

ASSOCIATE'S DEGREE NURSING

STUDENT HANDBOOK

North Idaho College ~ Spring 2025

North Idaho College Associate's Degree Nursing Program Division of Nursing

STUDENT HANDBOOK

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Section I: General Information

STUDENT HANDBOOK

Welcome and Introduction

Welcome to the Associate's Degree Nursing (ADN) Program at North Idaho College (NIC). North Idaho College's ADN Program is designed to prepare students for entry-level nursing positions in a variety of healthcare settings and to provide the foundation for advanced study. The program, which includes general education and nursing courses leading to an Associate of Science Degree, is approved by the Idaho State Board of Nursing and is accredited by the Accreditation Commission for Education in Nursing (ACEN). Upon completion of degree requirements, the graduate is eligible to write the national examination (NCLEX-RN) for licensure as a registered nurse.

History

The Associate's Degree Nursing Program at North Idaho College has a long history of academic excellence in preparing students to become registered nurses. On May 23, 1967, Dr. Perry Christianson, President of North Idaho College, called to order the first meeting of the Community Study Group on Nursing Education. This group consisted of citizens and members of agencies concerned with health care. At that meeting a sub-committee was appointed to study the "Associate of Arts Degree Program in Nursing," investigating the possibility of establishing an associate degree nursing program in the fall of 1968.

On October 5, 1967, the committee met with Mrs. Marjorie Schlottenbeck, Executive Director of the Idaho State Board of Nursing. After reviewing and discussing various aspects of the proposed program, a motion was approved to plan and institute an Associate's of Science Degree in Nursing in the fall of 1969.

In the interim, Dr. Christianson retired and Dr. Barry Schuler assumed the position as President of North Idaho College. Due to the change in college administration and the difficulty in locating a qualified director for the nursing program, no further direct planning took place until late winter of 1969.

In December of 1969, Mrs. Beverly Hatrock joined the college as a nursing consultant to perform a needs assessment survey of local health facilities and develop budgetary guidelines. In January of 1970, Dr. Schuler and Mrs. Hatrock requested a special appropriation from the Idaho Legislature in order to begin the program. In March of 1970, a special appropriation of \$50,000 was granted to operate the program from March 1970 through June 1971, and Beverly Hatrock was appointed Director of Nursing Education.

With community support and assistance, Mrs. Hatrock began planning for the admission of students. Twenty-eight students were admitted to the first class in September of that year. The faculty consisted of two instructors and the Director. Kootenai Memorial Hospital, Sunset Terrace Nursing Home, Panhandle Health District, and Eastern Washington State Hospital served as clinical facilities that first year. The program was housed in a frame building, which previously served as offices for Idaho Forest Industries, and two additional faculty members were employed in September of 1971 as a second class of thirty-six students were enrolled. The

addition of Region I Mental Health Center, Sacred Heart Medical Center, and Deaconess Hospital enlarged the clinical resources available to the program.

The first class of thirteen students graduated in May 1972. All passed the State Board Test Pool Examinations for Registered Nurse Licensure and attained the highest school mean score in the state.

In March of 1973, the nursing program was granted full accreditation by the National League for Nursing. The Winton Building was constructed adjacent to Post Hall providing classroom and laboratory space for the nursing program and housing for the first NIC Student Health Services.

In the spring of 2001, the Idaho legislature approved an \$11.3 million appropriation for the construction of a Health and Sciences Building on the North Idaho College campus. The building, to be completed in the fall of 2005, was to house the R.N. and L.P.N. nursing programs, Health Professions programs and science classes foundational to the health sciences. In March of 2004, NIC broke ground for the Health and Sciences Building. The Meyer Health and Sciences Building was occupied in August 2005 where the 35th class to be admitted began their nursing education.

Purpose

This handbook is specific to the Associate's Degree Nursing Program, and is intended to provide a reference for the students while enrolled in the program.

The Student Handbook contains the policies and guidelines of the ADN Program. Reading the ADN Student Handbook is an individual student responsibility, and each student is held accountable for the contents of the ADN Student Handbook. While a student is in the Nursing Program, it is expected that the policies and procedures contained in the Nursing Division Student Handbook will be followed. The Nursing Faculty reserve the right to revise policies as needed. When policies are developed or revised, students will be informed of the changes in writing.

The NIC Catalog and the ADN Program Student Handbook are available to students as a resource for NIC policies and procedures. If there is a difference in policy between written documents, the Nursing Program Handbook will take precedence.

Mission, Vision and Values

The faculty of the Associate's Degree Nursing Program uphold the mission, vision and values of North Idaho College.

Mission

The Associate's Degree Nursing Program at North Idaho College commits to excellence in nursing education by developing distinguished graduate nurses who are prepared to meet the health care needs of the community and seek to advance the profession.

Vision

The Associate's Degree Nursing Program at North Idaho College aspires to be a national leader in nursing education by promoting the knowledge, skills, and attitudes that cultivate exceptional and sought-after nursing care providers in service to our community.

Values

The Associate's Degree Nursing Program faculty empower students by modeling the distinctive merits of the profession: excellence, knowledge, and caring.

Philosophy

Nursing is a discipline with its own unique body of knowledge and skills, which focuses on optimizing the health of individuals and their communities. The Associate's Degree Nursing Program at North Idaho College is dedicated to educational excellence and preparing safe, caring, and competent graduates.

Faculty engage students as partners to achieve student learning outcomes that are relevant to the clinical practice environment. This partnership is exemplified by behaviors that demonstrate respect, equity and justice. Faculty embrace Knowle's Theory of Adult Learning in which students are acknowledged to be self-directed and responsible for their decisions. Students are encouraged to connect and relate prior experiences and knowledge to current and future learning. Learning is optimal when students and faculty develop a dynamic professional partnership fostered on mutual respect and engagement in critical reflection.

Faculty model effective communication, ethical behavior, and respect for diversity. Research and best practice in modern pedagogy are utilized in both the academic and clinical environments to educate students regarding the art and science of nursing. Faculty recognize that students differ in abilities, learning preferences, educational and cultural backgrounds, and goals. The curriculum is structured to develop knowledge, skills and attitudes, which promote patient-centered care, teamwork and collaboration, evidence-based practice, quality improvement, safety and informatics.

Statement of Distance Education Philosophy

In collaboration with the Office of Distance Education of North Idaho College, the Associate's Degree Nursing Program helps meet the changing needs of students by facilitating access to student-centered, effective, innovative, flexible, lifelong educational opportunities. The Associate's Degree Nursing Program at North Idaho College is committed to making nursing education accessible to qualified individuals in our service community.

Curriculum End-of-Program Student Learning Outcomes

- 1. Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs. (*Patient-centered Care*)
- 2. Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care. (*Teamwork and Collaboration*)
- 3. Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal healthcare. (*Evidence-based Practice*)
- 4. Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of healthcare systems. (*Quality Improvement*)
- 5. Minimize risk of harm to patients and providers through both system effectiveness and individual performance. (*Safety*)
- 6. Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making. (*Informatics*)

North Idaho College General Education Framework

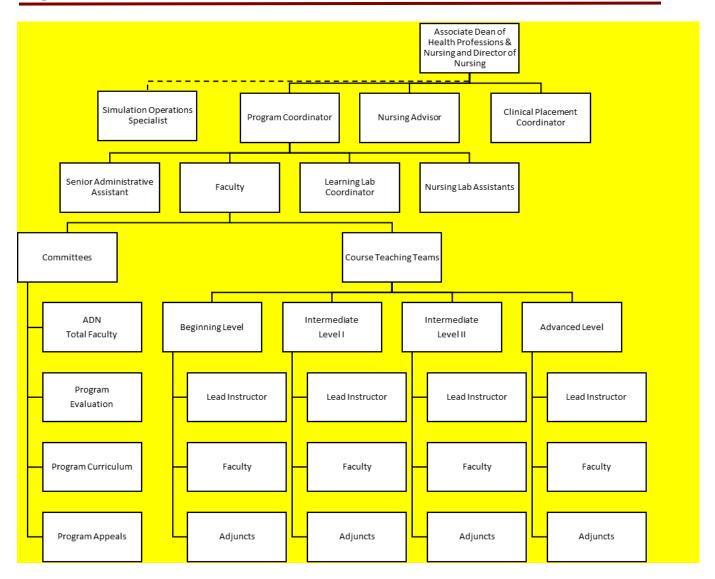
North Idaho College has a proud heritage of seeking to provide all students with learning experiences to build the knowledge, skills, and abilities needed for productive and meaningful lives and 38 Program Offerings to be contributing members of society. The college framework for general education adopts the principles and requirements outlined in Idaho's Statewide General Education (Policy III N). NIC's faculty met with colleagues from across the disciplines at each of the two- and four-year public higher education institutions in Idaho to write competencies in six areas of general education. The courses listed in the following pages represent the thoughtfully considered review by faculty of the content and learning outcomes for general education at NIC. These are:

- Written and Oral Communication: Students will express themselves effectively, in both written and oral forms, to varied audiences to serve diverse purposes.
- Mathematical Ways of Knowing: Students will use appropriate mathematical principles and practices to interpret mathematical concepts, execute and explain appropriate strategies, and draw conclusions.
- Scientific Ways of Knowing: Students will apply scientific reasoning to various discipline related questions in the field and use laboratory practices appropriately for study, analysis and replication of key principles.
- Humanistic and Artistic Ways of Knowing: Students will describe and interpret how a variety of humanistic and artistic forms, reflect, shape, and influence the human condition.
- Social and Behavioral Ways of Knowing: Students will use social science reasoning to inquire, collect relevant information, and develop insights on individual, social, community, regional, national, and/or global issues.

In addition, NIC has established requirements for competencies in:

• Integrative Inquiry and Wellness: Students will demonstrate self-awareness, apply integrative learning, and develop commitment toward educational and life goals. These competencies and outcomes are the basis for assessing our general education program. Together with the programs we offer, general education at NIC reflects the college's commitment to preparing citizens in the 21st century. NIC students will thereby have the benefit of an education that is shaped by our mission and values as a comprehensive community college.

Organizational Chart



Lines of Communication for Students

- 1. Initial line of communication is one-on-one with the clinical or classroom instructor.
- 2. If the concern or problem is not resolved, discuss it with your nursing faculty advisor.
- 3. If the concern or problem is not resolved, discuss it with the level team lead instructor.
- 4. If the concern or problem is related to <u>course</u> standards, policy or procedure, discuss with the class student representative so that the matter can be taken to the teaching team at team meeting.
- 5. Concerns or problems, which could not be resolved on the instructor level or the course teaching team level should be taken to the Associate Dean of Health Professions and Nursing.
- 6. The student will be informed of the decision/action on the matter.

Section II: Physical Facilities & Student Services

Physical Facilities

The physical facilities for the Division of Nursing are located in the Meyer Health and Sciences Building (MHS).

1. Associate Dean of Health Professions and Nursing/Director of Nursing Office:

Room 281

2. Faculty Offices:

Faculty offices are located on the second level of the MHS

3. Administrative Assistant offices:

Room 257 – Nursing Program Senior Administrative Assistant

Room 282 - Assistant to the Associate Dean of Health Professions and

4. Classrooms:

See class schedule for room assignments

5. Conference Room (for Nursing Program committee meetings):

Room 210 – located on the second level of MHS

Room 169- located on the first level of MHS

6. Nursing Program Learning Lab:

Room 112/120 – located on the first level of the MHS

Room 119 – located on the first level of the MHS

7. Simulation Center:

Room 141 – located on the first level of the MHS

8. Computer Resource Room:

Room 143 – located on the first level of the MHS

9. Group Study Rooms:

Room 153 and 168 (downstairs in MHS)

Room 235 and 240 (upstairs in MHS)

*Please check the kiosk by each door for the room schedule and to reserve a time to use the room.

Financial Information/Resources

1. Fees

Fees included in student course fees:

- Learning Lab
 - Students are charged a laboratory fee to cover the costs of laboratory/simulation supplies needed for individual use in the learning/simulation laboratories.
- Assessment Technology Institute
 - o Learning tool utilized by the ADN Program.
- Clinical Placement Northwest Consortium Fee
- NIC Clinical Placement Coordinator
- National Background Check and Washington State Patrol Watch
- Monthly OIG/GSA screening
- Document management fee for third party management of storage for primary source documents proving compliance with clinical requirements (such as proof of immunizations, tuberculin testing, etc.).
- Technology Fees
- ExamSoft Testing Platform

Additional Costs Not Included in Course Fees:

- Fingerprint Background Check Certain clinical settings may require an additional more extensive background check (Behavioral Health Settings). The student is responsible for the cost of any background check outside of the normal processes.
- Drug Screens if required by the clinical facility
- Parking Pass
 Campus parking is permitted only with an NIC parking pass. Information on parking, including the cost of the permit, is provided at registration.
- Uniform
- Textbooks

2. Scholarships

A number of scholarships with varying qualifications are available to nursing students. Nursing students are encouraged to discuss interest with the Nursing Program Advisor.

| Document Title: North Idaho College Maps | | |
|---|---|--|
| Document Number: 2.01.00 | | |
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| Additional Publication: | Review/Revise Date(s): 8/98; 8/02; 8/03; 4/05; 6/12; 2/14 | |

North Idaho College Campus Map





North Idaho College

Building Information

McLain Hall (MCL)

460 N. College Dr.
Outdoor Center, Graphic and Web Design Program

Lee-Kildow Hall (LKH)

471 N. College Dr. Cardinal Central (Campus Information, Student ID, Parking Services), Admissions Office of Finance and Business, Financial Aid. Student Finance, Registrar, Cardinal Learning Commons (Math Education Center, Academic Tutoring), English and Humanities Division, Social and Behavioral Sciences Division. Center for New Directions, Dual Credit

Christianson Gymnasium (GYM)

Athletics Department, Gymnasium

Edminster Student Union Building (SUB)

495 N. College Dr.

Market Food Court, Caffeinated Cardinal, Cardinal Bookstore, ASNIC Student Government Offices, Student Services (Advising), Career Services, Veteran and Military Family Services, Auxiliary Services American Indian Student Advisor, TRIO, Food Pantry, Student Involvement, Title IX and Student Conduct, Victim Advocate and Violence Prevention

Meyer Health and Sciences Building (MHS)

521 N. College Dr. Health Professions and Nursing Division, Natural Sciences Division, Labs, DeArmond Auditorium, Rolphe Auditorium

Siebert Building (SBT)

430 N. College Dr. Information Technology, The Sentinel, Mail and Copy Center, Fleet Services

Industrial Arts (IND)

466 N. College Dr. Carpentry Lab

Residence Hall (RES) Student Housing

Post Hall (PST)

536 N. College Dr.
Athletics Department; Physical Education,
Dance, and Resort/Recreation Management

Fort Sherman Officers' Quarters (FSQ)

1025 W. Garden Ave. Heritage Conference Room

Workforce Training Center 525 Clearwater Lp., Post Falls Workforce Training, Community Education

Lakeside Center (LKC) 489 N. College Dr.

Children's Cente

Winton Hall (WIN) 536 N. College Dr. Dental Hygiene Clinic

Bob and Leona DeArmond **Building (DARM)**

901 W. River Ave. New Student Welcome Center, University of Idaho Office, Lewis-Clark State College Office

Lee Hall Annex (LHA)

485 N. College Dr. Writing Center, Modern Languages Lab

Seiter Hall (STR)

475 N. College Dr. Math, Computer Science, and Engineering Division; Counseling, Disability Support

Fort Sherman Powder Magazine (FSM)

Study Area/Meeting Space

Medlund Building (HED)

420 N. College Dr. Emery's Restaurant, Gizmo-CDA, Idaho Small Business Development Center, Venture Center, Business and Professional Programs Division, Job Corps, University of Idaho

Sherman Building (SHE)

1000 W. Garden Ave.

President's Office, Community Relations, Communications and Marketing, NIC Foundation, Alumni Association, Grants

Boswell Hall (BOS)

880 W. Garden Ave. Schuler Performing Arts Center; Corner Gallery; Communication and Fine Arts Division

Molstead Library (MOL)

875 W. Garden Ave. Library, Todd Lecture Hall, Testing Center, Computer Labs, Office of Instruction, Office of Planning and Effectiveness, eLearning, Adult Education Center/GED®

Sunspot

Concessions and rentals (June-September)

Headwaters Complex

Facilities Operations (HWCA) 701 W. River Ave.

Custodial Services, Fleet Services - Key pick-up

Human Resources (HWCB) 710 Military Dr.

Maintenance Department (HWCC)

Landscape Services (HWCE)

Security (HWCD) 703 Military Dr.

Student Wellness and Recreation Center (SWRC)

920 W. River Ave.

Recreational Sports, Learning Labs

Campus Parking & Parking Services

(208) 769-5902

Security

(208) 769-3310

Campus Security

703 Military Dr., Coeur d'Alene, ID 83814 Security reports, fire reports, crime statistics, and safety

with a handicap plate or placard and motorcycles — are required to display a current parking permit during Fall and Spring Semesters. Parking permits must be displayed from the vehicle's rear-view mirror with the front of the permit

All passenger vehicles — with the exceptions of vehicles

Permits are required during Fall and Spring Semesters: Monday through Thursday from 7:30 a.m. to 4 p.m. Friday from 7:30 a.m. to 2:30 p.m.

Parking permits are not required during Summer Session. Rosenberry Drive, Hubbard Avenue and parking lot A on Hubbard Avenue near Northwest Boulevard do not require parking permits throughout the academic year.

Visit nic.edu/parking for regulations, information an online services, including purchasing parking permits

Emergencies

Call 911 immediately and then call NIC Security at (208) 769-3310 to report any crime or medical emerger that is in progress. Contact NIC Security to report any suspicious behavior, to request a security escort or for other

Metered Parking

All vehicles parked at the meters are required to pay Vehicles displaying a parking permit are required to pay when parking at the meters. Vehicles with handicap plat placard may park at the meters for free.

Visitor Permits

Visitor passes are required during the times when parking permits are required. Visitor passes are available in the Sherman Building, the DeArmond Building and Cardinal Central in Lee-Kildow Hall. A visitor is defined as any per other than a student, staff member or faculty member of North Idaho College. Visitor permits are free.

Winter Parking

From November 1 to March 15, do not park vehicles overnight on college streets, College Drive, West Garden Avenue or NIC parking lots. Limited overnight parking is available in the west row of the North Motstead lot - look for available in the west row of the North Motstead to: - look the overright parking signs. Overright parking will be enforced seven days a week from midnight to 6 a.m. Vehicles parked overright in areas other than the design overeight parking spots during the winter will be issued citations and towed when snow removal is in progress.

llegally parked vehicles and/or vehicles without a visible permit will be ticketed. Fines are payable online at nic.edu/parking. The fine will be reduced if paid within seven days. Fines are not reduced for handicap and fire lane violations. An additional fine will be assessed if the fine remains unpaid after 30 days. Students with unpaid parking tickets may lose course registration privileges and/or be placed on Academic Hold.

Appeal Process

An appeal must be made within seven business days of the date of citation. Appeal parking citations online at nic.edu/parking.

Off-Campus Locations

NIC at Sandpoint (208) 263-4594

515 Pine St., Ste. G Sandpoint, ID 83864

Workforce Training Center (208) 769-3214

525 Clearwater Lp. Post Falls, ID 83854

Workforce Training Center Law Enforcement Program

Kaniksu Building

510 Clearwater Lp. Post Falls, ID 83854

Parker Technical Education Center

(208) 769-4040

Rathdrum, ID 83858

North Idaho College Student Services

North Idaho College provides a variety of services to help promote student success. These services are listed in the college catalog under the section Student Resources (https://www.nic.edu/students). The catalog describes the services offered and gives campus location and phone number to facilitate access. Services include the following:

| Service | Website | Phone | |
|---|--|-------------------|--|
| NIC Campus Security | nic.edu/security | (208) 769-3310 | |
| Advising Services | nic.edu/advising | (208) 769-7821 | |
| Cardinal Central (Registrar, Financial Aid, Work Study, Scholarships) | nic.edu/cardinalcentral | (208) 769-3311 | |
| Cardinal Learning Commons | nic.edu/clc | (208) 769-3206 | |
| Career Services | https://www.nic.edu/websites/default.as | px?dpt=15&pageId= | |
| Center for New Directions | nic.edu/cnd | (208) 769-3447 | |
| Children's Center | nic.edu/childcenter | (208) 769-3471 | |
| Counseling Services | nic.edu/therapy | (208) 769-5947 | |
| Dining Services | nic.edu/diningservices | (208) 769-3359 | |
| Disability Support Services | nic.edu/dss | (208) 769-5947 | |
| eLearning | https://www.nic.edu/websites/default.aspx?dpt=25&pageId= | | |
| Financial Aid | nic.edu/cardinalcentral | (208) 769-3311 | |
| Food Pantry | | (208) 665-5086 | |
| IT Help Desk | nic.edu/it | (208) 769-3280 | |
| Library (Molstead Library) | nic.edu/library | (208) 769-3355 | |
| Math Education Center | nic.edu/clc/mec | (208) 676-7139 | |
| Parking Services | nic.edu/parking | (208) 769-5902 | |
| Student Health and Wellness Services | nic.edu/studenthealth | (208) 665-4520 | |
| Testing Center | nic.edu/testingcenter | (208) 769-7203 | |
| TRIO Student Support Services | nic.edu/triosss | (208) 769-5979 | |
| Veteran and Military Family Services | nic.edu/veterans | (208) 929-4028 | |
| Writing Center | nic.edu/writingcenter | (208) 769-3298 | |

Nursing Learning Lab

The Learning Lab is located on the first floor in the Meyer Health and Sciences Building, rooms 112/120, and 119. The Learning Lab is a learning resource for nursing students for developing technical skills, assessment skills, math skills, documentation skills and decision-making skills.

The Learning Lab is staffed by a an experienced R.N. Open Lab hours are determined at the beginning of each semester based on course schedules to provide maximum accessibility for the greatest number of students.

The Learning Lab is equipped with simulated patient units, models, supplies and audiovisuals required for development of skills specified in the course syllabi. Reservations are required for individual practice time. Guidelines as set forth by learning lab and simulation coordinator must be followed regarding PPE use while in lab or simulation center. Students can wear either clean street clothes or scrubs for any practice labs, and students are required to wear closed toe shoes at all times while in learning lab or simulation center. Scrubs must be worn while in the simulation center unless otherwise directed by faculty.

Simulation Center

The Health Professions and Nursing Simulation Center is located on the first floor of the Meyer Health Science Building (Room 139). The Simulation Center is designed to replicate a hospital or clinical environment and is equipped with high fidelity mannequins that exhibit human physiological functions such as blood pressure, heart and lung sounds and reactive pupils. The simulation lab provides the opportunity for students to be exposed to realistic clinical experiences where they can practice technical skills and clinical decision making in a safe environment before working directly with patients.

The Simulation Lab is staffed by a Simulation Tech. Educational experiences in the Simulation Lab are arranged and led by faculty.

Section III: Admission, Advising, Withdrawals & Readmission

Advising

A. North Idaho College is committed to providing academic advising to all undergraduate students. All pre-nursing students are assigned an advisor to guide them in selecting an educational plan consistent with their abilities and goals. As students get closer to applying to the nursing program, it is recommended that they meet with the Nursing Advisor to assist them in reviewing the application requirements. Once a student has been admitted into the Associate's Degree Nursing Program, they will be assigned a full-time nursing faculty member as their advisor.

If you are assigned to a faculty advisor you may find their contact information on the NIC <u>Faculty and Staff Directory</u> page. If your advisor is listed as "Advising Services", please call 208-769-7821 to set up an appointment with an advisor.

- 1. Students may visit an advisor at any point in time for academic advising.
- 2. The designated advisor meets with pre-nursing students by appointment.
- B. Advising for Students currently enrolled in the ADN Program:

Once a student has been accepted in the ADN Program, they will be assigned an advisor from the nursing faculty. The advisor assigned is from the teaching team for the course level in which the student is enrolled.

Please follow these steps to locate your advisors name:

- 1. Log into MyNIC*
- 2. Select **Self Service** button on the left-hand side of the page.
- 3. Select Student Planning.
- 4. Select Go to Plan & Schedule.
- 5. Select the **Advising** tab. Your advisor will be listed under **My Advisors**.

The advisor is available for academic advising and other guidance and assistance to facilitate success in the program. Advisors are knowledgeable about college and community services, which may meet individual needs and can help with accessing these services.

Students should meet with their advisor on a regular basis. The advisor will request a conference a minimum of three times each semester; within the first three weeks of the semester, at mid-term, and at the end of the semester.

A general advisor for Nursing is also available to nursing students. The nursing advisor's office is in the Meyer Health and Sciences Building, Room 166

Students are free to seek assistance from any nursing instructor. All have an open-door policy. The student's advisor, though, has a special interest in and responsibility to his/her advisees.

Admission Criteria

Minimum Requirements:

If HS program or GED is in progress, then completion of 12 or more college level credits is required. Final HS transcript or GED must be received prior to starting NURS courses.

- A minimum cumulative GPA of 3.0 on degree requirements.
- Meet the Associate Degree Nursing Program Essential Abilities Policy.
- TEAS adjusted individual score $\geq 58.7\%$
- If degree requirements are not completed, must be eligible to enroll in English 101 or higher.
- If degree requirements are not completed, must be eligible to enroll in a GEM 3 Math requirement.
- ENGL 101, GEM 3 MATH, BIOL 227, PSYC 101, & COMM 101 must be completed with a C/2.0 or higher prior to starting NURS courses.

After meeting the minimum standards above, students are ranked on a point system as follows:

| Percentage | Category | Criteria | Points Possible | Points awarded |
|------------|--|---|--------------------|----------------|
| 35% | Cumulative GPA for 12 or more college credits that apply to degree | ≥ 3.7 - 4.0 | 35 | |
| 3370 | requirements. | ≥ 3.4 - 3.69 | 25 | |
| | - indicate and in the second s | ≥ 3.0 - 3.39 | 15 | |
| | TEAS | ≥92.0% Exemplary | 25 | |
| 25% | adjusted individual score | 80% - 91.9% Advanced | 20 | |
| 23% | | 58.7%-79.9% Proficient will not accept students < 58.7% | 15 | |
| 15% | Credits with grade C/2.0 or | 12 or more completed credits | 15 | |
| 13% | higher at NIC* | 6-11 completed credits | 8 | |
| 15% | Previous direct patient care health care experience | 750 hours in last 3 years, verified by employer letter (on employer letterhead). Must be completed by application deadline. | 15 | |
| 10% | Previous earned degrees | Bachelor's or higher from accredited institution, recognized by NIC | 10 | |
| Bonus | Completion of BIOL 227, 228, or 250 | Minimum grade of B/3.0 (If repeated, average of 2 most recent scores) | 4 per course | |
| | Completion of other degree requirements* | Minimum grade of C/2.0 | 1 per course | |
| 100% | Total Points | | | |

^{*}Students applying (or re-applying) to the ADN Program will be given bonus points for any NIC Nursing (NURS) courses completed with a C/2.0 or higher, for up to two years from the time the course was taken. This includes students who take NURS 115 Wellness prior to getting into the ADN Program and students that attended the first semester of the program and completed some NURS courses, such as NURS 215, etc. These courses will be calculated into the cumulative GPA that apply to degree requirements, (regardless of grade) and will also be counted in the admission criteria as courses completed at NIC with a grade of C/2.0 or higher at NIC.

Direct Patient Care Experience

North Idaho College Associate's Degree Nursing Program applicants who complete 750 hours of direct patient care in the last three years (from the time of submitting the application to the program), will receive an additional 15 points awarded to their admission criteria. The 750 hours need to be completed while employed by a healthcare agency. The student will need to turn in a letter from their employer (on employer letterhead) stating the job title of the student at the time they were employed there, the dates of employment, and the job description. The letter must be turned in with the admission packet.

Examples of employment that meet the direct patient care criteria:

CNA

Clinical Medical Assistant

EMT or Paramedic

Emergency Room Technician

Licensed Massage Therapist

Mental Health Technician or Specialist

Military Medic or Corpsman

Occupational Therapy Assistant

Patient Care Technician (Dialysis)

Physical Therapist Assistant

Radiology Technician

Surgical Technician

Surgical Technologist

Examples of employment that do not meet the direct patient care criteria:

Esthetician

Health Unit Coordinator

Home Care Aide

Lifeguard

Medication Assistant

Patient Transporter

Pharmacy Technician

Phlebotomist

Physical Therapy Aid

Resident Assistant and Caregiver

Respite Care

Scribe

Ski Patrol

If the student strongly believes that their 750 hours of employment meets the criteria, but the position is not identified in either of the above lists, the student may request an appeal for review of their position. Directions to appeal:

- 1. Complete the Direct Patient Care Appeal form.
- 2. Include an employer letter, on the employer letterhead, stating the job title the student held, the dates they worked and their job description.
- 3. The completed appeal documentation must be submitted with the ADN admission packet.

Direct Patient Care

Appeal Form for ADN Admission Criteria

| Student Name: | Date: | | | |
|---|-------|----|--|--|
| Direct Patient Care Position held: | | | | |
| Dates student held the position: | | | | |
| Provide job description, including typical duties the student performed while employed: | | | | |
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| | | | | |
| Approved to meet the 750 direct patient care experience: | YES | NO | | |
| | | | | |

| Document Title: North Idaho College | | |
|---|------------------------|--|
| Associate's Degree Nursing Program | | |
| Essential Abilities Policy | | |
| Document Number: 3.01.00 | | |
| Origination: Program Evaluation Committee Approval Date: 4/01 | | |
| Approval: Nursing Program Faculty Committee | | |
| Additional Publication(s): Admissions Office Review/Revise Date(s): | | |
| Advising/Counseling Services | 8/02; 7/14; 3/16; 8/17 | |

Essential Abilities Policy

The following are considered to be essential abilities, which are necessary for admission to, and continuance in, the Registered Nursing program.

With <u>or without</u> reasonable accommodation, all candidates and students <u>must meet or exceed</u> the following in order to provide safe care for patients and families.

Must meet:

- Urine drug test screening if required by clinical facility
- Criminal background check * requirements. Some facilities may require a more extensive background check including fingerprinting.
- OIG/GSA twice monthly screening while enrolled in the Nursing Program

A. Motor/Sensory:

- 1. Ability to visualize, auscultate, percuss and palpate to complete physical assessments.
- 2. Provide direct patient care.
- 3. Lift minimum of 25 pounds without assistance.
- 4. Be capable of frequent bending, stooping, lifting, pushing or pulling.
- 5. Possess the manual dexterity necessary to perform common tasks including, but not limited to gloving, gowning, use of computers, and operating controls on equipment.

B. Communication:

- 1. Verbally communicate effectively in English with co-workers, providers, patients and families (in person and on the telephone).
- 2. Be able to read and comprehend handwritten or printed information written above the 12th grade educational level.
- 3. Be able to write and verbalize words commonly used in health care.

C. Cognition:

- 1. Gather, analyze, and draw conclusions from data.
- 2. Prioritize activities.
- 3. Appropriately respond to spoken words and auditory signals including patient call lights, vital sign and other equipment alarms and controls.

D. Behavior:

- 1. Demonstrate the honesty and integrity that reflects essential character traits supporting trustworthiness and professionalism.
- 2. Groom and dress professionally, and exhibit social skills (including verbal and body language) appropriate in professional interactions.
 - A list of disqualifying offenses can be found here: https://chu.dhw.idaho.gov/. Click on "What is a disqualifying offense?" on the list of Common Questions. Facilities may have additional disqualifying offenses.

Definition: "Adequate": As specified in the NIC Associate's Degree Nursing Program performance criteria.

Students requiring accommodation must register with Disability Support Services and provide documentation. Reasonable accommodations for persons with disabilities will be determined in collaboration with Disability Support Services following current Americans with Disabilities Act (ADA) guidelines as stated in the North Idaho College policy on disabilities.

| Document Title: North Idaho College Associate's Degree Nursing Program Progression Policy | | |
|---|--|--|
| Document Number: 3.02.00 | | |
| Origination: Nursing Program Date: 5/98 | | |
| Faculty Committee | | |
| Additional Publication(s): | Review/Revise Date(s): 5/01; 5/03; 9/06; 10/10; 7/14; 8/17; 4/18: 5/21 | |

Progression Policy

Students must pass all courses in their current level of the ADN Program in order to progress to the next level. If a student fails one or more courses in a level, this constitutes as one failure of the program. (i.e. - a student fails NURS 235, NURS 255 and NURS 250 in the same semester; since these courses are all in the same level and taken in the same semester, it counts as just one of the student's opportunities and the student is still eligible for one more readmission into the NIC Nursing Program). A student may readmit or reenter one (1) time only into any North Idaho College Nursing Program: either RN or LPN (exception: approved withdrawal due to crisis).

Definitions:

Readmit: Students who did not successfully complete any first level (semester) nursing courses or co-requisite general education course must apply for readmission through the competitive admission process.

Re-entry: Students who do not successfully complete any nursing or co-requisite general education courses in the second, third or fourth level of the nursing curriculum must request re-entry to the program.

Progression Standards

Level I:

A. Students that fail a first level nursing course:

1. Students that fail a first level nursing course, or co-requisite general education course are required to apply for admission to the ADN program as outlined in the Application Packet: https://www.nic.edu/admissions/applicationRN.pdf. The student is subject to the competitive admission process.

If a student drops (withdraws, or fails) NURS 215 (Physical Assessment), they must also drop (withdraw from) the co-requisite nursing courses, NURS 201 (Fundamentals of Nursing) and NURS 210 (Fundamentals Lab). The student may complete all other Beginning Level nursing courses (NURS 115: Wellness and NURS 225: Pharmacology). The student must apply to be re-admitted through the competitive entry process.

2. Upon the second acceptance of admission into the program, the first level student will need to repeat any failed nursing courses. NURS 201 and NURS 210 are linked

courses, and therefore, if the student failed NURS 201 or NURS 210, they will be required to retake both the course they failed and the associated linked course* (i.e. – the student passed NURS 201 and failed NURS 210, they will be required to retake both courses if they are accepted into the program).

- 3. All successfully completed courses not linked to other courses, will not need to be repeated if the student is accepted into the program (see part D).
- 4. Nursing courses the student passed in their first attempt in the Nursing Program will be accepted for up to two years at the time of the second admission into the program. If a course has been taken more than two years prior, the student will be required to retake the course(s) upon acceptance into the program.
- **B.** Course failure after completion of the first semester:

Re-entry: Students who do not successfully complete any nursing or co-requisite general education courses in the second, third or fourth level of the nursing curriculum must request re-entry to the program.

Minimum requirements for successful completion of any nursing courses:

- 1. **Theory Courses:** A grade of **C**+ (77.0%) or higher is required in each nursing theory course. To receive a grade of **C**+ in a nursing course the student must:
 - a) Achieve a **77.0% minimum** theory testing average. No grades will be rounded, with the exception of the final course grade (after the minimum 77.0% course grade has been achieved). If a 77.0% average is not achieved, the theory average will be converted to letter grade and recorded as the course grade. No other course requirements will be included in grade calculation.
 - b) Achieve a minimum 77.0% average on all course work as specified in the course syllabus.
 - c) Complete all course requirements as specified in the course syllabi.
- **C. Lab Courses:** Pass all lab courses. Satisfactory performance in the course outcomes is required to pass all lab courses. This is recorded as a satisfactory (pass) or unsatisfactory (fail) on the NIC student transcript.
 - 1. Student must obtain "Meets Outcome" grade in all competencies at the Final Evaluation to pass the Course.
 - 2. Student must obtain satisfactory clinical behavior ratings to meet this requirement
 - 3. Pass the Math/Dosage Calculation requirement, if applicable.
- **D. Linked Courses*:** If a student cannot successfully achieve the competencies of a theory course, then the student is deficient in the nursing knowledge required to competently and safely deliver patient care in the linked lab course.

- 1. If a student fails or does not complete a linked lab course, they may continue to complete the linked theory course and receive a grade. If the student re-enters the program, the student will be required to take both the linked courses (lab & theory) again and will receive the higher of the two grades for the theory course.
- 2. If a student fails or withdraws from a linked theory course, the student will not be able to continue in the linked lab course; the student must withdraw from both courses. If a failure occurs after the withdrawal date, the student will receive a failure (unsatisfactory) in the linked lab course.
- * A linked course is a course that has a required, independently numbered and named clinical lab course associated with it. The following are linked courses:

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NURS 201 & NURS 210
NURS 250 & NURS 255
NURS 260 & NURS 265
NURS 270 & NURS 275
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- **E.** Combined Lecture/Lab Courses: Students must meet the minimum 77.0% theory average and pass the lab component in order to pass the course. To receive a passing grade in combined nursing lecture/lab course, the student must:
 - 1. Successfully pass the lecture portion as described in number one above and pass the lab portion as described in number two (A & B) above.
 - 2. If a student fails the clinical portion of the course, the course grade will be recorded as a C- for the entire course. No other course requirements or grades will be included in grade calculation.
 - 3. If a student passes the clinical portion and fails the lecture portion, the cumulative lecture grade will be recorded, as described in 1. A. above.

F. General Education Courses:

- 1. A grade of **C** or better is required for each general education course listed as prerequisite for the next nursing level. Pre-requisites and co-requisites for nursing levels are specified with the course description in the college catalog and in the syllabus for the course.
- 2. If a student does not achieve the required grade, they may repeat the course. When the course has been successfully completed with the required grade, the student may seek re-entry to the nursing program. See Readmission or Re-entry Policy and Procedure. Students must complete all pre-requisite and co-requisite requirements before advancing to the next level within in the Nursing program.

| Document Title: North Idaho College Student Withdrawal | | |
|--|------------------------|--|
| Document Number: 3.03.00 | | |
| Origination: Nursing Program Faculty | Date: 8/98 | |
| Committee | | |
| Additional Publication(s): | Review/Revise Date(s): | |
| | 8/08; 7/14, 4/17; 8/17 | |

Student Withdrawal

- 1. To withdraw from any course at NIC, the student must log into their MyNIC account and drop (withdraw from) the course.
- 2. If a student drops (withdraws from) a Nursing linked course, they are required to drop both the theory and lab courses. A linked course is a course that has a required, independently numbered and named clinical lab course associated with it (e.g. NURS 250 and NURS 255).*
- 3. A student must drop (withdraw from) a course by the designated college withdrawal date for the semester. Final dates for drops (withdrawals) with a grade of W are published on the college calendar. Students in academic jeopardy should be informed of options and time lines.
- 4. Students who do not officially drop (withdraw from) a class will receive a grade of **F** unless the instructor for the class initiates a withdrawal for them.
- 5. Students may withdraw after the college withdrawal date only for compelling and extraordinary reasons. If a nursing student must exit under such circumstances, the student must make an appointment with the Associate Dean of Health Professions and Nursing/Director of Nursing to explore petitioning for withdrawal. A student must be passing all nursing courses to be considered for an approved late withdrawal due to crisis.
- 6. Any student withdrawing from the program should meet with his/her faculty advisor and/or the Director of Nursing or the Course Team Leader for an exit interview and completion of the Exit/Withdrawal Interview Form. Students are responsible to contact the Student Financial Aid Office to determine the impact of withdrawing on their financial aid.
- 7. Students who withdraw, but wish to be readmitted/re-enter to the ADN Program, must refer to the Readmission or Re-Entry Policy/Procedure in the Nursing Student Handbook. They are advised contact the Nursing Director for any changes in the policy as soon as they know they will be applying for readmission or re-entry. Withdrawing students will also be aware that re-entry is on a space-available basis.

EXIT/WITHDRAWAL INTERVIEW

| Studen | nt Name: | ☐ Generic ☐ Advanced Placement |
|----------|---|--------------------------------|
| Semes | ster: | |
| 1. | Withdrawal from: North Idaho College: ADN Program: Nursing Course Number: | |
| 2. | Reason(s) for Withdrawal: Academic Financial Personal Relocation | ☐ Health ☐ Other: |
| 3. | How many hours per week are you working? Hours worked/week: Not working | |
| 4. | Are you taking other college classes aside from the Nu Number of credits currently taking aside to Not taking any other classes besides Nurs | from Nursing Program |
| 5. | Readmission Policy: Reviewed with student Copy given to student Sent by mail in lieu of personal interview | ew Date mailed: |
| 6. | Interview Summary | |
| 7. | Faculty Recommendation | |
| Stude | nt's Signature: | Date: |
| Direct | tor/Lead Instructor: | Date: |
| Associat | to: Student and Student's Permanent Record | Date: |

*Students need to contact the Associate's Degree Nursing Program when considering application for readmission. Policies and procedures are subject to change.

| Document Title: North Idaho College Associate's Degree Nursing Program Readmission Policy/Procedure | | |
|---|---|--|
| Document Number: 3.04.00 | | |
| Origination: Advanced Placement/ | Date: 1/99 | |
| Readmission Committee | | |
| Approval: Nursing Program | | |
| Faculty Committee | | |
| Additional Publication(s): | Review/Revise Date(s): 5/99 ; 10/00 ; | |
| | 1/03; 5/04; 4/06; 11/08; 12/09; | |
| | 08/11; 4/12; 8/17; 12/17; 5/21 | |

RE-ENTRY POLICY

- A. A student requesting re-entry is defined as a student who:
 - 1. withdrew from the ADN program after successful completion of first level nursing program courses.
 - 2. Did not successfully complete all required courses in the second, third or fourth level of the Nursing Program.
- B. Students who fail a first level nursing course are not eligible for re-entry.
 - 1. Students that fail a first level nursing course, or co-requisite general education course are required to reapply admission to the ADN program as outlined in the Application Packet and are not eligible for reentry into the ADN program.: https://www.nic.edu/admissions/applicationRN.pdf
 - 2. See Progression Policy and Procedure.
- C. To be eligible for re-entry the student must:
 - 1. Meet program requirements that are in effect at the time of re-entry.
 - 2. be accepted for readmission within two years of the time of exit (e.g. A student fails NURS 250 during any part of spring 2020 semester; the latest date a student may apply for re-entry is the spring 2022 semester for fall 2022 nursing program level entry).
 - 3. Follow guidelines for re-entry as designated in the readmission procedure.
- D. A student may re-enter one (1) time only into any North Idaho College Nursing Program: either RN or LPN (exception: approved withdrawal due to crisis).
- E. Decision for re-entry will be based upon:
 - 1. Academic and clinical performance while enrolled in the program.
 - 2. Circumstances surrounding exit from the program.
 - 3. Actions taken by the student subsequent to exit to resolve problems and increase their potential for success in the program.
- F. Re-entry is contingent upon space availability.

^{*}Program level is defined as: Nursing Beginning Level; Intermediate Level I or II; or Nursing Advanced Level

RE-ENTRY PROCEDURE

This procedure is for all individuals seeking re-entry to the Associate's Degree Nursing Program.

- A. The individual will submit the following information to the appropriate nursing level team:
 - 1. A letter requesting reentry to the Associate's Degree Nursing Program which will address:
 - a. Reasons why the student would like to be considered for readmission.
 - b. Activities or experience since withdrawal from the nursing program that would contribute to the student's potential for success in the program.
 - c. If applicable, work experience including submission of name and address of immediate supervisor for reference
 - 2. Official transcripts of courses taken since withdrawal from the nursing program or in which the student is currently enrolled.
 - 3. Any other data deemed appropriate by the student.
- B. The deadlines for submitting re-entry requests:
 - 1. May 1 for fall courses.
 - 2. December 1 for spring courses.
 - 3. If requesting re-entry to the subsequent semester, the deadline for application will be the day after the last scheduled exam for that course.
- C. The appropriate nursing level team will review the letter of request and the data submitted and act upon the request for re-entry. If upon review the team has insufficient data to act, additional data may be requested.
- D. The appropriate nursing level team will make a recommendation to Associate's Degree Nursing faculty regarding the application, and the faculty will grant or deny re-entry based on policy criteria.
- E. The applicant will be notified in writing of the faculty decision on his/her request for reentry.
- F. Upon approval, the student will be notified to proceed with the re-entry process, which will include:
 - 1. Demonstration of satisfactory knowledge base evidenced by a minimum passing score of 77.0% on the last exam prerequisite to the course level of requested readmission. The student will have one (1) opportunity to re-take the exam. Students readmitted to the subsequent semester are exempt from this requirement.
 - a. Demonstration of satisfactory performance of clinical lab skills: The applicant will receive a list of testable skills.

- b. The student will be notified of the time when the lab is available for independent practice.
- c. There may be a non-refundable fee for skills practice and testing.
- d. Testing of skills will be scheduled.
- e. The student will have two opportunities to demonstrate satisfactory performance of skills.
- 2. All re-entry procedures must be completed according to the following guidelines:
 - a. August 1 for entry into Fall semester
 - b. December 15 for entry into Spring semester
 - c. Applicants requesting re-entry to a subsequent semester will be notified of the deadline.
- G. If readmission is to a subsequent semester, all or part of item #F may be waived with the endorsement of the most recent clinical lab course faculty team.
- H. Granting of re-entry is based on space availability. The student will be notified once they have successfully completed the requirements for re-entry as outlined above, and space availability has been determined. At that time, the student must show current documentation of all Clinical Passport Requirements.
- I. In the event that more students are seeking re-entry than there are theory or clinical/lab spaces available, the following will be used to determine the student priority ranking:
 - 1. A student who withdrew in satisfactory nursing level standing (passing all level courses with written assignments and theory test average at least 77.0%) will receive top priority for reentry.
 - 2. Second highest level of readmission priority will be awarded to the student with the highest GPA in nursing program courses. Actions taken by the student to increase their potential for success in the program will also be considered.
 - 3. The third level of readmission priority will be awarded to the student with the highest final clinical evaluation during their last clinical lab course in process at the time of withdraw/failure. Actions taken by the student to increase their potential for success in the program will also be considered.
 - 4. The fourth level of readmission priority will be to the student who is employed in a health-related profession as identified in program admission criteria. Actions taken by the student to increase their potential for success in the program will also be considered.
 - 5. The student who did not progress due to failure in clinical will be ranked last for re-entry.
- J. All accepted re-entry students will be placed on a Clinical Contract for the semester.

| Document Title: North Idaho College Associate's Degree Nursing Program Extended Readmission Policy | | |
|--|-----------------------------|--|
| Document Number: 3.05.00 | | |
| Origination: Nursing Program Pate: 5/9/24 Faculty Committee | | |
| Additional Publication(s): | Review/Revise Date(s): 8/24 | |

EXTENDED READMISSION POLICY

Students who did not successfully complete any nursing course and was granted re-entry into the program who then did not successfully complete a second course may be eligible to reapply for readmission to the ADN Program after a waiting period of five years. This includes students who have not successfully completed any nursing program at another college.

Extended Readmission

- Students may apply to readmit to the ADN Program after a five-year waiting period. Example: Failed 2nd attempt in Spring24, eligible to apply for readmission to start Spring29.
 - 1. The student must apply as a new student and meet all current admissions criteria
 - 2. The student will enter as a first semester student and progress through the entire ADN curriculum regardless of any previously passed nursing courses.
- Students who apply for the extended readmission process must also include a letter in the readmission packet including each course failed (Course Name and Semester taken) as well as steps taken to improve previous hindrances. Students should include a brief history of why they did not progress/were dismissed, and include evidence that they sought help with their academic skills since the dismissal. Students who qualify for readmission through the competitive process will then be required to meet with the Readmission Panel for an interview.
- Students who have been accepted as an extended readmission student may not fail any future courses. Failure of any nursing course after extended readmission will result in dismissal from the program without the possibility of readmission to any NIC Nursing Program.

Required to Disclose

Students who have committed egregious behaviors during their previous attempts and were dismissed as a result of these behaviors may not qualify for the Extended Readmission Process. Egregious behaviors include, but are not limited to:

- 1. Unethical Conduct
- 2. Abuse
- 3. Harassment
- 4. Academic Dishonesty
- 5. Breach of Confidentiality
- 6. Violations of Code of Conduct

7. Criminal Activity

Any of the above scenarios must be addressed within the readmission letter.

If an action would disqualify the individual from clinical placement or licensure in most states, the student may not be eligible for extended readmission.

The Readmission Panel will consist of a faculty member from each year of the nursing program, the Nursing Student Success Navigator as well as the Nursing Program Coordinator and/or the Director of Nursing. A currently enrolled student representative and an NIC Faculty member from outside the Nursing Division will also be included.

Section IV: Curriculum

Associate of Science Degree

Students graduating from the nursing program receive an Associate of Science Degree. Degree course requirements are listed in the college catalog. All college degree requirements must be met to graduate from the nursing program. Students are eligible to take NCLEX-RN on completing the Associate's Degree Nursing Program curriculum.

The faculty of the Associate's Degree Nursing Program adopted a competency-based nursing curriculum that aligns with the Quality Safety and Safety Education for Nurses (QSEN) Competencies. The faculty believe competencies in the domains of patient-centered care, teamwork, collaboration, evidence-based practice, quality improvement, safety, and informatics are essential for the new graduate to provide safe, quality patient care and improve the quality and safety of the healthcare systems in which they work. A curriculum based on these competencies prepares graduates to deliver care, which is consistent with contemporary practice.

The organizing framework guides selection and sequencing of content and learning experiences in each of the nursing courses toward the achievement of the program educational outcomes.

NORTH IDAHO COLLEGE ASSOCIATE'S DEGREE NURSING PROGRAM CURRICULUM OUTLINE

| Semester 1 GEM 1 GEM 3 GEM 4 GEM 6 GEM 2 | ENGL 101 Course BIOL 227 PSYC 101 COMM 101 | Title English Composition | Semester Credit Hours 3 3 4 3 3 16 | Lab Hours |
|--|--|---|---|---------------------|
| | | | g , | T 1 |
| Semester 2 | | <u>Title</u> | Semester Credit Hours | <u>Lab</u> Hours |
| GEM 4 | BIOL 228 | Human Anatomy and Physiology II | 4 | |
| GEM 6 | SOC 101 | Introduction to Sociology | 3 | |
| GEM 7 | NURS 115 | Wellness for Care Providers | 1 | |
| | NURS 201 | Fundamentals of Nursing | 2 | 00 |
| | NURS 210 NURS 215 | Fundamentals Lab Physical Assessment (.5 credit Lecture & .5 credit Lab) | 2 | 90 22.5 |
| | NURS 225 | Pharmacology | 1 | 22.3 |
| | 11010 223 | TOTAL | 14 | 112.5 |
| G 2 | | Ti'd | Semester | Lab |
| Semester 3 | | <u>Title</u> | Credit Hours | Hours |
| GEM 1 | ENGL 102 | English Composition – APA | 3 | |
| GEM 4 | BACT 250 | General Microbiology/Bacteriology | 4 | |
| | NURS 250 NURS 255 | Med-Surg I Loh | 3 | 125 |
| | NURS 235 | Med-Surg I Lab Psych-Mental Health (.6 credit Lecture and .4 credit Lab) | 3 1 | 135 18 |
| | NORS 233 | TOTAL | 14 | 153 |
| | | | Semester | Lab |
| Semester 4 | | <u>Title</u> | Credit Hours | Hours |
| GEM 5 | Course | Arts & Humanities | 3 | |
| | NURS 240 | Child-Bearing Families (1.5 hour lecture & .5 credit Lab) | 2 | 22.5 |
| | NURS 260 | Med-Surg II. | 4 | 100 |
| | NURS 265 | Med-Surg II Lab | 13 | 180 202.5 |
| | | IOIAL | | |
| Semester 5 | | <u>Title</u> | Semester Credit Hours | <u>Lab</u> Hours |
| GEM 5 | Course | Arts & Humanities. | 3 | Hours |
| GEM 7 | INTR 250-O | Leadership in Interprofess Healthcare (2 cr lect & 1 cr Lab) | 3 | 45 |
| | NURS 270 | Transition to Practice | 1 | |
| | NURS 275 | Transition to Practice Lab (Precepting) | 3 | 135 |
| | NURS 245 | Community Health (Service Learning) | 1 | 100 |
| | | TOTAL | 11 | 180 |
| | | TOTAL CREDITS | 68 | |
| | | TOTAL CREDITS TOTAL LAB HOURS | 00 | 648 |

Curriculum End-of-Program Student Learning Outcomes

- 1. Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs. (*Patient-Centered Care*)
- 2. Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care. (*Teamwork and Collaboration*)
- 3. Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal healthcare. (*Evidence-Based Practice*)
- 4. Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of healthcare systems. (*Quality Improvement*)
- 5. Minimize risk of harm to patients and providers through both system effectiveness and individual performance. (*Safety*)
- 6. Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making. (*Informatics*)

Curriculum Beginning Level Courses with Student Learning Outcomes

| Thread | Wellness for Care Providers NURS 115 | Fundamentals of Nursing NURS 201 & NURS 210 | Physical Assessment NURS 215 | Pharmacology NURS 225 |
|---------------------------|---|--|--|--|
| Patient- Centered Care | communication on | Demonstrate integration of the multidimensional needs of individuals to promote effective adaptation and wellness. | individuals across the lifespan. | Demonstrate the integration of patient education with patient- specific information to include: age considerations, and ethno- pharmacology. |
| | Practice self- evaluation using reflections to pursue | Apply nursing values, ethics, legalities and standards using effective and accurate information. | Demonstrate awareness of own strengths/limitations and when to request help appropriate to situation. Perform within own scope | Correlate the team approach to the medication process from CPOE to medication administration at the bedside, including applicable lab values, pre and post administration assessments, order verification. |
| ЕВР | | Utilize the health assessment and nursing process to include evidence-based practice into holistic patient care. | | Understand the pharmacokinetics, pharmacodynamics and pharmaceutics of medications by drug class and associate the importance of giving medications by the correct route. |
| Quality | Discuss the culture of quality improvement in healthcare and explain the impact of nursing within the context of quality. | Explain the process for evaluation and measurement of outcomes of care. | | Explain the process of timely updates of patient information associated with medications, and correlate this with appropriate patient education materials. |
| Safety | Discuss the culture of safety in healthcare and explain the impact of nursing within the context of safety. | Utilize national patient safety resources to support safe nursing practice. | effective practices while | Safely administer medications with knowledge of nursing implications. |
| Informatics | | Discuss information management tools that promote safe patient care and confidentiality of patient health information, including patient rights related to access of health records. | assessment information to communicate. | Utilize technology to research medications, mitigate error, and support decision making. Accurately employ agency policy to document medication administration. |

Curriculum Intermediate Level Courses with Student Learning Outcomes

| Thread | Med/Surg I NURS 250 & NURS 255 | Psych-Mental Health NURS 235 | Med/Surg II NURS 260 & NURS 265 | Child-Bearing Families NURS 240 |
|------------------------------|--|--|---|--|
| Patient- Centered Care | Plan and deliver patient-centered care with emphasis on patient and family, values, preferences and needs, advocate for patient needs and involve significant support systems. | Employ the nursing process in providing holistic, patient-centered care that reflects an understanding of psychiatric-mental health illness and recovery. | Integrate understanding of multiple dimensions to develop and evaluate patient-centered care and describe strategies to empower patients or families in all aspects of the health care process. | Demonstrate professional standards when formulating a plan to provide family- centered care with an emphasis on patient preferences, values and needs. |
| Teamwork & Collaboration | Utilize effective communication with inter-professional teams, patients and families from diverse sociocultural backgrounds while demonstrating integrity and compassion. | Apply self-knowledge gained through reflection of one's own beliefs and values while providing psychiatric mental health care and communicating professionally with members of the psychiatric mental health interdisciplinary team. | Formulate strategies for effective functioning of the health care team through communication and understanding of roles and accountability. | Communicate effectively with multidisciplinary team members when providing care to the family and person experiencing sexuality, childbirth and care of children. |
| EBP | Apply the nursing process, incorporating evidence-based practices while caring for a variety of patient populations. | Integrate evidence, clinical judgment, inter- professional perspectives and patient preferences in planning, implementing, and evaluating mental health care. | Develop, deliver, and evaluate nursing care that demonstrates evidence- based practice including research evidence, clinical expertise, and patient/family values. | Analyze and use current EBP to formulate a plan to provide effective nursing care to the family and person experiencing sexuality, childbirth and care of children. |
| Quality | Formulate and implement care plans developed from available data, contributing to positive outcomes and promoting quality. | Identify mental health disparity issues and key areas for quality improvement in mental health service delivery. | Consider systems of care, distinguishing continuous quality improvements as essential in the daily work of all healthcare providers. | Examine health promotion concepts and strategies in the nursing care of families and patients to promote sexual, child-bearing and pediatric wellness and decrease health care costs. |
| Safety | Demonstrate safe nursing care, applying standards of care and advocating for safety. | Demonstrate the ability to recognize, assess, and appropriately intervene with individuals at risk for suicide and non-suicidal self-injury. | Determine safe nursing care through use of effective strategies to reduce risk of harm to self or others. | Demonstrate knowledge and skill in preventing injury and providing safe care to families and patients experiencing sexuality, child-bearing and care of children with an emphasis on knowledge of medications and accurate dosage calculations. |
| Informatics | Utilize technology and information management tools to support safe processes of care. | | Discriminate communication technologies that support clinical decision-making, error prevention, care coordination, and protection of patient privacy. | Implement use of EHR to identify data that will allow implementation of patient's birth plan and care of the child. |

Curriculum Advanced Level Courses with Student Learning Outcomes

| Thread | Transition to Nursing Practice NURS 270 & NURS 275 | INTR250: Leadership in Inter- Professional Healthcare NURS 250 | Community Health NURS 245 |
|---------------|--|--|--|
| Patient- | Manage the care of a | Use the knowledge of one's own | Relate concepts of social |
| Centered | diverse group of patients | role and those of other health | justice, advocacy, autonomy, |
| Care | with patients/families to | professions to appropriately assess | human dignity, integrity, and |
| | formulate and implement | and address the healthcare needs of | altruism to delivery of care to |
| | plans of care designed to | the patients and populations served. | vulnerable communities, |
| | achieve desired outcomes. | | groups, and populations. |
| | Function competently as a | Evaluate the role of the health care | Develop plans of care for |
| Collaboration | member of the health care | provider within the system and | communities, groups, and |
| | team within the scope of | determine how the professional can | populations through |
| | practice as a graduate nurse. | utilize collaboration and leadership | collaboration with |
| | | skills to improve the safety, quality, | interdisciplinary teams, |
| | | and cost-effectiveness of care working with other health | taking into account elements of health, resources, and |
| | | professions to maintain a climate of | activities that contribute to |
| | | mutual respect and shared values. | health promotion and disease |
| | | mutual respect and shared varies. | and injury prevention. |
| EBP | Analyze current nursing | Apply relationship-building values | Use an evidence-based |
| | practice issues and | and the principles of team dynamics | approach to prevent injury |
| | determine how to integrate | to perform effectively in different | and maintain, restore and |
| | evidence-based guidelines, | team roles to plan and deliver | promote group, community |
| | clinical knowledge and | evidence-based care that is safe, | and population health. |
| | individual patient/family | timely, efficient, effective, and | |
| | needs into clinical decision- | equitable. | |
| | making and determine when | | |
| | to deviate. | | |
| Quality | Integrate theory, research | Implement ways in which different | Collaboratively gather, |
| | and knowledge to improve | professions can collaborate and | evaluate or implement |
| | the quality of care provided | measure quality patient care, | research recommendations |
| | to patients. | identify gaps between local and best | and Healthy People 2020 |
| | | practice and share resources to | recommendations that relate |
| | | improve healthcare. | to care of groups, |
| Safety | Analyze the safety measures | Evaluate the potential and actual | communities or populations. Identify methods to prepare |
| Salety | utilized to improve patient | impact of national patient safety | for and manage disasters that |
| | outcomes. | resources, initiatives and regulations | relate to communities, groups |
| | outcomes. | on patient care and systems of | and populations. |
| | | health care. | Populations. |
| Informatics | Combine health care | Analyze the leader's role in using | Use technology to identify |
| | information technologies in | information technology to improve | disease incidence and |
| | the management of patient | processes of care. | prevalence, and assist in the |
| | care. | | development of a plan of care |
| | | | to prevent the spread of |
| | | | population-based diseases. |

Beginning Level Nursing

| NURS | 115: Wellness for Care Providers |
|------|---|
| • | Key Dimensions of Health and Wellness |
| • | Holistic Health |
| • | Healthcare and Wellness Past, Present, and Future |
| • | Stress, Anxiety, Coping, and Self-care |
| • | Health Behavior Change and Health Promotion |
| • | Nursing Role |
| • | Teaching and Learning related to Health Promotion and Wellness |
| • | Teamwork and Collaboration |
| • | Theories of Carting within Health Care System Context |
| • | Quality and Safety Education in Nursing |
| • | Culture of Safety in Healthcare |
| • | Nursing Contributions to Quality and Safety and the Culture of Healthcare |
| • | Personal and Professional Behaviors |

| NURS 201: Fundamentals of Nursing | NURS 210: Fundamentals of Nursing | |
|--|---|--|
| (Theory) | (Lab/Clinical) | |
| Infection Control and Prevention | Hand washing | |
| | Types of isolation | |
| | Donning and removal of personal | |
| | protective equipment | |
| | Clean technique | |
| | Sterile technique (including gloving) | |
| Mobility and Immobility Issues | Basic Bedside Care | |
| | Management of bedbound patients | |
| | Skin Care | |
| Nursing Process | | |
| Oxygenation and Circulation | | |
| Pain Management | | |
| Communication | Documentation of care | |
| Psychosocial Care | | |
| Urinary and Bowel Elimination | Urinary Elimination | |
| | Management of incontinence | |
| | Bowel Elimination | |
| Nutrition | | |
| | Feeding skills | |
| | Enteral tube feedings | |
| Legal Implications and Ethical Dilemmas | Restraints | |
| Comfort | | |
| | Administration of non-parenteral | |
| | medications | |
| | Administration of parenteral medications | |

| NURS 215: Physical Assessment (Lecture) | NURS 215: Physical Assessment (Lab) |
|---|--|
| Health Assessment and Physical | Basics of assessment |
| Examination: Techniques Across the | Prioritization in Assessment |
| Lifespan | |
| System Specific Assessments | Head to Toe Shift Assessment |
| | Focused Assessment |
| | Respiratory |
| | Cardiovascular |
| | Neurological |
| | Gastrointestinal |
| | Genital urinary |
| | Integumentary |
| | Musculoskeletal |
| | Emotional behavioral |
| | Cognition |
| Documentation | Documentation and Communication of |
| | Assessment |
| | Competency Assessment |
| | Competency Measurement |

| NURS 225: Pharmacology |
|--|
| Drug Action |
| Basic Drug Calculation |
| Standardized Tools Used in Medication Management |
| Nursing Practice and Medication Administration |
| General Concepts in Pharmacology Across Specific Populations |
| Herbal Therapies |
| Medication Administration Process |
| Medication Safety and Error Prevention |
| Medication Administration Routes |
| Drug Classifications |
| Autonomic nervous system agents |
| Anticonvulsants |
| Anti-inflammatory agents |
| Anti-anxiety agents |
| Antidepressants |
| Anti-infectives |
| Respiratory agents |
| o Cardiac agents |
| o Diuretics |
| Antihypertensive agents |
| Anticoagulation agents |
| Hypolipidemics |
| Drugs for gastrointestinal disorders |
| o Diabetic medications |

Intermediate Level 1

| NURS | 235: Psych Mental Health (Theory and Lab) |
|------|--|
| • | Mental Health and Mental Illness |
| • | Biological Implications |
| • | Legal and Ethical Issues in Mental Health Nursing |
| • | Nursing Role in Psychiatric Mental Health Settings |
| • | Milieu Therapy |
| • | Psychopharmacology |
| • | Relationship Development/Therapeutic Communication |
| • | Crisis Intervention |
| • | Suicide Prevention |
| • | Survivors of Abuse and Neglect |
| • | Human Sexuality and Gender Dysphoria |
| • | Neurocognitive Diseases |
| • | Substance Use Disorders |
| • | Eating Disorders |
| • | Schizophrenia and other psychotic disorders |
| • | Depressive Disorders |
| • | Bipolar and related Disorders |
| • | Anxiety Disorders |
| • | Trauma and Stress related Disorders |
| • | Somatic symptom and Dissociative Disorders |

| NURS 250: Medical Surgical Nursing I | NURS 255: Medical Surgical Nursing | |
|---|--|--|
| (Theory) | Lab I | |
| Care Needs of the Adult | | |
| • Pain | | |
| Care of the Perioperative Patient | Sterile Procedures | |
| | Surgical Gowning | |
| Management of the Patient with Diabetes | Diabetic Skills | |
| Management of the Patient with Non- Pancreatic Endocrine Disorders | | |
| Oxygenation | | |
| Management of the Patient with Impaired Circulation Management of the patient with Chronic circulatory disorders | Simulation: Care of the Cerebrovascular Accident Patient | |
| Parenteral Hydration Basic IV therapy Introduction to fluid and electrolyte therapy | Basic IV Skills Safety | |
| Infection and InflammationSIRS | | |
| Management of Patient with Autoimmune Disorder | | |
| Management of the Patient with Musculoskeletal Abnormalities | Simulation: Management of the patient with Total Knee Replacement | |

| NURS 250: Medical Surgical Nursing I | NURS 255: Medical Surgical Nursing | |
|--|--|--|
| (Theory) | Lab I | |
| Management of the Patient with Chronic and Inflammatory Gastrointestinal Abnormalities | Simulation: Management of the Post- Operative Bowel Resection Patient Nasogastric Tube Management | |
| Management of the Patient with Chronic Integumentary Conditions | | |
| Management of the Patient with Wounds and Ostomies | | |
| Management of the Patient with Chronic and Inflammatory Conditions of the Ears, Eyes, Nose and Throat | | |
| Management of the Patient with Urinary Tract Infections | | |
| Management of the Patient with Chronic Neurological Disorders Neuro Assessment Headaches Seizures | | |
| Management of the Patient with Delirium, Dementia, Alzheimer's, and Parkinson's Disease | | |
| | Time Management and Safety | |
| | Phlebotomy Skills | |

Intermediate Level II

| NURS 260: Medical Surgical Nursing II | NURS 265: Medical Surgical Nursing Lab II |
|---|---|
| | Time Management |
| | Nursing Informatics |
| Management of the Patient with Acute / | |
| Complex Gastrointestinal Disorders | |
| Management of the Patient with Cancer | |
| Management of the Patient with Blood | |
| Disorders | |
| Management of the Patient with Acute / | Cardiac Rhythm Interpretation |
| Complex Circulatory Disorders | |
| o Management of the patient with | |
| acute circulatory disorders | Complete W. Thomas and Management of |
| Management of the Patient with Advanced Fluid and Electrolyte | Complex IV Therapy and Management of Vascular Access |
| Imbalance | o IV push medications |
| inibalance | Av push inculcations Management of Central Lines |
| | Management of complications |
| | o Total Parental Nutrition |
| Management of the Patient with Acute / | |
| Complex Renal Impairment | |
| Management of the Patient with Complex | Patient Controlled Analgesia |
| and Intractable Pain | |
| Management of the Patient with Acute / | Chest Tube Management |
| Complex Oxygenation Disorders | Tracheostomy Care |
| End of Life Care | |
| Management of the Patient with Acute / | |
| Complex Neurological Disorders | |
| Management of the Critical Care Patient | |
| Management of the Patient Experiencing | |
| Shock/MODs | |
| Nursing Role in a Cardio Pulmonary | Code Management |
| Arrest | |

| NURS 240: Nursing Care of Childbearing Families with Lab | | |
|--|---|--|
| • | Maternity Nursing | |
| • | Sexuality, Reproductive Health and Genetics | |
| • | Pediatrics (Infancy to Adolescence) | |
| • | Developmental / Age Related Care: Infant to Adolescence | |
| • | Childhood Illnesses / Disorders / Developmental Abnormalities | |

Advanced Level

| NURS 245: Community Health | | |
|---|--|--|
| Healthy People 2030, Nutrition, Obesity, and Health Promotion | | |
| Community Health for Vulnerable Populations | | |
| HIV/AIDS | | |
| Disaster Preparedness and Triage | | |
| Rural Healthcare | | |
| Care Across the Continuum | | |
| Cultural Aspects of Healthcare | | |
| Climate Change and Health | | |
| Service Learning | | |

| INTR 250-O: Leadership in Inter-professional Healthcare | | | |
|---|---|--|--|
| • Lea | eadership and Promoting Evidence-Based Practice | | |
| • Tea | eamwork and Collaboration | | |
| • Na | ational Patient Safety Goals and Error Prevention | | |
| • Inf | formatics- Impact of technology on healthcare | | |
| • Qu | uality Improvement | | |
| • Sys | estem Conflicts and Values | | |
| • Ca | areer Planning and Professional Development | | |
| • Pra | acticum | | |
| • Nu | ursing Role within Health Care System Context | | |
| • Tea | amwork | | |

| NURS 270: Transition to Practice | NURS 275: Transition to Practice Lab |
|---|---|
| Managing the Continuum of Care | |
| Utilizing Teamwork and Collaboration to Improve Patient Outcomes | Incivility in the workplaceCommunicationDelegation |
| Integration of evidence-based practice into Clinical Decision Making | Evidence-Based practice in the workplace |
| Promotion of Safety in Patient Care Management | |
| Utilizing Systems to Monitor Outcomes of Care | |
| Realities of Nursing Practice | Reality Shock Role Stress / compassion fatigue / job dissatisfaction Benner's Novice to Expert Professionalism |
| NCLEX Preparation | |

Guidelines for Student Use of Course Materials

A. Course Materials:

Course materials are posted on the Canvas NIC student learning management system. The course materials consist of the course syllabus, schedule for classes and lab/clinical experiences, content guides for units of course content, clinical information, and learning lab information.

B. Course Schedule:

The class schedule is posted on Canvas approximately one (1) week prior to the start of the semester. Although subject to minor changes, refer to it for approximate class dates, times, tests, and general class schedule information.

C. Content Guides:

- 1. Content guides are provided prior to most lectures on Canvas to direct effective studying.
- 2. Content guides consist of:
 - a. An overview, which introduces the content and establishes relevance of the content to nursing practice.
 - b. Student learning outcomes are provided according to the QSEN Competencies. Each content guide will have the Program Student Learning Outcomes, the Course Student Learning Outcomes, and the content specific objectives. The content objectives are very specific to the content being taught and help guide students in studying effectively for that particular topic. Content objectives identify the knowledge, skills and attitudes expected of students regarding the particular topic. The content objectives support students in meeting the Course Student Learning Outcomes, which support student achievement of the final Program Student Learning Outcomes upon graduation from the program.
 - c. Learning resources which provide facts, principles, theory, and exploration of attitudes, values and belief systems, and demonstration of skills are identified for the student for independent study and for practice to achieve the learning outcomes. Learning resources may include a variety of resources including but not limited to textbooks, articles and videos and websites.
 - d. Required written class preparation when applicable.

D. Use of the Content Guides:

- 1. Review the objectives, learning resources and written preparation pages <u>before</u> beginning textbook reading.
- 2. Read actively and purposefully extract information, that pertains to the content guide objectives.
- 3. Highlight or outline answers to objectives, if that is helpful to your learning style.
- 4. Complete required written class preparation if assigned.
- 5. Make notes of any questions or confusions to clarify with the instructor during class.

E. Preparation for class:

- 1. Students are expected to come to class having utilized the learning resources to acquire basic knowledge and comprehension of theory material in the objectives.
- 2. Classes will focus on application of theory to nursing practice using brief lecture but predominantly active learning methods.
- 3. Not all objectives will be addressed in class; however, the student is responsible for achieving all class objectives.

Section V: Evaluation, Grading & Academic Standards

| Document Title: North Idaho College Associate's Degree Nursing Program Academic Grading Policy | | | |
|--|--|--|--|
| Document Number: 5.01.00 | | | |
| Origination: | Date: | | |
| Additional Publication(s): | Review/Revise Date(s): 8/03; 10/10; 7/14; 8/17; 8/21 | | |

ACADEMIC GRADING POLICY

Grading: The grading criteria for each course is specifically addressed in the course syllabi.

Grading Scale: The faculty of the nursing program has adopted the following grading scale.

| Percent | Letter | Grade Point |
|----------|--------|-------------|
| 93-100% | A | 4.0 |
| 90 - 92% | A- | 3.7 |
| 87 - 89% | B+ | 3.3 |
| 83 - 86% | В | 3.0 |
| 80 - 82% | B- | 2.7 |
| 77 - 79% | C+ | 2.3 |
| 73 - 76% | С | 2.0 |
| 70 - 72% | C- | 1.7 |
| 67 - 69% | D+ | 1.3 |
| 63 - 66% | D | 1.0 |
| 60 - 62% | D- | 0.7 |
| 0 - 59% | F | 0.0 |

Grading Requirements:

A grade of C+(77.0%) or better in each nursing course. (Any course beginning with a nursing prefix – NURS and INTR 2500). To receive a grade of C+ in a nursing course the student must:

- 1. Achieve a **77.0% minimum** theory testing average. No grades will be rounded, with the exception of the final course grade (after the minimum 77.0% course grade has been achieved). If a 77.0% average is not achieved, the theory average will be converted to letter grade and recorded as the course grade. No other course requirements will be included in grade calculation.
- 2. Achieve a minimum 77.0% average on all course work as specified in the course syllabus.
- 3. Pass the Math/Dosage Calculation requirement, if applicable.
- 4. Receive a satisfactory (pass) end of semester performance evaluation for lab courses and the lab portion of combined lecture/lab courses.

Rounding of Grades after achievement of the minimum 77.0% average.

Final course grades <u>will</u> be rounded (using the 10th decimal column) to the next whole number. For example: 77.5 becomes 78 and 77.4 will remain at 77.

Incomplete Grades

A grade of "I" (incomplete grade) may only be recorded for a student whose work is incomplete due to circumstances beyond the student's control. The "I" grade must be removed before the student can progress to the next nursing course. (Refer to the North Idaho College catalog for the procedure to be followed).

| Document Title: North Idaho College Associate's Degree Nursing Program Progression Policy | | |
|---|--|--|
| Origination: Nursing Program Faculty Committee | Date: 5/98 | |
| Additional Publication(s): | Review/Revise Date(s): 5/01; 5/03; 9/06; 10/10; 7/14; 8/17; 5/21 | |

Progression Policy

Students must pass all courses in their current level of the ADN Program in order to progress to the next level. Progression to the next level of the ADN Program requires:

- **A. Theory Courses:** A grade of **C**+ (77.0%) or better in each nursing theory course. To receive a grade of **C**+ in a nursing course the student must:
 - 1. Achieve a **77.0% minimum** theory testing average. No grades will be rounded, with the exception of the final course grade (after the minimum 77.0% course grade has been achieved). If a 77.0% average is not achieved, the theory average will be converted to letter grade and recorded as the course grade. No other course requirements will be included in grade calculation.
 - 2. Achieve a minimum 77.0% average on all course work as specified in the course syllabus.
 - 3. Complete all course requirements as specified in the course syllabus.
- **B.** Lab Courses: Pass all lab courses. Satisfactory performance in the course outcomes is required to pass all lab courses. This is recorded as a satisfactory (pass) or unsatisfactory (fail) on the NIC student transcript. To meet this requirement, the student must:
 - 1. Obtain "Meets Outcome" grade in all competencies at the Final Evaluation.
 - 2. Obtain satisfactory clinical behavior ratings.
- **C. Combined Lecture/Lab Courses:** Students must meet the minimum 77.0% theory average and pass the lab component in order to pass the course. To receive a passing grade in combined nursing lecture/lab course, the student must:
 - 1. Successfully pass the lecture portion as described in **A.** above and pass the lab portion as described in **B.** above.
 - 2. If a student fails the clinical portion of the course, the course grade will be recorded as a C- for the entire course. No other course requirements or grades will be included in grade calculation.
 - 3. If a student passes the clinical portion and fails the lecture portion, the cumulative lecture grade will be recorded, as described in **A.1.** above.

D. General Education Courses:

- 1. A grade of **C** or better is required for each general education course listed as pre-requisite for the next nursing level. Pre-requisites and co-requisites for nursing levels are specified with the course description in the college catalog and in the syllabus for the course.
- 2. If a student does not achieve the required grade, they may repeat the course and when it has been successfully completed with the required grade, the student may seek re-entry to the nursing program. See Re-entry Policy and Procedure.

| Document Title: North Idaho College Associate's Degree Nursing Program Theory Testing & Campus Clinical Lab Participation Policy | | |
|--|---|--|
| Document Number: 5.03.00 | | |
| Origination: Program Evaluation Committee Approval: Nursing Program Faculty Committee | Date: 1/09 | |
| Additional Publication(s): | Review/Revise Date(s): 1/09; 8/09; 10/10; 1/11; 7/14; 8/17; 12/17; 8/18 | |

Theory Testing and Campus/Clinical Lab Participation Policy/Procedure Based Upon Theory Test Average

The North Idaho College Nursing Program strives to provide competent and safe students in clinical facilities. The nursing faculty will not place a patient at risk due to a student's knowledge deficit. The faculty believe when a student cannot successfully pass the course with a 77.0% theory testing average, the student is deficient in the nursing knowledge required to competently and safely deliver patient care.

Policy:

When a student is unable to pass the course with a 77.0% theory testing average, they may attend class, but will no longer be allowed to participate in theory testing or attend campus or clinical labs.

Procedure:

- 1. The student's nursing advisor will meet with the student who cannot pass the course with a 77.0% theory testing average. (For example, the student would need to receive greater than 100% on the last three (3) tests of the semester to earn a 77.0% theory testing average.)
- 2. The student will be informed that they may no longer participate in theory testing or attend campus or clinical labs.
- 3. If the date the student is informed is on or before the college's official withdrawal date, the student may choose to withdraw and receive a W for the course. It is the student's responsibility to withdraw from both the theory and linked lab courses.
- 4. The student will receive their current theory test average for their final course grade.
- 5. The student will no longer be able to attend clinical and will receive a "U" (Unsatisfactory) for the linked lab course. If the student has already satisfactorily completed the linked lab course, they will receive an "S" (Satisfactory). The student will be required to retake both the theory course and the linked lab course.
- 6. The student will be informed of the nursing readmission/reentry policy at the time of withdrawal from the course.

| Document Title: North Idaho College Associate's Degree | | | |
|---|--|--|--|
| Nursing Program | | | |
| Evaluation of Clinical Performance Policy and Procedure | | | |
| Document Number: 5.04.00 | | | |
| Origination: Curriculum Date: 5/00 | | | |
| Committee | | | |
| Approval: Nursing Program | | | |
| Faculty Committee | | | |
| Additional Publication(s): | Review/Revise Date(s): 8/01 ; 3/04 ; | | |
| | 5/07; 8/11; 7/14; 1/15; 5/15; | | |
| | 1/16; 8/17; 1/18/; 8/20 | | |

Evaluation of Clinical Performance Policy and Procedure

POLICY

I. Evaluation of Clinical Performance:

- A. Clinical performance is evaluated using the Clinical Behavior Standards and Clinical Performance Competencies, which specifies competencies expected of the student in each nursing course.
 - 1. Students are expected to demonstrate compliance with the Clinical Behavior Standards in all aspects of the nursing program.
 - Appropriately dressed and groomed for the clinical setting
 - Punctuality / attendance / reports absence
 - Maintains patient's right to privacy
 - Maintains patient rights in providing direct patient care
 - Maintains confidentiality of the patient, facility, and health care professionals
 - Adequately prepares for learning experiences
 - Seeks out appropriate learning experiences
 - Participates in pre- and post-conference
 - Utilizes feedback for improvement for learning and growth
 - Participates actively in self-assessment for personal and professional development
 - With guidance, judges own level of competence and functions within role boundaries and parameters of competency
 - Demonstrates courtesy and respect when interacting with instructors, staff, peers, and others
 - Reports errors and critical incidents through appropriate channels
 - Provides an environment that maintains physiological and psychological safety of patient, family, self and others
 - Demonstrates safe performance of technical skills
 - Demonstrates integrity and honesty in all aspects of the program and clinical practice
 - Practices in an efficient and cost-effective manner
 - Organizes appropriate equipment, resources and supplies
 - Completes care in a reasonable amount of time

- Utilizes other personnel as needed
- Utilizes available technology to facilitate care
- 2. When behavior is demonstrated, which does not meet Clinical Behavior Standards, the instructor will:
 - a. Provide verbal feedback to the student identifying the behavior related to Clinical Behavior Standards and the behavioral change the student needs to make.
 - b. Present the concern to the teaching team if indicated.
 - c. Follow the Evaluation of Clinical Performance Procedure.
- 3. Persistent behavior that is in conflict with the Clinical Behavior Standards or behavior of a critical nature may prompt immediate evaluation of the student for dismissal from the course and/or the nursing program. (See Dismissal Policy)
- B. The Clinical Performance Competencies for each nursing course are based upon the Course and Program Student Learning Outcomes.
- C. Formative evaluation is done as described in course syllabi.
- D. Summative evaluation takes place at the end of the course and results in a clinical grade of satisfactory or unsatisfactory.
- E. Satisfactory performance in the course outcomes is required to pass all lab courses. This is recorded as a satisfactory (pass) or unsatisfactory (fail) on the NIC student transcript.
 - 1. Student must obtain "Meets Outcome" grade in all competencies at the Final Evaluation to pass the Course.
 - 2. Student must obtain satisfactory clinical behavior ratings to meet this requirement.

PROCEDURE

I. Clinical Behavior Standards

- A. A Clinical Behavior Standards form will be placed in each student's clinical folder and will remain in the folder throughout enrollment in the Associate's Degree Nursing Program.
- B. During each clinical session, the instructor will review the Expected Clinical Behavior Standards form.
- C. If the student does not demonstrate compliance with any of the behaviors, the instructor will document the date in a box next to the behavior. The faculty member will document in the comments section the date the behavior was not met and any action taken and sign. (Example: 1/15/17 student 30 minutes late for clinical. Counseled regarding importance of being on time for clinical activities. S. Jones, MN, RN)
- D. Documentation is only needed if student does not meet expected behavior(s).
- E. If a pattern of non-compliance with expected behavior(s) is identified any time during the student's enrollment in the Associate's Degree Nursing Program by any clinical instructor(s) during the program, the student will be placed on a performance contract identifying a plan for correction. The contract may remain active throughout the remainder of the program.
- F. Continued non-compliance with expected clinical behaviors may result in failure of the course and/or dismissal from the Associate's Degree Nursing Program.

II. Formative Evaluation – (Applies to stand-alone lab courses)

Weekly Anecdotal Notes:

An anecdotal note is used by the student and the instructor to document and assess student performance related to the performance competencies. Clinical performance is evaluated by the student and the clinical instructor weekly using an anecdotal note form with the exception of NURS 275 and INTR 250O. (These students have separate evaluations regarding each component of NURS 275 and INTR 250O.)

- A. The anecdotal note rating form consists of five major areas:
 - 1. Reflective learning questions Section one (Student subjective reflection of learning experience).
 - 2. Clinical Performance Competencies listed in abbreviated format.
 - 3. Faculty rating of the student's performance.
 - 4. Student's rating of their own performance.
 - 5. Comments.

B. Anecdotal Note Narrative

The student rates his/her performance in the row designated for student assessment.

The instructor rates the student's performance in the row designated for faculty assessment.

Students and faculty will write comments regarding **unsatisfactory**, **needs improvement**, **or satisfactory behaviors**. Notation of performance regarding any rating difference will be documented in the comments area of the anecdotal form by the instructor.

The anecdotal note is a **LEGAL DOCUMENT**.

Anecdotal notes are retained by the faculty advisor while the course is in progress and are retained in the student's permanent file for seven (7) years.

Completed anecdotal notes are not to be removed from the folder for any reason.

Completing the Anecdotal Note:

- Use blue or black ink since the note is a legal document.
- O Date the anecdotal note according to date of **performance**.
- o Reflect on performance considering each of the performance criteria.
- Assess competency performance within the Course Learning Outcomes and assign the appropriate rating.
- Place a rating of N/A where a competency within a course learning outcome is not identified as a focus.

In the space for narrative comments for any performance assessed as not demonstrating competency the instructor and student will:

- Describe behavior.
- o Identify the way the behavior deviated from expected performance according to the performance criteria.
- o Identify actions to correct/improve performance.

In the space for narrative comment, the student and the instructor will identify and describe:

- Strengths, improvements, growth demonstrated. (Identify/describe with example.)
- o Areas for improvement, individual goal(s). (Identify with rationale.)
- o Activities to facilitate improvement and/or goal achievement.
- o Address performance, which is assessed as not demonstrating competency.

Response:

After completion by the instructor, all anecdotal notes must be reviewed by the student in a timely manner, signed and dated on date of review.

In some instances, the student may wish to respond to the instructor's evaluation of performance or instructor's comments on the anecdotal note. In other instances, the instructor may request a response from the student regarding a particular performance. If a response to the anecdotal note is indicated, an Anecdotal Response Sheet is used (See Anecdotal Response Form).

If the instructor attaches a response sheet, the student must reply within one week.

If the student wishes a response, they will attach a response sheet and resubmit the anecdotal note to the instructor. The instructor must respond within one week.

Formative Evaluation – Mid-Term:

- A. At the time of the mid-term evaluation, the clinical instructor will fill in each course student learning outcome with the appropriate grading criteria assessment in relation to summative performance to the current point in the semester. The clinical instructor will conference with the student regarding the instructor's evaluation of student performance and the student self-assessment at mid-term.
- B. At the time of mid-term evaluation, the average anecdotal rating from the grading period will be evaluated. The rating at mid-term is a formative evaluation. (Explicitly defined by course on Clinical Performance Evaluation Tool). The criteria is identified below:
 - 1. Making expected progress toward outcomes.
 - 2. <u>Needs to improve in progress toward outcomes:</u> Used in Formative Evaluation Only (Mid-term)
 - 3. <u>Insufficient Progress towards outcomes:</u> The student does **NOT consistently** demonstrate expected behaviors as specified in the Course Learning Outcomes; Clinical Behavior Standards and Clinical Performance Competencies.
- C. Performance which does not meet standard as specified in number three (3) above: When such performance is noted, the instructor will:
 - 1. Conference with the student regarding the unsatisfactory performance as soon as possible and recommend performance changes.
 - 2. Document the performance on the anecdotal form with written recommendation(s) to the student for change.
 - 3. Instructor will generate a clinical performance improvement contract, which will outline what the student needs to do in order to meet the Student Learning Outcomes.
 - 4. Document the results of conferencing on Progress Notes.

Summative Evaluation-End of Course:

- A. Summative evaluation of clinical performance will be completed at the end of the course (or completion of designated clinical experiences).
- B. The clinical instructor will conference with the student to review the student's written self-evaluation of performance as well as the instructor's evaluation, and will provide summative written ratings.
- C. Summative Rating Definitions:
 - 1. <u>Meets Outcomes</u> (Satisfactory): The student consistently demonstrates expected behaviors as specified in the Course Learning Outcomes; Clinical Behavior Standards and Clinical Performance Competencies.
 - 2. <u>Does Not Meet Outcomes</u> (Not Satisfactory): The student does NOT consistently demonstrate expected behaviors as specified in the Course Learning Outcomes; Clinical Behavior Standards and Clinical Performance Competencies.
 - 3. The student must score <u>Meets Outcome</u> in all categories of the End of Course (or designated clinical experience) in order to successfully complete course expectations.

At the successful completion (Satisfactory Performance) of each course with a clinical component (excluding NURS 275 and INTR 250O), a competency rating of each student will be recorded by the clinical instructor. The rating will convert to a Satisfactory (S) or Unsatisfactory (U) in regard to meeting Course Student Learning Outcomes. This score will be shared with the student at the time of their final clinical evaluation.

Clinical Performance Evaluation Tool NURS Beginning Level, NURS 210

Semester _____

| Semester | emester MID-TERM EVAL Student Self-Evaluati Faculty Evaluati | | | | |
|--|--|-----------------------|--|--|---|
| Student Name: | In | structor: | | .y Evaluation _ - | |
| Student must obtain "Meets Outcome" grade in all competencies at the Final Evaluation to pass the Course. | | | | | |
| | | Midterm | | | |
| COURSE LEARNING O | OUTCOMES – NURS | S Beginning Level | Making Expected Progress Toward Outcomes | Needs to Improve in Progress Toward Outcomes | Insufficient Progress Towards Outcomes |
| Demonstrate integration of the individuals to promote effective Care) Comments: | | | | | |
| Apply nursing values, ethics, legalities, and standards using effective and accurate communication. (Teamwork and Collaboration) Comments: | | | | | |
| 3. Utilize the Health Assessment and Nursing Process to include evidence-based practice into holistic patient care. (Evidence-Based Practice) Comments: | | | | | |
| Explain the processes for evaluation and measurement of outcomes of care. (Quality Improvement) Comments: | | | | | |
| 5. Utilize national patient safety (Safety) Comments: | resources to support safe | e nursing practice. | | | |
| 6. Discuss information management tools that promote safe patient care and confidentiality of patient health information, including patient rights related to the access of health records. (Informatics) Comments: | | | | | |
| Mid-Term Goals: | | | | | |
| Clinical Performance Remediati | on: | Absences at Mid-Term: | | | |
| Mid-Term Evaluation: Date: | | | | | |
| Instructor Signature: | | | | | |
| Student Signature: | | | | | |

Grade Descriptions

For an 8-week grading period:

| Making Expected Progress Toward Outcomes: Has an average rating of 1 or greater at the end of the grading period | Functions satisfactorily with minimum guidance in the clinical situation. Demonstrates accurate and appropriate knowledge and integrates knowledge with skills and attitudes. Engages consistently in self-direction in approach to learning. Provides evidence of preparation for all clinical learning experiences. Follows directions and performs safely. Identifies own learning needs and seeks appropriate assistance. Demonstrates continued improvement during the semester. Uses nursing process and applies scientific rationale. |
|---|---|
| Needs to Improve in Progress Toward Outcomes: Has obtained an average rating of .80 and .90 at the end of the grading* | Functions safely with moderate amount of guidance in the clinical situation. Demonstrates adequate knowledge and requires moderate assistance in integrating knowledge with skills. Requires some direction in recognizing and utilizing learning opportunities. *Instructor will counsel student as to which competencies need improvement in order to meet Student Learning Outcomes |
| Insufficient Progress Towards Outcomes: Has obtained an average rating of less than .80 at the end of the grading period** | Requires intense guidance or intervention for the performance of activities at a safe level. Clinical performance reflects difficulty in the provision of nursing care. Demonstrates gaps in necessary knowledge and requires frequent or almost constant assistance in integrating knowledge and skills. Requires frequent and detailed instructions regarding learning opportunities and is often unable to utilize them. Is often unprepared and has limited insight into own behavior. Is unable to identify own learning needs and neglects to seek appropriate assistance. Not dependable. Breaches in professional or ethical conduct such as falsification of records and failure to maintain confidentiality. **Instructor will generate a learning contract, which will outline what student needs to do to meet Student Learning Outcomes. |

Clinical Performance Evaluation Tool NURS Beginning Level, NURS 210

| Semester | FINAL EVAL | | Student Self-Evaluation | | |
|--|----------------------------|------------------------------------|--|--|--|
| Student Name: | Instructor: | Faculty Ev | aluation | | |
| Student must obtain "Meets Outcome" grade in all competencies at the Final Evaluation to pass the Course. | | | | | |
| | | T F | inal | | |
| COURSE LEARNING OUTCOM | MES – NURS Beginning Level | Meets Outcome (Satisfactory) | Does Not Meet Outcome (Unsatisfactory) | | |
| Demonstrate integration of the multidimensional health care needs of individuals to promote effective adaptation and wellness. (Patient-Centered Care) Comments: | | | | | |
| 2. Apply nursing values, ethics, legalities, and communication. (Teamwork and Collaboration) | , | | | | |
| Comments: 3. Utilize the Health Assessment and Nursing Process to include evidence-based practice into holistic patient care. (Evidence-Based Practice) Comments: | | | | | |
| 4. Explain the processes for evaluation and measurement of outcomes of care. (Quality Improvement) Comments: | | | | | |
| 5. Utilize national patient safety resources to support safe nursing practice. (Safety) Comments: | | | | | |
| 6. Discuss information management tools that promote safe patient care and confidentiality of patient health information, including patient rights related to the access of health records. (Informatics) Comments: | | | | | |
| | | | | | |
| End-of-Term Goals: | | | | | |
| Clinical Performance Remediation: | Absences at End-of-Term: | | | | |
| Final Evaluation: Date: | Ranking: | | | | |
| Instructor _Signature: | | _ | | | |
| Student Signature: | | | | | |

Grade Descriptions

| Meets Outcome (Satisfactory) means the student: has an average rating of 1 or greater at the end of the grading period | The student consistently demonstrates expected behaviors as specified in the Course Learning Outcomes; Clinical Behavior Standards and Clinical Performance Competencies. |
|---|---|
| | The student does NOT consistently demonstrate expected behaviors as specified in the Course Learning Outcomes; Clinical Behavior Standards and Clinical Performance Competencies, as evidenced by: |
| Does Not Meet Outcome means the student: has obtained an average rating of less than .80 at the end of the grading period** | Requires intense guidance or intervention for the performance of activities at a safe level. Clinical performance reflects difficulty in the provision of nursing care. Demonstrates gaps in necessary knowledge and requires frequent or almost constant assistance in integrating knowledge and skills. Requires frequent and detailed instructions regarding learning opportunities and is often unable to utilize them. Is often unprepared and has limited insight into own behavior. Is unable to identify own learning needs and neglects to seek appropriate assistance. Not dependable. Breaches in professional or ethical conduct such as falsification of records and failure to maintain confidentiality. |

Lab/Clinical Anecdotal NURS Beginning Level, NURS 210/215

| Date of Lab/Clinical: | Lab/Clinical Unit: | Primary Nurse: |
|-----------------------|--------------------|----------------|
| Student: | Diagnoses: | |

Place a check-mark in each student (S) box below that reflected your clinical performance. Your clinical instructor will place his or her initials to indicate their rating in the instructor (I) box.

| Rate Lab/Clinical performance o | competencies as it related to NURS210 Beg | inning Level outcomes. | |
|--|---|--|--|
| Course Learning Outcome | 1. Demonstrate integration of the multidimensional adaptation and wellness. Patient-Centered Care (P | | |
| Novice (Doesn't Yet See Picture) | Advanced Beginner (Sees Part of the Picture) | Competent (Sees the Basic Picture) | |
| Nursing Interventions: Performs simple, basic nursing care with prompts. | Identifies active patient problem(s) but needs help in selecting intervention(s) and determining desired patient outcomes | Implements appropriate routine nursing intervention(s) and evaluates effect; may delegate | |
| S: I: | S: I: | S: I: | |
| Student Comments: Course | 2. Apply nursing values, ethics, legalities and standa | "I agree"_ ards using effective and accurate information. | |
| Learning Outcome | Teamwork and Collaboration (TWC) | and disting effects to that the trace in straining in | |
| Novice (Doesn't Yet See Picture) | Advanced Beginner (Sees Part of the Picture) | Competent (Sees the Basic Picture) | |
| Patient Teaching: Seeks guidance to answer patient/family questions. | Explains procedures to the patient/family. | Rephrases medical information into lay terms for patient/family. Elicits patient/family participation in decision making and care implementation. | |
| S: I: | S: I: | S: I: | |
| Communication: Uses basic therapeutic interviewing techniques with patients and families. | Demonstrates effective interpersonal communication techniques and principles that reflect caring in Nursing Process. | Routinely demonstrates effective and reflective therapeutic communication techniques that empower patients and families in all aspects of care, reflect a cari person centered nursing care. | |
| S: I: | S: I: | S: I: | |
| | 2 Heliga the Health Assessment and Nursing Dunce | "I agree"_ ss to include evidence-based practice into holistic Competent | |
| | patient care. Evidence-Based Practice (EBP) Advanced Beginner | (Sees the Basic Picture) | |
| Learning Outcome | patient care. Evidence-Based Practice (EBP) | | |
| Learning Outcome Novice (Doesn't Yet See Picture) Patient Assessment: Performs assessment with guidance/prompts. | patient care. Evidence-Based Practice (EBP) Advanced Beginner | Recognizes changes in patient condition, intervenes appropriately and reassess | |
| Cearning Outcome Novice (Doesn't Yet See Picture) Patient Assessment: Performs assessment with guidance/prompts. I: | patient care. Evidence-Based Practice (EBP) Advanced Beginner (Sees Part of the Picture) Distinguishes between abnormal and normal assessment findings S: I: | Recognizes changes in patient condition, intervenes appropriately and reassess S: I: | |
| Learning Outcome Novice (Doesn't Yet See Picture) Patient Assessment: Performs assessment with guidance/prompts. B: I: History Gathering: Recalls questions for basic | patient care. Evidence-Based Practice (EBP) Advanced Beginner (Sees Part of the Picture) Distinguishes between abnormal and normal assessment findings | Recognizes changes in patient condition, intervenes appropriately and reassess | |
| Learning Outcome Novice (Doesn't Yet See Picture) Patient Assessment: Performs assessment with guidance/prompts. S: I: History Gathering: Recalls questions for basic nistory data with guidance/prompts. | patient care. Evidence-Based Practice (EBP) Advanced Beginner (Sees Part of the Picture) Distinguishes between abnormal and normal assessment findings S: I: | Recognizes changes in patient condition, intervenes appropriately and reassess S: I: Uses understanding of disease process to focus | |
| (Doesn't Yet See Picture) Patient Assessment: Performs assessment with guidance/prompts. S: I: History Gathering: Recalls questions for basic history data with guidance/prompts. | patient care. Evidence-Based Practice (EBP) Advanced Beginner (Sees Part of the Picture) Distinguishes between abnormal and normal assessment findings S: I: Discriminates between normal and abnormal history data | Recognizes changes in patient condition, intervenes appropriately and reassess S: I: Uses understanding of disease process to focus questioning | |

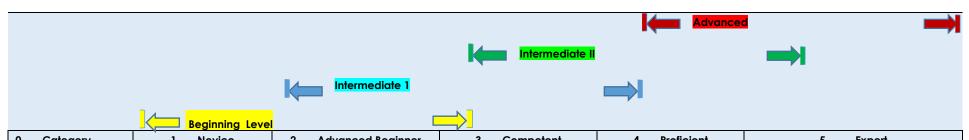
"I agree"

| Course Learning Outcome | 4. Explain the processes f | for evaluation and measuren | nent of outcomes of care. | Quality Improvement (QI) |
|---|--|--------------------------------|--|--------------------------|
| Learning Outcome Novice | Advanced | l Beginner | Co | empetent |
| (Doesn't Yet See Picture) | (Sees Part of the Picture) | | (Sees the Basic Picture) | |
| Clinical Judgement: Recalls norms in patient condition. | Recognizes variations in patient condition but needs help prioritizing; may access resources | | Determines priorities in patient care based on varying patient condition; accesses appropriate resources/ | |
| S: I: | S: | I: | S: | I: |
| Course | 5. Utilize national patient | safety resources to support | safe nursing practice. Sa | fety |
| Learning Outcome | | | | |
| Novice | Advanced Beginner | | Competent | |
| (Doesn't Yet See Picture) | (| f the Picture) | (Sees the Basic Picture) | |
| <u>Safety:</u> Identifies patients with prompts; sanitizes hands with prompts. | Identifies patient with single identifier; hand sanitation majority of times; may recognize unsafe equipment or situation | | Identifies with 2 identifiers; sanitizes hands; employs universal precautions, recognizes unsafe equipment or situation and corrects | |
| S: I: | S: | I: | S: | I: |
| Student Comments: Course | | anagement tools that promo | | |
| Learning Outcome | health information, include | ding patient rights related to | the access of health reco | rds. Informatics |
| Novice (Doesn't Yet See Picture) | Advanced Beginner (Sees Part of the Picture) | | Competent (Sees the Basic Picture) | |
| Documentation / Information Systems: Repeats basic and significant information with prompting for documentation and/or reports with completeness and in a timely manner to appropriate person(s). | Summarizes available information for documentation and discussion and/or reports with completeness and in a timely manner to appropriate person(s); May use standardized approach (ISBARD) | | Prioritizes available information for documentation and discussion and/or reports with completeness and in a timely manner to appropriate person(s); Uses standardize form for handoff/report (ISBARD) | |
| S: I: | S: | I: | S: | I: |
| Student Comments: | <u>I</u> | <u>I</u> | 1 | <u>I</u> |

- o Competency expectations for each semester are as follows:
 - By the end of the semester N210 ratings in each category are expected to fall between the Novice and Advanced Beginner ratings with a clear trend towards Advanced Beginner in all areas
 - The majority of N255 ratings are expected to fall between the Advanced Beginner and Competent ratings.
 - o The majority of N265 ratings are expected to fall between the Competent and Proficient ratings.
- N210 Critical Skills:
 - Hand Hygiene
 - o VS including manual BP
 - Sterile gloving
 - o Foley insertion, maintain sterile field
 - Head to toe assessment
 - Focused assessment

"I agree"

| What lab/clinical objective did you or your instruyou or did you not accomplish this? | uctor set forth for today's lab/clinical? How did |
|---|--|
| | |
| Discuss your lab/clinical day, indicate in which well as the situations in which you fell short. Inclimprovement. | vays you achieved competency or proficiency, as lude goals for next lab/clinical, including plan for |
| | |
| Instructor response: | |
| | |
| | |
| INSTRUCTOR SIGNATURE: | DATE: |
| Student signature required after review of instructor's c | comments. |
| STUDENT SIGNATURE: | DATE: |



| Beginning Level | | | | | |
|--|--|---|---|--|---|
| 0 Category | 1 Novice | 2 Advanced Beginner | 3 Competent | 4 Proficient | 5 Expert |
| | Doesn't Yet See Picture | Sees Part of the Picture | Sees the Basic Picture | Sees the Big Picture | Anticipate the Changing Picture |
| Patient assessment N/A | Performs assessment with guidance/prompts | Distinguishes between abnormal and normal assessment findings | Recognizes changes in patient condition, intervenes appropriately and reassesses | Classifies relative importance of multiple assessment findings over time | Relates ongoing findings to potential complications; modifies plan and nursing interventions |
| History gathering N/A | Recalls questions for basic history data with guidance/prompts | Discriminates between normal and abnormal history data | Uses understanding of disease process to focus questioning | Includes past medical history to develop comparison with current condition | Anticipates potential outcomes based on history findings |
| Patient teaching N/A | Seeks guidance to answer patient/family questions | Explains procedures to the patient/family | Rephrases medical information into lay terms for patient/family Elicits patient/family participation in decision making and care implementation | Modifies patient teaching based on patient/family response and learning barriers | Identifies need and resources for further patient/family teaching; initiates multidisciplinary involvement |
| Laboratory data and diagnostics N/A | Reports laboratory data | Distinguishes between normal and abnormal laboratory data/diagnostic studies | Uses understanding of laboratory values/studies to plan care | Analyzes trends in laboratory values; compares with patient response | Monitors patient response via analysis of laboratory data and examination; assists with plan for future testing |
| Nursing interventions N/A | Performs simple, basic nursing care with prompts | Identifies active patient problem(s) but needs help in selecting intervention(s) and determining desired patient outcomes | Implements appropriate routine nursing intervention(s) and evaluates effect; may delegate | Implements appropriate nursing intervention plan in timely manner; consistently delegates | Modifies nursing care by synthesizing evidence-based knowledge into practice; utilizes and/or conducts research |
| Clinical judgement N/A | Recalls norms in patient condition | Recognizes variations in patient condition but needs help prioritizing; may access resources | Determines priorities in patient care based on varying patient condition; accesses appropriate resources/ references | Carries out care while managing multiple contingencies in concert with healthcare team members | Devises plan to avoid complications; acts as resource when patient complications occur |

| Communication | Uses basic therapeutic interviewing techniques with patients and families. | Demonstrates effective interpersonal communication techniques and principles that reflect caring in nursing process. | Routinely demonstrates effective and reflective therapeutic communication techniques that empower patients and families in all aspects of care, reflect a caring, person-centered nursing care. | Enact goal directed communication with individuals and groups. | Expresses oneself effectively in a variety of media and contexts to educate, influence, and collaborate with others. |
|---|---|--|---|---|--|
| Documentation / Information Systems N/A | Repeats basic and significant information with prompting for documentation and/or reports with completeness and in a timely manner to appropriate person(s) | Summarizes available information for documentation and discussion and/or reports with completeness and in a timely manner to appropriate person(s); may use standardized approach (ISBARD) | Prioritizes available information for documentation and discussion and/or reports with completeness and in a timely manner to appropriate person(s); uses standardized form for handoff/report (ISBARD) | Draws conclusions based on available information for documentation and discussion and reports with completeness in a timely manner to appropriate person(s); uses standardized form for handoff/report (ISBARD) | Synthesizes available information and possible patient outcomes for documentation and discussion and reports with completeness in a timely manner to appropriate person(s); uses standardized form for handoff/report (ISBARD) |
| Safety N/A = | Identifies patient with prompts; sanitizes hands with prompts | Identifies patient with 2 identifiers; hand sanitation majority of times; recognize unsafe equipment or situation and seeks appropriate assistance. | Identifies with 2 identifiers; sanitizes hands; employs universal precautions, recognizes unsafe equipment or situation and corrects | Uses ≥ 2 identifiers and actively incorporates patient, environment, and procedural safety standards of care | Synthesizes patient safety assessment and standard of care to devise multidisciplinary plan for optimal patient safety and healthcare team member protection |

By Mariko R. Clark and Lu Sweeney, MS, RN, CNS *Rev.* 2007, 2008. Copyright pending 2009. Revised by L. Hargreaves, March 2010, for LPCH Nursing Orientation. North Idaho College Revision 2017

| Document Title: North Idaho College Associate's Degree Nursing Program Appeals of a Grade or Evaluation | | |
|---|------------------------------|--|
| Document Number: 5.05.00 | | |
| Original Approval: Nursing Program | Date: 5/98 | |
| Faculty Committee | | |
| Additional Publication(s): | Review/Revise Date(s): 8/01; | |
| | 12/02; 8/03; 7/14; 8/17; | |
| | 9/17 | |

Appeal of a Grade or Evaluation Policy and Procedure

<u>Policy:</u> Students have the right to appeal any grade that they believe is unfair or based upon areas other than academic achievement. To appeal, the student follows the Program Appeals Process. The Appeals Process provides an avenue of appeal for a student who feels a grade or evaluation received was unfair or a decision directly affecting progression in the program was unjust.

Process:

- A. After receiving the written notification of an evaluation, grade or team decision, the student will have three (3) business days to file an appeal.
- B. To file an appeal, the student submits a written statement of request to the Director of Nursing. In submitting the request, the student will provide available times within the subsequent seven (7) business days within which the Appeals hearing may be scheduled. The Director of Nursing will call a meeting of the Appeals Committee at the earliest possible date within the seven (7) business days' time frame.

Procedure:

- A. The Appeals Committee will review documentation such as Syllabus, Anecdotal(s), Performance Criteria Guidelines, materials submitted by the student and/or instructor, and other pertinent documentation. All materials to be reviewed by the Appeals Committee will be made available to the student at least 24 hours prior to the appeals hearing.
- B. At the appeals hearing, the student will:
 - 1. Present own verbal appeal to support, clarify, or expand on written statement.
 - 2. Present other substantiating documentation- if desired.
 - 3. Be prepared to answer clarifying questions posed by the committee.
 - 4. Be permitted the presence of a support person during his/her appearance before the committee with the understanding that that individual does not participate in the proceeding.
 - 5. Be excused after presentation while the committee deliberates.

- C. A teaching team representative may appear in person and/or provide a written statement after which the student will be excused from the meeting. (Written statement will be shared with the student prior to the hearing.)
- D. The committee's decision will result in one or more of the following:
 - 1. Uphold grade/evaluation, dismissal
 - 2. Reconsider grade or evaluation, or dismissal decision
 - 3. Request submission of other specified documentation
 - 4. Develop a specific written performance improvement plan that the student will acknowledge in order to continue in the program.
- E. The recorder (appointed by the Director of Nursing) will submit the written decision for committee approval or editing for accuracy; committee members will sign the final copy.
- F. The Director of Nursing will meet with the student immediately following the meeting to inform her/him of the outcome. The student and the teaching team will receive written notification of the outcome.
- G. The Director of Nursing will notify the Vice President of Instruction of the Appeals Committee's decision within 48 hours of the committee meeting.
- H. The Appeals Committee's decision is final and represents the end of internal NIC Appeal.

| Document Title: North Idaho College | |
|---|------------------------|
| Associate's Degree Nursing Program | |
| Dismissal Policy/Procedure | |
| Document Number: 5.06.00 | |
| Origination: Program Evaluation Committee | Date: 5/98 |
| Approval: Nursing Program Faculty Committee | |
| Additional Publication(s): | Review/Revise Date(s): |
| | 8/01; 10/06; 7/14; |
| | 8/17; 9/17; 12/17 |

Dismissal Policy/Procedure

Dismissal Policy:

The following behaviors occurring at any time shall prompt evaluation of the student for continuation in or dismissal from the course and/or the nursing program:

- 1. Any behavior that could result in harm (real or potential) to a patient.
- 2. Violation of confidentiality.
- 3. Behavior, which places self or others in physical or psychological jeopardy.
- 4. Dishonesty.
- 5. Behavior that demonstrates impairment in the classroom or clinical setting (i.e. the use and/or influence of any mood-altering substance including, but not limited to drugs and alcohol).
- 6. Emotional or behavioral responses, which inhibit learning and/or functioning in the patient care situation.
- 7. Behavior, which jeopardizes learning experiences for other students.
- 8. Code of Conduct and Ethics Violations.
- 9. Program policy violations.
- 10. Failure to satisfactorily (to the discretion of the teaching team) comply with the terms of a written performance improvement plan.

Dismissal Procedure:

- 1. When a problem or concern is identified by the instructor as potential grounds for dismissal, the instructor will:
 - A. Notify the student verbally and in writing that they are in jeopardy of dismissal from the program as a result of the identified behavior.
 - B. Inform the student that the student's behaviors, actions or non-actions will be reviewed at a meeting of the program level teaching team.
- 2. If the behavior involves or could affect clinical performance, the instructor will notify the Program Coordinator or Associate Dean of Nursing and Health Professions immediately and request that a team meeting be called at the earliest possible time, within seven (7) calendar days. The student will be suspended from clinical in the interim; however, they may to continue to attend class, take tests, turn in papers etc. for all other nursing courses.
- 3. At the program level team meeting, the student problem will be reviewed and evaluated.
 - A. The student will be notified of the meeting and can meet with the team to share their perception of the problem.

- B. The student will be given the opportunity to review all materials to be presented at the team meeting.
- 4. The resulting team decision will be shared verbally with the student by the Director of Nursing at the conclusion of the team meeting and in writing within two (2) school days of the conclusion of the meeting.
- 5. If the program level teaching team decision is dismissal, the student has the right to appeal the decision to the Associate's Degree Nursing Program Appeals Committee. This Appeal hearing represents the College internal appeal and exhausts the North Idaho College Appeal process.
- 6. If the student elects to appeal, they will continue to be suspended from clinical during the appeals process but may continue to attend classes. If the student is disruptive, they will also be suspended from attending class until a decision on the appeal has been made.
- 7. If the appeal is denied, the student has exhausted the NIC internal appeals process and will cease attending class and clinical. See Progression Policy for determination of grade.
- 8. If the student appeal is upheld, reasonable accommodation will be made to assist the student in meeting course requirements.

Math Rounding Guidelines

A. General Rules:

- 1. When rounding, 5 and above are rounded up (after the decimal point)
- 2. Use a calculator for computations

B. Simple conversion between pounds/kilograms:

- 1. For adults, carry to two decimal places and round to one.
- 2. For infants and pediatrics, carry to three places and round to two.

C. Calculation of dosages dependent on weight:

- 1. Convert pounds to kilograms first.
- 2. Leave the conversion result in the calculator without rounding. For example, if the weight after conversion to kilograms is 76.8765 kilograms, leave that entire number and multiply by the milligrams needed per kilogram.
- 3. Round the final calculation:

For adults, carry to two decimal places and round to one.

Example: 11.665832 rounds to 11.7

For infants and pediatrics, carry to three places and round to two

Example: 11.665832 rounds to 11.67

Enteral, Parenteral, and IV Drip Rate Considerations

A. Enteral and Parenteral Measurements:

- 1. Consider volume to be administered.
- 2. One milliliter syringes are marked in hundredths.
 - a. When administering less than 1ml, choose a 1ml syringe.
 - b. For example, 0.43ml can be accurately measured in a 1ml syringe.
- 3. Higher volume syringes are marked in tenths.
 - a. If the amount is 1-10ml, round the calculated dosage to one decimal place.
 - b. For example, 3.26ml must be rounded to 3.3ml in order to draw it up in a 5ml syringe.

B. Calculation of IV Drip Rates and Infusion Rates:

1. To determine gtts/minute = Carry to two decimal places through the problem and then round to a whole number to get the drip rate (gtts/minute). Remember you cannot count parts of drips!

Updated 10/2018

| Document Title: North Idaho College Associate's Degree Nursing Program | | |
|--|--|--|
| Math/Dosage Calculation | | |
| Policy and Procedure | | |
| Document Number: 5.07.00 | | |
| Origination: Nursing Program | Date: 5/00 | |
| Faculty Committee | | |
| Additional Publication(s): | Reviewed/Revised Date(s): 1/01; 1/03; 1/04; 1/05; 10/05; 7/09; 12/12; 5/14; 4/17; 8/17 | |

Math/Dosage Calculation Policy and Procedure

A. Purpose:

To establish an ongoing math competency assessment for nursing students, to facilitate mastery of nursing-related math skills and to prevent calculation errors in the clinical setting.

B. Policy:

- 1. Competency in safe administration of medications is essential. Students will be held responsible for accuracy in dosage calculation throughout their nursing education. The student's ability to perform accurate dosage calculation will be assessed through testing in labs NURS 210, NURS 255, and NURS 265.
- 2. A grade of 100% is required as demonstration of competency. The student is provided three (3) testing opportunities to demonstrate the required level of competence. If after the third opportunity the student is unable to achieve a 100%, they will not progress. Non-progression due to failure to demonstrate math competency will result in a clinical performance grade of unsatisfactory. Once the 100% level of competency is demonstrated, no further math competency testing in the course is required (i.e. if the student scores 100% on the math test, they will not be required to complete any further math competency testing for that course).

C. Procedure

- 1. After acceptance into the nursing program, math learning resources will be identified for the students for independent study prior to starting the beginning level of the nursing program.
- 2. Math practice problems will be provided to the students as a resource for their learning.

3. <u>Testing Schedule</u>:

Math tests will be scheduled by course faculty. Math competency testing must be completed by the **withdrawal date** specified on the College Calendar.

4. Math Test will consist of 20 questions.

Math Test Retake #1 will consist only of questions of similar type to the questions incorrectly answered by the student on Math Test.

Math Test Retake #2 will consist only of questions of similar type to the questions incorrectly answered by the student on Math Test Retake #1.

- 5. The North Idaho College, Associate's Degree Nursing Program, Math Rounding Guidelines will be provided.
- 6. Calculators will be supplied by the nursing program during testing for checking answers (work must be shown). No other calculators may be used.
- 7. Sixty (60) minutes will be allowed for completion of each test.
- 8. Dosage calculation problems may be incorporated in theory tests in all courses.

| Document Title: North Idaho College Associate's Degree Nursing Program Medication Policies | |
|--|---|
| Origination: Nursing Program Faculty Committee | Date: 1/00 |
| Additional Publication(s): | Review/Revise Date(s): 03/03; 12/03; 05/07; 08/11; 05/12;7/14; 10/14; 9/16; 11/16; 5/17; 1/18; 5/18; 8/18; 12/22 |

Medication Policy(s)

MEDICATION POLICY

North Idaho College Associate's Degree Nursing Program provides an environment, which supports safe administration of medications in the clinical environment. Students are expected to adhere to the medication administration procedures of North Idaho College ADN Program and the policies and procedures of their clinical rotation site. Failure to do so may result in a disciplinary action up to and including dismissal.

MEDICATION PROCEDURE FOR CLINICAL FACILITIES General Instructions for All Semesters

The following medication procedures apply to **all** levels of the North Idaho College Associate's Degree Nursing Program. As students' progress through the program, additional recommendations and/or restrictions pertinent to the level of instruction are included.

A. ROLE AND RESPONSIBILITIES OF MEDICATION ADMINISTRATION

1. Student Role and Responsibilities:

- a. Students are to follow medication policies of their clinical facility.
- b. Students are to review pharmacology/math theory from NIC Associate's Degree Nursing Program.
- c. Students will research all medications to be administered by using an approved drug text or website prior to giving any medication.
- d. Students will be prepared to answer questions about the medications they are administering when posed by the nursing instructor, primary nurse, or patient/family. Although the student should have a general understanding of the medication, the student may use a drug handbook in answering questions.
- e. The student will check medication orders on the medication administration record with the physician's orders at appropriate times, for example:
 - i. During clinical preparation time.
 - ii. After shift report, before beginning care, and at the end of the shift.
 - iii. If patient assignment changes.
 - iv. When doctor's orders are changed.
 - v. When administering anticoagulants, digitalis preparations, narcotics and fractional doses.

Note: This will be strictly adhered to when the student has only one patient. As the student progresses through the course levels and is assigned additional patients, students will remain responsible for changes in patient's medications by following the medication acknowledgement protocols of the facility.

f. The student will follow this NIC Medication Policy and will provide ongoing communication

about the patient's medications to the nursing instructor and primary nurse as indicated throughout this policy.

2. Nursing Instructor Role and Responsibilities:

- a. The nursing instructor will provide to the student an orientation to the clinical facility's policy/procedures on medication administration.
- b. The nursing instructor will dialogue with the student on a regular basis about his/her medications including such things as mechanism of action, reason for usage of medications, side effects, etc.

3. Primary Nurse Role and Expectations:

- a. The primary nurse assigned to a student should review medication administration records at the beginning of the shift to clarify which medications the student will administer. At the end of the shift, medication administration records should be reviewed again to ensure medications were given and that documentation on the medication administration record is correct.
- b. The primary nurse should be available to advise the student on medication administration throughout the student's shift.

B. RESTRICTIONS ON MEDICATION ADMINISTRATION

- 1. Students will not administer medications designated by the clinical facility that require specialized/advanced training such as chemotherapy and biotherapy (aka: immunotherapy, biologic response modifiers).
- 2. Medications, which in the opinion of the instructor, are not appropriate, will not be administered. Examples of inappropriateness would be unusual dosages, experimental medications, or unusual routes of administration.
- 3. The clinical instructor will determine whether an administration by the student is appropriate/inappropriate, such as insulin drips, cardiac drips, and heparin drips. The primary nurse will be notified and remain responsible for supervision or administration of the medication.
- 4. Medication administration to a pregnant patient is not permitted.

C. NON-PARENTERAL MEDICATIONS

Please refer to specific semester instructions.

D. PARENTERAL MEDICATIONS

Please refer to specific semester instructions.

E. INSULIN ADMINISTRATION

Please refer to specific semester instructions.

F. P.R.N. MEDICATIONS

- 1. The student will consult/notify the primary nurse **and** the clinical instructor before administering any PRN medication. If the nursing instructor does not respond to the student's message within a five-minute timeframe, the student will turn the medication administration responsibility back to the primary.
- 2. The student will confirm the medication order, the time of last administration, the effectiveness of the medication, drug actions/interactions and make appropriate assessments of the patient prior to administering the medication.

G. CONTROLLED SUBSTANCES

- 1. The student will consult with the primary nurse and instructor before administering a controlled substance.
- 2. The primary nurse and/or instructor will access narcotics from a locked cabinet or Pyxis system.

- 3. The primary nurse and/or instructor will verify that **the controlled substance count is correct before removing the medication**.
- 4. Controlled substances that are wasted must be witnessed by two licensed nurses.
- 5. Facilities may restrict students from administering controlled substances. While the student may not administer the medication, it is still their responsibility to assess the patient for effectiveness of the drug.

H. BLOOD PRODUCTS

Please refer to specific semester instructions.

NURS Beginning Level MEDICATION POLICY FOR CLINICAL FACILITIES

In addition to the General Instructions for All Semesters, the following recommendations and/or restrictions will apply to NURS Beginning Level student experiences.

A. SUPERVISION OF MEDICATION ADMINISTRATION

All first-time medication administration must be performed with direct supervision by clinical instructor. Prior to administering medication(s) with the primary nurse, the student must first contact the clinical instructor.

(Definition of Direct Supervision: Direct Supervision means that the instructor or primary nurse is by the student's side throughout the performance of the skill.)

B. NON-PARENTERAL MEDICATIONS

All non-parenteral medication administration is directly supervised during the NURS Beginning Level of the ADN program.

C. PARENTERAL MEDICATIONS

- 1. Intramuscular, intradermal and subcutaneous medications will always be administered under direct supervision of the clinical instructor or primary nurse as directed by clinical instructor. Student must contact clinical instructor prior to any parenteral medication administration.
- 2. Site selection, site landmarks, and injection procedure will be reviewed prior to medication administration.

D. INSULIN ADMINISTRATION

NURS Beginning Level students will not administer insulin.

E. BLOOD AND BLOOD PRODUCTS

- 1. The NURS Beginning Level student may not administer blood products.
- 2. The student **may not obtain blood products** from the blood bank, but may observe the procedure.
- 3. The student may monitor patients receiving blood and blood products with the supervision of the primary nurse and clinical instructor.

NURS Intermediate Level 1 MEDICATION POLICY FOR CLINICAL FACILITIES

In addition to the General Instructions for All Semesters, the following recommendations and/or restrictions will apply to NURS Intermediate Level 1 student experiences.

A. ROLE AND RESPONSIBILITIES OF MEDICATION ADMINISTRATION

- 1. Student Role and Responsibilities
 - a. All MEDICATIONS REQUIRE NOTIFICATION OF THE INSTRUCTOR PRIOR TO ADMINISTRATION.
 - Notification definition Verbal communication with the instructor in person or by phone before administration.
 - b. The student will be prepared to perform IV skills by reviewing nursing textbooks, consulting the facility's policy/procedure manual and by maintaining skill through practice in the learning lab.
 - c. The student will follow the NIC Medication Policy and will provide ongoing communication to the nursing instructor and primary nurse as indicated throughout this policy about their patient's medications and IV therapy procedures.
 - d. Students must contact their clinical instructor prior to administering medication(s) with a primary nurse.

2. Nursing Instructor Role and Responsibilities

- a. The nursing instructor will provide an orientation to the student about the clinical facility's policy/procedures on medication administration and IV therapy.
- b. Medication administration and IV therapy will be performed under direct supervision. (Definition of "Direct Supervision of Students" Direct supervision means that the instructor or primary nurse is by the student's side throughout the performance of the skill.)
- c. The nursing instructor will assess competency of the student to determine when a non-parenteral medication may be administered independently. The nursing instructor will inform the student when they are permitted to administer a medication independently.
- d. The instructor's assessment and judgment will be based on the instructor's observation over time of the student's performance in the clinical facility.

 Students may be released to independently perform some aspect(s) of the procedure.

3. Primary Nurse Role and Expectations

With selected primaries that are available to do so, the nursing instructor may request that the primary nurse directly supervise the student with a medication/procedure.

B. NON-PARENTERAL MEDICATIONS

- 1. Non-parenteral medications are administered under **direct supervision until** the student demonstrates mastery of the skill and **permission for independent performance is granted by the instructor.**
- 2. If (or when) the student is given permission to administer medications independently, the student will continue to dialogue with the nursing instructor/primary nurse about any questions or concerns regarding medications or procedures and expect that the nursing instructor/primary nurse will "spot check" their technique. The student will demonstrate knowledge of the medication before it is administered.
- 3. The student should continue to seek clarification/information from the instructor and primary nurse to ensure accurate and safe administration of medications even after permission is granted to proceed independently.
- 4. The students will communicate knowledge of medication administration.

C. PARENTERAL MEDICATIONS

Intramuscular, intradermal and subcutaneous medications will be administered under **direct** supervision. A student cannot administer any injection independently.

D. INSULIN ADMINISTRATION

Insulin is administered under the **direct supervision** of the clinical instructor, who may delegate to a staff nurse. **A student <u>cannot</u> administer insulin independently.** The student must check all insulin doses with a licensed nurse (s) as directed by facility policy.

E. PERIPHERAL IV THERAPY

Note: Students will assume responsibility for specific IV therapy (outlined below) with DIRECT SUPERVISION. Students performing IV therapy need to adhere to the agency medication guidelines and have demonstrated safe performance of IV therapy taught within the NIC Associate's Degree Nursing Program.

1. Basic IV Skills

- a. Calculating and monitoring flow rates
- b. Maintaining peripheral lines
- c. Changing existing peripheral IV systems to saline locks
- d. Flushing peripheral lines or saline locks
- e. Changing peripheral IV solutions
- f. Changing peripheral IV tubes
- g. Students will not utilize midlines until 2nd year courses.

2. Intermediate IV Skills

- a. IV Starts, including administration of Lidocaine Intradermal and IV maintenance fluids according to agency policy under the direct supervision of the instructor or primary nurse.
- b. Setting up, troubleshooting and readjusting IV pumps (volume infusion pumps and syringe pumps)
- c. Administering IV medications in solusets, premixed systems or Advantage systems

F. BLOOD AND BLOOD PRODUCTS

- 1. The first-year student **may not administer blood products**.
- 2. The student **may not obtain blood products** from the blood bank, but may observe the procedure.
- 3. The student may monitor patients receiving blood products with the supervision of the primary nurse and clinical instructor.

G. MEDICATION ADMINISTRATION IN SPECIALTY UNITS

1. Medications **may be** administered in the Kootenai Health Clinic (KHC) pediatrics unit under direct supervision. The clinical instructor must be informed **prior** to the medication administration to any pediatric patient at Kootenai Health (KH).

Students <u>will not administer</u> medication in other specialty units/experiences (this includes KH OR, KOS, SS) with the following exception: Students are allowed to administer Lidocaine Intradermal and IV maintenance fluids in KOS under the direct supervision of primary nurse.

NURS Intermediate Level 2 and Advanced Level MEDICATION POLICY FOR CLINICAL FACILITIES

In addition to the medication procedure's general instructions for all semesters, the following recommendations and/or restrictions will apply to NURS Intermediate Level 2 and Advanced Level student experiences.

A. ROLE AND RESPONSIBILITIES OF MEDICATION ADMINISTRATION

1. Student Role and Responsibilities

- a. The student will be prepared to perform IV skills from previous and current nursing courses needed by patients by reviewing nursing textbooks or consulting the facility's policy/procedure manual.
- b. The student will follow the NIC Medication Policy for NURS Intermediate Level 2 and Advanced Level and will provide ongoing communication to the nursing instructor and primary nurse as indicated throughout this policy about their patient's medications and IV therapy.
- c. Definition of "Direct Supervision of Students": Direct Supervision means that the instructor or primary nurse is by the student's side throughout the medication administration/IV therapy.
- d. At some point in time during the semester, the student may be given permission to perform certain medications/IV therapy independently. The student should continue to dialogue with the nursing instructor/primary nurse about any questions or concerns regarding medications or IV therapy and expect that the nursing instructor/primary nurse will "spot check" their technique and knowledge of medications/IV therapy.
- e. **Only with nursing instructor's permission** may the student administer medications/ IV therapy with a primary nurse. In working with a primary nurse, the student will continue to adhere to the medication guidelines of the clinical facility and demonstrate safe performance of skills taught within the NIC Associate's Degree Nursing Program.

2. Nursing Instructor Role and Responsibilities

- a. The nursing instructor will be available to directly supervise those medications and IV therapy, according to the NIC Medication Policy for NURS Intermediate Level 2 and Advanced Level requiring direct supervision.
- b. The nursing instructor will assess competency of the student to determine, according to the NIC Medication Policy for NURS Intermediate Level 2 and Advanced Level, when a medication or IV procedure may be done independently. The nursing instructor will inform the student when they are ready to do medications or procedures independently.

3. Primary Nurse Role and Responsibilities

a. With selected primaries who are available to do so, the nursing instructor may request that the primary nurse directly supervise the student with a medication/procedure.

B. RESTRICTIONS ON MEDICATION ADMINISTRATION

Please refer to General Instructions for All Semesters.

C. PARENTERAL / NON-PARENTERAL MEDICATION ADMINISTRATION

Parenteral (IM, sub Q, intraderm) and non-parenteral medications (after showing competency of skills) may be given independently with instructor permission.

D. MEDICATIONS THAT REQUIRE NOTIFICATION OF INSTRUCTOR PRIOR TO ADMINISTRATION

- 1. Notification of the nursing instructor/primary nurse before administration of medications may be accomplished by the student either in person or via the telephone.
- 2. These medications always require notification of instructor before the medication is administered.
 - a. All PRN medications
 - b. All anticoagulants i.e., Heparin, Coumadin, Lovenox
 - c. All parenteral doses of Digitalis preparations
 - d. All unusual and/or fractional doses of medications
 - e. All IV medications
 - f. Insulin- student must check all insulin doses with a licensed nurse(s) as directed by facility policy

E. ADMINISTRATION OF PRN MEDICATIONS

Please refer to General Instructions for All Semesters.

F. CONTROLLED SUBSTANCES

Please refer to General Instructions for All Semesters.

G. PERIPHERAL IV MEDICATIONS AND PROCEDURES

- 1. Peripheral IV Skills that may be performed independently with instructor permission after competency has been determined by the instructor.
 - a. Calculating and monitoring of flow rates
 - b. Maintaining peripheral lines
 - c. Changing existing peripheral IV systems to saline locks
 - d. Flushing peripheral lines with saline
 - e. Changing primary/maintenance bags without medications
 - f. Clearing PCA pumps
 - g. Discontinuing peripheral IVs
 - h. Setting up, troubleshooting and readjusting IV pumps. (volume infusion pumps and syringe pumps)

2. Peripheral IV skills that ALWAYS require direct supervision.

(NOTE: Instructors may give permission to the primary nurse to directly supervise the student performing these skills after competency of the student has been determined by the instructor.)

- a. Administering IV push medications with saline flush before and after push medication.
- b. Administering IV push medications on the secondary setting of the infusion pump (Advanced Level semester only).
- c. Performing Setting up PCA pumps and changing PCA cartridges
- d. IV starts
- e. Monitoring CADD pumps
- f. Injecting medications into IV solutions
- g. Hanging primary/maintenance bags with medications added
- h. Administering IV piggyback medications to peripheral lines

H. CENTRAL LINE MEDICATIONS & PROCEDURES

- 1. <u>Central line skills REQUIRE direct supervision.</u> (Note: Instructors may give permission to the primary nurse to directly supervise the student performing these skills once competency of the student has been determined by the instructor.)
- 2. **Exception**: Specific central line skills that may be performed independently *with instructor permission* after competency has been determined by the instructor:
 - a. Hanging primary/maintenance bags without medications
 - b. Hanging scheduled premixed piggybacks to existing infusing solutions.

I. BLOOD AND BLOOD PRODUCTS ADMINISTRATION

- 1. The student will notify the instructor of blood and blood products to be administered. The instructor may either directly supervise the student with the administration or have the primary nurse directly supervise the student.
- 2. The student may not obtain blood or blood products from the blood bank, but may accompany staff to the blood bank to observe the procedure.
- 3. RhoGAM may be administered to the postpartum patient.

J. MEDICATION ADMINISTRATION AND PROCEDURES IN SPECIALTY UNITS

1. **Pediatrics**:

- a. The student should notify the nursing instructor of all medications to be given to pediatric patients. The instructor or primary nurse **must** directly supervise the student with IV medications with their pediatric patients.
- b. Students are not permitted to start IVs on pediatric patients.

2. Oncology:

- a. Students are not permitted to administer chemotherapy /biotherapy medications.
- b. Students are not permitted to access or de-access implanted venous access devices (Port-a-Caths, Omega Ports, etc.)

3. ICU/CCU/ER:

- a. Arterial lines cannot be discontinued by students.
- b. Drawing of blood samples from arterial lines may be performed by the student with instructor supervision.

4. Labor/Delivery:

Medication administration to a pregnant patient is not permitted.

5. Newborns:

No intravenous medications will be administered by students.

6. Psychiatric Units:

With the express permission and direct supervision of the supervising RN, students may administer non-parenteral medications.

K. FINAL SEMESTER PRECEPTING

- 1. In lieu of a clinical instructor, the preceptor or supervising RN will provide direct supervision of the assigned student.
- 2. In providing supervision, the preceptor or supervising RN will follow the Medication Policy for Clinical Facilities for second year students.
- 3. **Exception:** Specialty Units Medication Administration and Procedures.
 - With the express permission and direct supervision of the preceptor, or supervising RN, students may administer non-parenteral medications in the Psychiatric units and may start IVs on Pediatric patients.
- 4. Students will refer to the "Do Not Do" document for specifics on skills that cannot be performed or skills that require direct supervision. Please be aware that this document is subject to change.

Section VI: Student Information & Policies

Student Information Standards

Program standards are provided to all students in the Associate's Degree Nursing Program Student Handbook.

Students are expected to read and follow the standards in the handbook.

The handbook is provided to students during their first week in the program. The student's advisor is available to clarify and to answer questions. Each student signs a form acknowledging that they have received and read the handbook and has had an opportunity for questions and clarification. The signed form is placed in the student's resource file.

College policies and procedures are published for students in the North Idaho College Catalog and the Associated Students' North Idaho College Student Handbook.

The Nursing Program operates within the policy framework of the college. Certain standards and policies may differ because of the goals and objectives of the program. When differences in college policy and program policy occur, program policies are to be followed.

Health Care Agency Policies/Procedures:

Students and faculty adhere to agency policies when learning experiences are held in a Health Care facility or other agency. Clinical facility manuals are available to students in the clinical setting.

Students may not either transport or be transported by a client outside of the clinical facility.

Students and faculty must park in areas designated by the facility when researching patient assignments or attending scheduled clinical experiences. Specific parking guidelines and location of designated parking areas will be provided by the clinical instructor as a part of clinical orientation.

Communication

A. E-mail

- E-mail: Students MUST maintain an operating Cardinal Mail address while enrolled in the Nursing Program. This is the email address you will use for all communication with NIC faculty and staff. Students must check the Cardinal Mail on a daily basis.
 Information and announcements are dispersed from NIC and the Nursing Program via this method only.
- Students must check Canvas daily for announcements and course updates.
- Student Mailboxes: Each student has a mailbox file in the file cabinets in 200C MHSB in the hallway next to office MHS 280. Graded assignments, papers, announcements, and other messages will be placed in the individual student files here.
- Mailbox files should be checked each class day.
- Use of cellphone may be permitted in the clinical setting to contact instructors or during scheduled break time for personal use.

B. Inclement Weather

NICAlerts is a new text message emergency notification system. NIC's text messaging alert system will send a text message when school is cancelled or a campus emergency exists. Sign up at www.nic.edu/safety and click on the link for NICAlerts. Standard text messaging fees and rates may apply, depending on your cell phone provider.

Alternatively, during severe winter weather, students may learn of NIC closure via local radio stations, or call the following number regarding the status of NIC classes.

School Closure Information:

1-800-254-4526 (Out of Coeur d'Alene) 208-769-3300 (In Coeur d'Alene)

Call by 6:00 a.m. for day classes. Call by 1:00 p.m. for evening classes.

C. Contact Information

Students must keep contact information (i.e. telephone, address, emergency contact information) current in the NIC Registrar's office and with the Nursing Program Senior Administrative Assistant. Students are responsible to notify the Nursing Program Senior Administrative Assistant with formal name changes or contact information.

D. Student Resource Hours

Resource hours are provided by the faculty at specified times for students to review test results. The day(s) and times will be designated by the course teaching teams.

E. Reporting Clinical Absences

It is the responsibility of the student to notify the clinical instructor as **early as possible** <u>before</u> clinical via the NIC approved chat application <u>and</u> send a follow-up email to the clinical instructor. The clinical instructor must notify the lead instructor of the student absence. If a student is precepting, they also need to notify their preceptor prior to the start of clinical. If a student is unable to reach their instructor, they may contact the nursing office at (208) 769-3329. The nursing office has a 24-hour voicemail; leave a message if staff are not available.

F. Division of Nursing Office Hours

Monday - Thursday 7:30 a.m. - 5:00 p.m. Fridays 7:30 a.m. - 2:30 p.m.

G. Communication with Faculty

Faculty office locations, phone numbers and e-mail are listed in course syllabi. Students are to contact faculty via the NIC approved chat application for testing, clinical or lab absences and are encouraged to communicate with faculty using e-mail for any other concerns or questions.

Advisor schedules may be accessed by students through Faculty Finder on the NIC website.

Faculty have mailboxes in the Program Senior Administrative Assistant's office. Confidential material may be submitted to the Senior Administrative Assistant for placement in the instructor's mailbox.

| Document Title: North Idaho College Associate's Degree Nursing Program Confidentiality Policy | | |
|---|---|--|
| Document Number: 6.01.00 | | |
| Origination: | Date: | |
| Additional Publication(s): | Review/Revise Date(s): 8/98; 7/14; 8/17 | |

Confidentiality Policy

It is a primary responsibility of every health care worker to respect the confidentiality of clients and other health team members. The nurse safeguards the clients' right to privacy by judiciously protecting information of a confidential nature (ANA, 1985, p.1-Code of Ethics). This includes information that is observational, verbal, or in writing.

North Idaho College health programs are committed to honoring each individual's privacy by maintaining their confidentiality. Confidentiality will apply to both the academic and clinical settings. A breach of confidentiality by college staff, faculty, or students may result in immediate termination or dismissal from the program.

A. Guidelines for Maintaining Student Confidentiality:

- 1. Student's academic and health records will be kept in compliance with the Family Educational Rights and Privacy Act of 1974.
- 2. Information regarding student academic status will not be given out over the phone or without permission of the student.
- 3. Student records will be maintained in a locked area.

B. Guidelines for Maintaining Confidentiality in Working with Clients:

- 1. Read and follow agency policies on confidentiality.
- 2. Discuss individual cases only in the health care/educational setting, and only with health care professionals.
 - a. Professional/educational conferences will be held in areas which ensure privacy.
 - b. Clients will not be discussed at any time in areas that do not ensure privacy.
 - c. Client-centered discussions are appropriate for learning purposes only, and are **never** otherwise discussed.
- 3. If you don't know if data is to be maintained as confidential, ask your instructor.
- 4. Courteously refuse inappropriate or unauthorized requests for confidential information.
- 5. Share information only with those who have a legitimate right to know. (Right-to-know is based on a **need** to know in order to provide care.)

| Document Title: North Idaho College Associate Degree Nursing Program Clinical Uniform Standards Policy | |
|--|---|
| Document Number: 6.02.00 | |
| Origination: Nursing Program | Date: 11/00 |
| Faculty Committee | |
| Additional Publication(s): | Review/Revise Date(s): 1/01; 12/02; 8/04; 12/05, 5/07; 10/08; 10/08; 1/12;12/13; 4/22; 4/24; 8/24; 11/24 |

Clinical Uniform Standards

A. Clinical Uniform Standards

All nursing faculty are accountable for implementing and enforcing this standard; therefore, the clinical faculty will offer the final decision regarding the appropriateness of a student's appearance in the clinical setting. Students must be in official college uniform anytime they are in the clinical or practice lab setting. The associate degree nursing student uniform is pewter grey in color.

- Required Dress Acceptable Styles
 - Approved uniform styles are provided at entry to the program (Orientation). The list of approved Cherokee band styles is available by request should you need to order more throughout the program.
 - Clothing must be of adequate size and length, so that standard body mechanics do not cause exposure of the abdomen or back.
 - Uniforms must be clean and wrinkle-free.
 - All uniforms must be the approved pewter grey color.
 - Uniforms must have the official North Idaho College of Nursing logo embroidered on each scrub top and/or jacket in the upper left corner.
 - Approved uniform skirts or dresses must be at least knee-length.
 - Full-length pants are required and no ankles showing.
 - Neutral color nylons will be worn with dresses or skirts
 - Neutral color, nonpattern socks to be worn with pants.
 - Undergarments are not to be visible through clothing and must be covered entirely by clothing at all times.
 - Students may wear approved uniform jackets with the NIC logo and/or a solid white or black, long-sleeved shirt.
 - Short sleeves under scrub tops must not be visible
 - Shirt worn under scrub tops must be solid white or black in color
- **Full uniform**, including monogrammed top, must be worn any time a student is in the clinical area or representing NIC at any facility (including clinical hours, clinical preparation activities, volunteer activities as required).

Name Tag

• Your pictured NIC identification badge and issued facility badge must be worn on students' uniform top, lab coat, or professional dress anytime in the clinical setting per clinical site requirements.

Shoes

- Solid white or black healthcare professional or athletic shoes in a conservative style that is well maintained, functional and quiet are required with closed toe and heel or heel strap. Shoes with a small colored emblem are acceptable. No other colors of shoes are permitted.
- Shoes with holes in the tops of the shoe are not permitted
- Shoes should be clean in appearance.
- Shoelaces must be the same color as shoes.

Makeup and Daily Grooming

- All students are expected to bathe daily, apply deodorant, and maintain good oral hygiene.
- No perfume, cologne, aftershave, or strongly scented products should be worn or used because of the potential risk of allergic reactions by patients and other staff/peers.
- Students are expected to be healthy role models of personal grooming and daily hygiene.
- Makeup/cosmetics, if worn, should be applied in moderation and conservatively.
- Students who smoke are advised not to allow the odor of smoke to be noticed on their person.

Fingernails

- Fingernails must be clean, well-groomed, and should be at working length, not to extend beyond fingertips.
- Artificial, gel, wraps, or nails extensions are not allowed while engaged in direct patient care.
- Nail polish, if worn, must be in moderate, subdued neutral colors only and should be maintained without cracks or chips.

• Hair

- Hair must be kept clean and neatly styled.
- If hair is beyond shoulder/collar length, it must be neatly pulled back to prevent hair from falling onto the face and secured off the shoulder/collar.
- If headbands are worn, they must be clean and must be a solid black or white color.
- Any extreme look is not permitted. Mohawks, spikes, etc., are not allowed.

- Unnaturally colored hair or glittered hair spray is not permitted.
- Facial hair is to be well-groomed
- Beard and mustache, goatee must be at a length that allows the passing of mask fit testing.
- Some agency policies may be more restrictive and must be followed by students in that facility.

Head coverings

- Approved head coverings must be black or white.
- The head covering should be secured away from the face to prevent it (like hair) from impeding vision or creating an infection control hazard.
- The head covering should be clean and without a pattern, logo, or other adornments.
- Hats or bandanas are not permitted in clinical settings.

Jewelry

- While in clinical uniform, a limited amount of jewelry is allowed; however, it may not pose a safety hazard, infection control risk, or interfere with patient care.
- Students may wear a watch and a simple wedding band or engagement ring unless prohibited by infection control policies in addition to medical alert jewelry. Necklaces should not be visible.
- No necklaces, earrings, or other jewelry can be worn that may place the student at risk for infection or injury in the clinical setting (i.e., dangling or hoop earrings).
- Students may wear only small stud or post earnings. All earlobe gauges must be plugged with a clear or skin tone plastic plug.
- Facial jewelry must be removed from any visibly pierced location.
- Piercing retainers are not acceptable.
- Any clothing, jewelry, or accessories that could be perceived as disrespectful of others' religious, cultural, or personal beliefs may not be visible.

Tattoos

- Visible tattoos must be appropriate. Tattoo visibility is based on clinical site location. Some clinical sites policies may require tattoos to be covered in the clinical setting and must be followed by students in that facility.
- Tattoos that could be perceived as disrespectful or offensive of others' religious, cultural, or personal beliefs may not be visible.

B. Professional Dress Code when not in uniforms

- Clothes that are too tight, long, loose, revealing, short, or may impinge on the student's ability to act quickly in a safe, effective manner are not to be worn.
- Pants or slacks must be to the ankle/shoe, and shirts/tops must cover the midriff.

- Dresses and skirts must cover the abdomen and be to the knee with no large slits.
- Appropriate length of tops must be worn with leggings.
- No casual attire is permitted, including the following:
 - Jeans, Shorts, t-shirts, sweatshirts, halters, sleeveless shirts, or camisoles worn alone.
 - Items with holes or tears and items with logos other than the NIC logo.
 - Flip-flops, slippers, foam clogs, or high-heeled shoes.
- **C.** In some clinical or observational experiences, the dress code may vary. Students will be notified by the faculty of the specific dress requirements for these situations.
- **D.** Students do not wear uniforms in the psychiatric setting but are expected to dress in a professional manner that does not interfere with their ability to provide patient care or draw undue attention to themselves and away from their clinical skills.
- **E.** Exceptions to the policy may be made for cultural or religious beliefs as long as attire does not interfere with patient care or present a safety hazard and must be preapproved.

F. Summary

- The guidelines for dress and demeanor of the student nurse in uniform or lab coat is to dress and act as a representative of North Idaho College and the nursing profession at all times. All criteria noted above are expected regardless of the clinical setting.
- Specific hospital or health agency policies regarding dress code must be adhered to.
- A nursing student not meeting the above criteria may be sent home, resulting in disciplinary action.

| Document Title: North Idaho College Associate's Degree Nursing Program Harassment Policy | | |
|--|---|--|
| Document Number: 6.03.00 | | |
| Origination: | Date: 8/98 | |
| Additional Publication(s): | Review/Revise Date(s): 8/02; 7/14; 8/17 | |

Harassment Policy

Harassment is inconsistent with the efforts to foster an environment of respect for the dignity and worth of all individuals. Harassment of any kind is unacceptable.

Harassment is defined as verbal or physical conduct, which has the intent or effect of:

- 1. Creating unreasonable interference with an individual's or a group's educational and/or work performance or,
- 2. Creating an intimidating, hostile, or offensive educational and work environment on or off campus.

Harassment includes discrimination against any individual on the basis of race, color, sex, religion, or national origin. Harassment also includes discrimination against an individual because of a stereotyped group characteristic or because of the person's identification with a particular group.

Sexual harassment also includes unwelcome sexual advances, requests for sexual favors, and other physical conduct and expressive behavior of a sexual nature where submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or education. Sexual harassment, which is a form of sex discrimination, may range from sexual innuendoes made at inappropriate times, perhaps in the guise of humor, to coerced sexual relations. Sexual harassment may occur between equals, between students, between faculty, between staff, and/or between administrators. For example, repeated sexual advances or demeaning verbal behavior between equals which affects a person's ability to study or work in the academic setting constitutes sexual harassment. Harassment at its extreme occurs between unequals--when a person in a position to control, influence or affect another person's job, career, or grades uses his or her authority and power to coerce that person into sexual relations, or to punish a refusal. In an academic setting where the integrity of the education process and the mutual respect of faculty, students and administrators is so important, the sexual harassment of a student by a teacher or administrator is an especially serious problem.

Any member of the Division, faculty, staff, or student who believes that they have been harassed is encouraged to raise the issue, or lodge a complaint, in accordance with the established grievance procedures of North Idaho College. See policies on their webpage at: Title IX - Sexual Assault, Discrimination, and Harassment

Student Health and Safety Clinical Requirements

Healthcare facilities have several requirements that students must complete prior to participating in patient care. These requirements are for the health and safety of both the students and the patients they are in contact with Students are responsible to post verification of completion of all requirements to the clinical requirement website prior to starting clinical experiences. Failure to do so may result in the student not being able to participate in clinical.

A. Background Check

National background checks will be required upon admission and annually while in the program. Students may also be required to have further background checks if required by the clinical facility where they will be participating in clinical experiences. OIG/SAM reports are run twice monthly by Clinical Placements Northwest to ensure compliance with monthly screening

B. Drug Screen

Some clinical facilities require that students have a drug screen prior to participating in clinical at their facility. Students will be notified if this requirement is needed.

C. BLS Certification

Each student is required to obtain and maintain current certification in basic life support (BLS AHA). A copy of a current certification card must be posted to the clinical requirements website.

- **D. Professional Liability Insurance** Professional liability insurance is provided by North Idaho College.
- E. A physical exam is not required but students must be able to fully participate in classroom and clinical experiences. In the event the student has something that is preventing full participation, the student will notify the Director of Nursing.

F. Clinical Training Modules

Healthcare facilities require specific annual educational content that must be completed prior to participating in patient care. Students will be provided information regarding the training modules that need to be completed. Students will be responsible to complete the modules and associated tests with the required score. Students are responsible to upload to the clinical requirements website.

G. Students are required to provide documentation of immunizations and maintain ongoing updated medical records. See following document titled Clinical Placement Northwest Student/Faculty Clinical Passport Requirements.

H. Failure to meet any of the published deadlines for obtaining immunizations, uploading information to the designated site (i.e CastleBranch), will not be eligible to attend clinical and may be dismissed from the program.

I. Illness/Injury Reports

- 1. If a student has been in contact with a possible communicable disease, it must be reported to student's clinical instructor.
- 2. If a student is absent from clinical due to illness or injury, or has a prescribed restriction on physical activity, a physician's written directive must be provided to the clinical instructor. The clinical instructor must notify the Nursing Program Coordinator or the Associate Dean of Nursing and Health Professions that the student has a restriction and receive notification that the student is still permitted to participate in clinical activities.
- 3.If an injury occurs during clinical hours, the student must report immediately to their instructor and complete NIC and the clinical facility incident forms.

J. Medical Insurance

All students must be protected by a health and accident insurance policy. All students must sign a waiver acknowledging it is their responsibility to ensure they are covered by medical insurance, individually, or as a part of an organization and that NIC will not provide such coverage. See Appendix B: Student Release and Acknowledgement for Participation. Under this policy, all injuries must be reported to the Dean of Instruction, Workforce Education Associate Dean of Health Professions and Nursing and proper forms completed. Any costs or fees associated with a student injury are the direct responsibility of the student.

K. Invasive Procedures

Students will not perform, nor allow to be performed, any invasive procedures on other students, faculty or staff for purposes of a practice experience.

L. Pregnancy

1. If a student has health care limitations related to her pregnancy, the student is strongly encouraged to contact the Student Disability Office (see contact information page). Accommodations will only be made in collaboration with the Student Disability Office.

M. Injury

- 1. If a student has health care limitations related to injury, the student must contact the Student Disabilities office and the faculty member. The student and faculty member will collaborate with the Student Disability Office to determine what accommodations will be implemented.
- 2. If class/clinical hours are missed, the student must coordinate with the class/clinical instructor regarding absences.
- 3. Before returning to the clinical setting, the student must provide a written release to return without restrictions from their healthcare provider to their instructor.

- 4. Certain clinical situations/diagnoses may pose a health risk. The pregnant student assumes the responsibility for safeguarding her health, and the health of the unborn child.5. The student's clinical instructor/advisor will provide the student with an Assumption of
- 5. The student's clinical instructor/advisor will provide the student with an Assumption of Responsibility Form to sign.



Student/Faculty Clinical Passport

This is a digital PDF and should not be handwritten.

For best results, we recommend the free version of Adobe that can be downloaded by <u>clicking here</u>
For more information on this Clinical Passport <u>click here</u>

By contract with your academic institution, all students and foculty participating in learning experiences at this healthcare site must meet the following health and safety requirements. The academic institution is responsible for ensuring that requirements have been met prior to participation in the clinical experience. Records will be kept at the academic institution and random review by the clinical diffiliates will occur on a regular basis.

Documentation must more requirements must include immunitations must include must individue.

| Sudent Employment Facility TUBERCULIN STATUS The Toberculin requirement can be met through corporate to the following: TUBERCULIN STATUS The Toberculin requirement can be met through corporate to the following: Date | Documentation must meet requirements at all times. Kequ | irea immunizations must include miniraryyyyy if available. |
|--|--|---|
| SUBMITTED ONCE | Student/Faculty Name: DOB: | Form Verified By: Name: Date |
| SUBMITTED VEARLY SUBMITTED ONCE | College: | Name: Date |
| TUBERCULIN STATUS And Decoration requirement can be met through completion of one of the following: | Program: | Name:Date |
| TUBERCULIN STATUS The Fuberculin requirement can be met through completion of one of the following: A | Student Employment Facility: | |
| completion of one of the following: A Two-step 1378* Piace Date: Read Date: Piace Date: Piac | | SUBMITTED YEARLY |
| Result | completion of one of the following: A. Two-step TST#1 | than one year from the administration date. Annual TST requirement may be met through completion of one of the following: |
| If first 197 is positive or new positive with no history of disease then an ISRA and provider examination with Chest XRay is Two-step 15182. Place Date: Result | | • |
| then an IGRA and provider examination with Chest XRay is recommended to confirm. Place Date: | Result Neg Pos | |
| Place Date Read Date Place Date Result mm Neg Pos OR | then an IGRA and provider examination with Chest XRay is | |
| Place Date: Read Date: Result mm Neg Pos OR B. TB IGRA Date: Result mm Neg Pos OR B. TB IGRA Date: Result mm Neg Pos OR D. History of positive results Date: (Salf Screening) HEPARTIS B The Hepatitis B requirement can be met through completion of one of the following: A 3-series (Recombinex HB or Energix B or Recombivax HB) Series Vaccination Dates: Vaccination Dates: Vaccination Dates of the following: A 3-series (Recombinex HB or Energix B or Recombivax HB) Series Vaccination Dates: Vaccination Vaccination | | |
| Result | • | |
| B. TB IGRA Date: Result Neg Pos | | • |
| C. New positive, date of exam/chest xray: Distory of positive results Date: Salf Screening) | | |
| HEATITISE The Hepatitis Desquirement can be met through completed of one of the following: A.3 -series (Recombines HB or Energies B or Recombivas HB) Series shots at 0, 1, 6 months plus titer confirmations 4-8 weeks later. Vaccination Dates: 1. | | |
| MEDATITIS B The Hepatitis B requirement can be met through completion of one of the following and one of the following the plus tier confirmations 4.8 weeks later. A. 3-series (Recombinex HB or Energix. B or Recombiwax HB) Series shots at 0.1, 6 months plus tier confirmations 4.8 weeks later. Vaccination Dates | | |
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| shots at 0.1, 6 months plus titer confirmations 4:8 weeks later. Vaccination Dates: 1. | tion of one of the following: | |
| Vaccination Dates: 1. | shots at 0, 1, 6 months plus titer confirmations 4-8 weeks later. | C. Annual TB IGRA |
| 2 Date drawn: 3 Result: Neg Pos 4 Inegative titer after initial series of 3 vaccines, then vaccine 44 and re-titer OR #3 and re-titer of 2 vaccines, then vaccine #3 and re-titer and #4 vaccines and re-titer OR #3 and re-titer or M4 vaccines and re-titer OR #3 and re-titer of #4 vaccines and re-titer OR #3 and re-titer of #4 vaccines and re-titer OR #3 and re-titer of #4 vaccines and re-titer OR #3 and re-titer of #4 vaccines of 2 vaccines, then vaccine #3 and re-titer of #4 vaccines of 2 vaccines, then vaccine #3 and re-titer of #4 vaccines of 2 vaccines, then vaccine #3 and re-titer of #4 vaccines of 2 vaccines, then vaccine #3 and re-titer of #4 vaccines of 2 vaccines, then vaccine #4 vaccines of 2 vacc | Vaccination Dates: | |
| Regult: Neg | | |
| If negative titer after initial series of 3 vaccines, then vaccine ## and re-titer OR #5 and #6 vaccines and re-titer ## and re-titer OR #5 and #6 vaccines and re-titer ## and re-titer OR #5 and #6 vaccines and re-titer ## and re-titer OR #5 and #6 vaccines and re-titer ## Date drawn: Date drawn: | 2 Date drawn: | Date: Result: D. If New Positive TST or IGPA Exam/Chest Y year |
| #4 and re-titer OR #5 and #6 vaccines and re-titer 4. | If negative titer after initial series of 3 vaccines, then vaccine | - |
| S | #4 and re-titer OR #5 and #6 vaccines and re-titer | Complete annual symptom check form. Date: |
| Date drawn: 6. Result: Neg Dos OR 8. 2-series (Heplisav) Vaccination Dates: 1. Date drawn: 2. Result: Neg Dos If negative titer after initial series of 2 vaccines, then vaccine #3 and re-titer and #4 vaccines and re-titer 3. Titer: 4. Date drawn: Result: Neg Dos C. Immunity by titer (anti-HBs or HepB SAb) Date: D. Non-converter: Must provide series information above. D. Non-converter: Must provide series information above. MMR (Mesales, Mumps, Rubella) OR MMRV (Mesales, Mumps, Rubella, Vaccination Dates 1. Cardinal History Disclosure (School keeps this on file) This is to be completed at the same time as WATCH, annually. VARICELLA A. Vaccination Dates 1. Cardinal History Disclosure (School keeps this on file) Waricella, MMRV if received prior to the age of 12. A. Vaccination Dates 1. Cardinal History Disclosure (School keeps this on file) This is to be completed at the same time as WATCH, annually. Date: D | 4 Titer: | E. For Known History of Positive/Possible Treatment: |
| B. 2-series (Heplisav) Vaccination Dates: 1. | | |
| Vaccination Dates: Titer: Date drawn: | | |
| 2. Result Neg Dos If negative titer after initial series of Z vaccines, then vaccine #3 and re-titer and #4 vaccines and re-titer 3. Titer. 4. Date drawn: Result Neg Dos C. Immunity by titer (anti-HBs or HepB SAb) Date: D. Non-converter: Must provide series information above. L. Yes E. Signed Series in Process Form Date: MMR (Measles, Mumps, Rubella) OR MMRV (Measles, Mumps, Rubella, Varicella). MMRV if received prior to the age of 12. A. Vaccination Dates 1. 2. OR B. Immunity by titers: Measles titer Date: Mumps titer Date: B. Immunity by titer Date: Mumps titer Date: Mumps titer Date: B. Immunity by titer Date: Mumps titer Date: Mum | | tion was received (CVS, Walmart, health dept., etc.) (location address is |
| Provider/Agency | 1 Date drawn: | |
| #3 and re-titer and #4 vaccines and re-titer #3 and re-titer and #4 vaccines and re-titer #4 | 2. Result: Neg Pos | |
| 3 | | |
| A. Date drawn: Result | | |
| Result: Neg Pos C. Immunity by titer (anti-HBs or HepB SAb) Date: D. Non-converter: Must provide series information above. S. Signed Series in Process Form Date: Date: Date: D. MMR (Measles, Mumps, Rubella) OR MMRV (Measles, Mumps, Rubella, Varicella), MMRV if received prior to the age of 12. A Vaccination Dates L. A Vaccination Dates B. Immunity by titers: Measles titer Date: Mumps titer Date: Mumps titer Date: Mumps titer Date: Date | | |
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| Date: | Varicella). MMRV if received prior to the age of 12. | This is to be completed at the same time as WATCH, |
| B. Immunity by titers: Measles titer Date: Mumps titer Date: Mumps titer Date: Mumps titer Date: Need a Disclosure form? Click Here D. Provider Search: OIG/GSA—Automatically (run bi-monthly on 1st and 15th of every month per CPNW) Student on-boarded before cycle: manually run on Date: 1 2 OR Immunity by titer Date: TETANUS/DIPHTHERIA/PERTUSSIS 1 dose of Tdap required followed by a dose of Td or Tdap every 10 years. A. Initial Tdap Date: B. Td/Tdap Date: ; Date: Date: Date: Need a Disclosure form? Click Here D. Provider Search: OIG/GSA—Automatically (run bi-monthly on 1st and 1st hof every month per CPNW) Student on-boarded before cycle: manually run on Date: A. HA/BLS COURSE (Course must be American Heart Association (AHA) BLS provider.) A. Expiration Date: Expiration Date: | | Date: Date: |
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| Immunity by titer Date: | 1 2 OR | AHA/BLS COURSE (Course must be American Heart Association (AHA) |
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Student/Faculty Clinical Passport

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For more information on this Clinical Passport <u>click here</u>

By contract with your academic institution, all students and faculty participating in learning experiences at this healthcare site must meet the following health and safety requirements. The academic institution is responsible for ensuring that requirements have been met prior to participation in the clinical experience. Records will be kept at the academic institution and random review by the clinical affiliates will occur on a regular basis.

| Documentation must meet requirements at all times. Requ | ired immunizations must include mm/dd/yyyy if available. |
|---|---|
| SUBMITTED ONCE | SUBMITTED YEARLY |
| COVID-19 VACCINATION Confirm with the Site Requirements on the CPNW website to determine specific COVID-19 vaccination requirments. A. Vaccine Information Manufacturer: | COVID-19 BOOSTER and/or VACCINATION Not all Healthcare facilities require annual boosters, confirm with the Site Requirements on the CPNW website. It is requested to include Booster information if available, even if not required. A. Vaccine Information |
| Date of first dose: Date of second dose: | Manufacturer: Date: |
| | Manufacturer: Date: |
| RESPIRATOR DOCUMENTATION *Verify with Academic/Program Coordinator for more information regarding this standard. If directed by Program Coordinator complete the following: | Manufacturer: Date: RESPIRATOR DOCUMENTATION *Verify with Academic/Program |
| A. Biennial Respiratory Medical Questionnaire complete? Yes, date completed: No | Coordinator for more information regarding this standard. If directed by Program Coordinator complete the following: |
| B. Annual Respiratory Fit Test Record complete? Yes, date completed: | A. Annual Respiratory Fit Test Record complete? Yes, date completed: No |
| *Individual forms from different organizations are acceptable alterna- tives if the content is the same. Please ensure forms are uploaded to user's CPNW account. | *Individual forms from different organizations are acceptable alterna- tives if the content is the same. Please ensure forms are uploaded to user's CPNW account. |
| Respiratory Medical Questionnaire | Respiratory Fit Test Record |
| Respiratory Fit Test Record | REQUIRED EDUCATION |
| AUTHORIZATION FOR RELEASE OF RECORD (School keeps this on file) | All students and faculty must complete ALL student learning modules on the CPNW website. Any questions, please consult your program. |
| MILITARY IMMUNIZATION Exempt Status for certain vaccines accord- | LICENSE (Any healthcare license, registration) |
| ing to military code are acceptable. Upload military exempt status paperwork to account users CPNW folder. | A. State: License# |
| Exempt status for certain vaccines according to military code: | Expiration date:;; |
| Hepatitis B MMR Varicella | |
| Click Here | State: License# |
| ADDITIONAL REQUIREMENTS (If Applicable) The healthcare organiza- | Expiration date:;; |
| tion may have additional requirements that must be completed. | ; OR |
| Other | B. Not Applicable |
| Date: | bi Not Applicable |
| Date: | *Office Use Only |
| Date: | Pursued Exemptions: |
| Date: | Users must meet the health and safety requirements of the hosting facility. Inquiry for an exemption must be initiated through the edu- |
| | cational institution. |
| | Approved exemptions are to be uploaded to the individual's CPNW |
| | account. |
| | Facility Name: Date: |
| | Exemption Type: |
| | Facility Name: Date: |
| | Exemption Type: |
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CPNW - 2

RELEASE AND ACKNOWLEDGMENT FOR PARTICIPATION IN INSTRUCTIONAL AND/OR WORKFORCE TRAINING AND COMMUNITY EDUCATION COURSE(S)

I, the undersigned "Participant," am eighteen years of age or older and have voluntarily applied to participate in an Instructional Program course and/or a Workforce Training and Community Education course (collectively the "Course") provided by North Idaho College ("NIC"). For and in consideration of being allowed to participate in the Course, I hereby agree as follows:

Acknowledgement. I acknowledge that I am in good health and have no physical conditions that affect my ability to participate in the Course and have not been advised otherwise by a medical practitioner. I expressly acknowledge that it is my responsibility to ensure that I am covered by medical insurance, individually, or as a part of an organization and that NIC will not provide such coverage.

I expressly acknowledge and agree that my participation in this Course, including any component of the Course that involves my participation in learning opportunities outside of the classroom environment, are solely for educational purposes and are not for the benefit of NIC as my employer. I expressly acknowledge and agree that I am not working for or employed by NIC as a result of my participation in the Course and that my participation is solely as a student and not as an employee of NIC. I further acknowledge and agree that, unless an agreement to the contrary exists, I am not entitled to any NIC-employee benefits such as compensation, retirement benefits, worker's compensation benefits, unemployment benefits and/or any other benefit afforded to individuals as a result of their employment with NIC.

Assumption of the Risk. I acknowledge and agree that my participation in the Course may expose me to hazards or risks that may result in my illness, bodily injury, emotional injury, loss, death and/or damage to property. I understand and appreciate the nature of such hazards and risks and I, individually, and on behalf of any community, estate, heirs, executors, administrators, assigns, insurer, and entity, assume all risks inherent in my participation in the Course.

Release. I, individually, and on behalf of any community, estate, heirs, executors, administrators, assigns, insurer, and entity, release, waive, discharge and acquit NIC, its governing board, officers, employees, volunteers, representatives, agents and insurers, from any and all liability, claim (including claims for attorneys' fees), damage, loss, injury, expense, cause of action, dispute and cost that may arise from, result from or occur during my participation in the Course, including my coming and going from the Course, whether caused by the negligence of NIC, its governing board, officers, employees, volunteers, representatives, agents or insurers, or by any cause whatsoever.

Understand. I acknowledge that I have read this agreement in its entirety, understand the terms herein and agree to be bound thereby.

Severability. If any provision of this agreement shall be found to be void, such determination shall not affect any other provision of this agreement.

| DATED this day of | , 20 | |
|--------------------------|---------------|--|
| | PARTICIPANT: | |
| | PRINTED NAME: | |

MEETING OSHA BLOOD BORNE STANDARDS

North Idaho College Health Professions and Nursing Division operates in compliance with OSHA's Blood Borne Pathogens Standard (29 CFR 1910.1030) and the recommendations from the Center for Disease Control. This standard is the facilities' policy to protect students and healthcare employees from occupationally acquired exposure to blood and other potentially infectious materials. Standard precautions for all patients will be followed. NIC is committed to educating health professions and nursing students on how to prevent and/or reduce the risk of blood borne pathogen exposures to themselves and patients.

Methods of Eliminating or Minimizing Exposure:

All North Idaho College Health Profession and Nursing Programs believe that strict adherence to proper infection control procedures by all health care providers is the primary way to prevent transmission of blood borne infectious disease. Many needle sticks and other cuts can be prevented by using safer techniques (for example, not recapping needles by hand), disposing of used needles in appropriate sharps disposal containers, and using medical devices with safety features designed to prevent injuries. Using appropriate barriers such as gloves, eye and face protection, or gowns when contact with blood is expected can prevent many exposures to the eyes, nose, mouth, or skin.

Employee and student protection is to be provided in a manner consistent with a high standard of care using a combination of the following:

- 1. Engineering and work practice controls
- 2. Personal protective clothing and equipment
- 3. Training and education
- 4. HBV vaccination/positive titer
- 5. Signs and labels

Exposure Control Program:

A. Purpose:

To identify tasks and or positions associated with occupational exposures to blood or other potential infectious materials and to document the schedule of implementation of the measures that will be used. To require the development of procedures to be used in the evaluation of the circumstances surrounding exposure incidents.

B. To include:

- 1. Universal precaution procedures.
- 2. HBV vaccine and titer.
- 3. Training and education, to include:
 - a. Understanding the risk
 - b. Proper work practices
 - c. Engineering controls
 - d. Disposal of regulated waste
- 4. Post exposure procedure, evaluation and treatment.

Exposure Determination and Protection:

- A. Persons at risk of exposure:
 - 1. Faculty working in the Health Programs at North Idaho College.
 - 2. Students attending the Health Programs at North Idaho College.
- B. Task and procedures involved in occupational risks:
 - 1. Specific tasks and procedures included, but not limited to:
 - a. Oral care
 - b. Emptying bedpans and urinals
 - c. Collection of specimens such as sputum, blood, fecal, and wound drainage.
 - d. Cleaning and dressing open wounds
 - e. Parenteral injections
 - f. Starting, discontinuing and managing intravenous lines and catheters
 - g. Oral and tracheal suctioning
 - 2. Specific jobs:
 - a. Student: Meeting the needs of patients in a progressive manner as determined by the job description utilized in acute care, extended care, emergent care, clinic, psychiatric, and cancer center facilities. The student will carry out only those tasks and procedures in a clinical setting after being taught and having practiced in preclinic or a learning laboratory on campus.
 - b. Faculty: Supervision, assistance and/or oversight of students in meeting the needs of patients.
 - 3. Method of compliance:
 - a. All Health students and faculty will have started the series of HBV vaccines prior to beginning the first clinical experience and a follow-up titer six (6) months after the completion of the series. If the series and titer have not been completed by the start of the clinical experience, the student must sign a waiver relieving NIC and the facility of any responsibility in the event the student experiences a blood exposure.
 - b. Should the titer be negative, a booster HBV vaccine will be given.
 - c. All Health students and faculty will maintain current on immunizations and health requirements as outlined in the Clinical Passport Requirements.
 - d. Students in the Health Programs are taught and practice prior to clinical experience working with patients:
 - i. Standard precautions, which includes wearing the appropriate protective clothing and equipment.
 - ii. Aseptic hand washing techniques.
 - iii. Prior to starting clinical or treating patients, students are taught the correct procedure for safe disposal of sharps.
 - iv. Prior to starting clinical or treating patients, students are instructed on the correct procedure for specific tasks and procedures that involve potential contact with blood and body fluids, especially, but not limited to:
 - Collection of specimens
 - Cleaning and dressing open wounds
 - Parenteral injections
 - Starting, discontinuing and managing intravenous lines and catheters
 - Oral and tracheal suctioning

• Oral health procedures

- 4. Implementation of plan:
 - a. Health students and faculty follow procedures that have been implemented in each facility.
 - b. Students and faculty maintain current immunizations as identified on the Clinical Passport Requirements.
 - c. The learning lab, simulation lab and pre-clinic are set up to ensure practice of standard precautions, using preventative clothing and equipment. Students are trained on use of universal precautions and protective equipment.

Procedure for needle stick/body fluid splash:

All contaminated needle sticks or bloody body fluid splash to mucus membrane or open skin should be treated as if there is a potential risk of pathogen exposure. If an exposure takes place in an experiential education facility the student will be required to follow the procedure(s) outlined below, as well as, complete any appropriate facility requirements and forms.

If the student receives an exposure to blood or body fluid:

- A. Provide immediate care to the exposed site:
 - Wash needle sticks and cuts with soap and water
 - Flush splashes to the nose, mouth, or skin with water
 - Irrigate eyes with clean water, saline, or sterile irrigants

No scientific evidence shows that using antiseptics or squeezing the wound will reduce the risk of transmission of a blood borne pathogen. Using a caustic agent such as bleach is not recommended.

- B. Notify Clinical Instructor, Team Lead Instructor, Director of the Program or the Dean of Health Professions and Nursing immediately.
- C. Fill out a college incident report and return to the Director of the Nursing Program within 24 hours to be kept in the student file.
- D. The Infection Control or Occupational Health Department from the facility involved need to be contacted with follow-up instructions. A copy of the follow-up instructions should be provided to the Director of Nursing to be kept in the student file.
- E. Complete all appropriate facility requirements and forms for the facility where the exposure occurred.

Procedure for an accident or injury in clinical setting:

If an accident or injury occurs involving the student or a patient(s) they are caring for in the clinical setting, the student should do the following:

- A. In the event that a patient is injured in the student's presence, insure the safety of the patient from further injury and report the incident to the supervisor immediately. All incidents involving patients, visitors or students, no matter how minor, must be reported. The facility supervisor, site or lead instructor will assist with completing appropriate forms.
- B. Notify Clinical Instructor, Team Lead Instructor, Director of the Program or the Dean of Health Professions and Nursing immediately.
- C. If the student is injured, seek immediate treatment as needed.
- D. Notify Employee Health of the facility for the facility.
- E. Complete all appropriate facility requirements and forms for the facility where the incident occurred.
- F. Complete an NIC incident report and file with the Director of the Program within 24 hours to be kept in the student file.
- G. A copy of the incident report is to be taken to NIC Student Health, to be placed in the student/faculty health file.
- H. Student should follow-up with care provider.
- I. If a student has a prescribed restriction on physical activity, a physician's written directive must be provided to the Program Director. The student will also need to provide the Director of the Program with a written release from any physical restrictions once they have been granted by the healthcare provider.

References:

Center for Disease Control (July 2003). Exposure to Blood: What Healthcare Personnel Need to Know. Retrieved from https://www.cdc.gov/HAI/pdfs/bbp/Exp to Blood.pdf

United State Department of Labor. Occupational Safety and Health Administration. Retrieved from: https://www.osha.gov/

Memorandum

TO: Nursing Students

FROM: Nursing Faculty

RE: Student Understandings

The student-teacher relationship in nursing education is a special kind of helping relationship. The faculty takes pride and pleasure in assisting you as you work toward your educational goals in nursing and we endeavor to do whatever we can to foster your success. If you have a clear understanding of how your courses are conducted and the expectations of you in your student role and you act in concert with that understanding, then you can foster your own success.

The items listed in the attached document identify some understandings we see as highly important. Each will be explained in course orientation and any questions you have will be answered. When your understanding is clear, we ask that you initial the item. After completing the list of items, we ask that you sign and date the Student Understandings document.

Your signature verifies your understanding and signifies your commitment to act upon that understanding throughout the semester.

Please complete this form and bring to your initial advising session.

STUDENT UNDERSTANDINGS

| A. | A. I understand that I am responsible for my own learning and demonstrate acceptance of this responsibility by: | | | |
|---------|---|---|--|--|
| | 1 2 3 4 | Preparing for class and laboratory experiences by studying required readings, turning in required written preparation, and doing necessary practice for skill development. | | |
| B. | | I understand the program level requirements and grading system as outlined in the course syllabi. | | |
| C. | | I understand that I should request clarification if I feel unsure of my level progress, course theory grades or clinical performance. | | |
| D. | | I understand that I will be held responsible for content and skills presented in previous courses. | | |
| E. | | I understand the attendance/absence policy and procedure for notification of absence, and that I must notify the course instructor. | | |
| F. | | I understand the attendance/absence policy and procedure for notification of test absence, and that ${\bf I}$ must notify the course instructor. | | |
| G. | | I understand the class conduct standards specified in the course syllabi. | | |
| Н. | | I have received information regarding the online copy of the ADN Program Student Handbook. I understand that I am responsible for understanding, and acting in accordance with, the NIC Student Handbook and the Nursing Program Student Handbook. I have read the ADN Student Handbook, understand the content and have had my questions answered. | | |
| I. | | I understand that as a student in the profession of nursing, academic honesty, acting with integrity, and maintaining confidentiality are absolute requirements and violation can result in dismissal from the program. | | |
| J. | | I understand that if there is any change in my current health status I must immediately inform my advisor. | | |
| K. | | I have read and understand the Release and Acknowledgement for Participation in Instructional Courses. | | |
| Pri | nt Name | | | |
| | | Date | | |

^{*}Signature
*Signature indicates understanding and commitment to act upon these understandings throughout the semester.

Student Incident/Injury Report and Guidelines

All nursing students who have an incident/injury occur while participating in a learning experience of North Idaho College such as in the Learning Lab, Pre-Clinical Lab or Clinical will be required to complete a Student Incident/Injury Report Form within 24 hours of the incident/injury.

- 1. The student will pick up a Student Incident/Injury Report Form either in the Learning Lab, in the program secretary's office, or from a clinical instructor.
- 2. The student will be responsible for filling out the form completely.
- 3. The student will then take the completed form to his/her clinical instructor/lab preceptor, who will then read and sign the form. The clinical instructor/lab preceptor will then turn the form into the Senior Administrative Assistant for Nursing. Completed Student Incident/Injury Report Forms will be kept on file.
- 4. If the injury takes place in a clinical facility the student will be required to fill out the appropriate facility forms.

If medical treatment is necessary and the incident/injury took place off campus, the student will need to be treated at a local hospital or urgent care facility.

If payment is expected up front, the student is responsible for payment. The student can file a claim for reimbursement from the North Idaho College Student Accident Insurance Policy. The information to obtain reimbursement is found on the North Idaho College Student Accident Report form. This is a separate form from the one required by the nursing department.

North Idaho College Associate's Degree Nursing Program Incident/Injury Report Student

Please complete and route to the Lead Instructor within 24 hours of incident/injury.

| Student Name | | | |
|--|-----------------------------|-------------------------|---------|
| Name of Student's Clinical Instructor | | | |
| Date of incident/injury | Time | Date/Time Reported | |
| Specific body part(s) involved/injured _ | | | |
| How did this incident/injury occur? | | | |
| | | | |
| | | | |
| | | | |
| Was first aid provided? ☐ Yes ☐ No If | f yes, Date | Time | AM / PM |
| If yes, describe | | | |
| Was medical treatment provided? ☐ Yes | s \square No If yes, Date | Time | AM / PM |
| If yes, name of medical provider | | | |
| Was another student/instructor/preceptor | r involved? □ Yes □ No | If yes, please explain: | |
| Please list the names of any witnesses | | | |
| Student Signature | Dat | e of Report | |
| Instructor/Preceptor Signature | | e | |

Original – Health Professions and Nursing Office

Copy - Student

| Document Title: North Idaho College Associate's Degree Nursing Program Academic/Professional Honesty Policy | |
|---|---|
| Document Number: 6.04.00 | |
| Origination: | Approval Date: 8/98 |
| Additional Publication(s): | Review/Revise Date(s): 8/02; 3/07; 8/17 |

Academic/Professional Honesty Policy

- A. All forms of dishonesty, including but not limited to cheating, lying and plagiarism, use of Artificial Intelligence applications are unacceptable behaviors for any student enrolled in the Nursing Program at North Idaho College. (Dishonesty can occur within the classroom and/or clinical setting).
- **B.** Examples of academic/professional dishonesty include, but are not limited to, the following:
 - 1. Cheating.
 - 2. Turning in work that has been copied from another person/source.
 - 3. Assisting others with dishonest behavior.
 - 4. Plagiarism Any use of wording, ideas or findings of other persons, writers or researchers requires the explicit citation of the source; use of the exact wording requires a "quotation" format.
 - 5. Inaccuracies in referencing.
 - 6. Giving false information.

C. Process for Resolution:

- 1. Instructor informs the student(s) of the suspected infraction.
- 2. A meeting is scheduled with the student as soon as possible.
- 3. Student relates his/her account of the event.
- 4. A counseling form describing the infraction and the student's response is initiated by the instructor.
- 5. Instructor refers incident to course teaching team.
- 6. The course teaching team determines the disciplinary action. This may include but is not limited to:
 - a. Having the student retake or rewrite the paper or exam.
 - b. Lowering the grade.
 - c. Receiving no credit for paper or exam.
 - d. Failing the course.
 - e. Being dismissed from the nursing program.
- 7. The student is informed of the appeals process (Doc #8.08.00).

Student Participation in College/Program

- A. Activities and events provided by the college can contribute in various positive ways to the student's education. Students are encouraged to participate in those activities, which suit their interests. A list of clubs and organizations is published in the Associated Students' North Idaho College Student Handbook.
- B. Student admission to events on campus is usually free or at reduced prices with student identification card.
- C. North Idaho College Student Nurse Association:
 - 1. The Nursing Program supports and promotes membership in professional organizations.
 - 2. North Idaho College is pursuing active e status within the North Idaho College Student Nurse Association (NIC-SNA) with a faculty advisor.
- D. The Associate's Degree Nursing Program has a charter of the Organization for Associate Degree Nursing (OADN) Alpha Delta Nu Honor Society. The institutional chapter at NIC is the Epsilon Gamma Chapter. Students who meet the requirements are invited to become members.

From the OADN:

Students shall have demonstrated conduct that reflects integrity and professionalism.

In addition to the OADN eligibility standards, students may not be on a contract in any violation of the Behavior Performance Standards as outlined in the ADN Student Handbook.

- E. Participation on Nursing Program Committees:
 - 1. Student input for decision making on program development and revision and course conduct is valued and encouraged by the nursing faculty.
 - 2. Student representatives from both first and second years are invited to participate in selected committee meetings (listed below). The representatives represent their peers and report back to their respective classes.
 - a. Curriculum Committee
 - b. Program Evaluation Committee
 - c. Appeals Committee
 - d. Course Teaching Team
 - 3. Information on role and functioning of student representatives will be provided by the Nursing Program Senior Administrative Assistant along with time, days, and frequency of meetings.
- F. Participation in Instructor and Program Evaluation:
 - 1. Instructor Evaluation
 - Students will be asked to evaluate clinical and classroom instructors in accordance with the college procedure.
 - 2. Course Evaluation
 - At the end of the semester nursing courses will be evaluated. All students are expected to participate in providing this written feedback.

3. Clinical Facility Evaluation

Students will be asked to evaluate the facilities in which they have had clinical experiences to assist faculty in evaluating the facility for continued use.

4. Program Evaluation

- a. At the close of the student's last semester students are asked to evaluate the program by completing the Graduate Exit Survey.
- b. Six (6) months after graduation alumni will receive by mail the Graduate Follow-up Survey. Responses to this survey assist faculty in assessing how well the program is preparing graduates for the job responsibilities of entry-level nursing positions and identifying relevant program changes.
- 5. Student evaluation responses are reviewed, analyzed and utilized in course and program development decisions.

Records

A. Current Students' Permanent Files:

- 1. The permanent files for currently enrolled nursing students are housed in the vault.
- 2. The permanent file contains admission materials, completed course performance evaluations, anecdotal notes, a summary of grades and correspondence/communications.

B. Current Students' Resource Files:

- 1. Resource files for current students are kept in a file cart in the vault for the first- and second-year classes.
- 2. Contents of the resource file for each student include written assignments, test results and other communications.

C. Student Progress Notes:

Progress Notes are kept in an electronic file. The student may request a copy of their Progress Notes from an instructor at any time.

D. Graduates and Former Students' Files:

- 1. Permanent records, i.e. transcripts are housed in the Office of the Registrar.
- 2. Anecdotal Notes and Final Semester Evaluation Forms are filed in the vault for a period of seven (7) years after which they are destroyed.

| Document Title: North Idaho College Associate's Degree Nursing Program Alcohol and Drug Policy | |
|--|--|
| Document Number: 6.05.00 | |
| Origination: | Date: 8/98 |
| Additional Publication(s): | Review/Revise Date(s): 7/14; 8/17 |

Drug and Alcohol Policy

- 1. The sale, possession or consumption of alcohol or other drugs on North Idaho College property is a violation of the college policy subject to sanction and may be a criminal offense.
- 2. Using or being under the influence of alcohol or other drugs in the classroom or clinical laboratory setting is a violation of program policy and may result in dismissal from the program. (See Dismissal Policy).

| Document Title: North Idaho Collego | e | |
|---|--|--|
| Associate's Degree Nursing Program | | |
| Classroom Attendance/Absence/Exam Makeup Policy | | |
| Document Number: 6.06.01 | | |
| Origination: Program Evaluation | Date: 11/99 | |
| Committee | | |
| Approval: Nursing Program | | |
| Faculty Committee | | |
| Additional Publication(s): | Review/Revise Date(s): 1/02; 8/02; 1/03; | |
| | 12/03; 12/05; 8/06; 10/06, 8/08; 8/10; | |
| | 7/14; 3/16, 5/17; 8/17; 8/23;12/23; | |
| | 5/24; 12/24 | |

Classroom Attendance/Absence/Exam Makeup Policy

A. Classroom Attendance/Absence:

- 1. Classroom attendance and participation is **expected** and contributes to the learning of all students. The content presented is considered essential to the student's learning and clinical application.
- 2. In the event of absence from class, the student is responsible for acquiring the missed content.
- 3. Students are expected to attend planned learning experiences, which occur outside the classroom.

B. Test Downloads:

1. All Examsoft tests must be downloaded within the defined timeframe as set forth by instructors and course syllabus. Failure to do so will result in a 5% deduction of the total possible points for the test.

C. Late Arrival to Testing:

- 1. Failure to arrive on time to the start of a test will result in a 10% deduction of the total possible points for the test. The student will not be permitted to enter the testing room after the start of the exam so as not to disturb the rest of the class. The student should wait outside of the classroom until the last student has finished testing; they may then enter to speak with the instructor.
- 2. The student is responsible for scheduling a make-up time within 24 hours of the missed exam.
- 3. Failure to arrive on time for the math test will result in a score of zero for that attempt.

D. Test Absence and Make-up:

1. Extenuating circumstances beyond the student's control may necessitate an absence. If this occurs, the student **must notify the Lead Instructor of the course,** citing the reason for the absence prior to the start of the scheduled test and make arrangements for test make-up. Failure to do so will result in a zero for the test.

- 2. Tests must be made up on a Monday through Friday, within 48 hours of the original scheduled test date.
- 3. Make-up tests completed after the allowed timeframe will have 10% deduction in the total possible points for the test for each additional day. (See Student Handbook Document Attendance/Absence/Exam Makeup Policy 06.06.01) NOTE: Exceptions may be made in the event of illness restrictions.

Example 1:

Test scheduled for Monday, make-up exam taken by Wednesday, the grade is recorded as scored.

Test scheduled for Monday, make-up exam taken by Thursday, the student's test is scored as 91%, the grade will be recorded as an 81%.

Example 2:

Test scheduled for Thursday, make-up exam taken by Monday, the grade is recorded as scored.

Test scheduled for Thursday, make-up exam taken by Tuesday, the student's test is scored as 91%, the grade will be recorded as an 81%.

- 4. Upon proper notification, the Lead Instructor will identify a date and time for the examination to be made up.
- 5. Make-up tests may consist of various types of questions other than multiple choice. Questions may include essay, short answer, fill in the blank, etc.
- 6. Students who score less than a 77% on any given test are strongly encouraged to meet with the assigned nursing academic advisor to review the examination.
- 7. Students who have questions regarding any test questions are encouraged to meet with the faculty member responsible for presenting the content in order to gain further clarification about the test.

E. Late Assignments:

- Students are expected to complete and submit all assignments in the course on time.
- There will be a 10% deduction in the total possible points if submitted past the deadline. There will be an additional 10% deduction for each additional 24 hours the assignment is late up to ten calendar days, after which the assignment will be awarded 0 points. Per division policy, all assignments are required to be submitted.

Example:

Assignment is worth 20 points.

Student submission is 1 day late. Student would have earned 18.75/20 points. 1 day late= 2 points off (20 possible points x 10% = 2 point deduction); Student score would become 16.75/20 points.

• Faculty may choose to grant an extension on assignments without penalty, however, students must seek permission from the instructor at least 24 hours prior to the due date of the assignment. NOTE: Instructors are not required to grant the extension.

| Document Title: North Idaho College | | |
|---|--|--|
| Associate's Degree Nursing Program | | |
| Clinical Standards; Attendance/Absence Policy | | |
| Document Number: 6.06.02 | | |
| Origination: Program Evaluation | Date: 11/99 | |
| Committee | | |
| Approval: Nursing Program | | |
| Faculty Committee | | |
| $Additional\ Publication(s):$ | Review/Revise Date(s): 1/02; 8/02; 1/03; | |
| | 12/03; 12/05; 8/06; 10/06, 8/08; | |
| | 8/10; 7/14; 3/16, 5/17; 8/17; 8/23 | |

Clinical Standards, Attendance/Absence Policy

F. Expected Clinical Behaviors:

- 1. Students are expected to be punctual and prepared as directed for any and all campus and clinical labs.
- 2. Students are to notify the course instructor(s) if circumstances prevent them from being at campus or clinical labs at the appropriate time.
- Students who do not arrive at clinical by the scheduled shift report or are not prepared, may be considered absent and will be sent home.
 Examples include, but are not limited to: not approved uniform, missing facility badge, missing prep work, etc.
- 4. Anecdotal forms are not considered an assignment, but a mandatory clinical evaluation tool. Failure to turn in anecdotal forms by due date may result in failure of the lab course.
- 5. Students are expected to demonstrate compliance with the **Clinical Behavior Standards** in all aspects of the nursing program:
 - Appropriately dressed and groomed for the clinical setting
 - Punctuality / Attendance / Reports absence
 - Maintains patient's right to privacy
 - Maintains patient rights in providing direct patient care
 - Maintains confidentiality of the patient, facility, and health care professionals
 - Adequately prepares for learning experiences
 - Seeks out appropriate learning experiences
 - Participates in pre- and post-conference
 - Utilizes feedback for improvement for learning and growth
 - Participates actively in self-assessment for personal and professional development
 - With guidance, judges own level of competence and functions
 - within role boundaries and parameters of competency

- Demonstrates courtesy and respect when interacting with staff, peers, and others
- Reports errors and critical incidents through appropriate channels
- Provides an environment that maintains physiological and psychological safety of patient, family, self and others
- Demonstrates safe performance of technical skills
- Demonstrates integrity and honesty in all aspects of the program and clinical practice
- Practices in an efficient and cost-effective manner
- Organizes appropriate equipment, resources and supplies
- Completes care in a reasonable amount of time
- Utilizes other personnel as needed
- Utilizes available technology to facilitate care

G. Clinical/Lab/Simulation Attendance/Absence:

- 1. **All** clinical/lab/simulation attendance is **required**. Missing one (1) hour of campus labs is equal to missing one (1) hour of clinical.
- 2. If absent from <u>any</u> clinical/lab/simulation experience, the student is to notify their clinical instructor (and NURS-275 preceptor, INTR 250 nurse leader, if applicable) at least one-half (1/2) hour prior to the designated experience starting time. Examples of a missed clinical experience include:
 - Clinical shift
 - Required campus lab(s)
 - Simulation
- 3. If a student misses any time in a lab, clinical, or simulation in any given course, the student must submit a letter to the course team within 48 hours addressing how the student plans to meet all the clinical course objectives for the semester and include a plan to prevent additional absences. After reviewing the student's letter, the semester team will meet and discuss student progression. The student will receive written notification of the team's decision prior to the next scheduled clinical.

Potential outcomes can include but are not limited to: failure to progress, scheduled make-up clinical/lab/simulation hours (as space allows), placed on a clinical performance contract, and/or additional assignments.

Clinical Responsibilities for Supervising RN Students

Primary Nurse

- A. Retain responsibility for your assigned patients by providing ongoing assessment and supervision.
- B. Provide patient information to student to assist them in providing nursing care to assigned patient. (i.e., change in doctor's orders, MAR review and updates, updates in patient's status.)
- C. With the permission of the instructor and when your time permits, assist the student in performing technical skills. (i.e., IV starts, indwelling urinary catheter insertion, NG insertion, IM, subq injections.)
- D. Provide feedback to the instructor and student regarding student's performance.
- E. Reference Medication Policy for North Idaho College Associate's Degree Nursing Program in a spot identified by the clinical facility.
- F. Communicate with instructor/student concerning questions about student's clinical experience.
- G. Receive end of shift report and confirm adequacy of documentation.

Instructor

- A. Maintain overall responsibility of monitoring and evaluating nursing students in the clinical area.
- B. Instruct/monitor student in the provision of nursing care of patients including:
 - 1. Medication administration.
 - 2. Technical skills,
 - 3. Nursing care planning and documentation.
- C. Maintain ongoing communication with primary nurse regarding patient's care and performance of student.
- D. Follow current Medication Policy for North Idaho College Associate's Degree Nursing Program for first- and second-year students and post copy in medication room for reference.

Student

- A. Arrive promptly for pre-conference or unit report and be prepared to care for assigned patient/s.
- B. Administer medications according to current Medication Policy for North Idaho College Associate's Degree Nursing Program.
- C. Perform technical skills that have been learned under supervision of instructor, or designated nurse, if applicable.
- D. Participate actively in the provision of care for assigned patient/s according to placement in nursing program.
- E. Consult with primary nurse/instructor at the beginning of shift, maintain ongoing communication with primary about patient/s during your shift, and report off to primary at the completion of shift regarding status of patient/s.

| Document Title: North Idaho College | |
|--|------------------------------|
| Associate's Degree Nursing Program | |
| Classroom Standards | |
| Document Number: 6.07.00 | |
| Origination: Nursing Program Coordinator | Date: |
| Additional Publication(s): | Review/Revise Date(s): 8/00; |
| | 5/05; 4/14; 8/17; 1/19 |

Classroom Standards Policy and Procedure

Policy

Learning occurs best in a positive environment. Disruptions in the learning environment "prevent others from receiving an education, interfere with the instructor's ability to carry out instructional responsibilities, and create a negative" atmosphere (UC Santa Cruz, p. 1, 2009).

A. Standards

- 1. QSEN competencies include "Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care."
- 2. ANA Code of Ethics for Nurses includes Provision One: The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

B. Civil interactions

- 1. Civil interactions are polite, reasonable and respectful.
- 2. "To create and preserve a classroom atmosphere that optimizes teaching and learning, all participants share a responsibility in creating a civil and non-disruptive forum. Students are expected to conduct themselves at all times in this learning environment in a manner that does not disrupt teaching or learning" (UC Santa Cruz, p. 4, 2009).
 - a. The student is expected to be on time. The student should be in their seat and ready to begin class at the start of class. The student should stay in their seat and remain attentive until the class comes to a close, without packing up early.
 - b. Classroom participation is expected; to participate the student must attend class having prepared the materials for the day. Questions and comments must be relevant to the topic at hand.
 - c. The student is expected to raise their hand to be recognized.
 - d. Classroom discussion should be civilized, respectful and relevant to the topic being discussed. Classroom discussion is meant to allow participants to hear a variety of viewpoints.
 - e. Any discussion from class that continues on campus learning systems, social media, blog, etc... should adhere to these same rules and expectations. Recordings are for personal use only and may not be posted or shared. Permission from the instructor/speaker must be obtained prior to recording a lecture.
 - f. Electronic devices such as phones, tablets or notebooks must be turned off during class, unless permission has been granted by the presenter ahead of time.

C. Student Incivility: Student incivility is a continuum of seemingly benign annoying, rude and disruptive behaviors that may progress toward acts of violence. While these behaviors may seem benign they disrupt the learning environment and may invoke anxiety, anger, and self-doubt in classmates and faculty both. These behaviors can be classified on a scale of relative severity (UC Santa Cruz, 2009).

1. Disruption of the Learning Environment is not acceptable. Examples of disruptive behavior include, but are not limited to:

- a. Cheating
- b. Use of cell phones in class (calls, texts, email or internet use)
- c. Holding distracting side conversations
- d. Annoyances, making sarcastic remarks or gestures
- e. Dominating discussion
- f. Sleeping in class
- g. Inappropriate use of computer during class
- h. Demanding exceptions and favors
- i. Groaning
- j. Refusing to answer questions
- k. Inattentiveness
- 1. Lateness
- m. Acting bored
- n. Leaving class early
- o. Being unprepared for class
- p. Misuse of social media
- q. Children and guests are not allowed to attend class, lab or clinical

2. Aggression and Bullying will not be tolerated. This includes, but is not limited to:

- a. Harassment over grades
- b. Unfounded accusations of unfairness or discrimination
- c. Disparaging or demeaning remarks
- d. Aggressive challenging of the instructor
- e. Insubordination
- f. Intimidation
- g. Verbal abuse

3. Threats or any Acts of Violence have ZERO tolerance.

a. Real or potential bodily harm or death

Procedure

- **A. Prevention:** Faculty are responsible to (Williams & Lauerer, 2013):
 - 1. Model behaviors
 - 2. Maintain control of the classroom or clinical/lab setting
 - 3. Actively engage students
 - 4. Create a culture of respect and learning
 - 5. Engage students in discussion of common sense etiquette/professionalism

- **B.** Intervention: Faculty may utilize or implement:
 - 1. Verbal warnings
 - 2. Written warnings
 - 3. Counseling forms
 - 4. Student Health or individual counseling referrals
 - 5. Learning or Behavioral contracts

The following warning signs are indicative of potential problems and should be reported immediately (DalPezzo & Jett, 2010). Faculty and/or students can report to the North Idaho College Director of Student Development whenever they feel is appropriate, signs such as the following:

- A. Adverse reaction to criticism
- B. Use of intimidation or threats
- C. Bizarre thoughts and behavior
- D. Low tolerance of stress
- E. Apprehensiveness on the part of faculty or other students

References

DalPezzo, N.K. & Jett, K. T. (2010). Nursing faculty: A vulnerable population. *Journal of Nursing Education* 49(3), pp. 132-136.

Williams, S. C. & Lauerer, J. (2013). Implementing a nursing civility code: Implications for education. *Journal of Nursing Education* 52(3), pp. 165-170.

UC Santa Cruz. (2009). Classroom civility. *Teaching tips: Center for teaching & learning*. The Regents of the University of California: Santa Cruz, CA. Retrieved from: http://teaching.ucsc.edu/tips/tips-civility.html

| Document Title: North Idaho College Associate's Degree Nursing Program Community Service/ Professional Enhancement Experience | |
|---|---|
| Origination: Nursing Program Faculty Committee | Date: 8/04 |
| Additional Publication(s): | Review/Revise Date(s): 3/07; 9/09; 8/17; 1/18; 1/22 |

Community Service/Professional Enhancement Experience Policy and Procedure

POLICY

All NIC nursing students are strongly encouraged to participate in community service activities that promote the profession and/or enhance the health of the community. Each semester of the nursing program, as specified in the course syllabus, students will be encouraged to do one or more of the following:

- perform a minimum number of hours in a community service experience
- participate in a faculty/advisor approved nursing committee
- serve on a class committee to coordinate volunteer activities

Students choosing to participate in community service recognize that:

- NIC is not an agent of, and has no responsibility for, any third party to whom the student may provide services.
- Should the student participate in an activity that requires expertise or a license, they must notify the receiving entity that they are not representing NIC or NIC's Nursing Program, and that NIC is not responsible for any service or care provided.
- NIC provides guidance and facilitates program activities only as a component of the Community Service experience and accepts no responsibility, in whole or in part, for loss, damage or injury to persons or property occurring as part of a student service activity.
- Participating in a community service/professional enhancement experience requires
 the student to take responsibility for maintaining safety and recognizing the potential
 for risk or injury. It is their responsibility to know what personal equipment is
 required and provide the proper personal equipment for participation in the
 Community Service to ensure that it is in good and suitable condition.
- It is the expectation that NIC students will act in a responsible and professional manner and will abide by all rules and regulations that govern the site.

PROCEDURE

Each semester, the student will be encouraged to volunteer a minimum of six (6) hours in health approved activities. All six (6) volunteer hours must be completed, documented, and submitted one (1) week prior to the last class of the designated course for each level:

- Nursing Beginning Level Fundamentals of Nursing (NURS 201)
- Nursing Intermediate Level I Medical/Surgical I (NURS 250)
- Nursing Intermediate Level II Medical/Surgical II (NURS 260)
- Nursing Advanced Level Transition to Practice (NURS 270)

If the student has attained a course average of a minimum of 77.0%, successful completion of the volunteer requirement will result in a two (2) percentage point increase in the student's final course grade for the core lecture course for each semester, as listed above. (Example: A final grade of 86.0% would be increased to 88.0%).

- A. Each participating student will be required to get pre-approval from their nursing advisor for the community service activity prior to participating in the activity.
- B. It is the student's responsibility to secure the volunteer hours and maintain documentation of the experiences.
 - 1. The student will maintain a log of his/her hours of volunteer service and obtain a signature from the agency contact to verify completion.
 - 2. The student will follow the usual expectations for professional activities: be present, be appropriately dressed and groomed, be punctual for the committed activity, not accept monetary payment, and maintain privacy and confidentiality of the client and/or the facility/agency.
- C. With advisor approval, students will be allowed to bank up to two (2) hours of volunteer service for the subsequent semester once they have fulfilled their requirement for the current semester.
 - 1. Examples of appropriate volunteer activities include but are not limited to participating in the orientation of new nursing students, blood drives, food drives, health fairs, blood pressure screenings, diabetic screenings, North Idaho College Student Nurse Association (NIC-SNA) board member, active participation in an approved ISNA activity, flu shots, and sports physicals.
 - 2. In addition, the student may volunteer hours in health-related projects at schools, daycares, long-term care facilities, senior centers, or at other faculty/advisor approved agencies. Examples of appropriate NIC nursing committee participation include, but are not limited to, nursing class representative at team meetings, curriculum committee, program evaluation committee, or appeals committee.

| Document Title: North Idaho College | | |
|--|------------------------|--|
| Associate's and Practical Nursing Degree Nursing Program | | |
| Extended time English Second/Additional Language Policy | | |
| Document Number: 6.09.00 | | |
| Origination: Nursing | Date: | |
| Program Faculty | 03/23 | |
| Committee | | |
| Approval: Nursing Program | | |
| Faculty Committee | | |
| Additional Publication(s): | Review/Revise Date(s): | |
| | | |

Extended Time, English Second/Additional Language Policy

POLICY

Nursing students whom English as a second/additional language (ESL/EAL) have the opportunity to elect to participate in the extended time testing policy. This is a voluntary opportunity and is directed by the student.

Student will be allowed extended time with a decreased time as they progress through the nursing program(s).

For Associate Degree Nursing:

Nursing Beginning Level: 1.5 times testing for ExamSoft and ATI exams.

Intermediate Level 1: 1.25 times testing for ExamSoft, and 1.5 times testing for ATI.

Intermediate Level 2: Regular time.

Advanced Level: Regular time.

For Practical Nursing:

PN 110: 1.5 times testing

PN 111: 1.25 times testing for ExamSoft, and 1.5 times testing for ATI.

PN 112: Regular time testing

Extended time does not apply to written assignments, in-class activities, or skills check offs.

PROCEDURE

- 1. Student will reach out to lead-faculty, for their respective semester, to notify them of their interest in extended-time testing.
- 2. Lead faculty will notify full-time faculty and Senior Administrative Assistant.
- 3. Extended time will be applied to next exam as long as the student has given notice at least 48 hours prior to next exam. Notification less than 48 hours may not be implemented.
- 4. If student testing grades decrease from one semester to the next the student should meet with both a full-time faculty member and make an appointment with Disability Support Services.
- 5. Student will be directed to meet with Disability Support Services to obtain a Letter of Accommodation (LOA). If and LOA is obtained faculty will adhere to LOA. If LOA is not obtained student will follow the Nursing Departments Extended Time Policy for ESL/EAL.

Section VII: Graduation & Licensure

Requirements for Graduation

To graduate from the Associate's Degree Nursing Program at North Idaho College, qualifying to take the NCLEX-RN examination for licensure requires that the student:

- 1. Meet North Idaho College degree requirements.
- 2. Achieve a grade of C+ or better in INTR 250O, NURS 270, NURS 275 and NURS 245 or any co-requisite if required.
- 3. Submit an application form for graduation to the Registrar in accordance with timelines in the college catalog.
- 4. Submit a cap and gown request if planning to participate in commencement.

| Document Title: North Idaho College Associate's Degree Nursing Program NCLEX Predictor Exam Policy and Procedure | |
|--|------------------------------|
| Document Number: 7.01.00 | |
| Origination: Nursing Program | Date: 5/00 |
| Faculty Committee | |
| Additional Publication(s): | Review/Revise Date(s): 8/00; |
| | 5/04; 2/08; 11/08; 11/12; |
| | 1/13; 5/13; 7/14; 8/17 |

NCLEX Predictor Exam Policy and Procedure

Policy: To meet graduation requirements for the Associate's Degree Nursing Program, students must complete an NCLEX Predictor Exam achieving a score designated by the nursing faculty, or until they have tested for a total of three (3) times.

Procedure:

- 1. The NCLEX Predictor Exam will be administered to students enrolled in NURS 270, Transition to Practice.
- 2. Students must test at the assigned time. A signed Confidentiality Statement will be required for admission to the test.
- 3. Students whose score reflects less than a 98% probability of passing the NCLEX Licensing Exam must retest.
- 4. Students will be given three (3) opportunities to take the NCLEX Predictor to achieve the required score. Students are required to retake the exam unless their previous attempt met the required score.
 - If a student does not achieve the required score on the first testing, the student will be allowed to retest twice, for a total of three (3) times.
- 5. The first retake will be scheduled no sooner than one (1) week after the initial testing.

Guidelines for Pinning Ceremony:

- **A.** All phases of the planning process will be done in conjunction with the faculty advisor(s) for pinning and will be discussed with the Director of Nursing.
- **B.** Students that would like an NIC nursing school pin must place an order through the designated vendor.
- **C.** The Nursing Division will provide financial assistance to help pay for the expenses directly involved with the ceremony.
- **D.** The ceremony is traditionally held during finals week of each semester.
- **E.** The electronic invitations and printed program for the ceremony will be created by the Sr. Administrative Assistant of the Nursing Division. This is an NIC sanctioned event and shall maintain the professional standards of the College.

F. Faculty responsibilities:

- 1. Designate place, date and time of pinning ceremony.
- 2. Review the student's suggestions for speakers. Make additions or deletions to the list. (Keynote speaker should not be a current faculty member.) Students will select a speaker from this list.
- 3. Approve the music and slide shows to be played prior to the beginning or during of ceremony and the recessional music.
- 4. Faculty will rotate pinning the students, reading students' names as they are pinned and presenting roses.

G. Student responsibilities:

- 1. Students will make suggestions for keynote speakers and present to the faculty. Students will select a speaker from the final list provided by the faculty.
- 2. Select the music to be played prior to the beginning of the ceremony and the recessional music (which must be approved by the faculty).
- 3. Develop a slide show to be viewed as guests are being seated prior to the ceremony. Students will choose music to accompany the slide show. (which must be approved by the faculty)
- 4. Develop a slide show to be viewed as students are being pinned. Each student may submit three (3) pictures for inclusion in the slide show.
- 5. Obtain student acknowledgements for inclusion of the program.

6. Determine if there will be a "Student Presentation" included in the ceremony. This can be a student message, a special reading, a special song, etc. (Must be approved by the faculty).

H. Associate Dean of Health Professions and Nursing/Director of Nursing responsibilities:

- 1. The Director will MC the ceremony.
- 2. All phases of the planning will be discussed with the Director of Nursing.

Spirit of Nursing Award

The criteria for the "Spirit of Nursing award" is as follows, The student will encompass the guiding principles of respect, integrity, professionalism, caring, excellence, and cultural competence, which is evident in all personal and professional behaviors. The graduate will have consistently demonstrated caring, and compassion for humankind in all his/her relationships and associations. Individual will demonstrate dedication, excellence and passion for the profession of nursing.

- 1. Each Advanced level student will have the opportunity to nominate one classmate for the Spirit of Nursing award.
- 2. The Advanced level faculty will tally the nominations.
- 3. The students receiving the highest number of nominations will be brought to the ADN faculty for their review and approval.
- 4. The ADN faculty will also have the opportunity to nominate students. The faculty nominations will then be added to the final ballot.
- 5. Faculty and students will vote for the individual that they feel most deserving to receive the Spirit of Nursing honor.
- 6. The student receiving the highest number of votes will receive the honor. In the event of a tie, both students will receive the award.
- 7. The recipient will be announced at the Pinning Ceremony.

Leadership Award

The criteria for the "Nursing Student Leadership award" is as follows: The student will exemplify leadership within the classroom and student organizations, exemplifies outstanding service and leadership to their fellow students and to the community. The student will have shown a commitment to excellence, and a willingness to inspire others towards greatness.

- 1. The ADN faculty will have the opportunity to nominate one student from the graduating class for the Leadership award.
- 2. The Advanced level faculty will tally the nominations.
- 3. Faculty will vote for the individual that they feel most deserving to receive the Leadership award.
- 4. The student receiving the highest number of votes will receive the honor. In the event of a tie, both students will receive the award.
- 5. The recipient will be announced at the Pinning Ceremony.

Academic Achievement Selection

- 1. The student receiving the highest cumulative grade point average in all the courses needed for the ADN degree, which include the core nursing classes.
- 2. In the event of a tie, both students will receive the award.
- 3. The recipient will be announced at the Pinning Ceremony.

Licensure

A. Dates:

Upon completion of the requirements for Associate's Degree in Nursing, the student may apply for the RN (NCLEX-RN) examination. When the application has been completed and the student determined to be eligible to take the examination, the applicant will be notified by mail of the process for scheduling the testing date.

B. Test Locations for Licensure Examination:

Applicants can take NCLEX-RN at any site, regardless of the state where they have applied for license.

The student will contact the testing site to make an appointment for administering of the test.

C. Prior to Test Date:

- 1. Applications for Idaho licensure are provided by the Idaho Board of Nursing and are available online. For other states, applicants need to contact the Board of Nursing of that state to obtain an application.
- 2. Instructions for completing applications are included with the application. **Note** the instructions for coding. The codes for RN's and LPN's are different and both are given on the same form.
- 3. Affidavits of Graduation will be signed by the Director of Nursing, notarized and forwarded to the appropriate State Board of Nursing. If a student is seeking initial license in a state other than Idaho, the student is responsible to provide the Director of Nursing with the required affidavit for that state.
- 4. Students are responsible for requesting that their official transcript(s) be sent to the appropriate State Board of Nursing by the Office of the Registrar. If a student is applying for initial licensure in another state other than Idaho, the student will not be provided authorization to test until that State Board has received the official transcripts verifying graduation from the nursing program.
- 5. A Temporary License request may be included with the application for Idaho licensure. Anyone who plans employment in Idaho prior to taking their NCLEX may request a temporary license. The temporary license is valid for 90 days, or until the student takes the NCLEX. The temporary license cannot be renewed.
- 6. It is highly recommended to take the Licensure Examination as soon as possible after graduation.
- D. A presentation regarding the Idaho State Board of Nursing will be given to each graduating class.
- E. If the graduate plans to work in a state other than the one in which they obtained their initial license, they need to apply for licensure by endorsement from that state.

Denial of License

A. Idaho Code for Application for License (RN and LPN):

Legal Authorization, Section 54-1413 Idaho Code:

"The Board shall have the power to refuse to issue, renew or reinstate a license issued pursuant to this chapter, and may revoke, suspend, place on probation, reprimand, limit, restrict, condition or take other disciplinary action against the licensee as it deems proper..."

B. Grounds for Denial of License:

1. Failure to Meet Requirement

Failure to meet any requirement or standard established by law or by rules and regulations adopted by the Board

2. Failure to Pass Examination

Failure to pass the licensing examination, and/or

3. False Representation

False representation of facts on application for licensure, and/or

4. Having another Person Appear for Examination

Having another person appear in his/her place for the licensing examination, and/or

5. Course of Conduct

A course of conduct which would be grounds for discipline regarding the Board rules and regulations, and/or

6. Disciplinary Action in Any Jurisdiction

Being subject to any proceeding and/or order in any jurisdiction, and/or

7. Conviction of a Felony or any offense involving moral turpitude.

For additional information, please contact the Idaho State Board of Nursing.