

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Correction
Division Of Prisons

SECTION: Personnel

POLICY # P-9

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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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POLICY

1. The nurse manager will insure 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 insure 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.

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- 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

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- 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 to 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

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ATTACHMENT 1

NORTH CAROLINA DEPARTMENT OF CORRECTION NURSING ORIENTATION

Facility:	Facility Number:	
Employee's Name:	Position #:	Date:
Discipline:		
Supervisor's Name:		
Preceptor's Name:		
Preceptor's Name:		
Preceptor's Name:		

COMPONENTS	Date of Review	Employee Initials	Non-Applicable (N/A)	Preceptor Initials
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				

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Overview of Count				
Medical Supplies				
Medical Tools Control				
Undue Familiarity with Inmates				
Games Inmates Play				
Self-Injurious Behavior				
Inmate Knowledge of Outside Medical Appointments				
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				

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Intake Screening (DC-435)				
Medical Orientation (Unit Specific)				
Sick Call				
Inmate Co-payment				
Nursing Protocols				
Initiation of CPR, Right to a Natural Death and DNR Orders				
Chronic Diseases				
Mental Health				
Patient Rights				
Telephone Triage (DC-940)				
Outside Appointments				
Diets				
Appliances / Devices				
Aftercare (DC-524)				
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				

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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		Date attended		
Undue Familiarity				
Unlawful Workplace Harassment				
Blood Borne Pathogens				
Self-Injurious Behavior				

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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)			Non-applicable if noted proficient on self-assessment	
Self-Assessment of Competencies				
Sick Call				
Blood Glucose				
Clean Catch Urine				
Urinary Catherization				
Oxygen Saturation				
Peak Flow Meter				
Multi-dose Inhaler				
Pulmicort Turbuhaler				
Nebulizer Treatment				
Oxygen Adm. per Nasal Cannula				
Oxygen Adm. per Non-rebreathing Mask				

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Sputum Collection				
Sterile Dressing Change				
Suture and Staple Removal				
Proper Body Mechanics				
Lifts				
EKG				
Vital Signs				
Use of scales including wheelchair and bed scales				
Physical Assessment (systems)				
Chronic Disease Protocols				
Forced Medications				
Mental Health Nursing Assessment				
Programming Tasks for CHAs in RMH				
Assessment of the Pregnant Patient				
TB Screening including skin testing and reading				
Eye Exams				
Intake Processing				
NG Tube / Gastric Feedings				
Ostomy Care				
Trach Care				
Intermittent Intravenous Infusion				
Intravenous Administration				
Blood Administration				
Nursing Documentation				

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ATTACHMENT 2

**Division of Prisons
Health Services**

Self-Assessment of Clinical Competencies

Name of Employee _____ / _____ Date _____
Print Signature

Levels of Proficiency

A = Perform Well
B = Limited Experience

C = Perform Infrequently
D = No Experience

Skill	A	B	C	D
Sick Call Procedures				
Blood Glucose Testing (Tru-track)				
Clean catch/midstream urine collection				
Female Urinary Catherization				
Male Urinary Catherization				
Venipuncture blood collection				
IV Administration				
Intermittent IV Infusion				
Blood Transfusion				
Oxygen Saturation				
Peak Flow Meter				
Multi-dose Inhaler				

Skill	A	B	C	D
Oxygen Administration via non-rebreathing mask				
TB screening and skin testing and reading				
Eye Exams				
DOC Intake Processing				
Assessment of the Pregnant Patient				
Vital Signs				
Physical Assessment				
DOC Chronic Disease Protocols				
Oxygen Concentrators				
Nasogastric/gastric tube feedings				
Ostomy Care				
Trach Care				

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Nebulizer Treatment				
Pulmicort Turbuhaler				
Oxygen Administration via nasal cannula				
Suture and staple removal				
Use of lifts				
Performing EKG				
Care of the Self-injurious patient				
Forced Medications				
Nursing Documentation				

Suctioning				
Isolation Techniques				
Sterile Dressing Changes				
Proper body mechanics				
Use of bed and wheelchair scales				
Mental Health Nursing Assessments				
Therapeutic Restraints				
OPUS				

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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

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Medication Administration (5 hrs) related items within scope of med tech practice

- 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

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- 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

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OPUS
Undue Familiarity
Unlawful Workplace Harassment
Patient Acuity
Group Wise
Microsoft WORD

VII. 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:

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CPR with AED training
OPUS updates

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

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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

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Nursing Documentation
DOP Presentation on Scope of Practice
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
Undue Familiarity
Unlawful Workplace Harassment
EEOI
PowerPoint/Microsoft Word/Excel
GroupWise
Performance Improvement/CQI
ANA/NCNA Requirements (Scope/Standards of Practice for Awarding Continuing Education credits)
Adult Learning Theory

- 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**:

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Blood Borne Pathogens

- 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