

STUDENT PACKET SUBMISSION Nursing Clinical Groups & Faculty

PLEASE NOTE: A PingID app on your cell phone may be needed in order to access Kaiser websites from a non-Kaiser computer. Call the Kaiser Help desk for assistance: (888) 457-4872

MAIN Website-ALL STUDENTS <u>https://kpnursing.org/_SCAL/professionaldevelopment/orientation/index.html</u>

OC Website-INPATIENT STUDENTS <u>https://kpnursing.org/_SCAL/professionaldevelopment/orientation/OrangeCounty/inpatient.ht</u> <u>ml</u>

Student Packets include the following COMPLETED forms, returned in this order: From KP-OC Student website: Group/Cohort Students Badge Form (From OC specific page).

- Badge Instruction Form (From OC specific page)
- Child Abuse Reporting Requirements
- □ Confidentiality Agreement (3 pages)
- Drug-Free Workplace Employee Acknowledgement (2 pages)
- Elder and Dependent Adult Abuse Reporting Requirements
- Health Status Questionnaire
- D Manager Approval Form (Needed only if completing student rotation on unit you are employed at Kaiser)
- Required Reading Attestation Orange County (From OC Specific site)
- Required Reading Attestation Regional
- Scope of Practice (Info provided by school, will be submitted to Department Managers by OC-Students).

KP Learn Completion Certificates https://learn.kp.org/

(Please use PC)

- Abuse Assessment and Reporting (0000877546)
- COVID-19 Symptom Self Check (0000859923)
- COVID-19 Training (0000871248)
- Equal Access and Effective Communication at Kaiser Permanente (0000842396)
- 2021 Ethics and Compliance Training (0000869569)
- Orange County Annual Training & Review 2021 (0000877633)
- □ Initial OSHA Safety Training for CA Hospital/MOB 2021 (0000872519)
- KP HealthConnect Inpatient Training for Nursing Students (00821855)
- Management of Patients who are a Danger to Self, Others (0000872484)
- Prevention of Workplace Violence (0000856933)
- Providing Culturally and Linguistically Appropriate Services in California (0000861641)
- Roche Accu-Chek Inform II Glucometer (0000852832)
- □ Safe Patient Handling 2021: Ambulatory (0000872537) OR Inpatient (0000872535)

Copy of:

- Health & Safety Verification Form Completed and Submitted by School Placement Coordinator ONLY with complete onboarding paperwork
- Copy of Licensure If Applicable (ex: RN License).

ONLY complete packets submitted electronically in the order listed as a single PDF will be processed. 12/7/2021 Health & Safety Verification Form & *Healthconnect Access Forms are the only separate attachments we may receive.



KAISER PERMANENTE Staff Education & Development Southern California

STUDENT PACKET SUBMISSION Nursing Clinical Groups & Instructors

PLEASE NOTE:

The **Urine Drug Screen, Background check and Proof of Immunizations** are required only in cases of an audit and must be readily available by the school placement coordinator. Proof of compliance must be indicated on the Health & Safety Verification Form by the school placement coordinator, but does not need to be submitted as part of the onboarding packet.

Drug Screening and **Background Check** must be dated within **90 days** prior to start of enrollment in school program. This will satisfy the screening requirement during **continuous** matriculation for the duration of participation at KP. If participant, (Faculty or Student), discontinues participation in the school program for more than one consecutive semester, a new background check and drug screening will be required.

Urine Drug Screening

(Not required if currently a KP employee).

- Amphetamines
- Barbiturates
- Benzodiazepines
- Benzoylecgonine (Cocaine)
- Marijuana
- Meperidine (Demerol)
- Methadone
- Opiates (Oxycodone, Demerol)
- Oxycodone
- Phencyclidine (Angel Dust)
- Propoxyphene

Background Check

(Not required if currently a KP employee).

Criminal record check (felony & misdemeanor), includes past 7 years

To be completed by <u>ALL</u> FACULTY:

- Health and Safety Verification Excel Spreadsheet
- CPMKPHC Student-Instructor Access Data Spreadsheet (HealthConnect Access)
- KP Learn Module: Pyxis MedStation ES System Tutorials (00817773)
- Copy of Nursing License
- Instructor competencies



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PLEASE NOTE: Declination forms are accepted for COVID only if documentation from a Physician or Licensed Healthcare provider (NP, PA) is received indicating medical or religious reason for declination.

Immunizations: Listed on Health & Safety Verification Form Only, do not submit documentation unless asked to do so

- Submit Health & Safety Verification Form to <u>OC-Students@kp.org</u> within 2 weeks of start date
- Tuberculosis Screening (TB)
 - **TUBERCULIN SKIN TEST (TST)**

TST requires 2 negative or non-reactive results dated within the previous 12 & 24 months

Positive/Reactive TST requires:

Documentation of positive screening test **OR** history of INH or other TB therapy **AND** written report of a negative chest x-ray within 1 year of start of current academic program **AND** completion of Annual TB Questionnaire

-OR-

INTERFERON-GAMMA RELEASE ASSAYS (IGRA), which encompasses QuantiFERON-TB Gold (QFT) and T-SPOT. A single negative IGRA within 12 months is acceptable.

Positive Titer OR 2 Vaccination Dates Vaccination is mandatory if non-immune and no vaccine record.

Varicella

Positive antibody titer OR 2 Vaccination dates Vaccination is mandatory if non-immune and no vaccine record.

Hepatitis A (Food Service/Dietary students ONLY)
Hepatitis A antibody titer OR 2 Vaccinations, 6 months apart

Hepatitis B

Positive antibody titer OR 3 Vaccination dates

Seasonal Flu

Proof of Flu Vaccination during the current Flu Season required. If current seasonal flu vaccine is not available (July/August), documentation must be provided as soon as the current season's flu vaccine is received.

Tdap

Provide Date of vaccination within last 10 years

COVID Vaccination

Completion of vaccination series required (Pfizer or Moderna Vaccines x2, last vaccination >14 days ago; OR J&J 1 vaccine >14 days ago)