# Dodge City Community College Area Technical Center

# Department of Nurse Education

# Student Handbook

Fall 2023 - Spring/Summer 2024



Handbook reviewed and revised by the DNE Policy and Procedure Committee May 19, 2023

Reviewed by legal counsel May 2023

Approved by the DCCC Board of Trustees June 27, 2023

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#### DCCC Academic Calendar 2023-2024

The current DCCC 2023-2024 Academic Calendar can be found on the College website at https://dc3.edu/events/calendar/.

#### Department of Nurse Education Calendar Events

The DNE has the following meetings, which will be announced and posted. All students are welcome to attend Allied Health Department meetings. Student representatives from each level will be appointed to represent students in their level for all DNE meetings listed here. Student representatives are *highly encouraged* to participate in their respective meetings.

- Student Nurse Association meetings
- Nursing and Allied Health Department meetings
- DNE Curriculum meetings
- DNE Policy & Procedure meetings

# **DCCC Notice of Non-Discrimination**

Dodge City Community College does not\_discriminate on the basis of sex, race, color, national origin, disability, age, religion, marital status, veteran's status, sexual orientation, or other factors that cannot be lawfully considered in its programs and activities as required by all applicable laws and regulations. The following offices have been designated to handle inquiries regarding the non-discrimination policies:

- Vice President of Student Affairs and Risk Management/Co-Title IX Coordinator
  - 2501 N. 14<sup>th</sup> Ave, Dodge City, KS 67801
  - o 620-227-9204
  - o jkinzer@dc3.edu
- Vice President of Academic Affairs/Co-Title IX Coordinator
  - o 2501 N. 14th Ave, Dodge City, KS 67801
  - o 620-227-9359
  - o jholwerda@dc3.edu
- Assistant Vice President of Administration and Human Resources/Co-Title IX Coordinator
  - 2501 N. 14<sup>th</sup> Ave, Dodge City, KS 67801
  - 0 620-227-9201
  - o kohlschwager@dc3.edu

# **DCCC Addresses: Main Campus & Department of Nurse Education**

# **Dodge City Community College Main Campus**

• Physical and Mailing Address

o 2501 N. 14<sup>th</sup> Ave., Dodge City, KS 67801

Main Phone Number: 620-225-1321

#### Floris Jean Hampton Nurse Education Center

Physical Address

o 308 W. Frontview Rd., Dodge City, KS 67801

Mailing Address

o 2501 N. 14<sup>th</sup> Ave., Dodge City, KS 67801

Main Phone Number: 620-471-4110

# **Nursing Program Accreditation & Approval Information**

The Associate Degree nursing program at Dodge City Community College at the Floris Jean Hampton Nurse Education Center, located in Dodge City, Kansas, is accredited by the:

Accreditation Commission for Education in Nursing (ACEN) 3390 Peachtree Road NE, Suite 1400 Atlanta, GA 30326 (404) 975-5000

The most recent accreditation decision made by the ACEN Board of Commissioners for the Associate Degree nursing program is Continuing Accreditation.

Kansas State Board of Nursing Landon State Office Building 900 SW Jackson Street Suite 1051 Topeka, Kansas 66612-1230 (785) 296-4929

The most recent approval decision made by the Kansas State Board of Nursing for the Associate Degree nursing program is Continuing Approval.

# **Department of Nurse Education Faculty and Staff**

# 2023-2024

Dean of Nursing and Allied Health		
Dr. Mechele Hailey, DNP, RNC-OB, CNE	mhailey@dc3.edu	620-471-4111
Full Time Faculty		
<u>Name</u>	<u>Email</u>	<u>Extension</u>
Nikki Debnam, BSN, RN	ndebnam@dc3.edu	620-471-4113
Sunshine Hicks, MSN/Ed, RN	shicks@dc3.edu	620-471-4115
Jennifer Lix, MSN/Ed, RN-BC	jlix@dc3.edu	620-471-4112
Tracy Reynolds, MSN/Ed, RN	treynolds@dc3.edu	620-471-4117
Ginger Rupp, MSN, RN	grupp@dc3.edu	620-471-4116
Part Time	Faculty	
Mary Benjamin, MSN, RN	mbenjamin@dc3.edu	Clinical Instructor
		Clinical Instructor
Amanda Mellott, BSN, RN	amellott@dc3.edu	Clinical Instructor
Terah Ramsey, MSN, RN	tramsey@dc3.edu	Clinical Instructor
Building	Staff	
Christy May ADN, RN- Skills Lab Coordinator	cmay@dc3.edu	620-471-4120
VACANT -Administrative Assistant		620-471-4110
Doriane Stimpert, BSN, RN- Nursing Success Center Coordinator	dstimpert@dc3.edu	620-471-4119

# **Health Services Information**

# **MEDICAL ASSISTANCE:**

C & S Medical Clinic 2200 Summerlon Circle 620-408-9700

Dodge City Medical Center 2020 Center Ave 620-227-1371

Family Care Clinic of Southwest Kansas 200 Ross Blvd 620-371-7300

Family Practice Associates 120 Ross Blvd 620-225-1650

Ford County Health Department 507 Ave L 620-227-4545

Medical Heights Medical Center 100 W Ross Blvd 620-227-3141

Urgent Care Clinic 2205 Central Ave 620-227-7323

Xpress Wellness Urgent Care 1513 W. Wyatt Earp 620-682-8304

Centura- St. Catherine Hospital at Dodge City 3001 Avenue A 620-225-8400

### **MENTAL HEALTH ASSISTANCE:**

Compass Behavioral Health 506 Avenue L 620-227-8566 http://compassbh.org/

DCCC Counselor 2501 N 14<sup>th</sup> DCCC Student Union 620-227-9372

Crisis Center of Dodge City 605 Central Ave 620-225-6987 http://crisiscenterdccom.doodlekit.com/home/family first center

#### **PHARMACY:**

Dillon's Pharmacy 1700 N 14<sup>TH</sup> 620-225-0872

Dodge City Medical Center 2020 Central 620-227-1371

Gibson's Pharmacy 2610 Central 620-227-8193

Walgreens Pharmacy 1800 N 14<sup>th</sup> 620-225-2443

Walmart Pharmacy 1905 N 14th 620-225-3477

# Department of Nurse Education Philosophy and Mission

#### **Department of Nurse Education Philosophy**

The Nursing Faculty believes nursing is a calling to a profession, encompassing the art and science of nursing, education and environment. The basis of nursing is providing care for humans wherever they may be in the healthcare continuum. The process of nursing is guided by scientific principle. Humanity is continuously affected by local and global environmental factors.

#### **Environment**

Physical and political environments influence the health care delivery system for clients. The Nursing Faculty believes in providing care in a safe environment taking into account internal, external, political and global forces that impact health. The Nursing Faculty believes that competent nurses are essential to the workforce environment in providing safe and effective care to individual clients and their families.

#### Humanity

The Nursing Faculty believes that each client is a complex being with physical, mental, social, spiritual and cultural needs. The client may be in individual, a family, the diverse local or global community. The inherent dignity of the client includes the right to have basic needs met throughout the lifespan with compassion, integrity, loyalty, and collaborative care.

#### Nursing

The Nursing Faculty believes that nursing is a profession that advocates the commitment of maintaining an individual's dignity in a caring and confident Manner. Effective communication skills are necessary to determine the client's diverse needs and desires as well as their perception of health. Empathy is essential in understanding the client's idea of wellness. The nursing process promotes the primary role of the client family in maintaining a state of health and/or illness prevention and restoration. Competent professionalism encompasses safe, legal and ethical nursing practice and includes the ability to utilize critical thinking at all times.

#### **Education**

The Nursing Faculty believes that education is an ongoing means of gaining knowledge, skills and attitudes, which encourages continual learning on either a formal or informal basis throughout the lifespan. We believe that education is a lifelong dynamic process, progressing from basic to complex knowledge. The Nursing Faculty is committed to the concept of educational excellence mobility and preparation for self-enrichment and successful employment within the community and/or transfer to other colleges and universities.

#### Health

The Nursing Faculty recognizes the importance of meeting the client's perception of health. Health is more than the absence of disease as the quality of life can be defined by the impact disease places on the client. Nurses must be aware of their personal feelings and not interject their own personal perspective of health.

#### **Department of Nurse Education Mission**

The mission of the Dodge City Community College Department of Nurse Education is to graduate caring, competent and professional nurses and provide a student-centered learning environment where students can achieve their educational, personal, and career goals. This mission is consistent with the stated philosophy of the Dodge City Community College found at https://dc3.edu/about/mission-values/.

#### The Program seeks to:

- Meet community health care needs. (Promotion of human flourishing)
- Provide a positive educational experience. (Stimulate a spirit of inquiry within students)
- Graduate competent nurses. (Nurture development of nursing judgment and professional identity)

# Kansas Board of Regents & Kansas State Board of Nursing Program Outcomes

Kansas Board of Regents (KBOR) and Kansas State Board of Nursing (KSBN) Associate Degree Nursing Program Alignment and Associate Degree Nurse Program Competencies/Terminal Outcomes (Graduate Characteristics)

KSBN and KBOR approved June 2022 <a href="https://www.kansasregents.org/workforce">https://www.kansasregents.org/workforce</a> development/program-alignment/associate degree nurse

Alignment Map: https://www.kansasregents.org/resources/PDF/Program Alignment/ADN Alignment Map 2022.pdf

#### **Program Outcomes**

- 1. Integrate caring behaviors in practicing the art and science of nursing within a diverse population.
- 2. Implement professional standards and scope of practice within legal, ethical, and regulatory frameworks.
- 3. Collaborate with clients and members of the Interprofessional health care team to optimize client outcomes.
- 4. Formulate safe and effective clinical judgments guided by the nursing process, clinical reasoning, and evidence-based practice.
- 5. Provide leadership in the management of care to meet client needs using available resources and current technology.
- 6. Generate teaching and learning processes to promote and maintain health and reduce risks for a global population.
- 7. Demonstrate effective communication methods to manage client needs and to interact with other health care team members.

#### Academic Honesty Policies

#### DCCC Acts of Dishonesty Policy (DCCC Student Handbook)

Prohibited acts of dishonesty include but are not limited to the following:

- Cheating, plagiarism, or other forms of academic dishonesty. Such acts of academic dishonesty are covered by a separate Academic Integrity Policy available in the college catalog or by contacting the Office of the VP of Academics/Chief Academic Officer. Such academic punishment shall not preclude other disciplinary action.
- Furnishing false information to any Dodge City Community College official, faculty member, or office.
- Forgery, alteration, or misuse of any Dodge City Community College document, record or instrument of identification.
- Tampering or interfering with the election of any Dodge City Community College recognized student organization.

# **Department of Nurse Education Academic Honesty**

The Department of Nurse Education will adhere to the Acts of Dishonesty Policy stated in the current College Catalog and DCCC calendar/handbook/planner and listed above. The Department of Nurse Education further defines the following academic honesty parameters:

#### Plagiarism

• The "using or sharing" without approval or acknowledgment of another's work. This includes, but is not limited to, written, artistic, musical, computer, ideas, language, or symbols. Course work must be original or appropriate credit granted to the original source.

#### Cheating

• The actual or attempted use of academic work, materials, information, computer programs or study aids not permitted by the instructor of the course. This includes but is not limited to, course work, campus and laboratory activities, or examination settings. The instructor for the individual course, the Dean of Nursing & Allied Health, and the Vice President of Workforce Development will define cheating. Unless expressly permitted by the instructor, the College considers using books/notes when explicitly instructed not to use books/ notes, calculators, copying from another, or the conversing with class members during an exam, to be cheating. Contracting with others (including websites, apps, or the use of Artificial Intelligence technology) to do research, write papers, create computer programs, or write examinations, is also considered cheating. To traffic (help) in examinations, computer work, writing, and other course work requirements is also considered academic dishonesty.

#### Falsification of Records

 The forgery or alteration of any document pertaining to academic records is considered academic dishonesty.

If a problem arises and is not resolved between an instructor and student, the student in violation may be administratively suspended from class and/or given a failing grade in the course. The student so affected shall have the right of appeal through the grievance process.

In the event of forgery or alteration of documents, the student may appeal through the Dean of Innovation and Workforce Development. Falsification of records may result in suspension from college. Other disciplinary action may be imposed in accordance with regulation found in the college catalog.

Good faith allegations of academic dishonesty made by student(s) regarding other student(s) (i.e., plagiarism, cheating, falsification of records, etc.) should be presented to the instructor and/or Dean in a prompt and professional manner. Students should refrain from making "in-passing" accusatory statements to other students, to instructors, to the Dean, or via social media posting regarding other students without intent to provide valid information, which can be interpreted as libel/slander.

# **Accommodations**

Dodge City Community College is dedicated to the belief that students with disabilities should have equal opportunity to develop and extend their skills and knowledge. We strive to maintain a least-restrictive environment and provide appropriate support services necessary to ensure access to our educational programs. We encourage you to communicate your needs and utilize available resources.

NOTE: For more information regarding accommodations for NCLEX licensure examinations please see the Dean of Nursing and Allied Health.

Policies and Procedures for Granting Accommodations for Students with Disabilities (from the DCCC Student Handbook).

#### General

DC3 is not required to provide you with a free appropriate public education (FAPE) as is required of elementary and secondary schools. DC3 is required to provide you with appropriate academic adjustments as necessary to ensure that it does not discriminate against you on the basis of a disability. DC3 is an open admissions postsecondary institution that may not deny you admission based solely on a disability.

#### **Academic Adjustments**

You are not required to identify yourself as having a disability unless you intend to request an appropriate academic adjustment based on a disability. Services are dependent on the student's needs and may include assistive technology, sign language interpreters, readers, test accommodations and preferential seating. As a resource, we also encourage the use of the Student Achievement and Resources Center (SARC) for study skills and time management strategies as well as tutoring services. **DC3** is not required to lower or make substantial modifications to essential academic requirements that would diminish the rigor of your program of study.

#### **How to Receive Accommodations**

- Prior to enrolling in classes at DC3, contact the Counselor. The Counselor is the person designated by the college to review requests for services and accommodations related to disabilities and to engage in an interactive dialog with students to determine eligibility. You will need to request accommodations in writing before the beginning of each semester. You may call 620-227-9232 or stop by the Student Union main level floor and ask for the Counselor.
- 2. Provide documentation (psychological, educational, or medical evaluations). You may submit the documentation in person or mail to:
  - a. Dodge City Community College, Attn: Counselor, 2501 N. 14th Ave., Dodge City, KS 67801
- 3. Once your written request for accommodations plus your documentation is received, the Counselor will review your request and documents to determine eligibility. If it is determined you are eligible for accommodations you will have an interactive interview with the counselor to determine appropriate access needs. Once the accessibility needs are determined, you will be provided a letter of notification regarding accommodations that have been granted. If it is determined that based on the written request and documentation you are not eligible for accommodations, the Counselor will engage in an interactive dialog with you to determine if you can submit additional information that may meet eligibility requirements. If, after engaging in this interactive process, the final review indicates you are not eligible for accommodations, the Counselor will explain the reason(s) you are not eligible for accommodations.
- 4. If you are granted accommodations, it is your responsibility to provide a copy of your granted accommodations to each of your instructors. Please do this prior to attending your scheduled classes or at the first class time.
- 5. It is the responsibility of the student to arrange a meeting with each of his/her instructors to give him/her the accommodations letter and to discuss accommodations specific to the course. We recommend that you meet with instructors during office hours or after class as before and during class are not typically times when a teach can give full attention to the matter.
- 6. The Counselors have forms that may assist you in writing your request for accommodations, as well as assistance in meeting with your instructors. These forms are for your convenience only and do not include all possible accommodations.

- 7. If you feel you have been denied accommodations unfairly, you may direct your complaint or grievance to the Sec. 504/ADA Coordinator. Please make the complaint in writing and mail or deliver in person to:
  - a. Dodge City Community College, Attn: 504 Coordinator, Student Services, 2501 N. 14<sup>th</sup> Ave., Dodge City, KS 67801

In accordance with the requirement of Section 504 of the Rehabilitation Act of 1973 and Title I and II of the Americans with Disabilities Act of 1990 (ADA), DC3 will not discriminate against qualified individuals with disabilities on basis of disability in its services, programs, or activities.

# Admission Policies for Department of Nurse Education

Admission/re-admission will be declined to any applicant with two previously recorded unsuccessful attempts to complete a program of nursing at DCCC or elsewhere.

#### **Oral and Written English Proficiency Policy**

Each student applying to the nursing programs that does not speak English as their primary language must complete Combined English Language Skills Assessment or CELSA. Students must score at a High Advance level. Students scoring less than the High Advance level are recommended for remediation through the DCCC ESL program before admittance into the Department of Nursing Education can be determined.

#### **Generic Admission Policy**

Nursing students are admitted to the college according to the policies of the Dodge City Community College. Acceptance to the college does not automatically ensure admission to the Associate Degree Nursing Program. Acceptance to the Department of Nurse Education (DNE) program is a separate and competitive process.

Applicants to the program must meet all admission criteria for DCCC. <u>Application or readmission will be declined</u> to any applicant with two previously recorded unsuccessful attempts to complete a program of nursing at <u>DCCC or elsewhere.</u>

The DNE reviews all COMPLETED applications. Applicants are accepted, waitlisted or declined based upon total point compilations. Points are awarded for grade point average above 2.75, comprehensive entrance examinations scores above 62% within the last one-year, letters of reference, and the interview process. The application deadline for fall semester entry is April 1<sup>st</sup> of the application year. The deadline may be extended for certain circumstances including, but not limited to, empty spots not filled or national emergencies that delay enrollment. If the student is currently in a class, the mid-term grade must be presented to the nursing department to have mid-term grades counted toward admission consideration. If application period is extended, completed applications are considered until class capacity is full or June 1.

#### Requirements for Generic Admission

- 1. Completed Department of Nurse Education Application form
- 2. Current cumulative grade point average of 2.75 or better in required pre-requisite classes
- 3. Test of Essential Academic Skills (TEAS), the composite entrance test, score of 62% or higher <u>prior</u> to the application deadline. Approval to take the TEAS should be obtained by the Nursing Success Coordinator (pre-nursing advisor). The examination may be taken an unlimited amount of times, allowing 30 days between each attempt for study and preparation, before the deadline to attempt a passing or better score for consideration.
- 4. Current Certified Nurse Aide (CNA) licensure/certification
- 5. Complete all pre-requisite (see Program of Study) with at least a C and cumulative pre-requisite GPA of 2.75. Science requirements (microbiology, anatomy and physiology I and II) must be current *within the last 7 years*.
- 6. Submit three (3) letters of recommendation. Forms will be provided by the Department of Nurse Education. The letters must be from a personal, professional and an educational (college level professor) person. To gain the maximum number of points possible for the letters, the person writing the letter must have been in contact with you (personally, professionally and educationally) within the last two years prior to application.
- 7. Complete an interview with the DCCC Department of Nurse Education

#### **Procedures for Generic Admission**

- 1. If not a current student, apply for admission to Dodge City Community College.
- 2. Arrange testing appointment with DCCC Testing Center, *AFTER* obtaining permission to test from the Nursing Success Coordinator. Online resources for the TEAS may be found through the NSC Coordinator.
- 3. Provide official transcripts of ALL colleges attended to Dodge City Community College Records department.
- 4. Application to the Department of Nurse Education may be made online at <a href="https://web.dc3.edu/ICS/Nursing">https://web.dc3.edu/ICS/Nursing</a> with a secure login and password. <a href="https://web.dc3.edu/ICS/Nursing">Must have prior approval from Nursing Success Center Coordinator 620-471-4119 to ensure all requirements have been met.</a>
- 5. Provide copy of TEAS scores to the Department of Nurse Education\*
- 6. Provide proof of Certified Nurse Aide licensure to the Department of Nurse Education.

- 7. Provide 3 letters of recommendation to the DNE. These letters should be from a personal, professional and educational acquaintance. The letters should be mailed or emailed **by the person writing the letter** and must be received prior to April 1. Letters should be sent to:
  - a. Floris Jean Hampton Nurse Education Center, c/o Dodge City Community College; 2501 N. 14<sup>th</sup> Avenue; Dodge City, KS 67801
- 8. Applicants will complete an interview process in the spring semester, prior to April 15. The DNE will contact/notify the applicant to schedule the interview.
- \* The Department of Nurse Education will accept an unlimited number of TEAS score attempts prior to application deadline. This examination must be taken within a year of program application.

# **Non-Generic Admission Policy**

Nursing Students are admitted to the college according to the policies of the Dodge City Community College. Acceptance to the college does not automatically ensure admission to the Associate Degree Nursing program. Acceptance to the program is a separate and competitive process.

Applicants who are currently licensed as a Practical Nurse and have completed one year or more of nursing practice are eligible to apply to the final two semesters of the Associate of Applied Science in Nursing program as class capacity allows. Exceptions into the program may be granted by the Dean of Nursing and Allied Health or designated administrator and will be considered on a case-by-case basis.

#### Requirements

- 1. Completed Department of Nurse Education Application form
- 2. Copies of all college transcripts
- 3. Grade point average of 2.75 or higher in previous nursing program courses
- 4. Completed all pre-requisites for general education courses with a grade of at least a "C" or higher and cumulative pre-requisite GPA of 2.75.
- 5. Evidence of current, unencumbered Practical Nursing License
- 6. Evidence of one or more years of current clinical nursing practice within two years of application
- 7. Complete an LPN to RN transitions course.
- 8. Submit three (3) letters of recommendation. The letters must be from a personal, professional and an educational (college level professor) person. To gain the maximum number of points possible for the letters, the person writing the letter must have been in contact with you (personally, professionally and educationally) within the last two years prior to application.
- 9. Complete an interview with the DCCC Department of Nurse Education.

#### **Procedures**

- 1. Apply for admission to Dodge City Community College.
- 2. Provide official transcripts of ALL colleges attended to Dodge City Community College Records department.
- 3. Arrange testing appointment with the DCCC Testing Center to take entrance examination, contact (620) 227-9357. Must be completed with passing score prior to application to the Nursing program.
- Application to the Department of Nurse Education may be made online at https://web.dc3.edu/ICS/Nursing with a secure login and password. <u>Must have prior approval from the Nursing Success Center</u>
  Coordinator to ensure all requirements are met.
- 5. Provide proof of current, unencumbered Practical Nursing license
- 6. Provide proof of 1 year of nursing practice or 1000 hours or more documented clinical nursing practice. The requirement will be for the higher of the two. For example: if a prospective student has been working for one year as an LPN but has not accumulated 1000 hours of LPN practice, the requirement is not met.
- 7. Provide 3 letters of recommendation to the DNE. These letters should be from a personal, professional and educational acquaintance. The letters should be mailed or emailed **by the person writing the letter** and must be received prior to April 1. Letters should be sent to:
  - a. Floris Jean Hampton Nurse Education Center, c/o Dodge City Community College; 2501 N. 14<sup>th</sup> Avenue; Dodge City, KS 67801

8. Applicants will complete an interview process in the spring semester. The DNE will contact/notify the applicant to schedule the interview.

All non-generic students are required to enroll in the Nursing Transition course (NR 200) or equivalent course if not completing course at DCCC. At DCCC, the transitions course is offered in the summer. The course must be completed prior to or during the first semester of enrollment in nursing core courses with a grade of 78% "C" or better.

Generic program students (students currently enrolled in the DCCC program and in good standing) who have: successfully completed the first two semesters of the Associate of Applied Science in nursing program, met the terms for program progression, will be given continued admission priority.

Applicants to the program must meet all admission criteria for DCCC Admission/re-admission will be declined to any applicant with two previously recorded unsuccessful attempts to complete a program of nursing at DCCC or elsewhere.

	PRE-REQUISITE COURSES	
Course Number	Course Name	Credits
PSY 101	General Psychology	3
ENG 102	English Composition I	3
SP 106	Principles of Speech	3
MATH 101	Madara Callaga Math	3
(or above)	Modern College Math	3
PSY 102	Human Growth and Development	
<mark>OR</mark>	OR	3
PSY 202	Developmental Psychology	
ZOO 201	Human Anatomy and Physiology I*	4
ZOO 202	Human Anatomy and Physiology II*	4
BIO 210	Microbiology*	5
	TOTAL GENERAL EDUCATION CREDITS	28
	LPN TO RN PLAN NURSING COURSES	
Course Number	Course Name	Credits
	to total 20 hours for LPN from LPN program. Must also have LPN lie	
		cense.
SUMMER SEMES		
NR 200	LPN to RN Transitions	cense.
NR 200 FALL SEMESTER	LPN to RN Transitions (EAR 2	
NR 200 FALL SEMESTER \ NR 208	LPN to RN Transitions /EAR 2 Nursing Care of the Adult I	1 4
NR 200 FALL SEMESTER	LPN to RN Transitions (EAR 2	1
NR 200 FALL SEMESTER \ NR 208	LPN to RN Transitions  /EAR 2  Nursing Care of the Adult I  Maternal Child Nursing	1 4
NR 200 FALL SEMESTER Y NR 208 NR 210	LPN to RN Transitions  /EAR 2  Nursing Care of the Adult I  Maternal Child Nursing	1 4
NR 200 FALL SEMESTER Y NR 208 NR 210 SPRING SEMESTE	LPN to RN Transitions  (FEAR 2  Nursing Care of the Adult I  Maternal Child Nursing  ER YEAR 2  Mental Health Nursing  The Nursing Environment	1 4 6
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#### Transfer/Advanced Standing/Articulation Applicant Admission

Applicants with credit(s) or of advanced standing from another nursing education program may apply for transfer and/or articulation credit. The request must be addressed to the Department of Nurse Education at Dodge City Community College. Dodge City Community College Department of Nurse Education recognizes the Kansas Statewide Nursing Articulation Plan as the mechanism through which state schools of nursing education cooperate to facilitate educational progress of students and graduates from one program to another. Admission/re-admission will be declined to any applicant with two previously recorded unsuccessful attempts to complete a program of nursing at DCCC or elsewhere.

- 1. The applicant must meet the program admission requirements identified in the generic Admission Policy. See the current version of the admission policy.
- 2. Applicants must be students or graduates of a Kansas program.
- 3. Credit may be given for no more than fifteen (15) credit hours (first semester) for transfer applicants.
- 4. Advanced Standing applicants must validate previous nursing education through current Practical Nurse licensure and/or reference from previous school Administrator and/or provision of a work portfolio supporting evidence of a minimum of one year of clinical practice.
- 5. Applications of out of state graduates applying for Advanced Standing admission will be evaluated individually by DCCC Dean of Nursing & Allied Health and the DCCC Registrar.
- 6. Previous nursing courses must be completed within two years before application to the DCCC Nursing Program to be considered for transfer credit.

#### **Readmission / Exception Policy**

Students who have withdrawn from the DCCC Associate of Applied Science in Nursing program or have not met nursing course competencies with a grade of "C" or higher may apply one time for re-admission to the program. The following guidelines will be utilized for students who are seeking readmission into the program after a previous suspension. As space is available, readmission applicants may be accepted. **Application for re-admission will be declined to any student who has experienced two previously unsuccessful attempts, regardless of reason, to complete the DCCC nursing program or any other nursing program.** 

- 1. Apply for re-admission within two (2) years of exit from the program.
- 2. If applicable, retake general education courses until a 2.75 grade point average in each course is attained.
- 3. Complete the Re-admission application.
- 4. Submit a formal written request for readmission. The request should identify the following:
  - the reason for the previous suspension,
  - what action has been taken to remediate and prepare for re-entry during the absence,
  - what action(s) will be taken to ensure successful completion on the second attempt.
- 5. Schedule an appointment with the Dean of Nursing and Allied Health to discuss your re-application.
- Attend Allied Health Faculty and Staff Meeting executive session for interview. This interview will consist of
  discussion with AH Faculty and Staff regarding your request for readmission, reason for previous suspension,
  remediation actions and plan for success. Any additional admission requirements could be discussed at that
  time.
- 7. For the safety of our patients, students may be required to practice and/or revalidate skills as a condition of readmission.

#### NOTE: Background checks must be conducted upon readmission.

If exception/readmission is granted, the student will be admitted under probationary status and a formal contracted plan for success will be developed. The plan will include remediation activities pertinent to the reason for previous suspension in addition to activities identified by the student and the Dean, AH Faculty and Staff Group, and/or Nursing Success Coordinator to enhance the potential for successful completion of the program. The terms of the plan must be evaluated on a regular schedule to progress in the program. Failure to do so may result in a recommendation for permanent suspension. All terms must be met to successfully complete the program.

# **Attendance Policies**

#### **DCCC Standard Campus Class Attendance Policy**

Regular attendance and prompt completion of class work are necessary for maximum success in college. Each student is expected to be present at all classes in which he/she is enrolled. In the event of an absence, the student is responsible for making up the course work.

Absences for college-sponsored activities will be recorded as excused if the following steps are completed:

- The activity sponsor notifies each instructor at least three school days prior to the day(s) the student will be absent (or as soon as possible if the event is rescheduled).
- The student contacts the instructor and makes definite arrangements for all work at least three school days prior to the absence.
- The instructor designates assignments as required by the instructor. (College-sponsored activities include academic competition, music and drama events, official athletic events, field trips, convocations and other college-sponsored events as approved by the Executive Vice President for College Affairs and Learning.)

For all absences other than those for college-sponsored activities, each instructor shall establish the attendance requirements for his/her class. Commonly, a student is allowed the same number of absences as the credit hour value of the course. For example, a student would be allowed three absences during the semester for a one-hour day class which meets three times a week. For a three-hour night course, the number of allowable absences would be one class session during the semester. The individual instructor may allow additional absences at his/her discretion. It is recommended that if a student misses more than the credit hour value of the class, the instructor would contact the student directly and discuss his/her standing in the course. The instructor would also inform the Registrar's office by submitting an *Early Alert and Referral* form. The student will be contacted for resolution of their issues. Following a meeting with the student, recommendation and comments will be sent to the instructor and advisor.

No statement in this policy shall preclude attendance polices that would meet the requirements of an accrediting or governmental agency.

#### **Department of Nursing Attendance Policy**

The profession of nursing is a discipline that requires responsible action from its members. It is therefore, the responsibility of the student to be at an appointed place at the appointed time.

#### Theory

Attendance for theory classes is mandatory for completion of the course. Course content is intense and requires consistent and committed attendance. The Department of Nurse Education will follow the DCCC attendance policy for multiple absences (as noted above). Example with interpretation for Nursing: students enrolled in a course with 3 theory credit hours and scheduled for 3-hour lectures can miss no more than ONE (3-hour) lecture. Additional absences will be addressed by the instructor and Dean.

Students must be alert and participate in learning experiences during class time. Students sleeping in class, or engaged in non-nursing school related activities may be asked to leave the classroom. Sleeping in class or engaging in non-nursing school related activities will be considered an absence due to the lack of participation in learning activities.

Students coming late to class will not be allowed in the room until the 1<sup>st</sup> break. **Three tardies = 1 absence**. TWO absences will require an assignment and a contract. THREE absences may result in dismissal from the program.

Notification of the faculty by the student who will miss a theory class for sponsored college absences is required for the absence to be excused. Final approval for all requested approval of absences will be held by the Dean of Nursing & Allied Health.

Breaks will be given once per hour (approximately every 50 minutes) during lecture/class time. Students are encouraged to use break times to use the restroom, get snacks, make phone calls, etc. To minimize the amount of distractions from learning, if a student leaves the classroom during lecture, that student will not be readmitted to class until the next break time.

A student who is unable to transfer knowledge from the didactic area to the clinical setting due to excessive absences may be placed on a clinical learning contract at the instructor's discretion.

#### Clinical

Clinical attendance is mandatory. Any clinical absence will result in a clinical contract and will be made up. Two (2) clinical absences will result in probation and/or suspension from the nursing program. No student-requested changes to clinical group assignments will be made once they are posted. All clinical schedules are final once posted to the course room.

A student will be considered tardy for arrival to clinical up to 15 minutes after the scheduled start time. If a student arrives more than 15 minutes after the scheduled start time, the student may be sent home and it will be considered an absence for the day. If a student is late (tardy) on three occasions, it will be considered an absence. After two tardies, the student will be placed on clinical contract. A make-up day will be scheduled by the instructor at the discretion of the instructor by the end of the term. When a student calls to report that he/she will be late, an estimated time of arrival is requested to assist the instructor in making appropriate plans at the clinical site for the tardy student's assignment of care.

Failure to notify clinical instructor one hour prior to an absence will be documented as a "No call, No Show". A "No call, No Show" can result in probationary status and/or suspension from the nursing program as determined by the instructor and the Dean of Nursing & Allied Health.

It is the <u>student's responsibility</u> to meet with the appropriate clinical instructor the first day upon returning to school to plan for the clinical make-up. Failure to do this may result in suspension from the program.

The decision regarding each student's clinical make up for an absence will be determined by the clinical instructor and the Dean of Nursing and Allied Health before the end of the term. Clinical makeup will be an equivalent experience to the clinical missed.

Any involvement/time demands due to KANS membership should be communicated ASAP and regularly with all instructors involved. The schedule will be reviewed and evaluated with each course team to verify time toward clinical hour credits. The student must be in good academic and clinical standing to attend KANS and/or NSNA activities.

STUDENTS WILL NOT BE EXCUSED FROM CLASS OR CLINICAL ASSIGNMENTS FOR PERSONAL WORK SCHEDULES. CHILDCARE ISSUES, CAR TROUBLE etc.

# **Background Checks**

All students accepted into the Dodge City Community College Associate of Applied Science in Nursing program are required to submit a background check. Background checks are required by the clinical facilities utilized by the Dodge City Community College Department of Nursing Education.

Background checks will be made by an independent contractor chosen by Dodge City Community College. An authorization and release form provide by Dodge City Community College must be signed by the student. The costs incurred for the background check shall be the student's responsibility. Some facilities will require fingerprints and drug screening (urine or blood) in addition to minimum requirements.

Information received from the background check and drug screen will be provided to clinical facilities upon request. Information from the independent contractor may be printed by Dodge City Community College to be kept in a confidential student file. Access to the confidential file shall be limited to the Dean of Nursing and Allied Health, Allied Health Administrative Assistant, Dean of Human Resources, the student and any persons or agencies designated by law or the order of a court of competent jurisdiction. The student shall be entitled to review the confidential file upon request. The Dean of Nursing and Allied Health and the student may review the information received from the background check to verify accuracy, prior to the release of the information to any individual or agency.

Students who fail to satisfy the background check requirements of clinical facilities or state licensing boards shall be subject to release from Dodge City Community College Department of Nurse Education programs. It is the student's responsibility to contact the Kansas State Board of Nursing, or the Board of Nursing from other state if planning to apply for licensure outside the State of Kansas, to discuss eligibility to sit for the NCLEX examination if there are any questions concerning their background check results and ability to sit for the NCLEX examination. Dodge City Community College is not responsible if a student does not qualify to sit for the NCLEX examination due to background check results.

#### Clinical Policies

#### **Blood and Body Fluid Exposure**

- A. All students will review the Blood Born Pathogen education materials annually, including decontamination process for uniforms.
- B. Students will follow universal precautions during all clinical and classroom conditions.
- C. If a student is exposed to blood and body fluids, the student is to inform the instructor at the clinical site at the time of the occurrence.
- D. Incident (occurrence) report is to be filled out and filed as directed by instructor.
- E. Hepatitis and HIV screenings are strongly recommended. These are at the student's expense.
- F. A second screening for Hepatitis and HIV is recommended six months later, at the student's expense.
- G. <u>If a student refuses the blood screenings, they are to sign a Release of Responsibility Form,</u> which will then be placed in the student's permanent file.

#### **Client Care**

During clinical experiences, students may be exposed to contagious conditions. Pregnant students will discuss clinical assignments with the clinical instructor.

#### **Clinical Procedures**

- 1. <u>ALL</u> oral and written reports are confidential. <u>No identifying patient information is to be used on written assignments, care plans, etc.</u>
- 2. Assignments submitted later than the time and date due will not be accepted and will receive a "U" or unsatisfactory on the Clinical Evaluation Tool under the Professionalism category.
- 3. The clinical instructor has the responsibility to remove from the clinical area any student who is determined to be unsafe.
- 4. The student is to notify the instructor of arrival and departure from the clinical floor
- 5. No cell phones in the clinical area.
- 6. Emergency personal calls received in the clinical area should be directed to the clinical instructor or clinical facility.
- 7. All required elements for clinical (immunizations, CPR, TB, etc.) must remain current to attend clinical. Additional requirements may be applicable dependent on individual clinical site protocols. Failure to update information before expiration will result in inability to attend clinical experiences until requirements are met. Any missed clinical time is subject to clinical attendance policies.

#### **Clinical Evaluation Procedures**

- 1. The Student/Faculty Clinical Notes are to be completed daily. The student should refer to the specific clinical guidelines regarding frequency of the student clinical note submission. Student clinical notes should reflect the student's performance at clinical and the student's ability to meet clinical guidelines. Formative faculty notes reflect the student's performance progress in general, and indicate the type of clinical experience the student had. E.g.: "Sally is performing clinical skill with increasing confidence. I would like to see her work on management of patient care this next week. Her clinical experiences this week allowed her to meet the clinical objectives for the respiratory and elimination content of the course."
- 2. The instructor will sign the student's summative statements and the student will sign the instructor's summative statements. Statements may be written by either the student or the instructor first. Clinical evaluations are discussed with the student at the end of the clinical rotation.
- 3. Students may not progress to the next clinical rotation with less than an "NI" rating without the express permission of all course faculty and the Dean of Nursing & Allied Health.
- 4. The course faculty will review student Learning Contract terms and circumstances in weekly course meetings.
- 5. The course faculty will determine suspension/dismissal progression status for all individual Learning Contracted students. Recommendation for a student suspension/dismissal will be made from the course faculty team to the Dean of Nursing & Allied Health and accompanied by all pertinent completed and signed case documentation.
- 6. The student shall make an appointment for case review with the Dean of Nursing & Allied Health.

- 7. The student and Dean will determine the need for continuation of the Due Process and Grievance procedures.
- 8. The student recommended for suspension or dismissal will be allowed to continue classes as usual until the grievance period is over or the Department of Nurse Education Grievance committee has made a decision. The grievance starts the day of the initial counsel regarding recommendation for suspension. However, if the student is considered to present immediate danger to patient welfare, he/she will be removed from clinical practice areas and not allowed to return to clinical practice areas until grievance is resolved.

#### **Clinical Skills Lab Policy**

- 1. All students must participate in an orientation to the Clinical Skills Lab.
- 2. If using the lab for personal/non-mandatory practice, sign the sign-in sheet at the beginning of the lab and sign out at the end of the lab.
- 3. Students will be expected to participate in laboratory experiences as if they were in an actual health care setting. This includes but is not limited to:
  - Appropriate infection control—hand washing/gloving
  - Proper body mechanics
  - Proper disposal of supplies/needles
  - Proper identification of patient
  - Safety issues for patient—side rails up, bed low, etc.
  - Psychosocial support introduction, appropriate interaction with patient.
  - Documentation of care
  - Professional behavior, dress and communication between faculty, peers, and patients
- 4. Do not remove the mannequin from the bed, or any part of the mannequin unless supervised by an instructor or the lab facilitator.
- 5. Dispose of all needles and biohazard material in the sharps box; dispose of syringes in the appropriate container.
- 6. Report any incidents of malfunctions to the lab facilitator or any nursing faculty.
- 7. Students are responsible for their personal belongings.
- 8. Lab jackets and/or scrubs must be worn in the lab during clinical, during practice, and while filming skills for instructor evaluations.
- 9. Please bring stethoscope if doing a scenario in the lab.
- 10. No hats are to be worn in the clinical lab.
- 11. Cell phones must be kept in personal backpacks and must not be brought out during clinical / lab time without facilitator's permission. Failure to comply may result in disciplinary action.
- 12. After use EACH time, return the simulation bed to its original state, ready for the next student:
  - a. Dispose of trash appropriately
  - b. Replace used supplies
  - c. Change linens as needed
  - d. Return bed to the original position
  - e. Clean up spills
  - f. Wipe down and put away all supplies and equipment
- 13. AV equipment will be provided for video recording of certain checkoffs in the lab. Students are responsible for providing flash drive to submit for grading. Multiple recording attempts will not be allowed. Students are responsible for signing up for a recording session and keeping the scheduled appointment. Only one reschedule of appointment may be allowed, any additional no shows or cancellations may result in automatic failure of skill. GoReact is the software used for submission and grading of skills check-off and simulation videos. When required for a course clinical component, specific instructions will be provided in course syllabus. GoReact software will be used for all clinical checkoff experiences, including second attempts.

#### CRITICAL ELEMENTS OF NURSING PRACTICE

The following objectives are critical elements in the student's clinical evaluation. If the clinical instructor observes behavior that indicates the student is not meeting either of the two criteria (stated below), the student will receive an unsatisfactory evaluation for the course (regardless of behavior assessed elsewhere on the evaluation tool and/or the academic grade).

#### Practices safe nursing care

Student prevents real or potential harm to patients and their families. The following examples serve as guides to these behaviors, but are **NOT TO BE CONSIDERED ALL INCLUSIVE**.

#### 1. Physical Safety

- a. **Safe behaviors:** appropriate use of side rails, wheelchairs, other mechanical equipment; proper protection of the patient, which avoids falls, lacerations, burns, etc.; performs only authorized nursing actions; seeks help when needed.
- b. **Reduction of risk**: appropriate recognition, evaluation and management of environmental and recognition of probable physical risks related to the client condition to reduce risks and improve outcomes.

#### 2. **Biological Safety**

a. **Safe behaviors**: recognizes violations in surgical and medical aseptic technique; utilizes "5 rights" in medication administration; comes to clinical without impairment; performs nursing actions with appropriate supervision; seeks help when needed; utilizes universal precautions, and demonstrates proper use of specific isolation protocols.

#### 3. Emotional Safety

 Safe behaviors: promotes patient sense of safety; provides patient with appropriate and/or correct information; performs nursing actions with appropriate supervision; seeks help when needed; demonstrates stable emotional behavior.

#### Practices according to legal, ethical, professional standards, and within scope of practice.

- 1. Maintains confidentiality.
- 2. Demonstrates appropriate knowledge base required to care for assigned client.
- 3. Performs in a professional manner when interacting with patients, families, faculty, and health care professionals (e.g., altruism, honesty, sensitivity and tolerance).
- 4. Maintains professional accountability at all times (e.g., pattern of promptness and adherence to dress code, seeks appropriate guidance and help from instructors and/or staff, follows instructions provided by instructor, keeps staff informed of patient's condition and changes in patient's condition, notifies instructor and staff when leaving the clinical unit).
- 5. Skills performed ONLY under supervision of instructor or delegated nurse

#### **Needle Puncture**

- 1. If a student receives a needle puncture, first aid should be administered immediately according to clinical site policies.
- 2. Clinical faculty should be notified immediately.
- 3. If a student punctures him/her with an uncontaminated needle, no risk is involved and no follow-up is required.
- 4. If a student punctures him/herself with a contaminated needle, (e.g., after needle withdrawal following an injection), this procedure is to be implemented:
  - a. If a student is exposed to blood and body fluids, the student is to inform the instructor at the clinical site at the time of the occurrence.
  - b. Incident (occurrence) report is to be filled out and filed as directed by instructor.
  - c. Hepatitis and HIV screenings are strongly recommended. The screenings are at the student's expense.
  - d. A second screening for Hepatitis and HIV is recommended six months later, also at the student's expense.

#### **Student Uniform**

Nursing students at Dodge City Community College are to wear the required uniform when in the class and clinical areas. Tools of the trade are required as well: stethoscope, scissors, pen, and watch with a second hand. Exceptions to this policy will be identified in individual courses. NO SMOKING OR DRINKING ALCOHOL IN THE DCCC NURSING PROGRAM ATTIRE IS ALLOWED BEFORE, DURING, OR AFTER CLINICAL HOURS. The uniform is highly recognized in the community and therefore wearing the uniform represents the college and the program even outside of clinical time. The uniform is:

- A. Approved scrub top and pants:
  - 1. All students will wear the dark grey scrubs purchased from a DC3 Department of Nurse Education approved vendor only.
  - 2. Pants should fit comfortably, but not appear tight.
  - 3. Pant length should be to the top of the shoe heel. Pants that fall beneath the shoe heel should be hemmed to avoid dragging and fraying.
  - 4. A plain **BLACK or WHITE** shirt may be worn under scrub top.
- B. Approved scrub dress: Dresses or skirts should fit comfortably, but not appear tight.
  - 1. Scrub color will be the same as indicated above for top and pants.
  - 2. Length should be from mid-knee to below the knee.
  - 3. A plain **BLACK or WHITE** shirt may be worn under scrub dress.
- C. Lab coat/scrub jacket.
  - A gray scrub jacket may be worn over scrub uniform.
  - Length should be between the hip and knee.
  - NO coats or hoodies/sweatshirts will be allowed in the classroom or clinical with the scrub uniform. If the student gets cold easily, a thicker layer (black or white undershirt) should be worn.
- D. Black soft-soled shoes with closed toes and heels are to be worn with the scrub uniform.
- E. Uniforms must be worn according to the following specifications:
  - 1. The student patch is worn on the **left sleeve**, three inches below the acromion process, on the lab coats.
  - 2. The student name badge is worn on the **RIGHT side** of the scrub top.

Additional personal protective equipment (PPE) may be required by specific clinical sites. Students are required to adhere to these requirements while at the site.

NOTE: Once the student is no longer an active nursing student at DCCC, the DCCC Nursing Student patch must be removed from the scrubs and jacket prior to public donation.

#### **Student Professional Image**

Professional appearance in clinical areas, and in other activities representative of the DCCC Nursing Program, projects a powerful image to colleagues and clients. Students will maintain personal hygiene and the cleanliness of all uniforms, lab coats, shoes, or other garments worn during clinical activities. The following guidelines are established to promote the professional appearance of students during clinical rotations. Please follow specific course clinical guidelines.

- A. <u>Oral, facial, and body hygiene:</u> Any makeup should be utilized becomingly and sparingly. Regular dental care and oral hygiene will be maintained to present a pleasant, professional appearance. Students should maintain oral hygiene to prevent the client/patient being offended from exposure to the odors of spiced foods and smoking. Perfume, cologne, or aftershave should NOT be worn, as patients may be allergic to or offended by the scent. The smell of cigarette smoke must NOT be apparent to the client/patient being cared for. NO SMOKING OR DRINKING ALCOHOL IN SCHOOL UNIFORMS. No chewing gum or tobacco, including chewing tobacco and ecigarettes at clinical sites.
- **B.** <u>Hair:</u> Hair must be clean, styled, and/or confined and groomed so it does not interfere with patient care. Hair color and/or highlights must be a normal human hair color (red, brown, black, blonde). Hair must be cut or styled in a manner that will prevent the hair from hanging down over the patient and posing a risk of infection. Hair that

is collar length or longer must be pulled neatly back in a ponytail or bun. Hair clips, bands, etc. shall be functional, not decorative (no bows/flowers). Any hair ties or hair bands must be black. Head/ear warmers should NOT be worn with the uniform in the classroom or clinical setting. Mustaches and beards will be neatly groomed, clean and trimmed.

- C. <u>Hands and Nails:</u> Hand washing is a key element in infection control. Hands are to be washed before and after each patient contact, and as required to prevent the spread of infection. Long nails are conducive to harboring harmful bacteria, may scratch a client/patient, and are easily broken during client care activities. Nails are to be kept clean and be well cared for. Nail length should not extend beyond the tip of the fingers, and nails are to be kept manicured. NO NAIL POLISH is to be worn in the clinical settings. FALSE/ACRYLIC/SHELLAC NAILS OR NAIL TIPS have been shown to harbor harmful bacteria and are NOT to be worn in clinical settings.
- D. Jewelry & Tattoos: NO jewelry with the exception of simple ear posts or studs (no hoops), watches (must have second hand), and wedding band. (No more than two (2) earrings in each ear. Piercings for migraines can be one.) Medic Alert bracelets or necklaces are permitted. Fitbit devices can be worn but NOT visible during clinicals. Tongue piercings should be removed or replaced with clear plastic retainer. Facial piercings such as eyebrow, lips, nose, etc., should be removed. NO VISIBLE BODY JEWELRY (industrial, gauges, etc.) OR TATTOOS in the clinical setting.

<u>STUDENTS</u> APPEARING IN CLINICAL AREAS INAPPROPRIATELY DRESSED <u>WILL</u> BE COUNSELED BY THE FACULTY AND **MAY BE** ASKED TO LEAVE THE CLINICAL AREA.

#### Pass/Fail Criteria for Clinical (Criteria for Clinical Grade)

Student clinical performance is measured utilizing the summative Clinical Evaluation Tool. Daily clinical performance is evaluated and documented on Student/Faculty formative clinical notes. At the Faculty discretion or at the conclusion of each clinical rotation within a course, the student and faculty member will review the clinical evaluation tool per formal conference to determine progression to the next rotation or course. The student must satisfactorily accomplish all identified course and program objectives of the Clinical Evaluation Tool to progress to the next course of the program. Students may be placed on Clinical Learning Contract to assist in achieving satisfactory performance in the clinical area as noted in the Learning Contract Policy.

The above criteria are the minimal requirements for all students to become safe <u>beginning practitioners</u>. Any student deemed unsafe by clinical instructor for academic, physical, or emotional reasons may be dismissed from the clinical area. Unsafe clinical performance may result in suspension from the program. <u>See Critical Elements of Nursing Practice</u> Statement.

The clinical grade (learning lab and clinical sites) will be on a Pass/Fail basis. If the student fails to meet the Dodge City Community College Department of Nurse Education requirements in the clinical area as specified in the Clinical Evaluation Tool, the grade attained for the course will be a failure "F" regardless of the theory grade. <a href="Each course's Clinical Evaluation Tool">Each course's Clinical Evaluation Tool</a> is specific at what level of supervision the student is expected to perform for "Satisfactory". Students will be provided with a copy (hard copy/electronic) Clinical Evaluation Tool in order have access to determining criteria in each course with a clinical component.

The following seven summative criteria will be considered in determining the clinical pass/fail grade:

- 1. Utilization of the nursing process to provide caring, safe and competent care.
- 2. Demonstration of acceptance of responsibility for continued professional growth and development.
- 3. Performance within the scope of practice in a legal and ethical manner.
- 4. Provision of care appropriate to the physical, mental, cultural, spiritual and social needs of the client.
- 5. Effective communication with clients, colleagues and others within the health care discipline.
- 6. Demonstration of professional behavior.
- 7. Recognition of environmental factors that impact health.

# Recommended Behaviors for the Clinical Setting

The following are behaviors that are recommended for success in the clinical setting.

- Never underestimate the importance of first impressions with staff or patients. Your appearance and communication are very important. Demonstrate pleasant, considerate and dignified behavior toward clients/patients, doctors and co-workers at all times.
- 2. When introducing self to a client/patient for the first time, the student should use identify his/herself as a student in the Nursing Program at Dodge City Community College. Use of the client's formal title (Mr., Ms., Dr., or other) should be included unless the client indicates otherwise.
- 3. Foster professional growth by graciously accepting and utilizing constructive criticism and feedback from patients/staff/peers/instructors.
- 4. Safeguard the patient's right to privacy by judiciously protecting information of a confidential nature and sharing only that information relevant to his/her care. There should be no discussion of a client/patient other than that needed for learning purposes. Assignments and care plans will carry only the client/patient's initials so that information about a client/patient is not distributed to others through carelessness. Student notes, etc. that have identifying information will be turned in to the instructor at the end of the clinical day for shredding purposes.
- 5. Be aware of potentially adding to the client/patient's stress. Personal or family problems of the nursing student should **not** be discussed with the client/patient under any circumstances. The person, by simply being ill, has enough problems.
- 6. Personal or family problems should not be discussed in clinical areas, with students, instructors, or clinical facility staff or preceptors.
- 7. Students should make maximum use of clinical time for learning. This means keeping in mind overall objectives and making oneself available/seeking out experiences when extra opportunities for learning and practice occur.
- 8. Consideration must be shown for agency co-workers who may be busy. This is done by not blocking halls or doorways; giving others a seat when they need to write and collect data for patient assignments at times other than change of shift periods.
- 9. Be mindful of noise levels. Because of the sadness often associated with illness and the fact that increased noise levels are detrimental to the client/patient ability to rest, loud talking and laughing on the part of any worker is inappropriate in the hospital. Since noise in stairwells and elevators can also be heard on the unit, talking when going to or coming from an assignment should be restrained.
- 10. Even a student in nursing may be besieged by friends/family/patients to become a resource person about medical problems. (Their opening sentence usually is, "You're a nurse..."). Learn to avoid giving advice, which is beyond your education and responsibility. You can admit, with courtesy, that medical diagnosis and treatments are not in your field; suggest that a physician's advice might be timely.
- 11. Student may not decline clinical assignment and learning experiences that are within approved competencies without *PRIOR* approval and recommendation by clinical instructor/preceptor.
- 12. Students are required to adhere to any additional precautions as determined by clinical sites.

#### Unsatisfactory Clinical Behaviors/Performance

THE FOLLOWING BEHAVIORS ARE EXAMPLES THAT CONSTITUTE UNSAFE OR UNPROFESSIONAL CLINICAL PRACTICE. Please note that this list is NOT all-inclusive and may be subject to change or addition as outlined in specific course clinical guidelines.

Regardless of how a clinical site responds to a clinical situation, the actions of the DCCC Department of Nurse Education are independent of the clinical site action(s).

\*Critical elements of student clinical behaviors identified with an asterisk (\*) could result in <u>immediate clinical failure</u> and consequent suspension from the nursing program. Clinical failures will be based on interpretation of patterns of behavior and /or seriousness of behavior at instructor discretion.

#### Unexcused Absences/Tardy to Clinical

- Students are expected to report absence or tardiness according to student nurse handbook. Clinical experiences
  are MANDATORY and are very difficult to make up. Pre/post, conferences are considered an important part of the
  clinical day. \*No call/No show for clinical experiences demonstrate unprofessionalism and may result in immediate
  suspension from the program.
- The student will be considered tardy to clinical up to 15 minutes past the scheduled start time. Arrival later than 15 minutes after the start time will be considered an absence for the day and will require a clinical makeup day according to policy.
- Students are to collaborate with clinical instructor prior to leaving and upon return to the clinical setting at any time during the assigned clinical experience.

#### Incomplete or Late Assignments

• Students are expected to complete clinical related assignments according to the guidelines provided by each instructor. Any late assignment submissions may result in an unsatisfactory (**U**) on the Clinical Evaluation tool.

#### Inappropriate Behaviors/Performance

- \*Incivility will not be tolerated towards patient/family/instructor/peers/staff/doctors. Incivility can be defined as: "Rude or disruptive behavior that may result in psychological distress for the people involved and, if left unaddressed, may progress into threatening situations." (Clark, 2010) Incivility may be found in verbal or electronic forms of communication.
- 2. Inappropriate verbal/nonverbal behavior patterns. Behavior patterns that are inappropriate cause potential for client/patient harm. These are identified (list not inclusive):
  - a. \*Working under influence of drugs or alcohol (see DCCC Student Handbook/Planner Code of Conduct and Controlled Substances Policies.
  - b. \*Inappropriate touching directed towards patient/instructor/peers/staff/ doctors.
  - c. \*Not following directions of instructor, preceptor or clinical site representative.
- Inadequate or substandard client/patient care: Students are responsible for retaining and increasing their knowledge base in order to provide competent, timely, safe and ethical cares to patients. Substandard cares may include (list not inclusive):
  - a. \*Dishonesty in admitting errors in carrying out any part of nursing care.
  - b. \*Failure to notify clinical instructor and staff nurse of any patient safety incident.
  - c. \*Failure to safely perform a procedure.
  - d. \*Falsification of documentation/inaccurate charting.
  - e. \*Inability to recognize the implications of, or respond to ("failure to rescue"), changes in the patient's condition.
  - f. \*Failure to check with the instructor/preceptor regarding a procedure prior to performing the procedure.
  - g. Late in providing a patient's treatment/medication.
  - h. Lack of sufficient knowledge of treatment/medication.
  - i. Failure to check medication/treatments appropriately.
  - j. Inability to give rationale for his/her nursing care.
  - k. Refusal of clinical assignment or non-participation in clinical activities as instructed by instructor/faculty.
  - I. Failure to comply with additional site-specific policy and procedure requirements.
- 4. Confidentiality: Please sign Confidentiality Statement and return to Department of Nurse Education Building Assistant. Clients have an inherent right to expect that all communications and records pertaining to their care will be treated as confidential. Students are expected to uphold the dignity and privacy of their patient/client. Therefore,

students are to limit discussion of client information to professional communication in the clinical area and in clinical education. It is inappropriate to ask staff to provide copies or accept copies of data related to the patient's chart.

\*Breaches in confidentiality are in direct violation of the Health Insurance Portability and Accountability Act (HIPAA). Disclosure of patient information to nonessential persons may result in dismissal from the clinical setting/nursing program and other disciplinary action.

Be aware that some clinical sites may require additional HIPAA/Confidentiality forms to be completed prior to arrival or care at that facility.

#### **Confidentiality Statement:**

Release of information to unauthorized person(s) is an invasion of privacy. (Health Insurance Portability and Accountability Act) No other discussion is permitted. Violation of confidentiality will result in clinical probation and/or suspension from the program.

# **Code of Conduct**

Dodge City Community College strives to create an academic community conducive to the proper functioning of the educational process and the development of each student. To create the atmosphere in which these goals can be pursued, the College maintains disciplinary rules and regulations. Protecting the functional integrity of the classroom and the campus educational environment is paramount to this endeavor.

Students are expected to behave in a manner that is conducive to the mission of the College. To accomplish its educational mission, members of the College community aspire to a standard that is higher than mere compliance with formalized College regulations and local, state and federal law. Dodge City Community College reserves the right to impose disciplinary sanctions for behavioral misconduct that occurs either on campus or off campus. Except for cases involving the possibility of suspension or expulsion from the College, informal hearings may be called at the discretion of the Dean of Student Services or designee for the purpose of fact finding and/or imposing sanctions for violations of the Code of Student Conduct. Such informal hearings may be held at any time and require no prior notification.

# Individualized Remediation Plan and Clinical Remediation Plan Policies

It is the desire of the Department of Nurse Education for students to access resources available in order to be successful in the program. Student remediation plans are used to establish expectations for improvement and/or actions required of the student. It is the student's responsibility to contact the appropriate course faculty for guidance in the development of the remedial plans.

The student will be notified in writing by the course faculty of the necessity of a formal remediation plan in either the didactic or clinical course components. Failure to respond within three days of published notification will result in immediate suspension from clinical learning experiences.

Once initiated, all remediation plans will remain in effect for the remainder of the semester. Failure to comply with all terms of the plan may result in suspension from the program. This includes failure to attend scheduled appointments related to the plan. The plan will be reviewed with the student. Signatures on the plan by the student indicate that the plan has been discussed with the student. Plans do not require a signature by the student to be valid. Should a student refuse to sign the plan, the instructor will write, "Student refused to sign" in the signature line. A transcript of the discussion with the student will be attached to the plan as documentation of receipt. Failure to comply with the terms of the plan may result in suspension from the nursing program.

All terms of the remediation plans must be met, to complete the course and subsequently progress to the next course or graduation in the nursing program curriculum program of study.

#### **Learning Contract Individualized Remediation Plan**

Students whose didactic course grade falls below an 80% exam average, or who have failed over half of the exams to date in a course, are required to seek remediation upon notification (notification includes posting of exam scores to Canvas). The student will be notified in writing by the course faculty within three (3) days of inadequate performance

in either the didactic or clinical course components. Failure to respond within three days of published notification will result in immediate suspension from clinical learning experiences.

The goal of the Individualized Remediation Plan is to work with the student to bring the course grade above 80% exam average or to remediate clinical deficiencies to successfully complete the course. **Requirements** on the plan should include activities that are directly related to student improvement in the areas of deficiency. Terms of the plan will be individualized according to the student's level of learning needs and will be constructed by the appropriate course faculty with the student's input. The appropriate faculty, the student, Nursing Success Center Coordinator and the Dean of Nursing & Allied Health will sign all plans. Once implemented, plans are in effect for the duration of a course, regardless if the course grade rises above the 80%.

Students with an exam average of 78-80% will meet with the Nursing Success Center Coordinator, assigned nursing advisor, or faculty at least every other week. These meetings will include review of study logs and study habit diagnostic tools brought to the meetings by the student. A transcript summary will be created of the meeting and signed by the coordinator/advisor/faculty and student.

Students with an exam average below 78%, or who are at risk of failing over half of the exams for a course, will meet with the Nursing Success Center Coordinator, assigned nursing advisor, or faculty at least once per week. These meetings will include review of study logs and study habit diagnostic tools brought to the meetings by the student. A transcript summary will be created of the meeting and signed by the coordinator/advisor/faculty and student.

If the student's exam grade rises to the 78-80% range, the meetings will change to biweekly. If the student's exam grade rises above an 80%, meetings will be held on an as-needed basis. If the grade falls below the 80%, biweekly meetings will resume.

The student will meet with the instructor or Nursing Success Center Coordinator, after each exam, to determine the student's progress in the course.

Students on Individualized Remediation Plans will be permitted to attend didactic sessions until all the terms of the contract are resolved, the student chooses to withdraw, or the course concludes. If the student takes the final course examination, the student will be assigned the grade earned. Course withdrawal after the final examination has been administered is not an option.

#### **Clinical Contract Clinical Remediation Plan**

Students whose clinical performance is rated as "U" unsatisfactory, "U-I" unsafe-ineffective, or are absent from a clinical experience are required to seek remediation upon notification. The student will be notified in writing by the course faculty within three (3) days of inadequate performance in clinical course components. Failure to respond within three days of published notification will result in immediate suspension from clinical learning experiences.

Students on a Clinical Remediation Plan will be permitted to attend clinical learning experiences under the direct supervision of the course faculty until all the terms of the plan are resolved, the student withdraws, or the course concludes.

After a skills failure, they will be allowed to attend clinicals during the remediation process, but they will not be allowed to perform the failed skill. If the failed skill is related to medication administration, including dosage calculation, the student will not be allowed to administer medications in the clinical setting until the skill is successfully passed. After remediation, they will be allowed a second opportunity to perform the skill, in front of two instructors. The student will be removed from the program, if they fail the second attempt. Students who do not meet the final course clinical objectives and competencies will be assigned a final course grade of "F".

Faculty may recommend suspension for any student for unsafe or ineffective performance at any time at their discretion. Recommendation is presented to Dean of Nursing and Allied Health. Students who do not have clinical assignments completed will not be eligible to take the final exam, and ANY failure to make up clinical experiences will result in the student not being eligible to take the final exam.

Once implemented, Clinical Remediation Plans will remain in effect for the duration of a course.

Returning students will meet with faculty for test reviews in addition to regular meetings with the NSC Coordinator.

# **Drug and Alcohol Policy**

Students must comply with the Dodge City Community College Drug and Alcohol Policy located under the Code of Conduct in the DCCC Student Handbook/Calendar/Planner. Clients have the right to safe and unimpaired care. Several clinical sites require drug/alcohol testing to help ensure the capability of providing safe and unimpaired care. Nursing students <u>must</u> be able to participate in clinical experiences without restrictions; therefore, students must pass these screenings to be allowed in the clinical facilities as they are requested throughout the course of the program. Students can expect to be tested each academic term. Additional testing may be performed if required by clinical facilities; if there is probable cause to believe a student is impaired, or randomly as determined by the Department of Nurse Education. Students returning to the program will be tested regardless of the academic term of return.

Failure to comply with scheduled testing, failure to pass the drug screenings, and/or failure to share drug test results with the Dean of Nursing and Allied Health may result in suspension and/or removal from the nursing program and/or referral for drug or alcohol counseling/monitoring. Students using prescription medications under a provider's care should disclose this information prior to testing on the appropriate testing consent form provided by the Department of Nursing at the time of testing. Students using prescription medication are still expected to meet the behavior expectations for the nursing student listed on the "Unsatisfactory Clinical Behaviors" and "Critical Elements of Practice" policy in this handbook.

Students who are asked to submit to drug/alcohol screening in good faith by a facility or an instructor should submit to testing. The student has the right to refuse the test, however, if client or student safety is in question, the student will not be allowed to participate in client care or drive self to another location. This may result in possible dismissal from the program. All testing done beyond the drug screen performed each term and/or due to suspicion or behavior is the financial responsibility of the student, and the results will be shared with the Dean of Nursing and Allied Health for inclusion in student file. Random drug screening will be the financial responsibility of the Department of Nursing.

# Family Education Rights and Privacy Act (FERPA) DCCC Annual Notification Definitions

For the purposes of this policy, Dodge City Community College has used a specific definition of terms. <u>Student</u> – any person who attends or has attended Dodge City Community College. <u>Education Records</u> – any record (in handwriting, print, tapes, film, or other medium) maintained by Dodge City Community College or an agent of the college which is directly related to a student.

The following are considered exceptions to these education records:

- A personal record kept by a staff member if it is kept in the sole possession of the maker of the record
  and is not accessible or revealed to any other person except a temporary substitute for the maker of the
  record.
- An employment record of an individual, whose employment is not contingent on the fact that he or she is a student, provided the record be used only in relation to the individual's employment.
- Records maintained by the college unit if the record is maintained solely for law enforcement purposes.
- Alumni records which contain information about a student after he or she is no longer in attendance at the College and which do not relate to the person as a student.

# Functional Ability Requirements for Nursing & Allied Health Students

All Nursing and Allied Health students admitted or re-admitted to a course and/or program are required to complete and submit an annual functional abilities assessment along with a yearly physical. The health care profession involves specific physical, sensory, cognitive and emotional functional abilities of its practitioners and these same functional abilities are required of students throughout the Nursing and Allied Health education courses and programs. Physicals performed by a licensed healthcare provider may be required to confirm the student is able to meet functional ability requirements for nursing and allied health students. If required, the physical forms will be provided by the Department of Nurse Education to the student for completion by a licensed healthcare provider.

If you have any questions regarding your own required functional abilities in these areas, please contact the Dean of Nursing & Allied Health for further information. If any of the required necessary functional abilities are in doubt for a

student, the Allied Health Department will require him/her to have a medical examination. Official proof that the student has sufficient capacity in each of the required functional abilities areas from a medical physician and/or other health care professional as appropriate, may be required for the student before continuing in an Allied health education program.

The National Council of State Boards of Nursing has identified functional abilities required for Nursing and Allied Health students and professionals. Web site: <a href="https://www.ncsbn.org">https://www.ncsbn.org</a>.

The Nursing and Allied Health Department has adopted these basic standards as requirements for all Nursing and Allied Health students. Students are required to be able to perform the functional abilities and activities/tasks with or without reasonable accommodations as required by law. To be considered for an accommodation, the student must declare with the Nursing and Allied Health Department and the Student Services Office, in writing, that they have a disability and provide the required medical documentation.

- If a student has concerns about meeting the functional abilities as described in the document entitled "Essential Skills and Functional Abilities for Nursing and Allied Health Students", he/she must contact the Dean of Nursing and Allied Health.
- The student must ask for an accommodation if it is believed to be necessary, by contacting the Student Services Office at (620) 227-9406. The student must provide professional documentation that validates the lack of functional abilities and their concomitant medical/physiological/psychological causes. Furthermore, the student must provide sufficient documentation as to assist college personnel in understanding the full impact of the lack of functional abilities in terms of time, severity, and dynamics. The student must request the Student Services Office to verify the existence of the disability and a need for accommodations.
- Information from the Student Services Office will be provided to the Dean of Nursing and Allied Health
  concerning the specific accommodations. It is the responsibility of the student and the Dean of Nursing and
  Allied Health to agree on reasonable accommodations, which are recommended from the Student Service
  Office. The final determination of the accommodation and its delivery will be the responsibility of the Nursing
  and Allied Health Department.
- Students can appeal a decision made regarding reasonable accommodations pursuant to the college's "Grievance Procedure".

#### **Student Responsibilities**

- Accurately and truthfully, complete, sign and submit a completed physical form (all 4 pages). The student
  must complete pages 1 and 2 of the physical form. Pages 3 and 4 must be completed and signed by a
  licensed healthcare provider (physician, nurse practitioner, physician's assistant).
- Request formal accommodation, if needed, using the DCCC process for accommodations.
- Meet with the Student Services Office representative
- Maintain ongoing communication with the Dean of Nursing and Allied Health and the Student Services Office about the effectiveness of the accommodation that are being provided.
- Manage the accommodation(s)
- Inform the Dean of Nursing and Allied Health and the Student Services Office about any barriers encountered
  in the didactic or clinical course sites
- The student has a duty to inform each clinical instructor of a pregnancy. The clinical instructor must have this information to make appropriate clinical assignments.

#### **Nursing and Allied Health Department Responsibilities**

- Review the "Essential Skills and Functional Abilities for Nursing and Allied Health Students" with the student when it is requested
- If no accommodation is requested, the Nursing and Allied Health Department does not have any responsibility to take the possible disability into account when assessing the student's ability to perform
- Consult with the student regarding the student's functional limitation(s) and the accommodation(s) needed
- Make final determination of specific accommodations and how they will be provided

#### References:

National Council of State Boards of Nursing. (2010). Uniform Core Licensure Requirements, Functional Abilities – RN and LPN/VN

# **General Program Information**

All students enrolled in Allied Health programs at DCCC must meet the application and admission requirements for Dodge City Community College. Nursing program students are accountable to the policies and procedure of the Department of Allied Health and Dodge City Community College as found in the DCCC Calendar/Handbook/Planner and DCCC Catalog. All Allied Health students are entitled to the rights of grievance and due process under the Dodge City Community College policies.

#### Addressing Faculty and Staff

It is requested as a professional courtesy to address the Dean, faculty and staff with their preferred title. Please do not use just first names, or just last names. For example: if a faculty member's name is Sally Smith, she should be addressed as Professor Smith, Ms. Smith, or Ms. Sally. These preferences will be made known to you on orientation day.

#### **Advisors**

The Nursing Success Center Coordinator will be the designated advisor for all students in the nursing program. Appointments should be made with this advisor:

- Prior to each semester
- Whenever the student has an academic or clinical problem
- During the 3<sup>rd</sup> semester of the program for graduation intent forms
- During the final semester of the program for graduation application

The college provides referrals to any student who has personal, family, or other needs. Make an appointment with the Dean of Nursing and Allied Health for referral.

#### **Nurse Education Center Offices**

#### • Nurse Education Center

- Students are NOT allowed in any of the faculty office spaces at any time. Students found in restricted areas of the department without permission, may be subject to disciplinary action and campus security may be notified.
- o Tutoring/study rooms must be scheduled with the Administrative Assistant.
- Students are not allowed to use the faculty/staff break area. Students should use the designated break area for students.
- Students may use the water coolers/dispensers in the designated student areas. Each class is responsible for ensuring the water is replenished.
- A refrigerator is provided by SNA for use by students in the student break area. Please remember to label any items you place in the refrigerator with your name and the date. Students are responsible for maintaining a clean space and cleaning out the refrigerator at the end of each semester.

#### **Assignment Return**

Nursing faculty will return graded written theory assignments within seven school days.

### **Cardiopulmonary Resuscitation Certification**

All students are required to obtain and maintain a current professional CPR certification through the American Heart Association (healthcare provider). Students will be required to attend a CPR course provided by the DNE prior to the fall semester in August of their first year, or before attending the program. Approved certification must include adult, child and infant CPR, choking, and AED training. A photocopy of the front and back of the CPR card must be filed with Castle Branch prior to the first day of classes.

#### **Chain of Command**

Students with concern or comments should follow the chain of command to best resolve the issue at hand. If the issue is with another student, the student should respectfully approach the other student with non-judgmental and positively voiced concern. Offer to help find a solution. If you are unable to rectify the situation, please address the issue to the

instructor in the room at the time or to the lead instructor, depending upon the frequency of occurrence of the problem. The issue can then be brought to the Dean if the instructor(s) is (are) not able to help the students resolve the issue.

The same chain of command should be utilized with a student-instructor concern. It is inappropriate, at any time, for a nursing student to discuss an instructor with another instructor. This includes but is not limited to discussions regarding classroom instruction methods, clinical, tests, and remediation. First, speak <u>respectfully</u> and <u>calmly</u> to the instructor(s) directly involved with the issue. Then, if unresolved, the issue should be directed to the lead instructor or Dean as appropriate. Student assistance with compliance in this matter is greatly appreciated!

#### **Community Service**

Part of being a professional is participation in college and community events. The Student Nurse Association (SNA) provides professional development opportunities in monthly meetings as well as volunteer opportunities as scheduled. Throughout the academic year, students are expected to participate in selected activities.

# **Contact Information Changes**

In order to optimize access to updated announcements and information, the Allied Health Department must have the student's current contact information at all times. If a student's contact information (address, phone number, email, emergency contact information) changes, the Allied Health Administrative Assistant and the student records department (in the student union) **must** be notified as soon as possible.

#### **Faculty and Staff Contact**

#### **Appointments**

Appointments should be made to meet with all DNE faculty and staff. Each faculty member will post office hours at the beginning of each semester. Appointments should be made through the DNE Administrative Assistant. If a student needs to speak with or attend an appointment with a faculty or staff member, they must first be announced by office staff. Meetings and appointments between students and faculty will occur in designated tutoring and/ conference areas. Students are NOT allowed in faculty offices at any time.

**Please Note:** Any meeting or appointment with DNE faculty and staff may be recorded by DNE employees for documentation purposes. The student will be informed of any recordings taking place during meetings or appointments, prior to the recording initiation.

#### After-Hours

Students should contact DNE faculty and staff during regular school business hours (Monday through Friday, 8 am to 5 pm). The faculty and staff have one hour each day to reserve for lunch, which is considered personal time. Clinical faculty will notify students of correct notification procedures for clinical experiences at the beginning of each semester. Any student making contact (phone, text, email, etc.) with faculty and staff outside of regular business hours/time should not expect a response until following the lunch break period or the next scheduled school business day (consult DCCC Academic Calendar). After-hours contact includes:

- Between 5 pm and 8 am Monday through Thursday
- After 5 pm on Friday until 8 am on Monday
- After 5 pm on the day prior to a scheduled break or vacation until 8 am on the first scheduled school day after the break/vacation.
- During lunch break periods

# Faculty and Staff Mailboxes and Faculty Assignment Submissions

Students are to use the assignment pockets to submit all items to faculty and staff. The pockets are located at the back of the building across from the bathrooms. Pockets are labeled with each instructor's or staff member's name and should be used to turn in required documents or other materials, correspondence, written assignments or to check out required materials.

#### Food and Beverage Policy

As a courtesy to staff, faculty, and fellow students, in accordance with college policies (see DCCC Student Handbook/Calendar/Planner); only drinks with spill-proof lids will be allowed in the classroom. Drinks will not be allowed in the clinical lab at any time.

Regarding food: Food will be allowed in the classroom only during potluck and/or catered lunch activities upon approval. Food is only allowed in the designated student break areas. Food of any kind is not permitted in the clinical lab at any time.

Potluck and/or catered lunch activities may be held in classrooms with approval. During and after potluck activities, students are responsible for cleaning the area of any/all food, dishes/containers and other items. This includes not leaving food trash in break area or classrooms. Violation of this policy may result in loss of food privileges in the Nurse Education Center.

#### **Grading Scale for DNE**

The grading scale for the Department of Nurse Education is different from in DCCC pre-requisite courses.

- A = 93.0% 100%
- B = 85.0% 92.9%
- C = 78.0% 84.9%
- D = 70.0% 77.9%
- F = 0% 69.9%

Each course has a determination for the weight percentage for exams, participation and written work. In all courses, the student will be required to obtain a 78% C exam AND course average or above in order to successfully complete the course and progress in the program. During the course semester, only the exam average will count toward the course average shown in the course. Other assignments (participation, written work, etc.) will be added to the final course score ONLY <u>AFTER</u> the final exam average received is at or above 78%. <u>After all the assignments/scores are entered, the student must continue to maintain a final course score of 78% or above to progress.</u> Final course scores are not rounded up or down.

ATI proctored assessments will be entered in the ATI section of the gradebook and will not be figured into the exam average portion of the grades.

The grading scale for ATI Proctored Calculation Exams will be the exact score received on the exam. The grading scale for ATI Proctored Assessments (except the calculation exams) will be as follows:

- Level 3 = 100%
- Level 2 = 90%
- Level 1 = 80%
- Below Level 1 = 78%

#### **Mandatory Student File Requirements**

All student files must contain current copies of the Letter of Intent, Functional Abilities Statement, current CPR certification, and current TB test results. Students must also provide evidence of current immunizations and a background check through the services affiliated with DCCC Department of Allied Health. This information is submitted online by accessing the website on the nursing link of the college website <a href="https://www.dc3.edu">www.dc3.edu</a>. Those students who are unable to receive any required vaccine must obtain a written note from a provider (physician or nurse practitioner) regarding the abstention. All requirements must be met before the student will be allowed to attend clinical experiences. It is the student's responsibility to respond to requests for additional information promptly. Failure to submit requirements may result in an inability to attend clinical and subsequent failure of the course.

# **Nursing Success Center**

The Nursing Success Center Coordinator, Doriane Stimpert, is located in the Floris Jean Hampton Nurse Education Center by appointment. The Nursing Success Center provides services for students in the nursing programs, prenursing and the para-professional programs.

Hours: By appointment

#### **NSC Services**

- Nursing Tutors
- Study Halls (group tutoring sessions) for Nursing
- Math Assistance
- Remedial Support Services
- · Student resources support
- TEAS Preparation Information
- Student support seminars

Students are also encouraged to access the Student Achievement and Resource Center (SARC) in the Math and Science building for additional educational assistance.

#### **Professional Liability Insurance**

Dodge City Community College will provide professional malpractice liability insurance for the nursing students. **THE POLICY COVERS THE STUDENT ONLY WHILE FUNCTIONING IN THE CLINICAL AREA AS A STUDENT.** It is the responsibility of the student to seek professional malpractice liability insurance when functioning as an employee of a health care facility during and after completion of the program. The Department of Nursing highly encourages students in the program to carry personal health insurance.

#### **Student Mailboxes**

Student mailboxes are located in back hallway near level 2 classroom of the Nurse Education Center. Boxes are labeled with the student's name. Students are responsible for checking their respective mailboxes daily for announcements, phone messages, and other information. The mailboxes are to be used for Department of Nursing communications. The contents of student mailboxes are considered private property. The DCCC Code of Ethics will apply to violators.

# Student Representatives on Committees (Allied Health/Department of Nurse Education)

Students have representation on the Allied Health Faculty and Staff Association, Policy and Procedures Committee, and the Curriculum Committee as outlined in the student bylaws. Voting privileges shall be one representative student vote by the SNA president, vice president, or assigned committee member/alternate at each of the department committee meetings.

## **Graduation and Licensure Procedures**

In order to graduate, the nursing student must meet all of the degree requirements of DCCC and the Department of Nurse Education. The student should initiate a degree check with the DCCC Registrar in the Fall before Spring graduation to verify no classes are needed for the degree and allow time to rectify if discrepancies are noted. The degree conferred will be the Associate of Applied Science in Nursing. This degree does NOT license the student as a registered nurse, but allows the student to apply for licensure from the state of their choice and apply to take the NCLEX-RN licensure exam.

## **Nursing Pinning Ceremony**

The RN graduation pin will be ordered at the beginning of the spring semester and included in the spring fee expenses. Students who fail the program will be refunded the cost of the pin. Students will receive their pins from faculty during the Department of Nurse Education pinning ceremony on the day of the college commencement.

Attendance at the Pinning Ceremony is required unless excused by the Dean of Nursing and Allied Health prior to event. Pinning ceremony attire shall consist of a white scrub uniform, and all white shoes. At the pinning ceremony, the student's hair may be worn down and behind the shoulders. Fingernails may be painted.

#### **DCCC Graduation**

All graduating students are encouraged to attend the DCCC graduation. This is generally held in the afternoon the same day as the morning Pinning Ceremony.

#### Licensure

To become licensed in the State of Kansas, the student must make application to both the Kansas State Board of Nursing (KSBN) and the National Council of State Boards of Nursing (NCSBN). Students are responsible for payment of fees for both KSBN and NCLEX. **The fees are subject to change**.

If students are applying to states other than Kansas, it is the responsibility of the student to inquire as to the requirements of that state. The students are also responsible for printing and completing the application for that state.

Application to the Kansas State Board of Nursing for licensure is done through the KSBN website at <a href="https://egov.ksbn.ks.gov/egov/">https://egov.ksbn.ks.gov/egov/</a>. Fees will be collected electronically using a debit or credit card at the time of application.

Instructions for application can be found at <a href="https://ksbn.kansas.gov/license/application/online-instructions/">https://ksbn.kansas.gov/license/application/online-instructions/</a> under examination section.

The fee to take the NCLEX examination is paid to Pearson Vue and currently is \$200. The fee for licensure depends on the type of license applied for and can be found on the Kansas Board of Nursing website at <a href="https://ksbn.kansas.gov/fees/">https://ksbn.kansas.gov/fees/</a>.

## **Finger Prints and Background Check**

Students will be provided with information regarding Kansas Board of Nursing (KSBN) requirements during the final semester of their program.

Additional information may be found on the KSBN website at https://ksbn.kansas.gov/fingerprints-and-background/

## **Official Transcripts**

Kansas Board of Nursing requires official transcripts as a part of the application. Please have all official transcripts from schools attended on file in the Registrar's Office. <u>All financial obligations to the college AND ATI green light requirements must be met before a transcript will be released</u>. Incomplete applications cannot be submitted to the Kansas State Board of Nursing.

#### **NCLEX Prep**

Students will be provided with information for NCLEX prep during their final semester of the nursing program. Additional information regarding initial licensure and NCLEX may be found on the KSBN website at <a href="https://ksbn.kansas.gov/initial-application/">https://ksbn.kansas.gov/initial-application/</a>

#### Standard of Practice

Each registered professional nurse or practical nurse shall be familiar with the Kansas (or other licensing state) Nurse Practice Act, standard of practice of the profession and code of ethics for professional nurse or practical nurse K.A.R 60-3-109a. It is the individual's responsibility to practice with in the scope set forth by the Nurse Practice Act in the state in which the nurse is functioning. These can be found or requested from each state's website. The Kansas Nurse Practice Act can be found as a PDF file on the KSBN website: <a href="www.ksbn.org">www.ksbn.org</a>. Links to all boards of nursing for each state may be found at the NCSBN website.

#### License Renewal

Nursing licenses are renewed every two (2) years. Thirty (30) hours of continuing education are required for each two (2) year renewal. Licenses are renewed in the even or odd years that coincide with the year of your birth; i.e., born in odd year, renew your nursing license in an odd year. First time renewals are exempt from the mandatory continuing education requirements. The renewal form will be sent to you at least sixty (60) days before the expiration of your license.

K.S.A. 65-1117

**Be sure** to inform the Board of Nursing of any change of name or address:

Kansas State Board of Nursing Landon State Office Building 900 SW Jackson, Suite 1051 Topeka, KS 66612-1256

## **Grievance Policy/Procedure**

#### **DCCC Grievance Procedure**

The Dodge City Community College Student Grievance Policy may be found in the DCCC 2023-2024 Student Handbook and College Catalog. The handbook may be found on My DC3 Web under the Student tab.

## **Department of Nurse Education Grievance Procedure Guidelines**

See Chain of Command under General Information in this handbook. Using clear communication and the chain of command may prevent misunderstandings from becoming grievances. The following guidelines are pertinent to the Department of Nursing. Students who wish to pursue further grievance may do so through the DCCC grievance procedures as identified above and in the DCCC Calendar/Handbook and DCCC Catalog.

- 1. Upon determination of a grievance, the student(s) will inform the involved faculty member(s) of the intent to grieve the conflict/situation.
- 2. Arrange an appointment with the Dean of Nursing and Allied Health, stating intent of the appointment and the specific area of concern, within 10 business days of the action/incident.
- 3. Provide copies of all pertinent data/documentation for presentation to the Dean of Nursing & Allied Health prior to the meeting for her/his review.
- 4. Include a written, dated and signed summary statement of your perception of the conflict/situation/event.
- 5. Select a peer/representative of your choice to attend the meeting with you.
- 6. Be prepared to present your defense utilizing the above items.
- 7. Upon conclusion of the presentation to the Dean of Nursing & Allied Health, you will be asked to wait for further action.
- 8. The Dean of Nursing & Allied Health will request the same procedure, (steps 3-6) of the involved faculty member(s).
- 9. After hearing, the presentations from both parties the Dean of Nursing & Allied Health will determine a recommendation for action. If deemed necessary by the Dean of Nursing and Allied Health, the grievance may be referred to the Vice President of Workforce Development for review. The student will be notified of the recommendation or referral by the Dean of Nursing and Allied Health.
- 10. If the recommendation by the Dean of Nursing and Allied Health is not acceptable, the student will be directed to the grievance procedure listed under Code of Conduct in the DCCC Catalog/Student Handbook for guidance in pursuing the grievance/complaint.

# **Program of Study**

# **Curriculum for Associate of Applied Science in Nursing Degree**

## Includes:

- Pre-Requisite Courses—required by all nursing graduates
- Traditional Generic RN Plan
- Transfer: LPN-RN Completion Plan
- LPN Certificate Opt-Out Plan

PRE-REQUISITE COURSES		
Course Number	Course Name	Credits
PSY 101	General Psychology	3
ENG 102	English Composition I	3
SP 106	Principles of Speech	3
MATH 101	Modern College Math	3
(or above)		3
PSY 102	Human Growth and Development	
<mark>OR</mark>	OR OR	3
PSY 202	Developmental Psychology	
ZOO 201	Human Anatomy and Physiology I*	4
ZOO 202	Human Anatomy and Physiology II*	4
BIO 210	Microbiology*	5
TOTAL GENERAL EDUCATION CREDITS 28		28

<sup>\*</sup> Science courses must be current in the last 7 years.

TRADITIONAL GENERIC RN PLAN NURSING COURSES		
Course Number	Course Name	Credits
FALL SEMESTER	/EAR 1	
NR 101	Fundamentals of Nursing	6
NR 107	Nursing Pharmacology	3
SPRING SEMESTER YEAR 1		
NR 103	Medical Surgical Nursing I	5
NR 106	Medical Surgical Nursing II	6
FALL SEMESTER YEAR 2		
NR 208	Nursing Care of the Adult I	4
NR 210	Maternal Child Nursing	6
SPRING SEMESTER YEAR 2		
NR 203	Mental Health Nursing	4
NR 204	The Nursing Environment	2
NR 209	Nursing Care of the Adult II	4
	NURSING CREDITS	40
TOTAL NURSING	PROGRAM + PRE-REQUISITES	68

TRANSFER: LPN TO RN PLAN NURSING COURSES		
Course Number Course Name Credits		Credits
Transfer courses to total 20 hours for LPN from LPN program. Must also have LPN license.		
SUMMER SEMESTER		
NR 200	LPN to RN Transitions	1
FALL SEMESTER YEAR 2		
NR 208	Nursing Care of the Adult I	4

NR 210	Maternal Child Nursing	6
SPRING SEMESTER YEAR 2		
NR 203	Mental Health Nursing	4
NR 204	The Nursing Environment	2
NR 209	Nursing Care of the Adult II	4
NURSING CREDITS		21
TRANSFER CREDITS		20
TOTAL NURSING PROGRAM + PRE-REQUISITES		69

LPN CERTIFICATE OPT-OUT NURSING COURSES		
Course Number	Course Name	Credits
FALL SEMESTER Y	/EAR 1	
NR 101	Fundamentals of Nursing	6
NR 107	Nursing Pharmacology	3
SPRING SEMESTER YEAR 1		
NR 103	Medical Surgical Nursing I	5
NR 106	Medical Surgical Nursing II	6
SUMMER SEMESTER YEAR 1		
NR 102	Maternal Child Nursing I	3
NURSING CREDITS 23		23
TOTAL NURSING PROGRAM + PRE-REQUISITES		51

## <u>Progression Policy</u> General Education Courses

Day/Evening/Guided Studies/Online/Hybrid Online courses:

To be considered for admission to core nursing program courses, all general education courses listed in the Associate of Applied Science for Nursing degree curriculum must be completed with a minimum with a grade of at least a "C" or higher and cumulative pre-requisite GPA of 2.75 accordance with the DCCC grading scale.

## **Nursing Courses**

The following requirements must be met to progress through the nursing program:

- 1. Core nursing courses must be completed in the sequence listed in the program curriculum.
- 2. In order to successfully complete the course and be allowed to progress in the program, the student must maintain/obtain:
  - a. A passing clinical component score and meet all of the minimum clinical requirements to obtain a clinical pass (see clinical section of handbook for more specific information). A separate clinical grade is not given for nursing courses. To progress through the program the student must attain each course clinical objective and competency.
  - b. A minimum grade of 78% "C" in accordance with the Department of Nursing grading scale in the didactic content of each nursing course,
  - c. A minimum of 78% C exam grade average (even if the overall course average is 78% or above),
  - d. A passing overall course average (78% or above) after all assignments and points have been awarded. For example: A student has a 78% exam average, but has an overall course average (with all points awarded for exams, homework, participation, etc.) is 77%. This student *will not* be allowed to progress in the program due to the D course average.

The student with ONE U-unsatisfactory in a clinical setting will be required to comply with a formal remediation plan, referred to as a Clinical Remediation Plan. Upon resolution of plan terms or the end of the course, if the student has failed to meet the course clinical requirements, the final course grade assigned will be an "F" regardless of the didactic grade and the student will be suspended from the nursing program.

The following will result in an Unsatisfactory (U) score for a clinical course.

- Two consecutive Needs Improvement (NI) ratings on daily assessments. This student demonstrates continued non-compliance or no progression of skills/behaviors after being counseled by faculty.
- One NI-unsafe rating. This student demonstrates a risk to client safety during a clinical experience.
- Failure to meet the terms of a Clinical Remediation Plan

Students who receive TWO (2) U-unsatisfactory, or one NI-unsafe, ineffective rating are unable to meet the course clinical objectives, competencies, and requirements. The final course grade assigned will be an "F" regardless of the didactic grade and the student will be suspended from the nursing program.

Students who are unable to maintain a didactic grade or exam grade average of 78% "C", or is not on course to pass at least ½ of the unit exams during a course will be required to submit a formal remediation plan, referred to as a "Learning Contract". Per the contract policy, it is the student's responsibility to seek out a contract/remediation plan from course faculty. Learning Contracts will be initiated as soon as the 2<sup>nd</sup> exam in the course or as soon as the student meets one of the above criteria. At the end of the course, if the student has not attained a minimum grade of 78% "C" in didactic content the student will be suspended from the nursing program, for a first attempt, or dismissed from the nursing program for a second attempt.

## Progression After Year 1

Students who have successfully completed the progression requirements for year 1 will automatically continue on to year 2 unless notice is given to the DNE regarding student's intent to transfer to another college/program.

Selected students may be eligible to obtain their LPN certificate (through an OPT-OUT) if they meet certain requirements. Please speak with the Dean of Nursing and Allied Health to inquire about this option. To obtain the Practical Nursing (LPN) Certificate, students must complete the following plan of study.

PRE-REQUISITE COURSES		
Course Number	Course Name	Credits
PSY 101	General Psychology	3
ENG 102	English Composition I	3
SP 106	Principles of Speech	3
MATH 101	Madaya Callaga Makh	2
(or above)	Modern College Math	3
PSY 102	Human Growth and Development	
OR	OR	3
PSY 202	Developmental Psychology	
ZOO 201	Human Anatomy and Physiology I*	4
ZOO 202	Human Anatomy and Physiology II*	4
BIO 210	Microbiology*	5
TOTAL GENERAL EDUCATION CREDITS 28		

LPN CERTIFICATE OPT-OUT NURSING COURSES		
Course Number	Course Name	Credits
FALL SEMESTER Y	YEAR 1	
NR 101	Fundamentals of Nursing	6
NR 107	Nursing Pharmacology	3
SPRING SEMESTER YEAR 1		
NR 103	Medical Surgical Nursing I	5
NR 106	Medical Surgical Nursing II	6
SUMMER SEMESTER YEAR 1		
NR 102	Maternal Child Nursing I	3
	NURSING CREDITS 23	
TOTAL NURSING PROGRAM + PRE-REQUISITES		51

\*Students who chose to OPT-OUT will not be eligible to continue to second year until a year has elapsed. **Student must meet all requirements of the non-generic admission criteria, including the GPA, as well as be subject to seat availability.** Refer to the Non-Generic Admissions policy.

## Refund Policy

## Refund Policy—Day, Night and Outreach Classes

A 100% refund of tuition and college fees for dropped classes will be made up to the eighth (8<sup>th</sup>) business day of the academic semester. Nursing fees may be subject to decrease if drop is after payment to outside vendors (ATI, electronic documentation, drug screening, etc.). These fees are non-refundable by policies of these vendors. After the eighth (8<sup>th</sup>) business day of the academic semester, there will be no refunds for withdrawn class(es) and the transcript will reflect a "W" for withdrawn class(es). Students earn the grade listed in the course if withdrawal is after last withdrawal date listed on the current DCCC calendar.

#### Refund Policy—Summer School

A 100% refund of tuition and fees for dropped classes in the summer depends on the length of the term. Please check with the Business Office for refund dates and details.

## Exams (Unit and ATI) and Skills Remediation Procedure

#### Purpose

The purpose of remediation is to identify, remediate, and counsel those individuals who demonstrate behaviors or evidence of difficulties in their Nursing Program as early as possible. Remediation is a system of support for the student, and is not a disciplinary action. The sole purpose of this program is to help struggling students with remediation efforts designed at assisting them to become better equipped to be successful nurses. Remediation may be made for any significant areas of weaknesses. The faculty seeks to ensure that each student successfully completes our program, and is ready to enter the profession having assimilated the necessary knowledge, skills, and attitude and conduct essential for the successful nurse.

#### Policy

There are two types of remediation: required and recommended.

- Required Remediation
  - All students will be required to complete the standardized ATI remediation plan/focused review following a proctored ATI exam.
  - Students who score 1 or Below on the initial proctored ATI exam will be required to complete the standardized ATI remediation plan/focused review and take the second proctored exam within three weeks of the initial proctored exam.
  - Students who are referred for remediation from their clinical instructor will be required to remediate in the practice laboratory and meet with the Nursing Success Center Coordinator. A formal remediation plan will be initiated and it is the responsibility of the student to ensure that requirements are met and confirmed by signature on the form.
  - Students who are referred for remediation from their laboratory instructor will be required to remediate in the practice laboratory and meet with the Nursing Success Center Coordinator. A formal remediation plan will be initiated and it is the responsibility of the student to ensure that requirements are met and confirmed by signature on the form.
  - Students may be required to complete remediation assignments after an examination in which the average class score is less than 78%. These assignments will be communicated to the students by the course instructor following review of the exam.
- Recommended Remediation
  - o If a student is unsuccessful on a theory exam, the student is expected to complete a self-remediation form, submit it to their instructor and the Nursing Success Center Coordinator within three days of the next scheduled exam.

 The instructor or Nursing Success Center Coordinator may identify a need for improvement. It is the student's choice whether to follow through with those suggestions.

#### **Procedure**

#### Required Remediation: Skills

- 1. The clinical or laboratory instructor refers the student for remediation of nursing skill(s) by completing the Clinical Remediation Plan with the student.
- 2. The student makes an appointment for remediation with the Nursing Lab Coordinator.
- 3. The Lab Coordinator will notify the appropriate nursing faculty by documenting the minutes/hours of remediation and signifying that the student has satisfactorily completed remediation requirements.

## Required Remediation: Standardized ATI Exams

- 1. All students after the initial proctored exam will be required to complete the standardized ATI remediation plan. Retesting is only required for students scoring below a level 2 on the initial exam. Any student scoring level 2 or 3 is encouraged to retake the exam after remediation.
- 2. Remediation/focused review shall be completed according to the following:
  - a. Score "Below Level 1"—Student is required to complete 4 hours of focused review/remediation prior to the repeat exam.
  - b. Score "Level 1"—Student is required to complete 3 hours of focused review/remediation prior to the repeat exam.
  - c. Score "Level 2"—Student is required to complete 2 hours of focused review/remediation before the scheduled repeat exam.
  - d. Score "Level 3"—Student is required to complete 1 hour of focused review/remediation before the scheduled repeat exam.
- 3. Repeat examinations will be scheduled by course faculty and communicated to students.
- 4. The standardized exam grade will be 10% of the course grade for the related theory course, which will be documented as the higher grade of the two proctored exams.
- 5. The grading scale for ATI Proctored Calculation Exams will be the exact score received on the exam. The grading scale for ATI Proctored Assessments (except the calculation exams) will be as follows:
  - a. Level 3 = 100%
  - b. Level 2 = 90%
  - c. Level 1 = 80%
  - d. Below Level 1 = 78%

## Recommended Remediation: Theory Exams

- 1. If a student is unsuccessful on a theory exam, the student is expected to complete a self-remediation form and submit it to their instructor within three days of the next scheduled exam. (nursing student self-remediation form)
- 2. The faculty member will assist the student in developing an individualized remediation plan.

## Student Employment Policies

Due to the demands of the nursing program and your new student role, working more than twenty (20) hours per week is discouraged. This personal decision should be based on your performance in the classroom and clinical areas, and your health status. If your academic or clinical performance is compromised, you may be suspended from the program for not acquiring or demonstrating the course/program objectives/outcomes even if you have a passing grade in that course. STUDENTS WILL NOT BE EXCUSED FROM CLASS OR CLINICAL ASSIGNMENTS FOR PERSONAL WORK SCHEDULES, CHILDCARE ISSUES AND CAR ISSUES.

If a nursing student is employed in a health care agency, the student uniform is NOT to be worn during employment. Nursing students function as students ONLY when an instructor or preceptor is directing the activity, or it is an official school-coordinated experience (observation experiences, volunteer opportunities, etc.). When in doubt, please seek clarification from faculty or staff prior to the activity. The student must remember that as a student he/she is personally liable for practicing outside the scope of practice if he/she functions as a student without instructor or preceptor guidance.

## Social Media Policy (Department of Nurse Education)

The Dodge City Community College and the Department of Nurse Education supports the use of technology inside and outside the classroom. This support includes the use of social media communication formats such as Facebook, Twitter, Instagram, Snap Chat and other social media. This support comes with the expectation that students in Dodge City Community College programs will uphold the ethical and legal standards of their prospective professions and the Dodge City Community College Student Code of Conduct. Only approved use of social media in the classroom is allowed.

Federal regulations regarding privacy such as Health Insurance Portability and Accountability Act (HIPAA) and Family Education Rights and Privacy Act (FERPA) apply to all personal and academic communication.

It is the expectation that students have read and understand the Student Code of Conduct and Federal regulations related to privacy (HIPAA and FERPA). Noncompliance with this policy will result in disciplinary action, which may include failure of a course, probation, suspension and/or dismissal from the program/college.

<u>Student use of photography and/or recording devices is prohibited in all classroom, clinical, laboratory, studio, and performance sites unless specifically asked to use in a learning activity.</u> Audio and/or video recording of lecture or study/tutoring sessions must be approved by individual instructors or tutors PRIOR to the lecture.

Students are respectfully requested to refrain from posting to social media accounts any reference to DC3, the nursing program, and any of the cooperating clinical site agencies. As a student of DCCC, you are a direct representative of our college and program. Please realize that any posting is directly reflective of yourself and the college. Absolutely NO client/patient information or information that could be identifiable to a person, place, or situation is allowed to be shared on social media accounts. Social media informational brochures from National Council of State Boards of Nursing are available if students need additional guidance regarding responsible social media use. Students found to be violating client/agency privacy or utilizing/exploiting the nursing program's educational materials or educational experiences in an unethical manner will be disciplined, with possible consequences from remediation up to suspension from the program depending upon the severity of the infractions or identifiable trend of offense.

Students and Allied Health Department of Nurse Education administrators, faculty and staff are discouraged from being friends/followers in any form of social media with a student enrolled in DC3 courses.

If a class has a social media page for use of information purposes, permission to the department designee will be granted to access the page for monitoring of policy compliance.

## Student Technology and Alternative Learning Policies

## **Cell Phone Policy**

As a courtesy to the instructor and fellow students, ALL electronic devices which may disrupt class must be turned off during regular class and testing sessions, unless being used as an instructional/learning device. Absolutely NO cell phones are allowed during tests AND during test reviews. Cell phones in class and clinical (including clinical lab) may be used ONLY at the instructor's or clinical site's discretion. Special or emergency circumstances in which a student knows in advance he/she may need to respond to a phone call during class should be discussed with the instructor prior to class. Emergency phone calls should be directed to the Allied Health Office (620-227-9248) during class and clinical times. In clinical areas, please refer to clinical guidelines. Please remember principles of cell phone etiquette while using cell phones during any nursing school activities.

## **Calculator Policy**

No outside calculators may be used during exams. DCCC Department of Nursing Education will provide calculators for students to use during exams. If the examination is administered through Canvas or ATI, only the built-in calculators provided by the testing software will be allowed.

## Computer/Technology Use by Student Nurses

During classroom/clinical time, student nurses should refrain from personal use of the computer, tablet or other electronic devices that would detract from the learning environment.

Recordings of lectures, study sessions, etc. may only be taken at the discretion of the instructor, staff or tutor. Please ask for consent BEFORE recording. Recordings of student and faculty/staff meetings and conversations may be done for documentation purposes after informing the student that such recordings are taking place. In the case of a recorded meeting or conversation, the student may also record using his/her own device.

#### **Online Exam Best Practices**

Make sure of the following before starting an online exam:

- 1. DNE and ATI examinations will be taken using a college-provided computer only.
- 2. Student will NOT be allowed to wear a "smart-watch" (Fitbit, Apple Watch, etc.) during test taking.
- 3. For maximum efficiency and test security, during a test only one tab can be open at a time. Close all other tabs. Opening other tabs during testing may be viewed as a form of cheating.
- 4. "Save Progress" after every 3-5 questions while taking exams.
- 5. Using ANY device to take screen shots of tests (during test OR during test reviews) violates the Department of Nurse Education Testing Policy.

#### **Alternative Learning Policies**

In the case of implementation of an alternative learning environments and/or formats (i.e. change of classes to online format due to national emergency), students are required to adhere to all department policies. This includes, but is not limited to, attendance, dress code and student conduct requirements. Zoom or other similar alternative format classrooms/clinicals are to be treated the same as face-to-face classroom and clinical times and spaces. Students without adequate technological resources should contact financial aid for assistance.

## Virtual Classroom Rules/Etiquette

In the virtual classroom, it is important that we all agree to follow some basic rules for the good of conversations, to make sure everyone is able to get all the help they need, and to assure a level of seriousness and professionalism appropriate to learning at Dodge City Community College. It is expected that everyone will respect the virtual classroom just as you would the traditional, in-person classroom. According to the DCCC Student Handbook, you may be removed from the classroom environment for inappropriate or offensive appearance or behavior. The following are some basic rules and etiquette for attendance of meetings and classes on virtual learning platforms.

#### 1. Be on Time

#### 2. Be Present

- a. Find a quiet place where you can sit up and be able to concentrate without distractions. Remember your surroundings can also be distracting to your classmates.
- b. Make sure you are following DNE dress-code requirements for class or clinical before signing on. This should include personal hygiene requirements.
- c. Camera must be on and you must be in view of the camera.
- d. Be an active listener.
- e. Stay on topic when chatting.

#### 3. Be Professional and Respectful

- a. Use your real name. Do not change your ID or profile name to a nickname or anything other than the name your instructors call you by in your classes.
- b. Be kind and respectful to others.
- c. When you enter the classroom, mute yourself.
- d. If you would like to use the chat box feature, remember that it is public and a record of the chat is kept and archived.
- e. Be aware of your background and surroundings, and avoid any offensive objects or pictures.
- f. Stay off your phones, other devices, and social media to respect your instructor and class members while in class.
- g. No screen shots or pictures are to be taken during a Zoom class session without permission of all class members.

#### 4. Always Do Your Best Work

- a. Prepare for class by watching provided lectures, review reading materials, etc.
- b. Contribute to the conversation by asking questions and participating in discussions.
- c. Have pen and paper handy to take notes.
- d. Stay focused and on task so you don't miss anything the speaker says.

## Student Nurses Association at Dodge City Community College

DCCC SNA is a campus organization. Membership is open to all students interested in pursuing a career in nursing. Every student in the nursing program at DCCC holds membership and is required to attend SNA meetings throughout the school year. The organization participates in campus and community activities, provides activities to enhance learning, promotes development of professional nursing image, and provides a support system for students. Elected representatives of DCCC SNA are invited to attend and participate at monthly Nurse Faculty Association meetings and committee meetings.

## Bill of Rights and Responsibilities for Students of Nursing

The National Student Nurses' Association (NSNA) believes that students of nursing should take a lead in the recognition, establishment, protection, and utilization of student rights to promote the rights and responsibilities of members of our own nursing schools if we expect to protect and promote the rights of our patients.

Now is the time for students to learn about the essential provisions and orderly procedures that are required within an institution in order to promote individual freedom and responsibility. The NSNA Student Bill of Rights and Responsibilities and the Guidelines for Grievance Procedures should be used to assess whether schools of nursing provide freedom and protection for students and faculty.

NSNA believes that the basis of "rights" and "procedures" is a contractual agreement between the school and student that clearly spells out the expectations and responsibility of students, faculty and administration, and that any agreement must include a procedure for dealing with infringements of the contract.

Every member of a nursing school must be held accountable for his/her actions, be it an instructor, administrator or a student. NSNA believes that every school of nursing should have a written agreement between its students, faculty, and administration even if no "turbulence" exists among the group at the present time.

For many years' students and faculty have talked about the idea of student rights, responsibilities, and grievance procedures to guarantee these rights. It is now time for the idea to be put into action.

The Student Bill of Rights and Responsibilities are a part of the National Student Nurse Association (NSNA) Code of Ethics. This document can be found at <a href="https://www.dropbox.com/s/a229ong58d5jx4p/Code%20of%20Ethics.pdf?dl=0">https://www.dropbox.com/s/a229ong58d5jx4p/Code%20of%20Ethics.pdf?dl=0</a>

The following Student Bill of Rights and Responsibilities was adopted by the NSNA House of Delegates in 1975. Updates, revisions, and amendments were implemented in 1991, 2006, 2017 and 2020. The current version was adopted in April 2020 by the 2019-2020 NSNA Board of Deans.

- 1. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, sex, sexual orientation, gender identity, age, citizenship, religion, national origin, disability, illness, legal status, personal attributes, or economic status.
- 2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom and quality education; students should exercise their freedom in a responsible manner.
- 3. Each institution has a duty to develop policies and procedures which provide for and safeguard the students' freedom to learn.
- 4. Students should be encouraged to develop the capacity for critical judgment and engage in an autonomous, sustained, and independent search for truth.
- 5. Students should be free to take reasoned exception in an informed, professional manner to the data or views offered in any course of study. However, students are accountable for learning the content of any course of study for which they are enrolled.
- 6. Students should have protection, through orderly approved standard procedures, against prejudicial or capricious academic evaluation. However, students are accountable for maintaining standards of academic performance established for each course in which they are enrolled.
- 7. Information about student views, beliefs, political ideation, legal status, United States citizenship status, sexual orientation or other personal information which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as an element of evaluation.
- 8. The student should have the right to advocate for themselves and other students in the construction, delivery and evaluation of the curriculum.

- 9. Institutions should have a clearly written published policy as to the disclosure of private and confidential information which should be a part of a student's permanent academic record in compliance with state and federal laws.
- 10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions in an informed, professional manner, both publicly and privately.
- 11. Students should be allowed to invite and hear any individual of their own choosing within the institution's guidelines, thereby advocating for and encouraging the advancement of their education.
- 12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, thereby encouraging leadership, e.g., through a faculty-student council, student membership, or representation on relevant faculty committees.
- 13. The institution has an obligation to clarify those standards of conduct which it considers essential to its educational mission, community life, and its objectives and philosophy. These may include, but are not limited to, policies on academic dishonesty, plagiarism, punctuality, attendance, and absenteeism.
- 14. Disciplinary proceedings should be instituted only for violations of standards of conduct. Standards of conduct should be formulated with student participation, clearly written and published in advance through an available set of institutional regulations. It is the responsibility of the student to know these regulations.
- 15. The nursing program should have readily available a set of clear, defined grievance procedures.
- 16. As citizens and members of an academic community, students are exposed to many opportunities and they should be mindful of their corresponding obligations.
- 17. Students have the right to belong to or refuse membership in any organization.
- 18. Students have the right to personal privacy in their individual/personal space to the extent that their wellbeing and property are respected.
- 19. Adequate safety precautions should be provided by nursing programs and clinical sites to ensure a safe and protected environment emotionally, socially, and physically. For example, adequate street and building lighting, locks, patrols, emergency notifications, and other security measures deemed necessary to ensure a safe and protected environment.
- 20. Dress code, if present in school, should be established with student input in conjunction with the school administration and faculty. This policy ensures that the highest professional standards are maintained, but also takes into consideration points of comfort and practicality for the student.
- 21. Grading systems should be carefully reviewed initially and periodically with students and faculty for clarification and better student-faculty understanding.
- 22. Students should have a clear mechanism for input into the evaluation of their nursing education and nursing faculty.
- 23. The nursing program should track their graduates' success in finding entry-level employment as registered nurses and make this information available to all who apply and enroll.
- 24. The nursing program should provide comprehensive, clear and concise information related to student loans, scholarships and any other student financial aid.

#### Dodge City Community College Student Nurses Association (SNA) Bylaws

## Article I

The name of this organization shall be the DCCC chapter of the SNA (Student Nurses Association) until such time the membership shall desire to find a distinguishing name.

#### **Article II Purpose and Function**

Section I – The purpose of the DCCC chapter of the SNA is to:

- 1) Assume responsibility for contributing to nursing education in order to provide for the highest quality of health care.
- 2) Provide programs with representatives of fundamental and current professional interest and concerns.
- 3) Aid in the development of the whole person, and his/her professional role, and his/her responsibility for the health care of people in all walks of life.

Section II – The function of the DCCC chapter of the SNA is to:

- 1) Have direct input into the standards of nursing education and influence the educational process.
- 2) Influence health care, nursing education and practice through legislative activities as appropriate.
- 3) Promote and encourage participation in community affairs and activities towards improved health care and the resolution of related social issues.
- 4) Represent nursing students to the consumer, to institutions, and other organizations.
- 5) Promote and encourage students' participation in interdisciplinary activities.
- 6) Promote and encourage recruitment efforts, participation in student activities, and educational opportunities regardless of a person's race, color, creed, gender, sexual orientation and gender identity, lifestyle, national origin, age or economic status.
- 7) Promote and encourage collaborative relationships with nursing and related health organizations.

#### **Article III Membership**

- 1) Active members shall be students enrolled in nursing classes at DCCC leading to licensure as an RN. All active members have voting privileges and may hold one elected office or position.
- 2) Associate members shall be pre-nursing students, enrolled in classes at DCCC in preparation for entrance into a program leading to licensure as an RN, or a baccalaureate degree in nursing. There is no fee to become an associate member. Associate members may volunteer to be a member of a standing or ad hoc committee but may not hold an elected office or position. Associate members do not have voting privileges.
- 3) A member of another chapter may transfer his/her membership to the DCCC chapter upon transference into nursing or pre-nursing classes at DCCC
- 4) All students in the nursing program are active members with a \$5.00 membership fee paid with enrollment to the office, with tuition as a fee.

#### **Article IV Officers**

## Section I

The officers of this association, in order of succession shall be President, Vice-President/President-Elect, Treasurer, Secretary, Treasurer-Elect, Secretary-Elect. The Executive Board shall consist of officers and members of the Executive Committee.

#### Section II

- 1) The President shall:
  - a) Be a second level student and serve as the Chief Executive Officer who shall preside at all meetings.
  - b) Appoint ad hoc committees and name the chairpersons for those committees as the need arises.
  - c) Have a written agenda for upcoming meetings and distribute copies to each officer and sponsor.
  - d) Perform all duties usually allocated and attributed to the President.
- 2) The Vice-President/President-Elect shall:
  - a) Be a first level student and a continuing nursing student.
  - b) Preside at meetings in the President's absence and work with the presiding president and executive committee.
  - c) Schedule a short program relating to areas of nursing, campus and/or community interest in conjunction with the meetings.
  - d) In the event the Vice-President does not continue on to the second level, election shall take place the following fall to fill the position.
- 3) The Treasurer shall:
  - a) Be in charge of all finances, collect all monies except dues, and pay valid and appropriate bills.
  - b) Be responsible for taking of the minutes when the Secretary is absent.
  - c) Keep a financial notebook/file to be turned into a sponsor at the end of the year.
- 4) The Secretary shall:
  - a) Keep written minutes of all meetings both executive and general.
  - b) Provide a copy of all minutes to the Executive Board and Sponsors.
  - c) Keep minutes on file in a notebook to be turned in to a sponsor at the end of the year.
- 5) The Treasurer-Elect and Secretary-Elect shall:
  - a) Perform all duties usually allocated to the corresponding position at the request of the President and/or in the absence of original chair holder.

#### Section III

Members of the executive committee will consist of a representative and alternate from each level in each of the following areas:

- 1) Allied Health Faculty Committee
- 2) Policy and Procedures Committee
- 3) Curriculum Committee
- 4) Student Government Association

#### **Section IV**

1) A vacancy shall exist in the executive board when an officer becomes deceased, resigns from office, drops from the DCCC nursing program, leaves DCCC or when the executive board declares by two-thirds majority votes the office to

be vacant. A student shall be appointed by the executive board to serve the rest of the vacancy term for the school year.

- 2) When a vacancy occurs in the office of President, Vice-President/President-Elect shall become president. A new Vice-President/President-Elect shall be elected at the next general meeting by the general membership by a simple majority vote.
- 3) The executive board shall meet with meetings to be called by the President. All decisions made by the executive board shall be referred to the next general meeting as recommended for action.
- 4) No person shall hold more than one executive office at a time.
- 5) The Vice President Elect, Treasurer Elect, and Secretary Elect for DCCC SNA will be voted on in the fall of the present school year at the first meeting.
- 6) Each level shall provide one representative for Student Government.
- 7) The student government members shall represent the chapter at all student government meetings as possible and shall report back to the chapter.

## **Article V Election of Officers**

- 1) The Vice-President/President-Elect shall assume the office of President after the last meeting of the spring semester.
- 2) The Secretary Elect shall assume the office of Secretary after the last meeting of spring semester. The Treasurer Elect shall assume the office of Treasurer after the last meeting of the spring semester.
- 3) The election of Vice-President/President-Elect, the Secretary, the Treasurer, and the Student Government members shall take place at the first meeting of the fall semester. These officers shall assume office upon election.
- 4) Any active member is eligible for nomination for an office. Any active member may present a nominee for an office.
- 5) All nominations for officers shall be made from the floor at the meetings designated for elections.
- 6) Officers shall be elected by a simple majority vote.

#### **Article VI Consultant Council**

The consultant council may consist of up to four sponsors or consultants.

- a. All sponsors should be current faculty/staff members of the Dodge City Community College.
- b. All consultants should be previous members of the Dodge City Community College SNA.
- c. The DCCC SNA President, with the approval of the membership may appoint two consultants. Consultants may serve for a period of 1 year after which they may be reappointed. At least one consultant or sponsor shall be at every scheduled monthly meeting or submit a report to the President.
- d. The sponsor or consultant will not have voting privileges and will provide consultation only. The membership has the right to accept or reject the consultation from those named above.

#### **Article VII Meetings**

- 1) The chapter shall meet at least once a month at a time set by the general membership.
- 2) The first meeting of the fall semester shall be called by the President at a time suitable for the general membership. The President shall choose a time considering the scheduling of both levels of the nursing program as well as general education classes in the pre-nursing curriculum.
- 3) Special meetings may be called by the approval of executive committee.
- 4) The consultant council shall be notified of all meetings one week prior to the scheduled date.

- 5) All meetings of this association shall be conducted according to standards set forth in <u>Robert's Rules of Order Newly</u> Revised, when rules apply and are not in conflict with these bylaws.
- 6) No proxies shall be allowed at any meeting.

#### **Article VIII Finances and Debts**

- 1) Payments of all debts under or equal to \$75.00 shall be approved by the officers and sponsors of the organization. Payments of debts exceeding \$75.00 shall be approved by the general membership.
- 2) All fundraising projects shall be approved by the general membership.

## **Article IX Rules and Procedures**

- 1) These bylaws may be amended or revised by a two-thirds vote of the members present in general or special meetings.
- 2) This chapter may establish bylaws relating to the operation of the chapter, which shall be adopted and amended by a two-thirds vote of the members present in general or special meetings. All bylaws must conform to the principles of this constitution
- 3) Any member of the chapter, either active or associate, may introduce an amendment or bylaw proposal.
- 4) Amendments and bylaws shall take effect immediately upon adoption, unless specifically provided for.

## **Article X Communication**

- 1) All communications to the membership will be posted by either email, college messaging system, and/or display of bulletins in community areas or in the student mailbox in the nursing department.
- 2) All communications received by the chapter shall be addressed at general meetings. Those communications requesting answers shall be answered by the general membership. The written answer shall be the duty of the secretary.

## Student Nurse Organizations (State and National)

#### Kansas Association of Nursing Students

KANS, the Kansas Association of Nursing Students, is the state organization for representation of nursing students in Kansas. The purpose of KANS is: to assume responsibility for contributing to nursing education in order to provide for the highest quality health care; to provide program representation of fundamental interests and concerns; and to aid in the development of the whole person, his/her responsibility for the health care of people in all walks of life. The KANS organization is open to all nursing students (PN, ADN, and pre-BSN). Students are encouraged to join KANS and to be an active member in the organization. Any involvement/time demands due to KANS participation should be communicated ASAP and regularly with all instructors involved. The schedule will be reviewed and evaluated with each course team to verify time toward clinical hour credits.

#### National Student Nurses' Association

NSNA, the National Student Nurses' Association, is a nationwide organization of students of nursing. Its purpose is to "aid in the development of the individual student and to urge students of nursing as future health professionals, to be aware of and to contribute to the health care of all people." Any involvement/time demands due to NSNA participation should be communicated ASAP and regularly with all instructors involved. The schedule will be reviewed and evaluated with each course team to verify time toward clinical hour credits.

## Testing/Exam Policies

#### **Late Exam Policy**

- A student that is absent on the day of a scheduled exam is responsible for contacting the instructor who
  monitored the exam. The <u>student should initiate the contact</u> prior to the day they return to class. Faculty will
  not initiate the contact.
- Each student will be allowed one "emergency absence" for scheduled exams per course. This should be
  reserved for true emergency situations only, (hospitalization of self or dependent child, vehicle accidents, death of
  immediate family members). Even in the case of emergency situations, it is the student's responsibility to
  contact the instructor responsible for the test.
- Each subsequent exam not taken at the scheduled date and time will be penalized a 10% reduction in the
  percentage earned on the exam. This shall apply to both unit and ATI exams. For example: A student scores a
  98% on the exam. After the 10% penalty, the student's grade would be recorded as 88%. Scores are not
  rounded.
- Failure to meet with the instructor on the day back after the absence or failure to take the exam on the rescheduled date will incur an additional 3% penalty for each day until the instructor is notified or the exam has been taken.
- Quizzes and activities conducted in class cannot be made up unless the absence is related to a DCCC activity. If
  a student is absent on a day a quiz or activity is given, the student will receive a zero if it is part of the course
  grade.

An exam may be taken early, without penalty, with an instructor's permission. Make up or early exams will be administered at the time/location as determined by the instructor. To maintain academic integrity, makeup or early exams may be an alternative version <u>of the same content</u>.

## **Testing Center Information**

The DCCC Testing Center is available from 8 am to 5 pm Monday through Friday. The center will not accept students for testing after 4 pm. The center has a disability accessible testing station available. If you have been granted testing accommodations (i.e. a reader, extended time, etc.) contact the Testing Center at 620-227-9357 at least 24 hours prior to test administration.

#### **Test Administration**

- 1. Testing will begin promptly at the announced time.
- 2. At no time will entrance into the classroom by late arrivals be tolerated after test administration has begun. Late arrivals will be expected to go to the Testing Center to take the exam.
- 3. Late arrivals must make arrangements to test through the appropriate course faculty at the time/location as determined by the instructor.
- 4. Students may not leave the test site before concluding the test without express permission from the test administrator. Students are NOT allowed unsupervised restroom breaks during tests. Students requesting restroom privileges will be accompanied by faculty or staff as available.
- 5. Students and faculty will maintain a quiet environment during the testing procedure.
- 6. No cell phones, pagers, other electronic devices are allowed during testing procedures.
- 7. The test administrator or a course instructor will remain at the test site at all times.
- 8. Errors on the test noted by faculty and/or students will be announced to the class and noted on the classroom board.
- 9. Calculators will be provided for tests requiring mathematical calculations. Students may not use personal calculators or other electronic devices.
- 10. Test taking areas must be cleared of books, notebooks and personal items. All personal items will be placed at the front of the room prior to testing. No items will be allowed on desk during test except for what instructor gives students.
- 11. Student questions related to test content will not be addressed during the testing session.
- 12. Students must follow all directives on the test booklet coversheet provided if a paper test is administered.

- 13. Students may not have on jackets, hats, coats or gloves during testing.
- 14. No food or drinks will be allowed in the testing area during the test.
- 15. In the case of alternative learning format implementation, additional requirements may be necessary.

## **Test Question Copying Policy**

When taking a test OR reviewing a test, students may not copy the test questions for further study. This includes NO CELL PHONE PICTURES, NO PRINTING, NO SCREEN SHOTS, NO HANDWRITTEN copies of the test/test questions. Student(s) found to be in violation of this policy will be subject to the Academic Honesty Policy: Cheating.

#### **Test Scores**

The nursing faculty will provide the student's test score within five (5) school days after the administration of the test is complete. (Student absence on test days may delay the completion and return of final test scores to the group as a whole.) Students may review test grades for grade clarification with instructor for ten (10) days **ONLY** after grades are posted. After the ten (10) day period, all grades are final.

According to the Department of Nurse Education Faculty Handbook, if the median score of the class for an examination falls below 78%, students must complete a remediation assignment as assigned by faculty. Any additional points for remediation should not be automatically expected by students, but may be given at the discretion of the faculty and Dean of Nursing and Allied Health.

#### **Test Bonus Points / Additional Points**

It is the policy of DCCC DNE that extra points or bonus points are not required to be awarded after any exam. These additional points should not be expected by students and are only awarded based on extenuating circumstances.

#### **Test Reviews**

Student review of missed items on examinations must occur within 2 weeks (10 business days) following the posting of final grades for an exam. The exam may only be reviewed one time, with a faculty member or Nursing Success Coordinator. The purpose of these reviews is for the student to understand items needed for remediation of learning. Challenge of test questions is not allowed during these sessions.

## Appendix A—Quality and Safety Education for Nurses (QSEN)

General information on QSEN can be found on their website: <a href="http://qsen.org/">http://qsen.org/</a>

The overall goal for the Quality and Safety Education for Nurses (QSEN) project is to meet the challenge of preparing future nurses who will have the knowledge, skills and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work.

QSEN pre-licensure KSAs and definitions can be found at <a href="https://qsen.org/competencies/pre-licensure-ksas/">https://qsen.org/competencies/pre-licensure-ksas/</a>

#### **PATIENT-CENTERED CARE**

• **Definition:** 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.

## • Knowledge:

- o Integrate understanding of multiple dimensions of patient centered care:
  - patient / family / community preferences, values,
  - coordination and integration of care
  - information, communication, and education,
  - physical comfort and emotional support,
  - involvement of family and friends
  - transition and continuity
- Describe how diverse cultural, ethnic and social backgrounds function as sources of patient, family, and community values
- Demonstrate comprehensive understanding of the concepts of pain and suffering, including physiologic models of pain and comfort.
- Examine common barriers to active involvement of patients in their own health care processes
- Describe strategies to empower patients or families in all aspects of the health care process
- Explore ethical and legal implications of patient-centered care
- Describe the limits and boundaries of therapeutic patient-centered care
- o Discuss principles of effective communication
- Describe basic principles of consensus building and conflict resolution
- Examine nursing roles in assuring coordination, integration, and continuity of care

#### Skills:

- Elicit patient values, preferences and expressed needs as part of clinical interview, implementation of care plan and evaluation of care
- o Communicate patient values, preferences and expressed needs to other members of health care team
- o Provide patient-centered care with sensitivity and respect for the diversity of human experience
- Assess presence and extent of pain and suffering
- Assess levels of physical and emotional comfort
- o Elicit expectations of patient & family for relief of pain, discomfort, or suffering
- o Initiate effective treatments to relieve pain and suffering in light of patient values, preferences and expressed needs
- o Remove barriers to presence of families and other designated surrogates based on patient preferences
- Assess level of patient's decisional conflict and provide access to resources
- Engage patients or designated surrogates in active partnerships that promote health, safety and well-being, and self-care management
- o Recognize the boundaries of therapeutic relationships
- o Facilitate informed patient consent for care
- Assess own level of communication skill in encounters with patients and families
- o Participate in building consensus or resolving conflict in the context of patient care
- o Communicate care provided and needed at each transition in care

#### Attitudes:

- Value seeing health care situations "through patients' eyes"
- Respect and encourage individual expression of patient values, preferences and expressed needs
- Value the patient's expertise with own health and symptoms
- o Seek learning opportunities with patients who represent all aspects of human diversity
- Recognize personally held attitudes about working with patients from different ethnic, cultural and social backgrounds
- Willingly support patient-centered care for individuals and groups whose values differ from own
- o Recognize personally held values and beliefs about the management of pain or suffering
- Appreciate the role of the nurse in relief of all types and sources of pain or suffering
- Recognize that patient expectations influence outcomes in management of pain or suffering
- Value active partnership with patients or designated surrogates in planning, implementation, and evaluation of care
- Respect patient preferences for degree of active engagement in care process
- Respect patient's right to access to personal health records
- Acknowledge the tension that may exist between patient rights and the organizational responsibility for professional, ethical care
- o Appreciate shared decision-making with empowered patients and families, even when conflicts occur
- Value continuous improvement of own communication and conflict resolution skills

#### **TEAMWORK AND COLLABORATION**

• **Definition:** Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

## Knowledge:

- Describe own strengths, limitations, and values in functioning as a member of a team
- Describe scopes of practice and roles of health care team members
- Describe strategies for identifying and managing overlaps in team member roles and accountabilities
- o Recognize contributions of other individuals and groups in helping patient/family achieve health goals
- Analyze differences in communication style preferences among patients and families, nurses and other members of the health team
- Describe impact of own communication style on others
- Discuss effective strategies for communicating and resolving conflict
- Describe examples of the impact of team functioning on safety and quality of care
- Explain how authority gradients influence teamwork and patient safety
- o Identify system barriers and facilitators of effective team functioning
- Examine strategies for improving systems to support team functioning

#### Skills:

- Demonstrate awareness of own strengths and limitations as a team member
- Initiate plan for self-development as a team member
- Act with integrity, consistency and respect for differing views
- Function competently within own scope of practice as a member of the health care team
- Assume role of team member or leader based on the situation
- Initiate requests for help when appropriate to situation
- Clarify roles and accountabilities under conditions of potential overlap in team member functioning
- o Integrate the contributions of others who play a role in helping patient/family achieve health goals
- o Communicate with team members, adapting own style of communicating to needs of the team and situation
- Demonstrate commitment to team goals
- Solicit input from other team members to improve individual, as well as team, performance
- Initiate actions to resolve conflict
- Follow communication practices that minimize risks associated with handoffs among providers and across transitions in care
- Assert own position/perspective in discussions about patient care

- Choose communication styles that diminish the risks associated with authority gradients among team members
- Participate in designing systems that support effective teamwork

#### Attitudes:

- Acknowledge own potential to contribute to effective team functioning
- Appreciate importance of intra- and inter-professional collaboration
- Value the perspectives and expertise of all health team members
- Respect the centrality of the patient/family as core members of any health care team
- Respect the unique attributes that members bring to a team, including variations in professional orientations and accountabilities
- o Value teamwork and the relationships upon which it is based
- Value different styles of communication used by patients, families and health care providers
- o Contribute to resolution of conflict and disagreement
- o Appreciate the risks associated with handoffs among providers and across transitions in care
- Value the influence of system solutions in achieving effective team functioning

#### **EVIDENCE-BASED PRACTICE**

• **Definition:** Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.

## Knowledge:

- Demonstrate knowledge of basic scientific methods and processes
- Describe EBP to include the components of research evidence, clinical expertise and patient/family values.
- o Differentiate clinical opinion from research and evidence summaries
- Describe reliable sources for locating evidence reports and clinical practice guidelines
- o Explain the role of evidence in determining best clinical practice
- Describe how the strength and relevance of available evidence influences the choice of interventions in provision of patient-centered care
- Discriminate between valid and invalid reasons for modifying evidence-based clinical practice based on clinical expertise or patient/family preferences

#### Skills:

- Participate effectively in appropriate data collection and other research activities
- Adhere to Institutional Review Board (IRB) guidelines
- o Base individualized care plan on patient values, clinical expertise and evidence
- o Read original research and evidence reports related to area of practice
- Locate evidence reports related to clinical practice topics and guidelines
- Participate in structuring the work environment to facilitate integration of new evidence into standards of practice
- Question rationale for routine approaches to care that result in less-than-desired outcomes or adverse events
- Consult with clinical experts before deciding to deviate from evidence-based protocols

## Attitudes:

- o Appreciate strengths and weaknesses of scientific bases for practice
- Value the need for ethical conduct of research and quality improvement
- Value the concept of EBP as integral to determining best clinical practice
- Appreciate the importance of regularly reading relevant professional journals
- Value the need for continuous improvement in clinical practice based on new knowledge
- Acknowledge own limitations in knowledge and clinical expertise before determining when to deviate from evidence-based best practices

#### **QUALITY IMPROVEMENT (QI)**

- **Definition:** 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 health care systems.
- Knowledge:

- Describe strategies for learning about the outcomes of care in the setting in which one is engaged in clinical practice
- Recognize that nursing and other health professions students are parts of systems of care and care processes that affect outcomes for patients and families
- o Give examples of the tension between professional autonomy and system functioning
- Explain the importance of variation and measurement in assessing quality of care
- Describe approaches for changing processes of care

#### Skills:

- o Seek information about outcomes of care for populations served in care setting
- Seek information about quality improvement projects in the care setting
- Use tools (such as flow charts, cause-effect diagrams) to make processes of care explicit
- o Participate in a root cause analysis of a sentinel event
- Use quality measures to understand performance
- Use tools (such as control charts and run charts) that are helpful for understanding variation
- Identify gaps between local and best practice
- Design a small test of change in daily work (using an experiential learning method such as Plan-Do-Study-Act)
- Practice aligning the aims, measures and changes involved in improving care
- Use measures to evaluate the effect of change

#### Attitudes:

- Appreciate that continuous quality improvement is an essential part of the daily work of all health professionals
- Value own and others' contributions to outcomes of care in local care settings
- Appreciate how unwanted variation affects care
- Value measurement and its role in good patient care
- Value local change (in individual practice or team practice on a unit) and its role in creating joy in work
- o Appreciate the value of what individuals and teams can to do to improve care

## **SAFETY**

• **Definition:** Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.

#### Knowledge:

- Examine human factors and other basic safety design principles as well as commonly used unsafe practices (such as, work-arounds and dangerous abbreviations)
- Describe the benefits and limitations of selected safety-enhancing technologies (such as, barcodes, Computer Provider Order Entry, medication pumps, and automatic alerts/alarms)
- Discuss effective strategies to reduce reliance on memory
- o Delineate general categories of errors and hazards in care
- Describe factors that create a culture of safety (such as, open communication strategies and organizational error reporting systems)
- Describe processes used in understanding causes of error and allocation of responsibility and accountability (such as, root cause analysis and failure mode effects analysis)
- Discuss potential and actual impact of national patient safety resources, initiatives and regulations

#### Skills:

- Demonstrate effective use of technology and standardized practices that support safety and quality
- Demonstrate effective use of strategies to reduce risk of harm to self or others
- Use appropriate strategies to reduce reliance on memory (such as, forcing functions, checklists)
- Communicate observations or concerns related to hazards and errors to patients, families and the health care team
- Use organizational error reporting systems for near miss and error reporting
- Participate appropriately in analyzing errors and designing system improvements
- Engage in root cause analysis rather than blaming when errors or near misses occur

 Use national patient safety resources for own professional development and to focus attention on safety in care settings

#### Attitudes:

- Value the contributions of standardization/reliability to safety
- Appreciate the cognitive and physical limits of human performance
- Value own role in preventing errors
- Value vigilance and monitoring (even of own performance of care activities) by patients, families, and other members of the health care team
- Value relationship between national safety campaigns and implementation in local practices and practice settings

#### **INFORMATICS**

• **Definition:** Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making.

## Knowledge:

- Explain why information and technology skills are essential for safe patient care
- o Identify essential information that must be available in a common database to support patient care
- Contrast benefits and limitations of different communication technologies and their impact on safety and quality
- Describe examples of how technology and information management are related to the quality and safety of patient care
- Recognize the time, effort, and skill required for computers, databases and other technologies to become reliable and effective tools for patient care

#### Skills:

- Seek education about how information is managed in care settings before providing care
- o Apply technology and information management tools to support safe processes of care
- Navigate the electronic health record
- Document and plan patient care in an electronic health record
- Employ communication technologies to coordinate care for patients
- o Respond appropriately to clinical decision-making supports and alerts
- Use information management tools to monitor outcomes of care processes
- Use high quality electronic sources of healthcare information

#### Attitudes:

- Appreciate the necessity for all health professionals to seek lifelong, continuous learning of information technology skills
- Value technologies that support clinical decision-making, error prevention, and care coordination
- Protect confidentiality of protected health information in electronic health records
- Value nurses' involvement in design, selection, implementation, and evaluation of information technologies to support patient care

## **REFERENCES**

Institute of Medicine. Health professions education: A bridge to quality. Washington DC: National Academies Press; 2003.

Cronenwett, L., Sherwood, G., Barnsteiner J., Disch, J., Johnson, J., Mitchell, P., Sullivan, D., Warren, J. (2007). Quality and safety education for nurses. Nursing Outlook, 55(3)122-131.

## Appendix B—ANA Scope and Standards of Nursing Practice

The American Nurses Association (ANA) has developed scope and standards of nursing practice to guide the practice of nursing.

American Nurses Association. (2015). *Nursing: Scope and Standards of Practice (3<sup>rd</sup>ed)*. Silver Spring, MD: Nursesbooks.org

For more information on this visit the ANA website at http://www.nursingworld.org/scopeandstandardsofpractice

The Scope of Nursing Practice describes the "who," "what," "where," "when," "why," and "how" of nursing practice. Each of these questions must be answered to provide a complete picture of the dynamic and complex practice of nursing and its evolving boundaries and membership. The profession of nursing has one scope of practice that encompasses the full range of nursing practice, pertinent to general and specialty practice. The depth and breadth in which individual registered nurses engage in the total scope of nursing practice is dependent on their education, experience, role, and the population served.

## The Nursing Process

The nursing process is often conceptualized as the integration of singular actions of assessment, diagnosis, and identification of outcomes, planning, implementation, and finally, evaluation. The nursing process in practice is not linear as often conceptualized, with a feedback loop from evaluation to assessment. Rather, it relies heavily on the bidirectional feedback loops from each component, as illustrated in Figure 1.

The Standards of Practice coincide with the steps of the nursing process to represent the directive nature of the standards as the professional nurse completes each component of the nursing process. Similarly, the Standards of Professional Performance relate to how the professional nurse adheres to the Standards of Practice, completes the nursing process, and addresses other nursing practice issues and concerns (ANA, 2015).

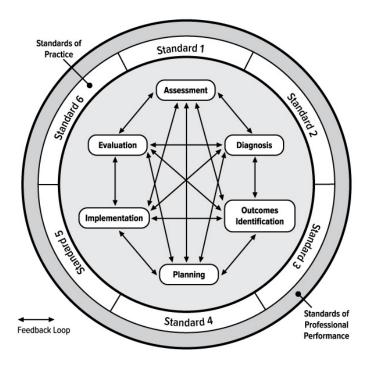


FIGURE 1. The Nursing Process and Standards of Professional Nursing Practice

## **Tenets Characteristic of Nursing Practice**

- 1. Caring is central to the practice of the registered nurse.
  - a. Professional nursing promotes healing and health in a way that builds a relationship between nurse and patient (Watson, 1999, 2008). "Caring is a conscious judgment that manifests itself in concrete acts, interpersonally, verbally, and nonverbally" (Gallagher-Lepak & Kubsch, 2009, p. 171). While caring for individuals, families, and populations is the key focus of nursing, the nurse additionally promotes self-care as well as care of the environment and society (Hagerty, Lynch-Sauer, Patusky, & Bouwseman, 1993; ANA, 2015).
- 2. Nursing practice is individualized.
  - a. Nursing practice respects diversity and is individualized to meet the unique needs of the healthcare consumer or situation. Healthcare consumer is defined to be the patient, person, client, family, group, community, or population who is the focus of attention and to whom the registered nurse is providing services as sanctioned by the state regulatory bodies.
- 3. Registered nurses use the nursing process to plan and provide individualized care to their healthcare consumers.
  - a. The nursing process is cyclical and dynamic, interpersonal and collaborative, and universally applicable. Nurses use theoretical and evidence-based knowledge of human experiences and responses to collaborate with healthcare consumers to assess, diagnose, identify outcomes, plan, implement, and evaluate care that has been individualized to achieve the best outcomes. Nursing actions are intended to produce beneficial effects, contribute to quality outcomes, and above all, "do no harm." Nurses evaluate the effectiveness of care in relation to identified outcomes and use evidence-based practice to improve care. Critical thinking underlies each step of the nursing process, problem-solving, and decision-making.
- 4. Nurses coordinate care by establishing partnerships.
  - a. The registered nurse establishes partnerships with persons, families, support systems, and other providers, utilizing in-person and electronic communications, to reach a shared goal of delivering safe, quality health care to address the health needs of the healthcare consumer and the public. The registered nurse is responsible and accountable for communicating and advocating for the planning and care coordination focused on the healthcare consumer, families, and support systems (ANA, 2013a). Collaborative interprofessional team planning is based on recognition of each individual profession's value and contributions, mutual trust, respect, open discussion, and shared decision-making.
- 5. A strong link exists between the professional work environment and the registered nurse's ability to provide quality health care and achieve optimal outcomes.
  - a. Professional nurses have an ethical obligation to maintain and improve healthcare practice environments conducive to the provision of quality health care (ANA, 2015). Extensive studies have demonstrated the relationship between effective nursing practice and the presence of a healthy work environment. Mounting evidence demonstrates that negative, demoralizing, and unsafe conditions in the workplace (unhealthy work environments) contribute to errors, ineffective delivery of care, workplace conflict and stress, and moral distress.

## **Standards of Professional Nursing Practice**

The Standards of Professional Nursing Practice are comprised of the Standards of Practice and the Standards of Professional Performance.

#### Standards of Practice

The Standards of Practice describe a competent level of nursing care as demonstrated by the critical thinking model known as the nursing process. The nursing process includes the components of assessment, diagnosis, outcomes identification, planning, implementation, and evaluation. Accordingly, the nursing process encompasses significant actions taken by registered nurses and forms the foundation of the nurse's decision-making.

- Standard 1: Assessment
  - The registered nurse collects comprehensive data pertinent to the healthcare consumer's health and/or the situation.
- Standard 2: Diagnosis
  - The registered nurse analyzes the assessment data to determine the diagnoses or the issues.

- Standard 3: Outcomes Identification
  - The registered nurse identifies expected outcomes for a plan individualized to the healthcare consumer or the situation.
- Standard 4: Planning
  - The registered nurse develops a plan that prescribes strategies and alternatives to attain expected outcomes.
- Standard 5: Implementation
  - o The registered nurse implements the identified plan.
    - Standard 5A: Coordination of Care
      - The registered nurse coordinates care delivery.
    - Standard 5B: Health Teaching and Health Promotion
      - The registered nurse employs strategies to promote health and a safe environment.
- Standard 6: Evaluation
  - o The registered nurse evaluates progress toward attainment of outcomes.

#### Standards of Professional Performance

The Standards of Professional Performance describe a competent level of behavior in the professional role, including activities related to ethics, education, evidence-based practice and research, quality of practice, communication, leadership, collaboration, professional practice evaluation, resource utilization, and environmental health. All registered nurses are expected to engage in professional role activities, including leadership, appropriate to their education and position. Registered nurses are accountable for their professional actions to themselves, their healthcare consumers, their peers, and ultimately to society.

- Standard 7: Ethics
  - The registered nurse practices ethically.
- Standard 8: Culturally Congruent Practice
  - The registered nurse practices in a manner that is congruent with cultural diversity and inclusion principles.
- Standard 9: Communication
  - o The registered nurse communicates effectively in all areas of practice.
- Standard 10: Collaboration
  - The registered nurse collaborates with healthcare consumer and other key stakeholders in the conduct of nursing practice.
- Standard 11: Leadership
  - o The registered nurse demonstrates leadership in the professional practice setting and the profession.
- Standard 12: Education
  - The registered nurse seeks knowledge and competence that reflects current nursing practice and promotes futuristic thinking.
- Standard 13: Evidence-based Practice and Research
  - o The registered nurse integrates evidence and research findings into practice.
- Standard 14: Quality of Practice
  - The registered nurse contributes to quality nursing practice.
- Standard 15: Professional Practice Evaluation
  - o The registered nurse evaluates one's own and others' nursing practice.
- Standard 16: Resource Utilization
  - The registered nurse utilizes appropriate resources to plan, provide, and sustain evidence-based nursing services that are safe, effective, and fiscally responsible.
- Standard 17: Environmental Health
  - o The registered nurse practices in an environmentally safe and healthy manner.

## Appendix C—ANA Code of Ethics

The Code of Ethics for Nurses was developed as a guide for carrying out nursing responsibilities in a manner consistent with quality in nursing care and the ethical obligations of the profession. To learn more about the creation of the Code of Ethics, details regarding the provisions, purchase a copy of your own, or view the nursing Code of Ethics online, please refer to the link listed below.

#### http://www.nursingworld.org/codeofethics

The nine (9) provisions of the ANA Code of Ethics include:

- **Provision 1:** The nurse, practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
  - o 1.1—Respect for Human Dignity
  - o 1.2—Relationships with Patients
  - o 1.3—The Nature of Health
  - 1.4—The Right to Self Determination
  - 1.5—Relationships with Colleagues and Others
- **Provision 2:** The nurse's primary commitment is to the patient, whether an individual, family, group, community or population.
  - 2.1—Primacy of the Patient's Interests
  - o 2.2—Conflict of Interest for Nurses
  - o 2.3—Collaboration
  - 2.4—Professional Boundaries
- Provision 3: The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
  - o 3.1—Protection of the Rights of Privacy and Confidentiality
  - o 3.2—Protection of Human Participants in Research
  - 3.3—Performance Standards and Review Mechanisms
  - o 3.4—Professional Responsibility in Promoting a Culture of Safety
  - 3.5—Protection of Patient Health and Safety by Acting on Questionable Practice
  - 3.6—Patient Protection and Impaired Practice
- **Provision 4:** The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
  - 4.1—Authority, Accountability, and Responsibility
  - 4.2—Accountability for Nursing Judgments, Decisions, and Actions
  - o 4.3—Responsibility for Nursing Judgments, Decisions, and Actions
  - 4.4—Assignment and Delegation of Nursing Activities or Tasks
- <u>Provision 5:</u> The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
  - 5.1—Duties to Self and Others
  - 5.2—Promotion of Personal Health, Safety, and Well-Being
  - 5.3—Preservation of Wholeness of Character
  - 5.4—Preservation of Integrity
  - 5.5—Maintenance of Competence and Continuation of Professional Growth
  - 5.6—Continuation of Personal Growth
- **Provision 6:** The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work settings and conditions of employment that are conducive to safe, quality health care.
  - o 6.1—The Environment and Moral Virtue
  - o 6.2—The Environment and Ethical Obligation
  - o 6.3—Responsibility for the Healthcare Environment

- **Provision 7:** The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
  - 7.1—Contributions through Research and Scholarly Inquiry
  - 7.2—Contributions through Developing, Maintaining, and Implementing Professional Practice Standards
  - o 7.3—Contributions through Nursing and Health Policy Development
- **Provision 8:** The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
  - o 8.1—Health is a Universal Right
  - 8.2—Collaboration for Health, Human Rights, and Health Diplomacy
  - 8.3—Obligation to Advance Health and Human Rights and Reduce Disparities
  - 8.4—Collaboration for Human Rights in Complex, Extreme, or Extraordinary Practice Settings
- **Provision 9:** The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.
  - o 9.1—Articulation and Assertion of Values
  - o 9.2—Integrity of the Profession
  - 9.3—Integrating Social Justice
  - o 9.4—Social Justice in Nursing and Health Policy

# Appendix D—Clinical Experience Facilities

FACILITY	Physical Address	City
Arrowhead West	1100 East Wyatt Earp Boulevard	Dodge City, KS
Ashland Health Center	709 Oak Street	Ashland, KS
Bethel Homes	300 South Aztec	Montezuma, KS
Cargill Meats (Nursing)	3201 East Trail Street	Dodge City, KS
Compass Behavioral Health Community Support Services	3000 North 14 <sup>th</sup> Avenue	Dodge City, KS
Compass Behavioral Health Clinic	506 Avenue L	Dodge City, KS
Dodge City Community College Child Development Center	2501 North 14 <sup>th</sup> Avenue	Dodge City, KS
Dodge City Police Department	110 West Spruce Street	Dodge City, KS
Eagle Med Transport	100 Airport Road	Dodge City, KS
Family Care Clinic of Western Kansas	200 Ross Boulevard	Dodge City, KS
Ford County Emergency Services	10996 113 Road	Dodge City, KS
Ford County Health Department	507 Avenue L	Dodge City, KS
Fresenius Medical Center (Dialysis Center)	204 Ross Boulevard	Dodge City, KS
Genesis Healthcare (formerly UMAM)	122 West Laurel	Garden City, KS
Hodgeman County Health Center	809 West Bramley	Jetmore, KS
Home Health and Hospice of the Prairie	200 Fourth Circle	Dodge City, KS
Larned State Hospital	1301 KS Highway 264	Larned, KS
Life in Motion Orthotic and Prosthetic Center	2601 Central Avenue	Dodge City, KS
Medicalodges of Kinsley	620 Winchester Avenue	Kinsley, KS
Minneola District Hospital	212 South Main Street	Minneola, KS
Minneola Long Term Care Unit	207 South Chestnut	Minneola, KS
Pratt Regional Medical Center	200 Commondore Street	Pratt, KS
Presbyterian Manor of the Plains	200 Campus Drive	Dodge City, KS
Shepard's Center	706 North Main Street	Cimarron, KS
St. Catherine Hospital	401 East Spruce Street	Garden City, KS
St. Catherine Hospital Dodge City	3001 Avenue A	Dodge City, KS
Trinity Manor	510 West Frontview Street	Dodge City, KS
USD #443 (Dodge City Public Schools)	100 North 2 <sup>nd</sup> Avenue	Dodge City, KS
USD #459 (Bucklin Public Schools)	422 South Main Street	Bucklin, KS

# **Appendix E—Acknowledgements and Consents**

The following acknowledgements and consents should be completed and returned to the Department of Nurse Education by August 18, 2023.

- Handbook Acknowledgement
- Acknowledgement of Critical Elements of Nursing Practice
- Consent to Drug Screen

# **Handbook Acknowledgement**

By my signature below, I acknowledge that I have read this 2023-2024 Nursing Student Handbook and understand its contents. This form will be placed in my permanent file.			
I will comply with the Academic Honesty Policy of Dodge City Community College.			
(Signature)			
(Print Name)			
(Date)			

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Return this form to the Department of Nurse Education by Friday, August 18, 2023.

#### **Acknowledgement of Critical Elements of Nursing Practice**

The following objectives are critical elements in the student's clinical evaluation. If the clinical instructor observes behavior that indicates the student is not meeting either of the two criteria (stated below), the student will receive an unsatisfactory evaluation for the course (regardless of behavior assessed elsewhere on the evaluation tool and/or the academic grade).

1. Practices safe nursing care: prevents real or potential harm to patients and their families.

The following examples serve as guides to these behaviors, but are **NOT TO BE CONSIDERED ALL INCLUSIVE.** 

## A. **Physical Safety**

**Safe behaviors:** appropriate use of side rails, wheelchairs, other mechanical equipment; proper protection of the patient, which avoids falls, lacerations, burns, etc.; performs only authorized nursing actions; seeks help when needed.

**Reduction of risk:** appropriate evaluation of environmental and recognition of probable physical risks related to the client condition to reduce risks and improve outcomes.

#### B. **Biological Safety**

Safe behaviors: recognizes violations in surgical and medical aseptic technique; utilizes "5 rights" in medication administration; comes to clinical without impairment; performs nursing actions with appropriate supervision; seeks help when needed; utilizes universal precautions, and demonstrates proper use of specific isolation protocols.

## C. **Emotional Safety**

Safe behaviors: promotes patient sense of safety; provides patient with appropriate and/or correct information; performs nursing actions with appropriate supervision; seeks help when needed; demonstrates stable emotional behavior.

- 2. Practices according to legal, ethical, professional standards, and within scope of practice.
  - A. Maintains confidentiality.
  - B. Demonstrates appropriate knowledge base required to care for assigned client.
  - C. Performs in a professional manner when interacting with patients, families, faculty, and health care professionals (e.g., altruism, honesty, sensitivity and tolerance).
  - D. Maintains professional accountability at all times (e.g., pattern of promptness and adherence to dress code, seeks appropriate guidance and help from instructors and/or staff, follows instructions provided by instructor, keeps staff informed of patient's condition and changes in patient's condition, notifies instructor and staff when leaving the clinical unit).
  - E. Skills performed under supervision of instructor or delegated nurse

Student Signature:	Date:
Print Name:	

Return this form to the Department of Nurse Education Friday, August 18, 2023.

# Dodge City Community College AREA TECHNICAL CENTER

2501 North 14<sup>th</sup> Avenue • Dodge City, KS 67801-2399 620/225-1321 • 1-800-FOR-DCCC • www.dc3.edu

## **Consent to Drug Screen**

Ι,	, (Student Nurse) the undersigned:		
acknow	edge being notified for institutional drug testing and consent to be immediately		
	ested at on (date/time:)at Dodge City Community		
College			
<ul> <li>I will be prepared to provide an adequate urine specimen and will not overhydrate. I understand that providing numerous diluted specimens may be cause for follow-up drug testing.</li> <li>I will be prepared to provide an adequate saliva sample if necessary and will not eat or drink at least 10 minutes prior to providing a saliva sample.</li> <li>I will be prepared to provide an adequate hair sample if necessary.</li> <li>I understand that I may have a witness accompany me to the drug-testing site.</li> <li>I understand that an Allied Health/DC3 representative may be present in the bathroom/staduring collection.</li> </ul>			
	ng below, I acknowledge being notified of my participation in institutional drug testing, and I re of what is required of me in preparation for this drug-testing event.		
Student	Nurse Date		
Disclos	re of medications:		
For De	partment Use:		
Dodge	City Community College Drug Testing Program		
Student	Nurse:		
Locatio	of test:		
Date of If sent to	test: Results: Negative Non-Negative (Sent to lab: $Y/N$ ) ab, please know the lab reserves the right to contact the student regarding medications listed.		
Tester(	)/Witness(es):		