HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Correction
Division Of Prisons

SECTION: Personnel

POLICY #   P-9

PAGE   1 of 20

SUBJECT:  Nursing Orientation, Mandatory Training and Competency Evaluation

EFFECTIVE DATE:      May 2010
SUPERCEDES DATE:   July 2005

PURPOSE

The purpose of this policy is to insure that all nursing staff receives:

➢ a comprehensive, standardized orientation, which encompasses administrative, custody and health services information;
➢ in-service and on-the job training and continuing education in order to perform their job and enhance their knowledge and skills, and
➢ a competency evaluation of clinical skills to insure the safety of nursing care.

DEFINITIONS

Licensed nursing staff – state employed and contract registered nurses and licensed practical nurses

Unlicensed nursing staff – state employed and contract Correctional Healthcare Assistant I and II’s

Nursing Staff – licensed nursing staff, unlicensed nursing staff, Medical Record Assistants and other clerical staff assigned to medical and inmate care assistant (ICA).

Employee – state employed and contract, licensed and unlicensed nursing staff and medical records assistants/clerical staff

Inmate Care Assistant (ICA) – previously called Inmate Orderly - an inmate, who has been assigned by Programs, to work in a chronic disease, long term care or non-acute care medical unit as per job description. The Inmate Care Assistant has completed special training to be a nurse assistant I.  This position is not regarded as an employee.

Continuing Education – Educational programs designed to build on or improve the basic nursing knowledge base. These programs usually provide formal recognition of credit by awarding continuing education units through the governing body of education for the profession.

In-Service Training – Training provided to ensure processes occur according to the policies and procedures of the employer. This training can be formal as in classroom or lecture; or informal such as on-the-job training by a peer preceptor.

On-the-Job Training – Informal training provided by a peer preceptor usually one on one.

Competency Evaluation or assessment – determining the degree of proficiency in clinical skills

Orientation - Training provided by the employer to a new employee or to an employee who has new responsibilities due to a position change; this training ensures the employee understands their job responsibilities, and has adequate information to meet the expectations of the employer.

Preceptor – teacher, instructor

Proficient – performs well
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PAGE   2 of 20

SUBJECT: Nursing Orientation, Mandatory Training and Competency Evaluation

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POLICY

1. The nurse manager will ensure that every nursing staff receives orientation, training and competency evaluation as specified in this policy and procedure. In facilities with one nurse, Regional Nurse Supervisor will ensure the nurse receives orientation, training and competency evaluation as specified in this policy and procedure.

2. The nurse manager or Regional Nurse Supervisor will assign a preceptor(s) to provide orientation and needed on-the-job training, and to conduct the competency assessments for new employees, employees who have changed positions and inmate care assistants.

3. No licensed or unlicensed nursing staff or inmate care assistant will be assigned or delegated duties involving skills that have not been determined as proficient.

4. Orientation
   a. Orientation is to be completed within the 90 day probationary period except for externally scheduled classes such as OPUS, etc.
   b. Each facility will add to the statewide orientation checklist (Refer to Attachment 1) any facility-specific items such as Standard Operational Procedures, etc.
   c. Multiple departments and disciplines may be involved in orienting staff, such as OSDT, custody officers, administrative staff, etc.
   d. Newly hired staff will attend a facility or regional Nursing Orientation, utilizing a standardized curriculum reviewed by the Nursing Education Director and Nurse Education Committee. Facility Nursing orientation will be scheduled by the facility Nurse Educator. Nursing orientation trainings will be by the regional medical office Coordinator.

5. Competency Assessment
   a. Every licensed and unlicensed nursing staff will do a self-assessment of their clinical skills using the DOP form “Self-Assessment of Clinical Competencies” (Refer to Attachment 2) during the time of orientation, and for state employed staff repeat every year at the time of the final TAPS Evaluation, and for the contract staff repeat at the annual date of hire.
   b. Each facility will add to the self-assessment form any pertinent skills based on the facility’s medical mission, and develop individual competency evaluation forms for those skills. This may include but not limited to new medical equipment, clinical protocols, etc.
   c. In-service training will be provided to all nursing staff not proficient in skills needed to do their job. This training will be conducted as specified in the instructions located in the Nursing Orientation Manual.
   d. Competency of required skills will be documented on all licensed and unlicensed nursing staff and inmate care assistants.
   e. Medical Record Assistants and other clerical staff will also have an evaluation of skills pertinent to their job. These skills will include but not limited to OPUS, computer skills, management of medical records, etc.

6. Mandatory Training
   a. All licensed and unlicensed nursing staff and Medical Record Assistants/clerical staff will attend training as specified for their position (refer to attachment 3)
   b. Mandatory training will be accomplished in a variety of ways such as classroom, handouts, self study, visual aids, etc.
   c. Training needs are position specific. These training requirements will need to be reassigned with any medical staff position changes.
   d. All training will be scheduled within 90 days of position assignment with the exception of externally scheduled classes such as Board of Nursing training.
e. Training requirements will be classified as: 1). Upon employment  2). Annually or 3). Every 2 years.

7. Maintaining Documentation
   a. Orientation and competency evaluation forms shall be maintained in the employee’s personnel file in facility administration. A copy of these forms may be kept in the nurse manager’s office or the facility’s Education Department.
   b. Course attendance will be documented in the OSDT Staff Training System (STS) using standardized course numbers.
   c. Forms completed on the Inmate Care Assistant will be maintained by the nurse manager and the Programs staff.

PROCEDURE

1. Refer to the Nursing Orientation Manual for orientation forms and information, competency evaluation forms and associated in-service or on-the-job training instructions.

2. Orientation
   a. The preceptor(s) is to utilize the DOC Nursing Orientation checklist when orienting employees, and the Inmate Care Assistant Orientation checklist when orienting ICA’s.
   b. Each preceptor, who is involved in the orientation of nursing staff, is to sign the orientation checklist. All preceptor initials are to correspond to a signature on the first page of the checklist.
   c. Preceptors are to initial and date items on the checklist that were conducted by other departments and disciplines such as administrative, custody or OSDT staff. The preceptor is to confirm that the employee did attend the orientation by the other departments or disciplines.
   d. Items on the checklist, that do not apply due to the facility mission or the discipline of the nursing staff, are to be marked “non-applicable”.
   e. As the staff is oriented to particular items, they are to initial and date. The staff is to sign at the top of the first page so as to correspond with their initials.
   f. The nurse manager/designee or ADON is to schedule the staff to pertinent training as indicated on the orientation checklist and record the date attended. (Refer to item 3 below)
   g. The preceptor(s) is to check off clinical skills as indicated on the orientation checklist and record the date that the skill was determined to be proficient (“performs well”). Proficient skills (“performs well”) noted on the self-assessment checklist are to be dated on the orientation checklist as to when the self-assessment was done. (Refer to item 5 below)

3. Mandatory Training
   a. The Nurse Manager/designee is to assign mandatory training needs according to the Mandatory Training Requirements by Discipline. (See attachment 3).
   b. Dates of attendance for the training are to be notated on the orientation check list.

4. Self-Assessment of Clinical Skills
   a. During orientation and annually at the time of the final TAPS Evaluation, each licensed and unlicensed nursing staff will be given the “Self-Assessment of Clinical Competencies” checklist (refer to Attachment 2).
   b. The employee is to rate their level of proficiency for each skill listed unless it is a skill not within their scope of practice or not required for the facility’s medical mission. In this case the item is to be marked “NA” for non-applicable.
   c. The employee is to print and sign their name and date the self-assessment form.

5. Competency Evaluation
a. The preceptor(s) is to provide the employee on-the-job training for each skill rated less than “performs well”, and will assess their competency using the skills competency checklist. The instructions for training and the training tools are located in the Nursing Orientation Manual.

b. The preceptor(s) is to assess the staff’s competency in performing clinical skills in accordance with their job description and facility medical mission. Competency checklists are be utilized to document these assessments.

c. Each checklist designates how many successful demonstrations are needed before competency can be determined as proficient.

d. Each evaluator’s initials and signature are to be recorded on the competency checklist.

e. Upon successful completion of the skill evaluation, the employee is to print and sign their name, title and date the form.

f. The facility name and number are to be recorded on the competency checklist.

g. The preceptor and staff are to initial off and date the clinical skill on the Orientation Checklist.

5/1/10

Paula Smith, M.D., Director of Health Services Date

SOR: Director of Nursing
ATTACHMENT 1

NORTH CAROLINA DEPARTMENT OF CORRECTION
NURSING ORIENTATION

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<thead>
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<th>COMPONENTS</th>
<th>Date of Review</th>
<th>Employee Initials</th>
<th>Non-Applicable (N/A)</th>
<th>Preceptor Initials</th>
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**NCDOC OVERVIEW**
- History of NC Prison System
- Department’s Mission and Vision Statement
- Custody Chain of Command
- Classification of Correctional Facilities
- Classification’s Chain of Command
- Table of Contents - DOC Policies
- Table of Contents - DOC Benefits

**NCDOC HEALTH SERVICES AND NURSING SERVICES**
- Health Services’ Mission, Vision, Goals & Objectives
- Health Services Treatment Philosophy
- Health Services Chain of Command and Organization Charts
- Nursing Services’ Mission, Vision, Values, Strategic Plan
- Staffing Standards - Order of Facility Classification

**SAFETY & SECURITY**
- SOP's (Unit Specific)
- Keys
- Locked Gates
### Overview of Count

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<tr>
<th>Medical Supplies</th>
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### Medical Tools Control

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<th>Undue Familiarity with Inmates</th>
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<td>Games Inmates Play</td>
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<tr>
<td>Self-Injurious Behavior</td>
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<tr>
<td>Inmate Knowledge of Outside Medical Appointments</td>
</tr>
</tbody>
</table>

### Segregation

### PERSONNEL

### Professional Licensure, Credentials, Verification, Renewals

### Employee Job Description and o-chart

### Sign up in Personnel

### Obtain Name Badge

### Parking

### Obtain OPUS access

#### Role of Various Nursing Staff Positions (listed below)

- RN - Staff Nurse
- RN - Lead Nurse
- Nurse Clinician
- LPN
- CHA II / Medication Technician
- CHA I
- Inmate Care Assistant
- Medical Records Assistant
- Utilization Review Nurses
- Outreach Nurses
- Triage RNs
- Nurse Supervisor, Nurse Manager, Regional Nurse
- Supervisors, ADON & Inpatient DONs
- Nurse Liaison & Nurse Educator
- DOP Director of Nursing

#### Dress Code

#### Obtain Uniforms

### DELIVERY OF NURSING CARE TO INMATES

- Processing Intake Physical Examination (DC-386)
- Report of Medical History (DC-385)
- PULHEAT (HS policy A-2)
- Patient Acuity (HS policy A-9 and DC950)
- Inmate Housing and Facility Missions (Medical Mission Spreadsheet)
- Inmate Transfer
# Nursing Orientation, Mandatory Training and Competency Evaluation

**Effective Date:** May 2010  
**Supercedes Date:** July 2005

<table>
<thead>
<tr>
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<td>Initiation of CPR, Right to a Natural Death and DNR Orders</td>
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<td>Patient Rights</td>
<td>Telephone Triage (DC-940)</td>
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<td>Diets</td>
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<td>Aftercare (DC-524)</td>
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## MEDICATION

- Drug Formulary
- Procurement of Medication
- Administration (Unit Specific)
- Direct Observed Therapy (DOT)
- Self-Administered (SAMS)
- Administration Record (DC-175)
- Controlled Substance Administration Record (DC-175A)
- Self Administration Record (DC-763)
- Self Administration Instructions & Agreement Form (DC-762)
- Transfer of Medication
- Starter Dose Program
- Controlled Substance Destruction Record (DC-877)

## MANAGED CARE

- Utilization Review (HS10)
- Purchase Care (HS20 Screen)
- Appointments - OPUS
- EKG's
- Contract Vendors

## MEDICAL RECORDS

## MENTAL HEALTH RECORDS

- Format of charts
- Confidentiality
- Record Copying
- Procurement of Medical Records
- Release of Confidential Information
- Transfer of Medical Records
- Parole Records
### DOCUMENTATION

- Format for documentation
- Medical Notification Slip (DC-490)
- MD Orders (DC-752)

### ADMINISTRATIVE

- Reports
- Shift Reports
- OPUS
- CPT Codes
- Inmate Accidents, Injuries (DC-193)
- Inmate Grievance
- Staff Injuries (Form 19)
- Witness Statements (DC-138)
- Leave Request (DC-660)
- Exposure Incident Pack

### INFECTION CONTROL

- Immunizations (DC-928)
- Bloodborne Pathogens (DC-801)
- Annual PPD

### DENTAL SERVICES

- Dental Protocols
  - Dental Treatment
  - Dental Co-Payment

### GLOSSARY

- Medical
- Custody
- Nursing Diagnosis
- Inmate Terms

### APPROVED ABBREVIATIONS

- Medical
- Mental Health
- Dental

### SCHEDULING OF MANDATORY TRAINING

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<td>Self-Injurious Behavior</td>
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### Physical Assessment

### Infection Control in Long Term Care Facilities at UNC-CH

### DHHS TB Control Training

### DHHS – AIDS Drug Assistance Program Case Management and Counseling of HIV Positive Patients

### Infection Control

### CPR

### OPUS

### Medication Technician Program

### Telephone Triage

### Patient Acuity

### CPT Codes

### ICD-9

### TAP

### Time sheet

### Board of Nursing Mid-level Managers and Administrators

### Board of Nursing Scope of Practice

### EEO

### Microsoft Word

### Microsoft Excel

### Microsoft Power Point

### Medical Terminology

### Group Wise

### Nursing Supervision

### Performance Improvement and CQI

### ANA/NCNA Continuing Education Requirements

### Telephone Etiquette

### COMPETENCY ASSESSMENT SKILLS CHECKLIST (including in-service training)

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<tr>
<th>Skill</th>
<th>Non-applicable if noted proficient on self-assessment</th>
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<td>Self-Assessment of Competencies</td>
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<td>Peak Flow Meter</td>
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<td>Pulmicort Turbuhaler</td>
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<td>Nebulizer Treatment</td>
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<td>Oxygen Adm. per Nasal Cannula</td>
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<td>Oxygen Adm. per Non-rebreathing Mask</td>
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<td>Use of scales including wheelchair and bed scales</td>
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<td>Physical Assessment (systems)</td>
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<td>Forced Medications</td>
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<td>Blood Administration</td>
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<td>Nursing Documentation</td>
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# Self-Assessment of Clinical Competencies

**Name of Employee** ___________________/______________________________  **Date** ____________________

**Print** | **Signature**
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<th>Levels of Proficiency</th>
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<td><strong>A = Perform Well</strong></td>
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<tr>
<td><strong>B = Limited Experience</strong></td>
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<tr>
<td><strong>C = Perform Infrequently</strong></td>
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<td><strong>D = No Experience</strong></td>
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<td>Suture and staple removal</td>
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<td>Use of bed and wheelchair scales</td>
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<td>Nursing Documentation</td>
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ATTACHMENT 3

MANDATORY TRAINING REQUIREMENTS BY DISCIPLINE

I. Correctional Healthcare Assistant I

A. One time training **upon employment**
   - DOP Overview
   - DOP Health Services Overview
   - Undue Familiarity
   - Unlawful Workplace Harassment
   - Blood glucose testing
   - Specimen Collection (urine, sputum)
   - OPUS/Forms identification and usage
   - Legalities of Documentation
   - Medical Terminology
   - Proper Body Mechanics
   - DOP Presentation on Scope of Practice

B. The following training requirements must be met **annually**:
   - SIB training
   - Blood Borne Pathogens
   - Infection Control

C. The following training requirements must be met **every 2 years**:
   - CPR with AED training
   - OPUS updates

II. Correctional Healthcare Assistant II

A. One time training **upon employment**
   - DOP Overview
   - DOP Health Services Overview
   - Undue Familiarity
   - Unlawful Workplace Harassment
   - OPUS/Forms identification and usage
   - Nursing Documentation
   - Venipuncture
   - Transcription
   - Medical Terminology
   - Medication Administration
   - Proper Body Mechanics
   - DOP Presentation on Scope of Practice

B. The following training requirements must be met **annually**:
   - SIB training
   - Blood Borne Pathogens
   - Infection Control
C. The following training requirements must be met every 2 years:
   - CPR with AED training
   - OPUS updates

III. LPN

   A. One time training **upon employment**
      - DOP Overview
      - DOP Health Services Overview
      - Undue Familiarity
      - Unlawful Workplace Harassment
      - Nurse Protocols (limited role)
      - Sick Call Process (limited role)
      - Documentation to include SOAP/Legalities
      - TB screening (limited role)
      - Infection Control
      - Process of Medication administration including DOT and self meds
      - Basic OPUS training to include appointment scheduling and utilization review
      - Veni-puncture and blood collection
      - Triage training (limited role)
      - EKG
      - Patient Acuity (limited role)
      - Proper Body Mechanics
      - IV therapy (for infirmary and in-patient units) (limited role)
      - DOP Presentation on Scope of Practice
      - CPR, Right to a Natural Death and DNR orders

   B. The following training requirements must be met **annually:**
      - Blood Borne Pathogens
      - Medication (at least 5 hrs of continuing Ed)
      - SIB training
      - Infection Control Update

   C. The following training requirements must be met every 2 years:
      - CPR with AED training
      - OPUS updates

IV. Registered Nurses

   A. One time training **upon employment**
      - DOP Overview
      - DOP Health Services Overview
      - Undue Familiarity
      - Unlawful Workplace Harassment
      - Nurse Protocols
      - Sick Call Process
      - Nursing Documentation
TB screening
Falls Risk Screening (In-patient and Long Term Care units only)
Infection Control
Process of Medication administration including DOT and self meds
Basic OPUS training to include appointment scheduling and utilization review
Venipuncture and blood collection
Triage training
EKG
Patient Acuity
Physical Assessment
Proper Body Mechanics
IV therapy (for infirmary and in-patient units)
Assessment of the Pregnant Patient (NCCIW only)
Chronic Disease Protocols
Grinding Toenails and Calluses
DOP Presentation on Scope of Practice
Performance Improvement/CQI
Delegating Effectively
CPR, Right to a Natural Death and DNR orders

B. The following training requirements must be met **annually:**
   Blood Borne Pathogens
   SIB training
   Infection Control Update

C. The following training requirements must be met **every 2 years:**
   CPR with AED training
   OPUS updates

IV. **Nurse Clinicians** – in addition to the training requirements of a RN as stated in III above, the nurse clinician must have the following training in:
   Understanding Laboratory Reporting Values
   Infection Control in Long Term Care Facilities at UNC-CH – one time training (In-patient facility’s IC Nurse)
   DHHS TB Control – Annual TB Training for Health Department Nurses – annually (In-patient facility’s IC Nurse)

V. **Triage RNs** – in addition to the training requirements of a RN as stated in III above, the triage RN must have the following training in:
   Conducting Telephone Triage

VI. **Utilization Review Nurses**
   A. One time training **upon employment**
      DOP Overview
      DOP Health Services Overview
      CPT codes
      ICD9 training
VI. Outreach Nurses

A. One time training upon employment to DOC or to this position

- DOP Overview
- DOP Health Services Overview
- Nurse Protocols and Sick Call Process
- Nursing Documentation
- TB testing/screening
- Nursing Supervision: Basic Supervision, Interactive Management and Dealing with Difficult Employees
- Process of Medication administration including DOT and self meds
- Basic OPUS training to include appointment scheduling and utilization review
- Venipuncture and blood collection
- Patient Acuity
- Physical Assessment
- CPR recertification with AED training
- Time sheet training
- Undue Familiarity
- Unlawful Workplace Harassment
- EEOI
- PowerPoint/Microsoft Word/Excel
- GroupWise
- Legal Issues
- Delegating Effectively
- Performance Improvement/CQI
- Train the Trainer by OSDT
- Adult Learning Theory
- Red Cross HIV Prevention Education Instructor Training
- DHHS TB Control: Annual TB Training for Health Dept Nurses
- Interview training (after 5 years with the program)
- Blood Borne Pathogens Instructor (teach at least 2 classes)
- Chronic Disease Protocols
- DHHS – AIDS drug assistance – Program Case Management and Counseling of HIV Positive Patients

B. The following training requirements must be met annually:

- Blood Borne Pathogens Instructor (teach at least 2 classes) update
- Medication (at least 8 hrs of continuing Ed)
- Infection Control Updates (at least 8 hours continuing Ed)
- Physical Assessment review
- SIB training

C. The following training requirements must be met every 2 years:
VIII. Lead Nurse

A. One time training **upon employment or to this position**
   - DOP Overview
   - DOP Health Services Overview
   - Undue Familiarity
   - Unlawful Workplace Harassment
   - Nurse Protocols
   - Sick Call Process
   - Falls Risk Screening (In-patient and Long Term Care)
   - Nursing Documentation
   - TB testing/screening
   - Process of Medication administration including DOT and self meds
   - Basic OPUS training to include appointment scheduling and utilization review
   - Venipuncture and blood collection
   - Triage training
   - EKG
   - Patient Acuity
   - Physical Assessment
   - IV therapy for infirmary and in-patient units
   - CPR recertification with AED training
   - TAP
   - Time sheet training
   - EEO
   - DOP Presentation on Scope of Practice
   - Chronic Disease Protocols
   - Nursing Supervision: Basic Supervision, Interactive Management and Dealing with Difficult Employees
   - Grinding Toenails and Calluses
   - Delegating Effectively
   - CPR, Right to a Natural Death and DNR orders

B. The following training requirements must be met **annually**:
   - Blood Borne Pathogens
   - Infection Control Updates
   - SIB Training

C. The following training requirements must be met **every 2 years**:
   - CPR with AED training
   - OPUS updates

IX. Nurse Supervisor, Nurse Manager (regardless of classification), Regional Nurse Supervisors, ADON & In-Patient DONs

A. One time training **upon employment in DOC nursing or to this position**
   - DOP Overview
DOP Health Services Overview
Nurse Protocols
Sick Call Process
Nursing Documentation
TB screening
Process of Medication administration including DOT and self meds
Basic OPUS training to include appointment scheduling and utilization review
Venipuncture and blood collection
Triage training
EKG
Patient Acuity
Physical Assessment
CPR recertification with AED training
TAP
Time sheet training (including FMLA, VSL, FIL)
BON Mid-Level Manager training
Undue Familiarity
Unlawful Workplace Harassment
BON Presentation on Scope of Practice
DOP Presentation on Scope of Practice
EEOI
GroupWise
Microsoft Word, Excel, PowerPoint
Interview training
Delegating Effectively
Legal issues update
Performance Improvement/CQI
Controlled Substance Accountability & Record Keeping
Nursing Supervision: Basic Supervision, Interactive Management and Dealing with Difficult Employees
CPR, Right to a Natural Death and DNR orders

B. The following training requirements must be met annually:
   Blood Borne Pathogens
   Infection Control Updates
   SIB Training

C. The following training requirements must be met every 2 years:
   CPR with AED training
   OPUS updates

X. Nurse Liaison & Nurse Educator

A. One time training upon employment to DOC or to this position
   DOP Overview
   DOP Health Services Overview
   Nurse Protocols
   Chronic Disease Protocols
   Sick Call Process
Nursing Orientation, Mandatory Training and Competency Evaluation

B. The following training requirements must be met **annually**:
- Blood Borne Pathogens
- Infection Control Updates
- SIB Training

C. The following training requirements must be met **every 2 years**:
- CPR with AED training
- OPUS updates

XI. Medical Records Assistant

A. One time training **upon employment**
- DOP Overview
- DOP Health Services Overview
- Undue Familiarity
- Unlawful Workplace Harassment
- Medical Terminology
- OPUS/Forms ID & usage
- Policy and Procedure regarding medical records
- Telephone Etiquette
- Microsoft Word
- Excel
- Transcribing of orders
- Medical Record Legalities

B. The following requirements must be met **annually**:
C. The following requirements must be met every 2 years:
OPUS updates

XI. DOP Director of Nursing

A. One time training upon employment in DOC nursing or to this position:
   DOP Overview
   DOP Health Services Overview
   Nurse Protocols
   Sick Call Process
   Nursing Documentation
   TB screening
   Process of Medication administration including DOT and self meds
   Basic OPUS training
   Triage training
   Patient Acuity
   CPR recertification with AED training
   TAP
   Time sheet training (including FMLA, VSL, FIL)
   BON Mid-Level Manager training
   Undue Familiarity
   Unlawful Workplace Harassment
   BON Presentation on Scope of Practice
   DOP Presentation on Scope of Practice
   EEOI
   GroupWise
   Microsoft Word, Excel, PowerPoint
   Interview training
   Delegating Effectively
   Legal issues update
   Performance Improvement/CAI
   Controlled Substance Accountability & Record Keeping
   Nursing Supervision: Basic Supervision, Interactive Management and Dealing with Difficult Employees

B. The following training requirements must be met annually:
   Blood Borne Pathogens

C. The following training requirements must be met every 2 years:
   CPR with AED training
   OPUS updates
   Nursing Leadership