i) Sexual harassment in clinical facility.\*
- (j) Possession/use of firearm or tobacco products in the clinical premises.\*
- (k) Leaving patients unattended.\*

**Note:** Students who are not properly attired or dressed, or with tongue, nose or lip rings, long or large dangling ear rings or bright, multicolored hair style will not be allowed to do the clinical and will not be allowed into the clinical facility.

**Note:** \* = Immediate Dismissal from site & program

\*\* = One Warning, followed by dismissal from site & program

Name of Student: \_\_\_\_\_

Signature of Student: \_\_\_\_\_

Date: \_\_\_\_\_

CC: Legal Department



## **POLICY ON LIFTING/MOVING PATIENTS.**

Stein Academy prohibits clinical students from lifting and/or moving patients without the permission of their clinical instructor, and the presence of their clinical instructor.

Stein Academy clinical students must only lift/move patients with (1) the permission of their clinical instructor, and (2) the presence of their clinical instructor.

Students who fail to follow the said policy will be responsible for any injuries caused.

I, \_\_\_\_\_ hereby certify that I have read, and understand the policy regarding lifting/moving patients during clinical/externship. I further certify that should I fail to follow the said policy on lifting/moving of patients, I will be solely responsible and will hold the school or clinical/externship facilities harmless in the event of injury.

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**Signature of Student**

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**Date**

**P/S: Reminder! Your Signed Copy is on File**

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## RESIDENT RIGHTS

### The right to **INFORMATION**

- The resident has the right to all records. This includes the medical record, contracts, incident reports, and financial records.
  - The request can be oral or written.
  - The record must be available within 24 hours of the request.
  - The agency has 2 working days to provide requested photocopies.
- The person must be fully informed of his or her total health condition.
  - Information is given in language the person can understand.
  - Interpreters are used for those speaking a language other than English.
  - Sign language or other aids are used for persons with hearing impairments.
- The person is given information about his or her doctor. This includes the doctor's name, specialty, and how to contact the doctor.

### The right to **REFUSE TREATMENT**

- OBRA defines treatment as care provided to relieve symptoms, improve functional level, or maintain or restore health. A person who does not give consent or refuses treatment cannot be given the treatment.
- The agency must find out what the resident is refusing and why. The agency should try to educate the person about the treatment, problems from not having the treatment, and other treatment choices.
- Although the resident may refuse a specific treatment, the agency must provide all other services.
- Advance directives are part of the right to refuse treatment (see Chapter 36). They include living wills or other instructions about life support.
- The resident has the right to refuse to take part in research.

### The right to **PRIVACY**

- The resident's body must not be exposed unnecessarily.
- Only those workers directly involved in care, treatments, or examinations should be present. The resident must give consent for others to be present.
- A resident has the right to use the bathroom in private.
- Privacy must be maintained for personal care activities.
- Residents have the right to visit with others in private.
  - They have the right to visit in an area where they cannot be seen or heard by others.
- The agency must try to provide private space when it is requested. Offices, chapels, dining rooms, meeting rooms, activity rooms, and conference rooms can be used if available.
- Residents have the right to private telephone conversations.
- Residents have the right to send and receive mail without interference by others.
  - Letters sent and received by the resident are not opened by others without the resident's permission.
  - Mail must be delivered to the resident within 24 hours of its delivery to the center.

### The right to **CONFIDENTIALITY**

- Information about the resident's care, treatment, and condition must be kept confidential.
- Medical and financial records are confidential.
- The resident must give consent for the release of any record to other agencies or persons.
  - Consent is not needed for the release of medical records when the resident is transferred to another agency.
  - Consent is not needed to release records when they are required by law or for insurance purposes.

## RESIDENT RIGHTS—cont'd

### The right to **FREEDOM FROM ABUSE, MISTREATMENT, AND NEGLECT**

- Residents must be free from verbal, sexual, physical, or mental abuse (see Chapter 2).
- Residents have the right to be free from involuntary seclusion. Involuntary seclusion is separating the resident from others against his or her will. It can also mean keeping the person confined to a certain area or away from his or her room without consent.
- No one can abuse, neglect, or mistreat the resident. This includes center staff, volunteers, staff from other agencies or groups, other residents, family, visitors, and legal guardians.
- Agencies must have policies and procedures for investigating suspected or reported cases of resident abuse.
- Long-term care centers cannot employ persons who were convicted of abusing, neglecting, or mistreating other individuals.

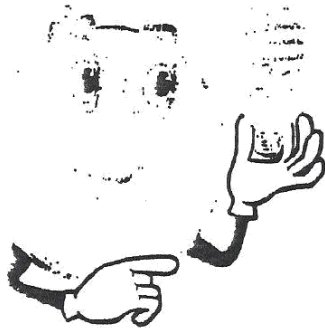
### The right to **FREEDOM FROM RESTRAINTS**

- Residents have the right not to have body movements restricted.
- Restraints (see Chapter 10) and some drugs restrict body movements. Some drugs restrain the person because they affect mood, behavior, and mental function.
- A doctor's order is necessary to use restraints.
- Sometimes residents are restrained to protect them from harming themselves or others.
- Restraints cannot be used for the convenience of the staff or to discipline a resident.

### The right to **QUALITY OF LIFE**

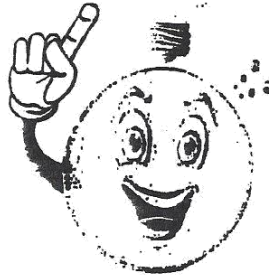
- Residents must be cared for in a manner that promotes dignity, self-worth, and physical, psychological, and emotional well-being.
- Personal choice, privacy, participation in group activities, having personal property, and freedom from restraint show respect for the person.
- The resident is spoken to in a polite and courteous manner (see Chapter 6).
- Good, honest, and thoughtful care enhances the resident's quality of life.
- The actions in Box 5-6 on p. 92 show concern for the person's dignity and privacy. These actions are required by OBRA.
- Long-term care centers must provide activity programs that meet the interests and physical, mental, and psychosocial needs of each resident.
- Activities must allow personal choice and promote physical, intellectual, social, and emotional well-being.
- The center's environment must promote quality of life.
- The environment must be clean and safe and be as homelike as possible.
- Residents are allowed to have personal possessions. This allows personal choice and promotes a homelike environment.

### *Things to Remember!*



1. Answer call lights *as promptly as possible*.
2. Leave signaling devices within client's reach.
3. Turn and reposition clients a minimum of every 2 hours.
4. Provide privacy when giving care.
5. Treat all clients, coworkers and yourself with respect and dignity.
6. Wash your hands:
  - ✓ before handling clean linen,
  - ✓ Before and after break,
  - ✓ Before and after lunch and
  - ✓ Before going home
7. Practice standard precautions at all times.
8. Remove gloves and isolation gowns in the client's room before entering the Hallway.
9. All clients are covered when transported to the shower room.
10. Male residents are shaved every day as indicated.
11. Bedside tables are restocked and wiped off every shift:
  - ✓ Oral care supplies products are cleaned after use and stored in the emesis basin in the top level;
  - ✓ Hair brushes and combs are cleaned after each and stored in the top level;
  - ✓ Wash basins are cleaned and stored in the middle level;
  - ✓ Bedpans and urinals are cleaned after each use and stored in the bottom level.
12. Carry linens away from your body.
13. Keep clean linen carts covered at all times.
14. Clean linen should be placed on a clean surface, not on the bed that's about to be changed.
15. Clean linen is stored on the linen cart, not hidden in the client's closet.





16. Keep soiled linen off the floor.
17. Soiled linen hampers and wastebaskets are lined with plastic bags.
18. Soiled linen must be bagged in the client's room before transport in the hallway.
19. Serve food trays to all independent and "set-up" clients before assisting those who need to be fed.
20. Fresh water and ice is given to all clients as indicated every shift.
21. Elevate the head of the bed for clients receiving tube feedings.
22. Clients with contracted hands need their hands washed, dried and positioned with a hand roll every shift.
23. Use underpads and/or draw sheets to turn and reposition clients.



24. Practice good body mechanics.
25. Give help and support to your coworkers as needed.
26. Maintain a positive, professional attitude at all times.
27. Communicate any client-related observations and/or concerns to the nurse.
28. Encourage hydration and proper nutrition.
29. Help clients to be as independent as possible and encourage them to participate in life.
30. Remember that you are very important to our clients;  
*Let the quality of your care speak for you!*

## NURSING ASSISTANT ENVIRONMENTAL ROUNDS

### PRIVACY/DIGNITY

- Privacy curtain pulled totally around bathing or changing area. Even if door to room is closed, the curtain must be pulled all the way.
- Cover resident as much as possible when bathing. Never leave resident completely exposed.
- Knock on doors or announce yourself prior to entering resident rooms.
- Always address residents by Mr. or Mrs. Never call them or refer to them by their last names only.
- Do not discuss residents where you can be overheard by others, e.g.: "Mrs. H. is wet again."

### CALL LIGHT

- Within reach of all residents, regardless of mental or physical status.

### FLUIDS

- Accessible to all residents unless being tube fed or on fluid restriction.

### APPEARANCE

- Appropriately dressed, hair groomed, fingernails and dentures clean. Odor free.

### POSITION

- Protection from breakdown. Pillow between the knees. Hand rolls when hands are clenched. Positioning devices (see devices)
- Head of bed up on residents who are being tube fed.
- Turn and reposition a minimum of every two hours.

### DEVICES

- Splints, TED stockings, heel protectors, geri gloves, etc. On and off as ordered.

### OXYGEN

- Tubing and cannula to be placed in plastic bag when not in use. If found on the floor, tubing and cannula have to be replaced and dated. Protect resident from ear breakdown by placing some barrier between the ear and the tubing.

### CATHETERS

- Privacy cover for drainage bag. Stabilizing strap attached to leg to prevent pulling, tugging and/or injury.
- Tubing to be kept off the floor.
- Drainage bag kept below bladder level. If above bladder level, urine will flow back into bladder, increasing risk of infection.

### RESTRAINTS

- Release and reposition resident a minimum of every two hours. Ambulate residents who are able to walk.
- Full, bilateral side rails are to be used only when specifically ordered by the physician or requested by the resident.

### SKIN ASSESSMENT

- When bathing or changing residents, always pay special attention to the skin condition. Any redness, skin tears, bruises, etc. must be reported to the nurse immediately. Note whether lips are cracked, mouth is dry, etc.

### NUTRITION/MEALS

- Deliver trays as soon as possible. Set up tray and position the resident in an upright position to prevent aspiration/choking. If resident does not need to be fed, you must still check the resident to make sure that he/she is eating. Some residents have a tendency to fall asleep, especially at breakfast. Other residents need encouragement.
- Get a substitute if resident expresses dislike for the food that has been served.
- Report any changes, such as decreased appetite, complaints of problems swallowing, etc., to the nurse.
- Document intake on appropriate form.

### COMPLAINTS

- Listen to the resident. Any complaint, regardless of its nature must be followed up. Report all complaints to the Charge Nurse or Director of Nursing Services.

**REFER ANY QUESTIONS OR CONCERNS ABOUT THE RESIDENT TO THE NURSE**