NORTHLAND PIONEER COLLEGE
NURSING PROGRAM

STUDENT HANDBOOK

2020-2021
Fall Edition

Welcome to the Northland Pioneer College Nursing Program~!

We are so very pleased that you have enrolled in our nursing program to acquire your Associate of Applied Science in Nursing degree. You have worked hard to come this far and we are committed to be right by your side as you continue toward reaching that goal over the coming semesters.

Nursing is a caring profession well-suited for energetic people who are attentive to detail, passionate about quality and compassionate toward others. One goal of the nursing program is to prepare nurses to practice safely, competently and professionally in a healthcare environment that is ever-changing. You will develop fundamental knowledge and skills during your time in training to serve you in entry-level clinical roles. For more than a decade, nursing has been viewed as the most trusted profession in honesty and ethical standards (Gallup, 2016). Nurses are trusted confidants and demonstrate exceptional communication skills, punctuality, and are among the most responsible and accountable professionals. The way you approach problems and manage situations will no doubt change as you learn to become a safe, competent nurse. We will expect you to be disciplined and organized in the ways you prepare for and participate in patient care, gathering a thorough understanding of the patient's history, course of illness and treatment in the hospital and medications – acquiring knowledge about possible contraindications, incompatibilities, and side effects. How you acquire this clinical knowledge is directly related to your ability to organize and utilize your time to perform in a sustained, superior manner. We look forward to teaching you how to involve patients in decision making, and how to understand psychological social contexts affecting your patients.

This handbook offers information and policies about our program and our expectations of your classroom and clinical performance. Meeting these standards will help you prepare for your future in the profession. Please read the handbook closely and carefully as you will be required to follow the policies found within its pages and you may need to refer to them regularly. You will be required to sign a confirmation statement that you have read and understood its contents.

May you have an exciting and rewarding year! We look forward to celebrating your progress and completion of the nursing program.

The Nursing and Allied Health Faculty and Staff

Northland Pioneer College Nursing Program
is accredited by:

Accreditation Commission for Education in Nursing

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Northland Pioneer College Nursing Program is approved by:

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The contents of this handbook supersede all previous editions. This handbook may be revised at any time by NPC and such revisions shall be applicable to all students and any re-enrolling students, and is *subject to change as necessitated by the Covid-19 pandemic*. Students are responsible to know the contents of the handbook at all times. NPC shall endeavor to inform students of any changes. Students are responsible for keeping their address and contact information current with the nursing program and the College. To the extent this handbook is inconsistent with the College Catalog, this Handbook controls but shall be interpreted so as to avoid conflicts where possible.

06/2020

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Nursing Student Handbook

I. Program Information

Description

In May of 1992, the Arizona State Board of Nursing granted provisional approval to Northland Pioneer College to begin an Associate Degree of Applied Science (AAS) nursing program on the White Mountain Campus (WMC) in Show Low. The Director of Nursing and qualified nursing faculty were hired and classes were started fall semester of 1992. The program expanded in 1995 by offering classes on the Little Colorado Campus (LCC) in Winslow. A dedicated nursing classroom and skills lab were established at the WMC when the Ponderosa Center was built in 1995 and at the LCC in 2001 when the Blunk Building was completed. The nursing program is available at both campuses.

In 1997, Northland Pioneer College nursing program became part of a collaborative group of rural colleges to provide seamless articulation from the Associate Degree (AAS) to a Baccalaureate Degree in Nursing (BSN) at Northern Arizona University. Arizona State University also offers seamless articulation to its BSN for graduates of Northland Pioneer College's Associate Degree nursing program. These partnerships manifest Northland Pioneer College's mission to create, support and promote lifelong learning.

Occupational Information

The nursing program, after the completion of prerequisites, is designed to be completed within two academic years. After completion of the first year, the student nurse can receive a Certificate of Applied Science in Practical Nursing and apply to write the NCLEX-PN. Licensed Practical Nurses (LPN) are employed in acute, long-term and community-based health care agencies, and work under the supervision of a Registered Nurse (RN). The student nurse may continue on to the second year of the program to earn the Associate of Applied Science Degree, and be qualified to take the NCLEX-RN exam. The RN is educated as a generalist who delivers health care to clients and family groups and demonstrates competencies related to the art and science of nursing.

Mission

The nursing program supports Northland Pioneer College's mission to create, support and promote lifelong learning. The nursing program's mission is to develop competent, caring nursing professional who demonstrate ethical behavior and integrity while collaborating with the healthcare team to provide safe patient-centered care within a continually changing healthcare environment.

The mission statement is supported by nursing program outcomes which are closely related to Northland Pioneer College goals and national guidelines, driven by the needs of the population which we serve.

Nursing Program Goals

Access to Education
To disseminate learning and deliver services at multiple sites to diverse communities throughout rural service areas by providing encouragement and support to students preparing for admission into nursing and allied health programs.

Leadership
To attract and retain a highly qualified faculty and staff dedicated to student-centered learning, ethical

practices, and continued professional development in teaching, practice, and community service.

Client-Centered Care
To enhance student success by providing accessible and comprehensive services, including individualized, structured learning plans and referrals for and support of college student services and community-based social services.

Evidence-Based Practice
To integrate methods of research and scholarship to improve the quality and delivery of health care services through the learning-teaching process.

Informatics and Technology
To prepare students to utilize information and technology to communicate, manage knowledge, mitigate error, and support decision making

Teamwork and Collaboration
To facilitate effective communication and collaboration between and among nursing and college faculty and administration that supports a dynamic process of curriculum development and ongoing program evaluation within a relevant, meaningful framework.

Nursing Judgment
To prepare students to engage in reflective practice, demonstrating accountability for nursing practice based on professional standards, values, and decision making processes.

Safety
To practice within legal and ethical principles to deliver safe and competent care based on current standards of practice.

Program Effectiveness
To strengthen planning and evaluation of our program goals and objectives to achieve a first-time pass rate of 100% on NCLEX-PN examinations and 90% on NCLEX-RN

Degree/Certificate Completion
To facilitate student achievement of the Certificate of Applied Science in Practical Nursing and the Associate of Applied Science in Nursing Degree as evidenced by an on-time completion rate of 70%

Graduate Employment
To promote the development of occupational skills that support professional nursing employment for 85% of students within 12 months of graduation, which, in turn, encourages economic development of the individual and community.

Degrees/Certification Transfer
To promote seamless articulation agreements between the nursing program and other state institutions of nursing education including: Northern Arizona University, Arizona State University, and the University of Arizona so that more than 15% of graduates passing the NCLEX will enroll in a BSN or MSN program within 18 months of graduation.

II.   Philosophy

Overview
Societal influences in the evolving health care system challenge nursing education to provide students with an organized approach to learning. The creation and purpose of the Quality and Safety Education for Nurses (QSEN) and Nurse of the Future (NOF) frameworks were to stimulate progress in evidence-based education approaches and methods to prepare clinicians with new perspectives and the means to support continuous evaluation of nursing care.

Vision

Education provides a mechanism, by which an individual pursues life goals, broadens human potential and opportunities, develops critical thinking and clarifies values. Education is a lifelong collaborative process between learner and teacher. The Northland Pioneer College Nursing Program philosophy reflects the values of culturally diverse human life and dignity, environment, health, and nursing. This philosophy promotes excellence for nursing education and practice incorporating changes aimed at current and emerging health care trends in the rural southwest.

Faculty believes that nursing is an art and science that is an integral component of the health care system. Faculty value the different levels of knowledge, skills, and abilities of competent and caring practitioners within the discipline of nursing. Nursing practice is holistic and focuses on transitional experiences and meanings of individuals, families, groups and communities related to health and illness. Special attention is given to the full range of health related experiences so graduates will view nursing care without the restrictions of a problem focused orientation.

Faculty believes that the faculty members are facilitators of the nursing students' learning process. We believe that the students take ownership of learning and have diverse individual learning needs. We recognize that our students come to us from diverse cultural and ethnic backgrounds. We acknowledge that our students will set a range of personal goals based on their prior exposure to health care and life experiences. We also acknowledge that our students are adult learners with various learning styles and personal support systems.

The nursing faculty believes that learning is a life-long process. We also believe the transition to the role of competent professional nurse is a major developmental achievement. It is the faculty who facilitate this transition, but the student must take ultimate responsibility for his/her own learning. Faculty serve as catalysts, facilitators and role models. Educational activities are designed to build upon the student's previous experiences, expand their perceptions, encourage them to clarify, modify and/or reaffirm their values, incorporate knowledge and enhance their interpersonal relations.

Through this process, the student has opportunities to develop the ability to think critically, act responsibly, be creative, and communicate effectively. Learning-teaching is enhanced by functioning in an environment of effective informatics and technology, allowing the student to be an active participant in the process of assuring and improving patient safety and communication. Thus, the faculty selects opportunities to develop learning objectives and appropriate experiences in dynamic clinical environments that inform students' future professional practices.

The practice of nursing responds to health care needs of individuals, families, groups and communities through services such as case finding, health teaching, health counseling, and the provision of supportive or restorative care. Nurses are held responsible and accountable for nursing practice based upon the professions' code of ethics, standards of practice and legal regulations.
Nurses are responsible for developing and maintaining current nursing knowledge and skills through

formal and continuing education and, where appropriate, seek certification in their areas of practice demonstrating this accountability. Peer review and laws are the mechanisms by which nurses are held accountable for practice.

Faculty foster the development of professional responsibility and accountability through students' self-regulatory mechanisms such as student self-appraisal, standards of academic integrity, honesty, and the maintenance of confidentiality. As students encounter greater complexity of material in the second year, they will require progressively higher levels of commitment and preparation for lecture and clinical experiences. Faculty value integrity, a supportive environment, quality, responsiveness, and commitment to learning. These values govern the faculty actions and interactions with students and community members.

At both the associate and baccalaureate level, responsibility and accountability are foundational to nursing practice. Students identify, explore and analyze the ethical, legal and political factors that impact upon the role of professional nursing in the health-care delivery system. Nurses are expected to demonstrate responsibility and accountability appropriate to their levels of education, experience and practice.

Metaparadigm Constructs
Constructs of client, environment, health and nursing inform the organizing framework for the curriculum.

Client
The faculty defines person as being the individual, family, groups and community. The faculty places a high value on human life and dignity. All life experiences involve dynamic and complex processes of human development and achievement of personal growth through learning. The faculty recognizes the interdependence and interconnectedness of the human experience. People come from diverse backgrounds which influence the ways in which each person perceives reality, sets personal goals and discovers meaning in life experiences. Individuals have the right to choose from multiple options that are available in daily living experiences but must also accept responsibility for their choices.

Environment
The environment is comprised of internal and external forces which affect individuals, families, groups and communities. Environmental forces influencing everyday life include, but are not limited to bio-psycho-social, cultural, spiritual and developmental dimensions, political and economic structures, physical surroundings, and human relations.

Health
Health is a dynamic process that is defined by individuals, families, groups and communities; it is influenced by personal, family, cultural and societal norms. Health is not merely the absence of disease, but a process that involves constant dynamic adjustments, adaptations, and transitions in response to environmental influences.

Nursing
Nursing as a discipline is both an art and science. Nursing is recognized as a creative endeavor that integrates multiple ways of knowing to nurture the wholeness and uniqueness of the person. Nursing is a profession of caring that includes the essential elements of compassion, competence, conscience, commitment, comportment and confidence. Nurses use the components of caring to create a healthy, healing environment. Caring is a mutual human process whereby the nurse responds to persons with authentic presence and with intention to create an environment conducive to health.

Quality and Safety Education for Nurses Organizing Framework

The nursing faculty adopted an organizing framework that forms the basis for the course objectives, exit outcomes, and for nursing education. This framework represents a systematic organization of concepts that are the essential components of the curriculum. The framework serves as a guide and provides direction for faculty to organize nursing knowledge into nursing courses, clinical experiences and independent studies.

The curriculum begins at the freshmen level in which students begin foundational course work for nursing through various articulation agreements and ends at the senior level with completion of the baccalaureate degree requirements. As the curriculum progresses, each of the component concepts is developed at increasingly complex levels. The outcome goal of this curricular approach is to integrate the concepts depicted in the organizing framework that facilitate seamless articulation and promote professional nursing.

The conceptual framework consists of six strands: client-centered care, evidence-based practice, informatics and technology, nursing judgment, safety, and teamwork and collaboration. These strands represent areas of competence and attributes of professional nurses. This is an integrated curriculum where all strands are addressed in each course, progressing in complexity over the entire curriculum. Outcome objectives for each of the strands are developed for the end of two semesters at the practical nursing level, for end of four semesters resulting in an associate degree, and for anticipated completion of the bachelor of science in nursing degree following graduation from the program.

NPC Core Concept	Practical Nursing	Associate Degree Nursing	Baccalaureate Degree Nursing
Client-Centered Care	Implements compassionate and coordinated care with the client as a full partner in planning care.	Utilizes the nursing judgment to provide, plan and direct compassionate and coordinated care that recognizes the client as the source of control and full partner based on respect for culture, preference, values, and needs.	Integrates theory, evidence, professional perspectives, and patient preferences into clinical judgment to provide holistic patient-centered care across the lifespan and healthcare continuum, and in healthcare environments. (NAU)
Evidence-Based Clinical Practice	Discusses evidence-based rationale for care decisions on selected clients.	Applies sound clinical judgment based in theory and evidence to promote and protect health in clients across the lifespan and healthcare continuum.	Synthesizes evidence and nursing knowledge to evaluate and modify clinical nursing practice, in order to provide holistic, safe, comprehensive, patient-centered care. (NAU)
Informatics and Technology	Utilizes technology and informatics to plan and implement selected aspects of patient care.	Utilizes and protects health care information to communicate, manage knowledge, mitigate error at both the individual and organizational level and support decision-making.	Employs communication technologies to coordinate patient care and monitor outcomes of care processes. (QSEN)

NPC Core Concept	Practical Nursing	Associate Degree Nursing	Baccalaureate Degree Nursing
Nursing Judgment	Identifies sound rationale for nursing actions. Analyzes patient data to direct nursing care for chronic stable patients. Demonstrates ethical comportment based on professional nursing standards, values, and decision making processes.	Utilizes nursing judgment to analyze changing client data that is relevant and clinically significant and implement appropriate nursing actions to maximize client outcomes. Evaluates patient outcomes and revises the plan of care to achieve optimal patient health. Demonstrates nursing care that is consistent with moral, legal, ethical, regulatory, and humanistic principles. (ANA Code of Ethics, 2015)	Synthesizes evidence and nursing knowledge to evaluate and modify clinical nursing practice, in order to inform practice and make clinical judgments. (NAU) Integrates professional values and their associated behaviors into the practice of nursing.
Safety	Demonstrates quality and safety practices that minimize risk of harm to self, clients and members of the healthcare team. Plans and implements safety teaching to childbearing and childrearing families.	Provides safe nursing care anticipating and communicating potential risks to client and provider safety that are apparent in system effectiveness and individual performance.	Integrates reliable evidence from multiple ways of knowing to inform practice and make informed, clinical judgments (NAU)
Teamwork and Collaboration	Maintains professional demeanor and identifies aspects of care that may be delegated; demonstrates appropriate delegation utilizing the 5 rights of delegation.	Utilizes principles of leadership to influence positive change within the healthcare setting, and advocates for safe, effective client care.	Integrates caring's affective characteristics into patient-centered care with other healthcare professionals (NAU)

Nursing Practice Competencies

The curriculum begins at a level in which students encounter foundational coursework for nursing and ends at the senior level with completion of the baccalaureate degree requirements. As the curriculum progresses, each of the component concepts is developed at increasingly complex levels. Students may opt to exit from the nursing program after completion of associate degree requirements and/or continue with nursing courses offered at statewide sites for completion of the baccalaureate degree. The outcome goal of this curricular approach is to integrate the concepts depicted in the organizing framework that facilitate seamless articulation and promote professional nursing.

Client-Centered Care
Client-centered care "recognizes the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for the client's preferences, values, and needs" (QSEN, 2012). The Institute for Patient and Family-Centered Care identifies four core concepts:

dignity and respect, information sharing, participation, and collaboration (IPFCC, 2010). Maintaining the client at the center embraces the essential meanings of advocacy, empathetic communication and caring.

Students at the associate degree level are expected to utilize the nursing process to provide compassionate and coordinated care that recognizes the client as partner based on respect for and consideration of unique needs, culture, preferences, and values. Students at the baccalaureate level integrate theory, evidence, professional perspectives, and patient preferences into clinical judgments to provide holistic patient-centered care, across the lifespan and in serving communities as client.

Students are expected to develop their ability to plan and carry out knowledgeable, efficient and safe nursing care and demonstrate an awareness of one's own limitations. The achievement of client-centered care is evidenced by the student's ability to provide nursing care in increasingly complex settings and situations. Students are required to master the core competencies that include: 1) achieving a minimal knowledge base 2) practicing safe and efficient nursing care and 3) demonstrating basic nursing skills. Subsequently, students continue to develop proficiency in their skills and knowledge base for providing nursing care that maintains client safety and client confidentiality. Students must prove their competency to demonstrate responsibility and accountability in well-defined practice settings with individuals, families and groups.

At the baccalaureate level, students display a synthesis of nursing knowledge and skills by demonstrating competency in nursing practice. They must prove their competency to provide and coordinate nursing care by developing and implementing a comprehensive plan of care with individuals, families, groups and communities in complex practice settings. Students reflect the knowledge and skills that are needed to practice safely and efficiently as professional nurses.

Evidence-Based Practice
Evidence-based practices "integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care". These practices "use data to monitor the outcome of care process and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems" (QSEN, 2012). Nurses must lead inter-professional teams to review literature and implement research to develop comprehensive, holistic approaches to clinical practice to assure they provide the most current and safest care possible to clients.

Associate degree students consult the literature to uncover best practices, develop clinical expertise through practice, and discover client values to provide optimal care. These students learn to become aware of their strengths and limitation as they implement and monitor action plans to improve quality of care. Baccalaureate students are challenged to synthesize evidence and nursing knowledge to evaluate and modify clinical nursing practice to provide holistic, comprehensive care. All students are best served when instructional methods promote curiosity to stimulate the discovery of evidence-based practices that result in improved patient outcomes (Kelly, Vottero, & Christie-McAuliffe, 2014).

Informatics and Technology
Nursing practice requires the "use of information and technology to communicate, manage knowledge, mitigate error, and support decision making" (QSEN, 2012). It is imperative that nurses integrate nursing science and information science to manage and communicate data, information knowledge and wisdom in nursing practice. Nursing informatics and its associated technology support clients and other providers in their decision-making in all roles and settings (ANA, 2008). The ultimate goal in nursing is to develop innovative ways to use technology to improve healthcare delivery and information

management for patient safety.

At the associate level, students should be skilled in information management to sustain their practice. These skills include utilizing technology in the assessment and monitoring of clients to mitigate error and support decision-making. At the baccalaureate level students advance skill development using technology to inform decisions based on trends in patient data and coordinate care with other healthcare professionals. This teaching-learning progression provides strong foundations and practices to facilitate the optimal patient outcomes.

Teamwork and Collaboration
This construct describes the planning and coordination of nursing practice to "function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care" (QSEN, 2012). Efforts to prepare nurses for enhanced team-based care of patients and improved health outcomes have spawned competencies for inter-professional collaborative practice (IPEC, 2016) that are shared across healthcare disciplines: value/ethics, roles/responsibilities, inter-professional communication and teamwork.

Students learn to appreciate teamwork and collaboration by engaging in a close study of the qualities of effective leadership. Leadership is the ability to influence and guide the decisions and subsequent actions of others. Positive leadership creates working conditions that optimize nursing practice to promote high quality patient care. Facilitating change in working conditions, creating access to resources, guiding individual and team attitudes, behavior and performance and enabling staff participation in unit and patient care decisions influence patient outcomes. (Wong, 2013). Developing leadership skills involves self-reflection, understanding human processes and envisioning possibilities for enriching people's lives. An analysis of the health care delivery system introduces students to the importance of nursing involvement in professional organizations, political processes and organizational procedures.

At the associate degree level, students learn traditional and contemporary theories of management and interpersonal processes. Knowledge and skills are developed in the supervision and delegation of nursing personnel and coordination of client care associated with accountabilities. At the baccalaureate level, students synthesize management and leadership knowledge and skills in the delivery of health care in multidisciplinary settings. Emphasis is on assuming a leadership role in the designing, organizing, directing, supervising, coordinating and evaluating health care in diverse settings.

Nursing Judgment
Nursing judgment describes the degree to which nurse educators expect students to apply critical thinking skills. Students are required to use knowledge from the natural, behavioral, social and nursing sciences and humanities to assess, plan, implement and evaluate care. Critical thinking is "based on the evaluation and integration of existing data and theory into a solution about the problem at hand, a solution that can be rationally defended as most plausible or reasonable, taking into account the sets of conditions under which the problem is being solved" (King and Kitchener, 1994, p. 8). Critical thinking is defined as reflective judgment and reasonable thought that focuses on deciding what to believe or do and is a composite of attitudes, knowledge and skills. Attitude denotes a frame of mind in which there is the recognition of problems. Knowledge involves weighing the accuracy and logic of the evidence and understanding the nature of valid inferences, abstractions, and generalizations. Skill in cognitive application attitudes and knowledge must be demonstrated.

Nursing judgment embraces the concept of professionalism. Nursing students acquires a sense of occupational identity through an internalization of nursing values and norms, which are manifest in

professional skills. Faculty convey knowledge and demonstrate the application of standard-based nursing care consistent with moral, altruistic, legal, ethical, regulatory and humanistic principles.

Faculty facilitate the acquisition of nursing values at the associate level by demonstrating the importance and application of professional, ethical and legal principles in planning and delivering patient care. It is important for students to understand and appreciate such antecedents to professionalism as levels of education, years of experience, membership in professional organizations, community service and contributions to scholarship. Faculty guide the development of professionalism by presenting a sound body of theoretical, practical and clinical knowledge, demonstrating a spirit of inquiry, modeling accountability, exhibiting collegiality, and applying nursing ethics and values to clinical practice (Alidina, 2013).

Associate degreed nurses are expected to demonstrate nursing care that is consistent with moral, legal, ethical, regulatory, and humanistic principles (ANA, 2015). Students also derive information from general studies and nursing theory to use as a basis for nursing decisions. They learn to develop nursing interventions by selectively evaluating and integrating knowledge. At the associate degree level, students learn to assess the health as well as the multifaceted needs of individuals, families, and groups at a basic level. Subsequently, students are required to apply information derived from individuals, families and groups to structure clinical judgments, decision-making, for common nursing problems.

At the baccalaureate level, students synthesize information from all previous nursing and general studies courses to initiate interventions that are based upon in-depth assessments of individuals, families, groups, and communities. Using this information, they formulate independent, complex decisions that relate to nursing care. Students incorporate legal and ethical standards in the coordination of client care, participation in organizational concerns, and allocation of resources associated with client care. Baccalaureate students develop knowledge through consulting and participating in scientific research.

Safety
Nursing practice requires constant vigilance to identify and implement strategies to minimize risk of harm to patients and providers through both system effectiveness and individual performance. Faculty design the curricula and plan supervised hours of clinical practice with a focus on the safety of clients. Nursing students develop knowledge and skill in preventing and reporting errors, creating cultures of safety and communicating critical information to patients, families and members of the healthcare team. Faculty utilize patient simulation to enhance student understanding of patient safety. Leadership studies include the importance of responsiveness and substantive investigation, evaluation and remediation of actual and potential safety hazards and performance ineffectiveness. The 2015 American Nurses Association (ANA) Code of Ethics reads, "The nurse promotes, advocates for, and protects the rights, health, and safety of the patient" (ANA, p. 16).

At the associate level, students learn to plan care, assess and evaluate client care, provide and interpret information accurately, and utilize technology appropriately. Baccalaureate studies focus on integrating reliable evidence and multiple ways of knowing to inform practice and make informed, clinical judgments.

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III. Curriculum – 2020-2021

Certificate of Applied Science in Practical Nursing

Required Courses/Certification to gain Admission to the Nursing Program

Before the student will be considered eligible to enroll in the nursing program, all courses must be completed with a grade of "C" or higher. A cumulative GPA of 3.0 "B" or higher is preferred for the following prerequisite courses:

			Credits
BIO	181	General Biology (prerequisite to BIO 201 and BIO 205)	4
BIO	201	Human Anatomy & Physiology I	4
BIO	202	Human Anatomy & Physiology II	4
BIO	205	Microbiology	4
CHM	130	Fundamental Chemistry	4
ENL	101	College Composition I	3
			23

All of the general education or non-NUR courses may be completed before entering the program but must be completed as listed by semester below and no later than beginning of the next semester. All courses require a grade of "C" or better for advancement to the 3rd semester of the nursing program. If the courses are not completed by the semester listed, e.g.; PSY240 is not completed prior to the 3rd semester; the student cannot continue in the nursing program and will be administratively withdrawn. Students must be a licensed LNA (Licensed Nursing Assistant) in the state of Arizona and must submit a copy of current certification or licensure prior to July 1st of the admission year for fall admission. For financial aid purposes, federal assistance requirements define full time status as a student enrolled in 12 or more credits per semester. Your Federal Pell grant award is based on the number of credits for which you are enrolled.

Required Courses to Complete the Nursing Program

1st Semester: Core Requirements — **Credits**

NUR	117	Pharmacology I	2
NUR	121	Nursing I	8

General Education Requirements

ENL	102	College Composition II	3
		Total	13

2nd Semester: Core Requirements

NUR	118	Pharmacology II	2
NUR	122	Nursing II	8
NUR	125	PN Completion Course	2

General Education Requirement

PSY	240	Developmental Psychology	3
		Total	15

Total Program Requirements:

Nursing	22 credit hours
Core/General Education Requirements	29 credit hours
	51 credit hours

Associate of Applied Science in Nursing

Required Courses/Certification to Gain Admission to the Nursing Program

Before the student will be considered eligible to enroll in the nursing program, all courses must be completed with a grade of "C" or higher. A cumulative GPA of 3.0 "B" or higher is preferred for the following prerequisite courses:

				Credits
BIO	**181**	General Biology (prerequisite to BIO 201 and BIO 205)		4
BIO	**201**	Human Anatomy & Physiology I		4
BIO	**202**	Human Anatomy & Physiology II		4
BIO	**205**	Microbiology		4
CHM	**130**	Fundamental Chemistry		4
ENL	**101**	College Composition I		3
				23

All of the general education or non-NUR courses may be completed before entering the program but must be completed as listed by semester below and no later than beginning of the next semester. All courses require a grade of "C" or better for advancement in the nursing program. If the courses are not completed by the semester listed, e.g.; PSY240 is not completed prior to the 3rd semester; the student cannot continue in the nursing program and will be administratively withdrawn. Students must be a licensed LNA (Licensed Nursing Assistant) in the state of Arizona or LPN (Licensed Practical Nurse) in good standing and must submit a copy of current certification or licensure prior to July 1st of the admission year for fall admission. For financial aid purposes, federal assistance requirements define full time status as a student enrolled in 12 or more credits per semester. Your Federal Pell grant award is based on the number of credits for which you are enrolled.

Required Courses to Complete the Nursing Program

1st Semester: Core Requirements

				Credits
NUR	**117**	Pharmacology I		2
NUR	**121**	Nursing I		8
General Education Requirement				
ENL	**102**	College Composition II		3
			Total	13

2nd Semester: Core Requirements

NUR	**118**	Pharmacology II		2
NUR	**122**	Nursing II		8
NUR	**125**	PN Completion Course		2
General Education Requirement				
PSY	**240**	Developmental Psychology		3
			Total	15

3rd Semester: Core Requirements

NUR	**221**	Nursing III		8
General Education Requirement				
SOC 101 or ANT 102				3
			Total	11

4th Semester: Core Requirements

NUR	**222**	Nursing IV		8
NUR	**219**	NCLEX Review Course		2
			Total	10

Total Program Requirements:

Nursing	40 credit hours
Core/General Education Requirements	32 credit hours
	72 credit hours

Licensed Practical Nurse to Registered Nurse

Required Courses/Certification to gain Admission to the Nursing Program

Before the student will be considered eligible to enroll in the nursing program, all courses must be completed with a grade of "C" or higher. A cumulative GPA of 3.0 "B" or higher is preferred for the following prerequisite courses: Credits

BIO	**181**	General Biology (prerequisite to BIO 201 and BIO 205)	4
BIO	**201**	Human Anatomy & Physiology I	4
BIO	**202**	Human Anatomy & Physiology II	4
BIO	**205**	Microbiology	4
CHM	**130**	Fundamental Chemistry	4
ENL	**101**	College Composition I	3
			23

All of the general education or non-NUR courses may be completed before entering the program but must be completed as listed by semester below and no later than beginning of the next semester. All courses require a grade of "C" or better for advancement in the nursing program. If the courses are not completed by the semester listed, e.g., PSY240 is not completed prior to the 3rd semester; the student cannot continue in the nursing program and will be administratively withdrawn. Students must provide proof of LPN licensure in good standing in the state of Arizona prior to fall enrollment. For financial aid purposes, federal assistance requirements define full time status as a student enrolled in 12 or more credits per semester. Your Federal Pell grant award is based on the number of credits for which you are enrolled.

Required Courses to Complete the Nursing Program

Spring Semester: Core Requirements

NUR	**116**	LPN to RN Transitions	3
NUR	**118**	Pharmacology II	2

General Education Requirements, if not completed previously

PSY	**240**	Developmental Psychology	3
ENL	**102**	College Composition II	3
		Total	11

*Any nursing program prerequisites may be taken in conjunction with NUR 116. All of the prerequisite courses must be completed before admission into the 3rd semester of the nursing program.

3rd Semester: Core Requirements

NUR	**117**	Pharmacology I (credit for prior learning may apply)	2
NUR	**221**	Nursing III	8

General Education Requirement

SOC 101 or ANT 102	3
Total	13

4th Semester: Core Requirements

NUR	**222**	Nursing IV	8
NUR	**219**	NCLEX Review Course	2
		Total	10

Total Program Requirements:

Nursing	25 credit hours
Core/General Education Requirements	32 credit hours
	57 credit hours

The sequence of courses of the nursing program may be completed before but no later than the semester in which they are listed without permission in writing. All the above courses require a grade of "C" or better for advancement in and completion of the nursing program.

Paramedic to Registered Nurse

Required Courses/Certification to gain Admission to the Nursing Program

Before the student will be considered eligible to enroll in the nursing program, all courses must be completed with a grade of "C" or higher. A cumulative GPA of 3.0 "B" or higher is preferred for the following prerequisite courses: Credits

BIO	**181**	General Biology (prerequisite to BIO 201 and BIO 205)	4
BIO	**201**	Human Anatomy & Physiology I	4
BIO	**202**	Human Anatomy & Physiology II	4
BIO	**205**	Microbiology	4
CHM	**130**	Fundamental Chemistry	4
ENL	**101**	College Composition I	3
			23

All of the general education or non-NUR courses may be completed before entering the program but must be completed as listed by semester below and no later than beginning of the next semester. All courses require a grade of "C" or better for advancement in the nursing program. If the courses are not completed by the semester listed, e.g., PSY240 is not completed prior to the 3rd semester; the student cannot continue in the nursing program and will be administratively withdrawn. Students will be required to complete the same admission requirements as students to the Multiple Exit LNA to RN pathway (see College Catalog Admission to the NPC Nursing Program requirements) and provide proof of Paramedic certification in good standing in the state of Arizona prior to enrollment. Student must have a minimum of one year experience as a paramedic. For financial aid purposes, federal assistance requirements define full time status as a student enrolled in 12 or more credits per semester. Your Federal Pell grant award is based on the number of credits for which you are enrolled.

Required Courses to Complete the Nursing Program

Spring Semester: Core Requirements

NUR	**123**	Paramedic to Nurse Bridge Course	11
NUR	**118**	Pharmacology II	2
General Education Requirements, if not completed previously			
PSY	**240**	Developmental Psychology	3
ENL	**102**	College Composition II	3
			Total 19

*Any nursing program prerequisites may be taken in conjunction with NUR 123. All of the prerequisite courses must be completed before admission into the 3rd semester of the nursing program. The sequence of courses of the nursing program may be completed before but no later than the semester in which they are listed without permission in writing. All the above courses require a grade of "C" or better for advancement in and completion of the nursing program.

3rd Semester: Core Requirements

NUR 117 Pharmacology I (credit for prior learning may apply)		2
NUR 221 Nursing III		8
General Education Requirement		
SOC 101 or ANT 102		3
	Total	13

4th Semester: Core Requirements

NUR 222 Nursing IV		8
NUR 219 NCLEX Review Course		2
	Total	10

Total Program Requirements:

Nursing	33 credit hours
Core/General Education Requirements	32 credit hours
	65 credit hours

IV. Academic Policies

Transfer Students

Nursing degree-seeking transfer students should submit official transcripts of previous college work to the Records & Registration Office. Students must include and complete the Request for Evaluation of Transfer Credits form. This form may be obtained from an Academic Advisor or the Records & Registration Office. Evaluated credits will aid advisement prior to enrolling in classes. Transfer students require a letter of recommendation from the director of their previous nursing program. LPN students must have a letter of recommendation from a former employment clinical supervisor.

Students must submit Pharmacology syllabi from previous course completion and course descriptions for previous nursing courses. See section VIII for additional requirements.

Nursing Course Transfer

To receive credit for prior learning, the student must provide evidence of the quantity and quality of the learning that has been achieved. The nature of this documentation varies depending on the topic or skill, but generally includes certificates of completion for non-college courses in the private, government, or military sectors. Additionally, the student must provide documentation of course content and classroom hours. This information is usually available in a syllabus. Those interested in the evaluation of their prior learning should meet with an NPC academic advisor or the Director. This is necessary to receive a general overview of the options and processes that may need to be followed for any individual student's situation. Nursing and pharmacology courses need to be pre-approved by the Director if intended to substitute for NPC nursing courses.

Petitions for Exceptions

Students seeking exceptions to degree requirements should meet with an Academic Advisor for assistance in completing the petition forms. These forms accompanied by supporting information such as copies of transcripts, course descriptions, and articulation rules are forwarded to the Director of Nursing and Allied Health. The Director makes a recommendation and forwards the paperwork to the Registrar and Vice President for Learning and Student Services for a final decision and distribution of the copies of the petition form.

Transferability of Credits

Students interested in transferring their credits to another Arizona public university should contact an Academic Advisor. NPC offers online access to The Arizona Course Applicability System (CAS) which offers helpful features that allows you to:

    a. See how your previous courses will transfer to public universities in Arizona
    b. Learn what community college courses transfer as specific university equivalents
    c. View transfer guides that outline university academic programs for community college students
    d. Research lists of community college courses that apply to university general education equivalents

To access the Arizona Course Applicability System, visit their website at
http://www.aztransfer.com/

Transferring between Campuses

1.   Students will not transfer between campuses or facilities after the second week of the semester. Extenuating circumstances will be considered on a case-by-case basis.

2.   Currently enrolled students seeking preference on a waiting list for transfer between campuses must submit a written petition to the Director. The waiting list will be based on the admission ranking and the written petitions received. Petitions must be received by the Director no earlier than 8:00 a.m. on the first day of the spring semester and no later than April 1st for the following fall semester. For the spring semester, petitions must be received no earlier than 8:00 a.m. on the first day of the fall semester and no later than October 1st. No transfers are allowed for the 4th semester unless deemed necessary by the Director. If you decline a transfer at the time it is offered, you will be moved to the bottom of the list.

LPN to RN or Paramedic to RN Alternative Learning Credit

For the student who is a Licensed Practical Nurse (LPN) or a certified Paramedic, who wishes to enter the program to acquire the Associate of Applied Science in Nursing degree, the prerequisite requirements are identical to the multiple exit LNA to RN program with the exception of the Nursing Assistant Training course. Students should meet with an NPC Academic Advisor and provide evidence of current Arizona Licensed Practical Nurse licensure that is active and in good standing. Decisions regarding acceptance are determined by the Nursing Admission Committee. Note: Additional fees may apply for assessed credit by evaluation. See pages 16-17 for additional requirements.

Student Information

It is essential that students inform the nursing department, current instructors, and Northland Pioneer College of any changes in their contact information. Failure to do so may result in missing critical information and other communication. All students have been issued an NPC email address. NPC uses this address to deliver official notices, such as closures and alerts and important date reminders. Faculty use this address to email grades, progress reports, evaluations, and other sensitive material to students. Students must verify they understand that e-mail is not a secure means of transmitting information – there are inherent security risks. The system allows forwarding your NPC email to another email system of your choice.

Family Education Rights and Privacy Act (FERPA)

According to FERPA guidelines, students will be required to release protected information (CPR, Immunization, TB, etc.) in order to work at contracted healthcare facilities. It is the student's responsibility to sign a release of information form.

Registration/Professional Liability Insurance

Students must be registered with tuition paid in each course before they may attend classes or clinical assignments. If a student's name does not appear on the faculty roster on the first day of classes, the faculty will ask for registration receipt of payment. Students may NOT attend a class or clinical site, UNDER ANY CIRCUMSTANCES, unless they are registered in the course. Registration is necessary so the College professional liability insurance covers the students, the college, and the clinical affiliating agencies. Keep all registration receipts for the duration of enrollment in the nursing program.

Health and Safety Medical Record and Functional Ability Requirements

All students must meet all the health and safety requirements documented on the Nursing and Allied Health Program Medical Record and Functional Abilities Essential for Nursing Practice (see p. 33, Functional Abilities Essential for Nursing Practice). It is essential that nursing students be able to perform a number of physical activities in the clinical portion of the program. At a minimum, students will be required to lift patients, stand for several hours at a time and perform

bending activities. Students who have a chronic illness or condition must be maintained on current treatment and be able to implement direct patient care. The clinical nursing experience also places students under considerable mental and emotional stress as they undertake responsibilities and duties impacting patients' lives. Students must be able to demonstrate rational and appropriate behavior under stressful conditions. Individuals should give careful consideration to the mental and physical demands of the program prior to making application and should inform the program of changes in their functional ability.

Accommodations

Students are expected to participate fully in activities required by the program. See the Functional Abilities Essential for Practice (p. 33). Students must exhibit stable mental processes by being able to function appropriately under stressful conditions.

Any student having a temporary medical condition inhibiting/restricting their activities must supply a written explanation from their physician. Should a student become unable to participate fully in the program's activities, s/he may be withdrawn.

We acknowledge that nursing students may have needs for which the College will make every effort to provide reasonable accommodations in compliance with the Americans with Disabilities Act (ADA). If you are a student needing accommodations for any classes, please contact the Office of Accessibility and Inclusion located at the Silver Creek Campus. The coordinator, Sandy Manor, travels to all campuses and centers and an appointment can be scheduled to meet with her by calling 928-536-6246 or emailing sandy.manor@npc.edu. The coordinator should be contacted before the first class meeting. It is important to contact the Office of Accessibility and Inclusion as early in the program as possible so that any necessary accommodations may be expeditiously implemented. Applications can be submitted electronically at www.npc.edu/dra. In addition to class exams, there will be standardized exams. For standardized exams, it is a separate process outside of NPC to whom you will be submitting documentation and requesting accommodation.

Please contact the Accessibility and Inclusion Coordinator if you need help requesting or submitting documentation for this accommodation. Individual faculty will not provide extra time, different environments, or dictionaries during testing without authorization from the Office of Accessibility and Inclusion. Examples of when an accommodation may be appropriate are: specific learning disabilities, vision, hearing, speech impairment, and mental health conditions.

According to ADA law, implementing accommodations cannot pose a direct threat to health or safety of others. It is the responsibility of the student to follow through with the Accessibility and Inclusion Coordinator.

Immunizations/TB Screening/CPR Certification

It is the student's responsibility to keep updated with TB Skin tests (annually), keep immunizations current and recertify CPR-Health Care Provider as necessary to maintain enrollment in nursing courses. Students unable or unwilling to provide documentation of compliance with these health and safety requirements will be withdrawn from all nursing courses. No student will be permitted to attend clinical without these items being up to date.

Health Insurance

Clinical affiliating agencies require that students have their own health insurance. During the first

semester, that the student is enrolled in the nursing program, s/he is required to submit a copy of insurance coverage. Students are required to keep the nursing office updated of changes in an insurance carrier. If a student does not have private insurance s/he may purchase optional insurance through Northland Pioneer College. The College offers a group health plan through a major insurance company, especially designed for students attending Arizona community colleges, and offers excellent coverage for illnesses and accidents at reasonable rates. For an application or further information, contact your local Academic Advisor or the office of the Vice President for Student Services. No student will be permitted to attend clinical without current health insurance.

Fingerprint Clearance

Fingerprint clearance is required by July 1st of the admission year and is required for clinical experiences. If there is a positive criminal history, a fingerprint clearance may be revoked or denied. Students unable to maintain a current fingerprint clearance card will be withdrawn from nursing courses.

First Language Not English

If English is not your first language, you may wish to identify yourself to your instructor. The instructor can make recommendations for additional academic support while you are in the nursing program. Faculty will not provide extra time, different environments or dictionaries during testing without official documentation of disability and approved accommodations from the Disability Resource and Access office.

V.   Nursing Student Honor Code

The Northland Pioneer College nursing program adheres to the policies and procedures of the College as they currently exist or may hereafter be amended. These procedures include, but not exclusively, the Student Conduct Code (procedure #2625), Student Grievance (#2605), Student Appeal of Grades (#2666), Harassment (#2762), Hazing Prevention (#2627) and the Drug-Free Student Environment (#2624) of the Navajo County Community College District. Any provision in this handbook that is inconsistent with any college procedure supersedes that procedure with regard to the nursing program.

Northland Pioneer College has partnered with Safe Colleges to provide each student an opportunity to educate themselves on the sensitive topics of sexual harassment and violence awareness, intimate partner violence, and drug and alcohol awareness and abuse. Students are encouraged to view the easily accessible Safe Colleges courses and benefit from knowing how to have a safe college experience.

In addition, nursing students must adhere to the policies and procedures of any agency where the student is assigned for clinical experience as a part of the Northland Pioneer College nursing program. A student who has been deemed ineligible for return as an employee or volunteer by any clinical agency will be administratively withdrawn from the program. By signing the acknowledgment of this handbook, or by continued, voluntary participation in the nursing program, a student consents to the policies and procedures of any agency that she or he uses for a clinical experience.

Any violation of college, agency, or nursing program procedures involving the health and safety of a patient, college or agency personnel or students may lead to student discipline up to and including dismissal from the nursing program.

Elements of the Nursing Student Honor Code

All students entering health professional programs require qualities of honesty and integrity. NPC nursing students apply these principles to both their academic careers and their subsequent professional nursing careers. Nursing students are expected to demonstrate a level of maturity that manifests in appropriate conduct at all times. Types of conduct that violate the Honor Code include, but are not limited to, the following:

A. Academic Dishonesty

Examples of academic dishonesty include, but are not limited, to the following:
- o Complicity with academic dishonesty.
- o Plagiarism.
- o Cheating.
- o Fabrication and falsification.
- o Misuse of academic materials.
- o Possession or use of copyright-protected, illegally published test banks.
- o Participation on websites that promulgate the illegal publication of copyright-protected test questions.

Examination Policy
As organizations and individuals attempt new ways of illegally obtaining and sharing test materials for their own profit or benefit, nursing faculty consistently enhance our test security measures to assure students have access to a fair testing environment. To prevent security breaches, the following safeguards are followed:
a. The testing environment will mimic the NCLEX environment. No food or drinks. No electronic or communication devices. No smart watches. Show ear plugs to instructor. No personal belongings in the room. No hats/headwear, scarves, sunglasses, etc.
b. Students only bring writing utensils into class room.
c. Students will use instructor provided calculator.
d. Students may not leave during the exam unless it is an absolute emergency.
e. Student may not re-enter exam room until all students have finished testing.
f. Instructor will not answer student questions in reference to exam items during an exam. If there is a typo on an exam, this should be communicated to the whole class.
g. Testing Methods
   Exams will consist of NCLEX style questions-
   1. Multiple choice- there should be 4 answer choices with only 1 correct answer.
   2. *Sequencing- ordering responses Ex. Highest risk factor to lowest risk factor, first step to last step, etc.
   3. *Multiple response- at least 5 answer choices, 1 or more of those should be the desired responses. In 1_{st} semester **ONLY**, indicate the number of correct responses for each question.
   4. *Exhibit/charting- part of chart presented and used to answer the question.

5. *Hot spot- picture given and student must mark correct spot or area, such as a syringe or medicine cup, or placement of stethoscope for auscultation of breath sounds, etc.
6. *Fill-in-the-blank/Dosage Calculation- provide the rounding rule for each question. Unless conversion of pounds to kg is the problem, the kg will be provided within the question stem. For each question provide a blank line with the appropriate unit for the student to "fill-in-the-blank" with the correct numerical response.

h. Students understand that when reviewing unit exams and quizzes, they may not copy by hand or machine, photograph, or transmit any part of any quiz or exam. No paper, writing implements, electronic devices (including cell phones, smartwatches and computers) are permitted while reviewing the exam. No exam or quiz will be removed from the classroom.

i. All students agree not to discuss the exam questions, rationales, or answers with any other possible examinee. Students verify their understanding that violation of this policy is a form of academic dishonesty and may result in immediate dismissal from the nursing program and a report to the Arizona State Board of Nursing.

j. *Exams and quizzes taken remotely (Moodle, Respondus, other electronic platforms) are subject to the same policies and safeguards.*

HESI Confidentiality Statement

Students are aware HESI exams are secure exams. Exam questions, rationales, or answers may not be discussed. Violators will be reported to the State Board of Nursing and legal action may be taken by HESI.

B. Unprofessional Conduct

Denotes any conduct (either on- or off- campus) that interferes with the student's ability to perform professional duties or reflects poorly on the practice of nursing. Examples of unprofessional conduct include, but are not limited to, the following:

- o Disruptive or disorderly conduct in a classroom or clinical setting (on-site or off-site), such as disregarding rights of faculty and peers, threatening behaviors in any medium of communication, and sexual harassment.
- o Intoxication or being under the influence of drugs or alcohol on campus, in a classroom or in a clinical setting.
- o Violation of any NPC policy.
- o Violation of patient confidentiality.

C. Professional Role Behaviors

Expectations related to professional role behaviors (PRB) are imbedded in the National Student Nurses Association Code of Academic and Clinical Professional Conduct, the Arizona Nurse Practice Act, and the American Nurses Association Code of Ethics. These resources demonstrate standards of practice and professional performance for nursing. Students accept responsibility for professional role behaviors related to 1) attendance, 2) dress code and professional appearance, and 3) protection of confidentiality: A breach of expected conduct whether covert or overt, reflects poorly on the nursing student, the nursing program, the nursing profession and can place the college and facility in legal

jeopardy (Christensen, 2016).

1. Attendance

One goal of the nursing program is to prepare nurses to practice competently and professionally in the health care environment. Among the many desirable qualities of the nurse is appropriate communication, courtesy to others, punctuality for obligations, and completion of responsibilities. These qualities also are expected while a student is learning to become a nurse. Depending on the course and clinical placement the clinical/lab days listed on your schedule may not necessarily reflect the days that you will attend. Special days are listed in the syllabus and are subject to change.

Class Attendance
Promptness, punctuality and attendance at all classes, whether face-to-face or virtually, are an important part of professional accountability. Upon entering Northland Pioneer College, a student assumes the responsibility of completing each course for which s/he is registered. The student is expected to attend all sessions of the classes in which s/he is enrolled. Any student who has three (3) absences without excuses acceptable to the instructor, medical or otherwise, may be dropped from the class. Students who miss the first two (2) meetings of the class may also be dropped. After a student has been dropped from class for unexcused absences, an appeal for reinstatement will be considered only under extenuating circumstances.

1. When absence is unavoidable, students should report the reason to the instructor and assume the responsibility for all classroom work they miss.

2. Class attendance may affect the final course grade at the discretion of the instructor as specified in the course syllabus.

3. For further course requirements, i.e., penalties for tardiness and late assignments, see each course syllabus.

Classroom Etiquette
1. Cell phones are to be turned off and placed out of view during class.
2. Students are expected to arrive to class on time, return from breaks on time, and remain in class for the scheduled time. Tardiness or leaving early may result in an unexcused absence, *whether face-to-face or in the virtual environment where synchronous attendance is expected.*
3. Talking out of turn or exhibiting other disruptive behaviors is not tolerated. You will be required to leave the classroom or lab. Please review the NPC Student Code of Conduct within the college catalog.

Clinical Attendance
In order to meet the clinical objectives, faculty members believe learning occurs best in the clinical setting. Your attendance assists in the acquisition of clinical competencies. Therefore, attendance at clinicals is mandatory.

1. If the student must miss clinical due to an emergency or illness, the student **must notify** the instructor, the clinical agency, and the preceptor, if applicable **before** the beginning of the shift.
   a. With one (1) clinical absence, a make-up clinical day or a written assignment will be required to be completed on the date determined by the instructor.
   b. With two (2) clinical absences, the student must complete make-up clinicals/assignments as described above and meet with faculty to develop a learning contract. Students must make

arrangements to make up missed clinical days by the date arranged with the clinical instructor. Opportunities will be provided at the faculty's convenience.

    c. Failure to complete the required assignments on the designated dates may result in a failing grade and the student may be dismissed from the nursing program.

2. More than two (2) clinical absences per course may result in a failing grade in the course and the student may be dismissed from the nursing program.

3. If an absence is due to an illness, a provider's written permission to return to clinical activities may be required by the instructor.

4. Any unexcused clinical absence may be grounds for dismissal.

5. *Skills lab* attendance is mandatory. If a student misses a skills lab, it is the student's responsibility to arrange make-up by the date arranged with the instructor.

6. In circumstances of student illness, injury, or other health limitations, both the clinical agency and the college health policies must be upheld. The faculty member will determine a student's ability to give adequate nursing care and will determine if the student can remain and/or return to the clinical experience, regardless of a physician's approval for return. In the event of a student injury suffered during clinical practice, emergency medical treatment may be obtained at the clinical facility. However, such treatment will be at the expense of the student.

7. It is the student's responsibility to update TB tests (annually), keep immunizations current and recertify CPR-Health Care Provider as necessary to maintain enrollment in nursing courses. Students unable or unwilling to provide documentation of compliance with these health and safety requirements will be withdrawn from all nursing courses.

8. Cancellation of clinical due to weather is based on the discretion of the instructor, but does not occur often. Clinical allowances and availability for make-up opportunities differ between sites – please refer to your instructor.

9. Punctuality is an important characteristic of a nurse and a discipline that must be learned by the student nurse in the clinical area. Tardiness may result in being sent home and an absence given.

10. Please refer to each course syllabus for further guidelines.

Clinical Travel
Clinical experiences take place in various health care agencies in and outside the college's district. Hours may vary from the class schedule depending on the clinical placement and travel will be required at times.

In addition, overnight stays may be required. Occasionally, it is necessary for the nursing student to travel to a more specialized training facility out-of-town that requires being away from home overnight.
1. The college does not assume financial responsibility for overnight accommodations.
2. For students who travel to Flagstaff Medical Center or Whiteriver IHS Hospital for a clinical

experience: If the student is unable to return to his/her home due to a snowstorm or hazardous road conditions, the students will be lodged at the expense of NPC. Students are responsible for their meals. When the college makes lodging arrangements for the students and is financially responsible, the following rules will apply for the duration of the travel period:

    a. Students are representing Northland Pioneer College and should conduct themselves in a manner which will not bring complaints from hospital or hotel personnel.

    b. One to four students may be assigned to a room.

    c. Family members and friends are not allowed to share the accommodations.

3. When the college does not assume financial responsibility for overnight accommodations, the students are free to make their own living arrangements but are still held accountable to the college while at the health facility.

4. All students will agree to abide by the NPC Student Conduct Code during the travel period.

In case of weather conditions that render traveling hazardous, students are urged to exercise their best judgment in determining whether to attend clinical assignments. The clinical instructor must be notified promptly if students are going to be absent or late. Cancellation of clinical due to weather is based on the discretion of the instructor, but does not occur often. Faculty will notify students of changes in scheduling clinical practice. Clinical allowances and availability for make-up opportunities differ between sites – please refer to your instructor.

Jury Duty

Students can request a postponement of jury duty if the jury duty assignment conflicts with class. It is advisable, in such cases, that students request jury duty to be deferred until a break from school so as not to interfere with exams or other in-class assignments. If a letter from the program is required, please see the Director of Nursing and Allied Health for a letter seeking to postpone jury duty. In cases where a student must be absent from class for jury duty, it is the student's responsibility to notify the instructor in advance that they will be absent. If released from jury duty during the course of the day, the student is expected to return to class.

2. Clinical Dress Code

Students are to wear the official nursing program uniform in all clinical settings unless setting or agency requires other clinical attire. Guidelines for student's dress and appearance when functioning in a professional capacity in clinical areas and skills laboratory include the following:

a) Students must be meticulous regarding personal hygiene. A student maybe dismissed from clinical for the day for hygiene issues.

b) Fingernails must be short, clean, and in good repair and with **NO** nail polish. No artificial nails (including gel, shellac, or silk applications) are permitted.

c) Hair is arranged neatly and securely so that it will stay under control, away from the face. Hair longer than shoulder length must be tied back, off the shoulders. Beards and mustaches are neatly trimmed. Facial beards may not be longer than one inch and no more than two inches below the jaw line.

d) Visible jewelry is limited to a watch, one plain wedding ring, and "post" type earrings only. No visible facial or body piercing jewelry is permitted, including the tongue.

e) Students are not to chew gum or use tobacco products at the clinical site. Breath mints are acceptable.

f) No perfumes, aftershaves, or perfumed lotions, soaps, and creams are permitted.

g) Tattoos will be handled on an individual basis. If deemed that a tattoo may be offensive to any client, the student may be asked to cover up the tattoo during clinical time.

h) The nursing uniform includes:

1. <u>Cherokee Pewter Gray</u> scrub bottoms and scrub top. Students *are not* required to purchase scrub tops/bottoms from United Uniforms, but *are* required to wear the Cherokee Pewter Gray color. The optional navy blue scrub jacket (<u>females #4350</u> or <u>males WW360</u> in Navy only) may be worn with the uniform in the clinical setting if desired. Students need to order this jacket by phone, as it is embroidered with our logo – please call United Uniforms at 928-634-1666. A solid, non-patterned white, navy blue, or gray undershirt may be worn under the scrub top. Short skirts or culottes that end above the knee are unacceptable. Skin-tight or form-fitting clothes are not appropriate. No other sweaters, sweatshirts, or hoodies will be authorized in clinical areas.

2. Appropriate white or neutral underwear that is not visible are required.

3. Clean, predominately white or black shoes with closed toes, non-porous top, and a back strap (no clogs) are permitted. Uniform style or athletic shoes and laces must be clean with low heels. No open toes, backless shoes or sandals are permitted.

4. Tan or white hose or white or navy blue socks for women and men, according to agency policy.

5. Name tag approved by the nursing program and/or I.D. badge of institutions if required are part of the uniform. A student may be sent home from clinical if they don't have an approved name tag.

6. The NPC nursing patch must be visible on left upper arm of the uniform.

7. Other required supplies include a wrist watch with a second hand, a stethoscope, bandage scissors, and Kelley forceps.

8. Students may use cell phones to communicate with faculty during clinical experiences. Personal use of phones must be completed while on break from the clinical unit.

Guidelines for clinical laboratory experiences not requiring uniforms:

a. **"a"** through **"g"** in prior section apply.

b. Usually slacks, skirt and blouse or sweater or a daytime dress should be worn by women. For men, a sport shirt and slacks are suitable. Attire should be discreet and non-suggestive. A lab coat may be worn. No jeans.

c. In certain institutions, in designated areas, special garments may be worn, such as scrub gowns/suits in operating rooms, maternity areas, etc.

3. Confidentiality and the Health Insurance Portability and Accountability Act of 1996 (HIPAA): The Law that Protects the Privacy of Health Information

Nurses have always had a duty to keep their patients' confidences. In essence, the nurse's duty to maintain confidentiality means that a nurse may not disclose any medical information revealed by a patient unless to the physician or other health care provider. In general, ANA's *Code of Ethics* states that the information disclosed to a nurse during the course of the patient-nurse relationship is confidential to the utmost degree. As explained by the AMA's Council on Ethical and Judicial Affairs, the purpose of a physician's and nurse's ethical duty to maintain patient confidentiality is to allow the patient to feel free to make a full and frank disclosure of information. Full disclosure enables the physician to diagnose conditions properly and to treat the patient appropriately. In return

for the patient's honesty, the physician and nurse generally should not reveal confidential communications or information without the patient's express consent unless required to disclose the information by law. There are exceptions to the rule, such as where a patient threatens bodily harm to himself or herself or to another person.

The ANA's ethical guidelines are not binding by law, although courts have used ethical obligations as the basis for imposing legal obligations. Moreover, maintaining patient confidentiality is a legal duty as well as an ethical duty. A nurse's legal obligations are defined by the *US Constitution*, by federal and state laws and regulations, and by the courts. Even without applying ethical standards, courts generally allow a cause of action for a breach of confidentiality against a treating nurse who divulges confidential medical information without proper authorization from the patient.

Despite these ethical and legal obligations, access to confidential patient information has become more prevalent. Nurses in integrated delivery systems or networks now have access to the confidential information of all the patients within their system or network. Confidential information also is disseminated through clinical repositories and shared databases. Sharing this information allows patients to be treated more efficiently and safely. The challenge for nurses is to utilize this technology, while honoring and respecting patient confidentiality.

What is a Breach of Confidentiality?

A breach of confidentiality is a disclosure to a third party, without patient consent or court order, of private information that the nurse has learned within the patient-nurse relationship. Disclosure can be oral or written, by telephone or fax, or electronically, for example, via e-mail or health information networks. The medium is irrelevant, although special security requirements may apply to the electronic transfer of information.

The legal basis for imposing liability for a breach of confidentiality is more extensive than ethical guidelines, which dictate the morally right thing to do. Although current law in this area has been referred to as "a crazy quilt of state and federal law," protecting patients' confidentiality is the law of the land. Included in the patchwork are federal and state constitutional privacy rights, federal and state legislation and regulation governing both medical records and licensing, and specific federal and state legislation designed to protect sensitive information (*e.g.*, HIV test results, genetic screening information, mental health records, and drug and alcohol abuse rehabilitation information).

HIPAA has created additional patient confidentiality considerations. Under the privacy regulations, covered entities may usually release protected health information without authorization only to facilitate treatment, payment or health care operations.

Nurses should become familiar with laws involving the duty to maintain confidentiality. Any breach in confidentiality – even one that seems minor – can result in mistrust and, possibly, a lawsuit and/or disciplinary action.

You may not review charts that are not your patients' charts if you have no reason to have that information. Facilities will question why you are reading a patient record. Some agencies will have you sign a "Confidentiality Agreement." The list below shows information you are not to take from the clinical site. If you get a copy of a patient's lab for your care plan you need to remove any patient identifiers from the form and shred any information that can identify the patient.

Patient Identifiers

The following 18 identifiers comprise the minimum information which must be removed from a patient record before it can be released:

1. Names
2. All geographical subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes, except for the initial three digits of a zip code, if according to the current publicly available data from the Bureau of the Census: (1) The geographic unit formed by combining all zip codes with the same three initial digits contains more than 20,000 people; and (2) The initial three digits of a zip code for all such geographic units containing 20,000 or fewer people is changed to 000.
3. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older.
4. Phone numbers
5. Fax numbers
6. Electronic mail addresses
7. Social Security numbers
8. Medical record numbers
9. Health plan beneficiary numbers
10. Account numbers
11. Certificate/license numbers
12. Vehicle identifiers and serial numbers, including license plate numbers
13. Device identifiers and serial numbers
14. Web Universal Resource Locators (URLs)
15. Internet Protocol (IP) address numbers
16. Biometric identifiers, including finger and voice prints
17. Full face photographic images and any comparable images
18. Any other unique identifying number, characteristic, or code (note this does not mean the unique code assigned by the investigator to code the data)

There are additional standards and criteria to protect individual's privacy from re-identification. Any code used to replace the identifiers in datasets cannot be derived from any information related to the individual and the master codes, nor can the method to derive the codes be disclosed. For example, a *patient's initials cannot be used to code their data because the initials are derived from their name*. In other words, the information would still be considered identifiable if there was a way to identify the individual even though all of the 18 identifiers were removed, e.g., names of relatives or employers.

VI. Functional Abilities Essential for Nursing Practice

Individuals who apply for admission to the Northland Pioneer College nursing program must be able to perform essential skills. Any applicant who has met the necessary prerequisites and who can perform the essential functions will be considered for admission. If a student believes that he or she cannot meet one or more of the standards without accommodations, the nursing program must determine, on an individual basis, whether a reasonable accommodation can be made.

Functional Ability	Standard	EXAMPLES of required activities
Motor Abilities	Physical abilities and mobility sufficient to execute gross motor skills, physical endurance, and strength, to provide patient care. Must maintain balance in multiple position, reach above shoulders, below waist and out front.	Mobility sufficient to carry out patient care procedures such as assisting with positioning patients, administering CPR, assisting with turning and lifting patients, providing care in confined spaces such as treatment room or operating suite. Ability to stand for long periods of time (2-4 hours), walk, twist, turn, bend, stoop, squat, sit, climb stairs and move quickly. Reach above shoulders, below waist and out front. Push and pull 50 pound (e.g., carry instrument pans, move equipment). Support 50 pounds of weight (e.g., hold arm or leg). Lift 50 pound (e.g., pick up a child, transfer patient, bend to lift an infant or child). Carry equipment/supplies (e.g., lift instrument pans). Use upper body strength, e.g., retraction, physically restrain a patient. Squeeze with hand (e.g., operate fire extinguisher)
Manual Dexterity	Demonstrate fine motor skills sufficient for providing safe patient care.	Motor skills sufficient to handle small equipment such as small screws, perform suctioning, insert catheters, squeeze dropper, typing with keyboard.
Perceptual/ Sensory Ability	Sensory/perceptual ability to monitor and assess patients.	• Sensory abilities sufficient to hear alarms, auscultation sounds, cries for help, person-to-person conversation and discriminate in presence of background noises. • Ability to hear in situation while not able to see lips. • Visual acuity to read calibrations on 1 cc syringe, assess color and intensity (cyanosis, pallor). See in a darkened room (e.g., during endoscopic and eye procedures). Use peripheral vision. See objects 20 inches away and 20 feet away (e.g., information on monitors, identification of small needles). Depth perception and peripheral vision. • Tactile ability to feel pulses, detect temperature (skin/solutions), discriminate surface characteristics, feel differences in size and shape and detect environmental temperature. • Olfactory ability to detect smoke or noxious odor, etc.
Behavioral/ Interpersonal/ Emotional	• Ability to relate to colleagues, staff and patients with honesty, integrity and nondiscrimination. • Capacity for development of mature, sensitive and effective therapeutic relationships • Interpersonal abilities sufficient to establish rapport and interact professionally with individuals, families and groups from various social, emotional, cultural and intellectual backgrounds. • Ability adapt to and work constructively in stressful and changing environments with the ability to modify behavior in response to constructive criticism. Ability to deal with the unexpected (e.g., client condition, crisis)	• Establishes rapport with patients and colleagues. • Functions as part of a team and workgroup. • Emotional skills sufficient to remain calm in an emergency situation. • Behavioral skills sufficient to demonstrate the exercise of good judgment and prompt completion of all responsibilities attendant to the safe and effective care of patients. • Performs multiple responsibilities concurrently • Adapts rapidly to environmental changes and multiple task demands. • Maintains behavioral decorum in stressful situations. • Copes with strong emotions in others (e.g., grief, anger, stress)

	• Capacity to demonstrate ethical behavior, including adherence to the professional codes of conduct.	• Ability to negotiate interpersonal conflict. • Accepts constructive feedback • Accepts responsibility for own actions
Communication	• Ability to communicate in English with accuracy, clarity and efficiency with patients, their families and other members of the health care team (including spoken and non-verbal communication, such as interpretation of facial expressions, affect and body language). • Required communication abilities, including speech, hearing, reading, writing, language skills and computer literacy	• Gives verbal directions to or follows verbal directions from other members of the healthcare team and participates in health care team discussions of patient care. • Elicits and records information about health history, current health state and responses to treatment from patients or family members. • Conveys information to clients and others as necessary to teach, direct and counsel individuals in an accurate, effective and timely manner. • Establishes and maintains effective working relations with patients and co-workers. • Recognizes and reports critical patient information to other caregivers.
Cognitive/ Conceptual/ Quantitative Abilities	• Ability to read and understand written documents in English and solve problems involving measurement, calculation, reasoning, analysis and synthesis. • Ability to gather data, to develop a plan of action, establish priorities and monitor and evaluate treatment plans and modalities. • Ability to comprehend three-dimensional and spatial relationships. • Ability to react effectively in an emergency situation. • Ability to transfer knowledge from one situation to another • Utilizes long-term and short-term memory	• Calculates appropriate medication dosage given specific patient parameters. Ability to count, add, subtract, multiply, divide whole numbers and compute fraction and decimals. Document numbers in records. Tell and measure time. Read measurement marks (e.g., ruler, scale) • Analyzes and synthesize abstract and concrete data, problem solves, and evaluates outcomes. • Collects data, prioritize needs and tasks and anticipate reactions. • Comprehends spatial relationships adequate to properly administer injections, start intravenous lines or assess wounds of varying depths. • Recognizes an emergency situation and responds effectively to safeguard the patient and other caregivers. • Transfers knowledge from one situation to another. • Accurately processes information on medication container, physicians' orders, monitors, equipment calibrations, printed documents, flow sheets, graphic sheets, medication administration records, other medical records and policy and procedure manuals.
Safe environment for patients, families and co-workers	• Ability to accurately identify patients. • Ability to effectively communicate with other caregivers. • Ability to administer medications safely and accurately. • Ability to operate equipment safely in the operative area. • Ability to recognize and minimize hazards that could increase healthcare associated infections. • Ability to recognize and minimize accident hazards in the clinical setting including hazards created by clinical staff and students that contribute to patient, family and co-worker falls.	• Prioritizes tasks to ensure patient safety and standard of care. • Maintains adequate concentration and attention in patient care settings. • Seeks assistance when situation requires a higher level or expertise/experience. • Responds to monitor alarms, emergency signals, call bells from patients, and orders in a rapid and effective manner. • Tolerates confined spaces, exposure to allergens, (e.g., latex gloves, chemical substances), strong soaps and odors, unpleasant sights, grease, oils, slippery or uneven walking surfaces, excessive noises and extreme temperatures.
Punctuality/ work habits	• Ability to adhere to NPC policies, procedures and requirements as described in the Surgical Technology Student Handbook, college catalog, student handbook and course syllabus. • Ability to complete classroom and clinical assignments and submit assignments at the required time.	• Attends class and clinical assignments punctually. • Reads, understands and adheres to all policies related to classroom and clinical experiences. • Contacts instructor in advance of any absence or late arrival. • Understands and completes classroom and clinical assignments by due date and time.

VII. General Policies

A. Student Representation

A class representative shall be elected from each site for each year and serve as nursing student representatives. An additional representative will be selected by students entering the nursing program through the LPN-RN and Paramedic-RN cohorts during their bridge courses. These additional representatives will then stand for election with any of the other students in the second year courses. Class representatives must maintain a 78.00% exam average and acquire satisfactory clinical evaluations in all areas throughout the semester. If unable to maintain this standard, the student is removed from office and the class will immediately vote for a replacement. Representatives or their designees are required to attend all faculty meetings, curriculum planning workshops, and other administrative gatherings when curricular and student concerns are addressed. They shall participate in the development of academic policies and procedures and provide student input into the nursing program evaluation plan.

Students are encouraged to provide input on departmental decisions including admission standards, curriculum, student services, and the teaching/learning process. Students are invited to become active in the College student government association, nursing student associations and organizations on campus and in the community. The following activities are ways that students can become involved in governance:

- Participate in Clinical Instructor and Clinic Site Evaluations and graduate surveys.
- Provide honest and fair feedback to your instructor when asked to complete Evaluation of Instructional Effectiveness.
- Participate in Student Government activities.
- Provide input when your peers are representing your issues at faculty meetings and student forums.

B. Grading Scale

Nursing students will be evaluated separately in theory and clinical areas. Evaluation is separate for each area.

1. All nursing courses are graded as follows:
   a. The theory component will be assigned a letter grade based on the nursing program scales as described below:

91.00 – 100	=	**A**
85.00 – 90.99	=	**B**
78.00 – 84.99	=	**C**
77.99 & below	=	**F** (dismissal from program)

   b. In order to remain in the nursing program, students must maintain a 78.00% or above exam AND overall course average in every nursing course in which they are enrolled, whether containing a clinical component or not. The weight of unit and final exams differs between courses - check your course syllabus. When a student's final grade average in a course falls below 78.00%, or it becomes mathematically impossible to achieve a 78.00% average, s/he will be dismissed from the program pursuant to the dismissal procedure contained in this handbook.

   c. The clinical component in NUR I, II, III, and IV will be assigned a Pass/Fail grade. The

clinical/laboratory components are interdependent co-requisites; e.g., if a student receives a failing grade in either component, the grade recorded for both components is **"F"**, and the student cannot continue in the program. If the student is readmitted to the program, the entire course must be repeated.

2. Remediation: If an instructor determines that remediation is required for any component of the course, a required Remediation Plan will be developed by the student and instructor. Failure to comply with the Remediation Plan may result in failure of the course. This failure to comply with remediation will be considered if readmission is requested.

Theory Component

1. Theory grades are based upon examinations, and/or other assignments.

2. All nursing students must achieve a minimum average of 78.00% on exams and must achieve a minimum overall 78.00% average in each course to continue in the program. The weight of each unit or final exam component to calculate the exam average and course average differs between courses – refer to the specific course syllabus.

3. All students must have an average of 78.00% on **all** exams (4 unit exams and final exam scores combined and averaged) to receive a passing grade (C) in this course. *The exam average will not round up to the next whole number. For example, a 77.5 is recorded as a 77 and does not meet the 78% requirement.*
   (EXAMPLE) Exams are weighted as follows to calculate exam average:
   a.   4 Unit Exam Average   x 0.80   = _____
   b.   Comprehensive Final   x 0.20   = _____
   c.   Exam Average (must be 78.00% or higher)   = _____

4. Grades from additional components may be used to increase the grade average **only if the student has a minimum exam grade average of 78.00%.** Grades from additional components may result in an overall course grade lower than 78.00%, causing the student to fail the course (grade of F). Each *component* of the grade is calculated to the nearest tenth. The final grade will not be rounded up to the next whole number. *For example, if the components add up to 77.5%, the requirement is not met.*

5. A unit exam average of at least 78.00% is required for the 4th semester student to remain in the program and progress to capstone.

6. Methods of evaluation for each course are printed in the course syllabus.

7. All 1st semester nursing students will be required to pass a dosage calculation exam with **100% proficiency** in order to continue in the program.

8. All 2nd and 3rd semester nursing students will be required to pass I.V. content, dosage calculation exams with **100% proficiency** in order to continue in the program.

9. A grade of "D" or "F" in any co-requisite (general education) course is not acceptable to fulfill the grade requirements for the nursing program. Co-requisite courses must be completed before or in the sequential order listed on the nursing program curriculum outline.

10. It is the responsibility of each student to turn assigned reports, projects, etc. in to the instructor

who made the assignment on the designated date stated by the instructor. Late work will be assessed a penalty – refer to each course syllabus for specific information.

11.   All students will be notified **in writing** if doing unsatisfactory work.

12.   Alcohol or drug abuse in class will not be tolerated and are subject to the Substance Abuse Procedures (p. 47).

13.   Use of tobacco products in class/lab/clinical is not permitted.

14.   Bringing children to class is disruptive and discourteous to fellow classmates and will not be permitted.

15.   Students are not to bring any noise producing electronic equipment to class or clinical experience (pagers, cell phones) that cannot be silenced.

Plagiarism or any dishonest academic behaviors are not tolerated and will be reported to the Vice President for Learning and Student Services for investigation and possible disciplinary action. Please refer to the Student Conduct Code found in the College Catalog.

Clinical Component

All nursing students must demonstrate safe skill procedures as evidenced by instructor verification on the Nursing Skills Check List.

l.   All nursing students will have a written midterm and end-of-semester evaluation. Additional evaluations may be initiated by faculty or students at any other time. Clinical agencies and clinical instructors will be evaluated by students.

2.   Students are required to attend clinical practicum assignments to meet the objectives of the course; however, the student may be restricted from clinical practicum if the agency staff or instructor deems them unsafe or unfit for duty.

3.   Any student suspected of being under the influence of alcohol or other mind altering substances will be asked to submit to a urine or blood test and to leave the clinical area. (See "Reasonable Suspicion" Substance Abuse Procedure, p. 47)

4.   Clinical performance based upon behavioral objectives is graded on a Pass/Fail basis.

5.   Students are responsible to have their clinical Nursing Skills Checklist with them at all times and to initiate having demonstrated skills initialed and dated by the instructor.

6.   All students are to request direct supervision in clinical procedures and performance until the instructor approves their performance as safe.

7.   **Students are to obtain supervision from an RN or instructor of the "rights" for every medication given for the duration of the program.** The "rights" of medication will be explained to the student during the course work before the clinical experience in which the student will give medications. Students giving medications without supervision will be dismissed from the nursing program.

8.   Hospital and/or clinical agency incident reports involving any student and/or client are to be completed in full and signed by the student and the clinical instructor.

9.   At no time will the student leave the agency during the assigned clinical time without permission from the instructor.

10.   When the assigned clinical time is finished, the student is to exit the facility in a timely manner. If it is necessary to re-enter the clinical facility after or at other than assigned times, the student must remove any Northland Pioneer College identifying articles of clothing such as name tag or uniform.

11.   Students not assigned to a particular clinical area or group will not loiter in the area where other students are working.

12.   Any unsafe or unprofessional nursing behavior shall be communicated to the student. The student may be dismissed from the nursing program at any point due to a single or cumulative problem behavior, depending upon the severity of the incident.

13.   Meals before, during, and after clinical experience are the student's financial responsibility. Students are responsible for their own transportation.

14.   It is required for safety reasons that eight hours of work-free time precede each NPC clinical session. Excessive fatigue and/or inability to provide safe patient care may result in the student being asked to leave the clinical area, constituting a clinical absence.

Student Limitations and RN Supervision Requirements

In addition to the formal role descriptions, the following aspects of student roles require emphasis:
RN supervision is required for:
1.   Venipuncture–starting IV or drawing blood.
2.   Conversion to IV to saline locks or vice versa.
3.   IV fluids and medications including saline/heparin lock flush.
4.   Observe/assist with blood transfusions.
5.   Giving or receiving report on a client transferred between units.
6.   Observe/assist with verbal or phone orders from physician.
7.   Observe/assist with transcribing orders.
8.   Student's signatures for controlled substances consent forms for procedures or surgery, admission and discharge sheets, and on blood transfusion RN must countersign sheets.
9.   Changing dressings on central lines, performing peritoneal dialysis, and/or other complex procedures.
10.   Emergency Department triage.
11.   Checking insulin, anticoagulants, oral anti-neoplastic medications, and all pediatric doses.
12.   Drawing blood from an arterial line.
13.   Administering medications for cardioversion.
14.   Monitoring epidural medications.

The following will lead to immediate dismissal: the following procedures are **NOT** within the scope of practice of a nursing student. Thus, if done even with RN supervision, immediate dismissal from the nursing program will result.
      a.   Arterial sticks or drawing arterial blood (except arterial lines. See #12 above).

b. Electrical defibrillation or cardioversion.
c. Administration of anti-neoplastic agents (except oral agents. See # 11 above.).
d. Administration of epidural medication (except for monitoring of. See #14 above).
e. Administration of IV emergency antiarrhythmic medication

C. Clinical and Laboratory Incidents

Student Injury or Illness

Students who are injured or become ill in the clinical area should notify the clinical instructor immediately. In the case of a clinical site-related injury, the student should follow the procedure (if one exists) prescribed by the institution or agency for students who are injured.

Students who are injured in a skills laboratory or at a clinical agency complete, with the clinical instructor, the Nursing and Allied Health Division Clinical/Laboratory Incident Report found within this handbook. This form will assist your data collection to provide information to the Campus Manager and the Director. The agency may also request that its incident report form be completed. Notify the Director of the incident by calling 928-532-6133 *after* you have followed the procedure at the agency and contacted the clinical site's employee health office or nearest emergency room for immediate triage. If the student is treated in a hospital emergency room, neither the College nor the agency will accept financial responsibility. The student must pay for any care according to the policy of that agency.

Students who become ill at the clinical site should, along with their clinical instructor, determine if their illness is communicable and presents a risk to patients/clients. The determination of whether an ill student who is symptomatic should be excluded from providing direct care shall be made on a case-by-case basis by the clinical instructor. A student's physician may also exclude a student from providing direct care. Treatment of any illness is at the student's expense.
The purposes of these procedures are:
   a. To document the type and frequency of incidents that occur during student clinical and laboratory experiences in order to identify, analyze and take action.
   b. To serve as an educational tool to assist faculty to detect risks, gaps in understanding and direct changes in the educational program.

Definitions

Incident – any unintended event, no matter how trivial, that could have harmed or did harm a patient/client, staff member, student, visitor or all four. **Incidents will be immediately reported to the clinical instructor and clinical agency**. A clinical incident is an occurrence inconsistent with accepted professional standards of patient care or routine organizational policies and procedures. An incident could involve supplies, equipment, procedures, or particular services or programs. The term incident includes near misses and injuries as a result of medication errors, error of execution, error of planning, or medical error.

Medication error – An error in the processing, ordering, delivery, or administration of a medication.

Error of execution – Failure of a planned action to be completed as intended (i.e., desired outcome may or may not be achieved).

Error of planning – The use of a wrong plan to achieve an aim (i.e., desired outcome cannot be achieved).

Medical errors – When something planned as part of medical care does not occur or when a wrong plan is implemented. The four types of medical errors include:
- o Diagnostic – error or delay in diagnosis, failure to employ required tests, use of outmoded tests or treatment, and failure to act on results.
- o Treatment – technical errors in performing an operation, a procedure or administering a treatment, medication error, avoidable delays, and inappropriate care.
- o Preventive – failure to provide prophylactic treatments, inadequate monitoring or follow-up
- o Miscellaneous – improper medical staff behavior, laboratory errors, equipment failures, and communication problems.

Near miss – An occurrence that could have resulted in an accident, injury, or illness but did not by chance, skillful management, or timely intervention.

Reporting Guidelines and Procedures

The following guidelines are followed when completing the Nursing and Allied Health Division Clinical/Laboratory Incident Report found within this handbook.
- A. Student notification of the clinical agency and instructor immediately.
- B. Follow emergency and medical care and agency procedures.
- C. Documentation on the Clinical/Laboratory Incident Report about the incident should be objective and contain factual information only. This form does not replace the agency or NPC incident reporting forms. Reports are to be completed by the student and clinical instructor directly involved in or present at the time of the incident.
- D. The Director is notified by calling (928) 532-6133.
- E. The Clinical/Laboratory Incident Report will be sent to the Director and the student will meet with the Campus Manager within 24 hours of the incident.

VIII. Progression and Graduation Requirements

Progression Requirements

Students must meet the following criteria to progress to the third semester of the nursing program:
1. Maintenance of grade point average of 2.0 or better for nursing classes (78.00%-84.00%).

2. Grade of "C" or better in all co-requisite (general education) courses.

3. Completion of all college requirements with a minimum of 51 credit hours required for the Certificate of Applied Science Practical Nursing.

PN Exit Exam Progression Requirement

The purpose of the PN Exit Exam is to:
- o Provide information for the ongoing systematic evaluation of the curriculum (as required for state and national accreditation).
- o Measure the ability of second semester students to think critically, synthesize knowledge, and make safe judgments and decisions in the discipline of nursing.
- o Predict probability of passing the NCLEX-PN exam.

Policy

1. All second semester nursing students are required to complete the PN Exit Examination.

2. The exam and vendor will be chosen by the nursing faculty.

3. The passing score will be determined by the nursing faculty.

4. Second semester nursing students will take the examination two times. A different version of the exam will be given with each attempt. The higher of the scores will be applied to the exam average and course grade.

5. Students must wait at least 3 weeks between exam attempts in order to provide time for review and remediation.

6. Students who do not achieve a passing score on the first exam attempt are required to complete structured remediation prior to the second and final attempt.

7. The PN Exit Exam will be a component of the course grade approximately equal to the final exam.

8. All students must have an average of 78.00 % on all exams, that is, unit exams and final exam to receive a passing grade to progress to the third semester.

9. Rounding rules in the grading policy apply to this policy.

RN Exit Exam Graduation Requirement

The purpose of the RN Exit Exam is to:
- o Provide information for the ongoing systematic evaluation of the curriculum (as required for state and national accreditation).
- o Measure the ability of senior students to think critically and synthesize knowledge to make safe judgments and decisions in the discipline of nursing.
- o Predict probability of passing the NCLEX-RN exam.

Policy

1. All 4th semester nursing students are required to complete the RN Exit Examination.

2. The exam and vendor will be chosen by the nursing faculty.

3. The passing score will be determined by the nursing faculty.

4. All fourth semester nursing students will take the examination two times. A different version of the exam will be given with each attempt. The higher of the scores will be applied to the course grade.

5. Students must wait at least 3 weeks between exam attempts in order to provide time for review and remediation.

6. Students who do not achieve a passing score on the first exam attempt are required to complete

structured remediation prior to the second and final attempt.

7. The RN Exit Exam will be a component of the course grade approximately equal to the final exam.

8. All students must have an average of 78.00% on all exams, that is, unit exams and the final exam, to receive a passing grade to graduate from the nursing program. Rounding rules in the grading policy apply to this policy.

9. Students who fail to achieve a 78.00% average on all exams and fail the nursing course as a result, and who are eligible to return to the nursing program, will be allowed to apply for readmission to repeat the associated course the next time it is offered.

IX. Conditions for Dismissal

1. Failure of any required nursing course results in automatic program dismissal.

2. Failure to successfully complete the co-requisite courses by the semester listed on the nursing curriculum outline, without written permission by the Director, results in automatic program dismissal. Course scheduling conflicts precluding registration will be considered on an individual basis.

3. A student may be suspended from the program during a grade appeal, grievance or student conduct code adjudication. Dismissal will be effective immediately after the deadline for filing a student grade appeal or grievance, or such grade appeal or grievance being fully adjudicated with the College, whichever is later.

4. The following is a representative list of disciplinary reasons, any one of which may constitute a basis for dismissal or not being readmitted to the program: (This list is not meant to be exhaustive)
   a. failure to maintain a minimum grade of **"C"(78.00%)** in all required nursing coursework on an on-going basis.

   b. any recurring performance or single incident which could jeopardize life, impede recovery, or interfere with the maintenance of the patient's current health status. (Example: medication error).

   c. failure to report investigation, disciplinary, or regulatory actions taken in the past or currently pending against your nursing license, LNA certificate or any other license or certification you have held or hold currently in any state or territory of the United States.

   d. DPS violations that affect your fingerprint clearance status and/or failure to report these violations.

   e. denial, surrender, suspension, or revocation of your nursing license or nursing assistant certificate in any state or territory of the United States.

   f. failure to immediately report a patient-care error or incident (pp. 39-40) to the nursing instructor and responsible nursing personnel.

g.   clinical evaluation indicating behaviors that pose a public safety risk.

h.   violation of the [College Student Conduct Code](#) or [Nursing Student Honor Code](#)

i.   violation of HIPAA regulations.

j.   actions or verbal statements which threaten the personal safety of any faculty, staff, students, patients or others lawfully assembled on the campus or clinical agency; or any conduct which is harmful, obstructive, disruptive to, or interferes with the educational process or institutional functions.

k.   charged with a felony which may affect clinical performance.

l.   behaviors that make it impossible for the student to perform the essential functions required of the student in the clinical experience including but not limited to insuring patient confidentiality, safety, recovery, and health.

m.   alcohol or drug use during or just before a clinical experience that impedes mental processes.

n.   failure to meet or maintain specific health and legal requirements, i.e., DPS fingerprint clearance, CPR training, communicable disease immunizations and tuberculosis testing, drug screening, and verification of ability to perform Functions Essential for Nursing Practice.

o.   failure to disclose medical conditions or treatment plans that may influence the student's ability to safely care for patients or perform the Functional Abilities Essential for Nursing Practice.

p.   current illegal drug use or current abuse of prescription or mind altering medications or substances such that a student's ability to safely care for patients and to function in the nursing profession appropriately is adversely impacted.

q.   failure to achieve **100% proficiency** on dosage calculation exams in the first, second, or third semesters.

r.   failure to demonstrate safe I.V. skills in second, third, and fourth semesters.

s.   failure to participate in the exit interview described below may constitute independent grounds for dismissal and may bar readmission to the program.

5. A student who is failing a nursing course may be dismissed prior to the end of the semester.

6. When a nursing student is dismissed from the nursing program, a grade of "F" will be given in either the specific nursing course or all nursing courses in which he or she is enrolled that semester.

7. Any decisions regarding dismissal will be discussed by the Director of Nursing, the lecture instructor and the clinical instructor prior to any decision being made.

X. Withdrawal and Readmission

Procedure for Withdrawal
Students will follow NPC procedures for withdrawal found in the Northland Pioneer College Catalog.

Exit Interview
Within 30 days of the last date of attendance in the nursing program, a student must arrange an exit interview (preferably in person) with the Director of Nursing and Allied Health. The Director will document the student's reasons for leaving, make recommendations for readmission if any, and discuss other issues as appropriate. A summary of the exit interview will be placed in the student's folder.

Re-Admission Application
Students who have failed or withdrawn from the nursing program are not guaranteed readmission. Students who have failed or withdrawn from any nursing (NUR) course for academic, disciplinary, or personal reasons more than once will be dismissed from the nursing program and will not be readmitted. Extraordinary circumstances may be evaluated by the Admission Committee.

The former student must send a written petition for re-admission in a letter format to the Director of Nursing by October 1st for enrollment in the spring semester and by February 15th for enrollment in the fall semester.

l.   Because petitions for re-admission to the nursing program are carefully considered, the former student must answer the following questions in the petition, and the answers must be specific:
   a.   Why were you dismissed or why did you withdraw?
   b.   If your exit interview identified causes for dismissal/withdrawal and/or recommended support services or education, please answer the following questions (be specific):
      i.   What causes for dismissal/withdrawal and/or recommended supportive services/education were identified in your exit interview?
      ii.   What have you done since your dismissal/withdrawal to address these issues as noted in your exit interview?
   c.   Beyond the issues noted in b. (above) having been addressed, why should you be readmitted to the nursing program?
   d.   What commitments will you make to your nursing education to increase your chances of academic success?
   e.   Are you willing to sign a behavioral contract as part of your re-admission if this was a condition discussed in your exit interview?
   f.   All readmission applications will be evaluated first by the instructor at the time of withdrawal or dismissal, the receiving instructor and the Director of Nursing prior to forwarding the request to the admission committee.

2.   When a petition is received on or before the deadline, the Admission Committee for the nursing program meets to consider the former student's request for re-admission. The committee's decision is based on the former student's exit interview, application and record. Available space will be a factor in the committee's decision.

3.   Meeting contingencies such as a required course, skills lab or clinical practice, or a contract to fulfill specific objectives may be part of the re-admission decision.

4.   An applicant requesting re-admission to the first semester of the program is required to

compete with all other first time applicants to the program. The original HESI score is good for eighteen (18) months, but the applicant may choose to retake it. Any co-requisites taken in the interim will be used in the admission criteria.

5.   A student not being readmitted to the nursing program within 12 months of last date of attendance must re-apply as a new applicant with a complete application, following all current nursing application requirements and deadlines. Students will need to retake NUR117 and NUR121. If the student is a licensed LPN they may apply for the LPN to RN transition program.

XI.   Advanced Placement

Licensed Practical Nurses, Transfer Students and Paramedic to RN Students

Graduates of state-approved Practical Nursing programs, certified Paramedics and students transferring at any level from other state-approved nursing programs may apply for advanced placement when the following criteria are met:

1.   Meet the NPC Nursing program's admission requirements listed in the Admission Packet.

2.   Prerequisite completion with a grade of "C" or better in each course is required. A cumulative GPA of 3.0 "B" or higher is preferred for the prerequisite courses.

3.   Applicants whose science course work was not completed within the last eight years may be required to test for knowledge prior to admission to the program.

4.   Enrollment in NUR116 first semester of the program is required for Licensed Practical Nurses. Enrollment in NUR123 first semester of the program is required for certified Paramedics.

5.   Candidates must pass the Nursing Math Dosage Calculations tests with a score of 100%.

6.   LPN applicants must possess a valid Arizona Practical Nursing license which is active and in good standing. Paramedic applicants must possess a valid and active Arizona Paramedic Certificate. Applicants must submit a current resume.

7.   Final admission and methods of selection are decided by the Nursing Admissions Committee and are dependent upon available space. While admission to the program will be based on completion of pre-requisites, GPA, and admission scores, campus priority will be based on availability. Candidates should be willing to attend either campus.

8.   Licensed LPNs and Paramedics must provide a current Admission Examination cumulative report for admission to the program.

9.   Transfer students require a letter of recommendation from the director of their previous nursing program. LPN students must have a letter of recommendation from a former employment clinical supervisor.

10.   Petitions for exception to these policies will be reviewed by the Nursing Admissions Committee and handled on an individual basis.

XII. Guidelines regarding Blood-Borne Diseases

For their own protection, it is recommended that students have a baseline HIV test drawn, on a confidential basis, prior to starting the program.

Guidelines for Exempting Students from Clinical Assignment to AIDS Clients:

l.   Confirmed Pregnancy
   The risk of transmission of HIV infection to pregnant health care workers is not known to be greater than the risk to those not pregnant.

   The risk of transmission of other pathogens such as cytomegalovirus (CMV) from patients with AIDS to pregnant health care workers is unknown but is thought to be low to non-existent.

   Based on the above information, it is prudent to excuse pregnant students from caring for clients with AIDS until further data is available.

2.   Incompetent Immunological Systems
   Students with diagnosed immunological deficiencies are at an increased risk for developing opportunistic infections.

3.   Infections
   A student with an infectious process could further compromise the already incompetent immunological system of the AIDS client.

   The decision to exempt a student from caring for an AIDS client due to illness or pregnancy will be made on a case-by-case basis by the faculty responsible for the clinical course. Decisions about longer exemptions (more than one clinical session) will be made in consultation with the student's physician and appropriate college faculty/administrators.

Student Clinical Assignments to AIDS Clients

The student will be assigned to an AIDS client only after having been educated on the principles of infection control and Standard Precautions. Because Hepatitis B & C are transmitted via the same routes as HIV, guidelines for caring for someone with AIDS are the same as those for Hepatitis B & C. Except for the exemptions to clinical assignments as stated under "Guidelines for exempting student for clinical assignment to AIDS client", students who have received instruction in Standard Precautions and the general principles of infection control may be subject to disciplinary action in the event they refuse a clinical assignment.

Students Who Are Antibody Positive, or Have AIDS

Present guidelines recommend that asymptomatic health care workers with HIV infection **not** be restricted from employment (Conte and CDC).

Based on this information, students with HIV infection who are asymptomatic need not be restricted from clinical experience unless they have some other illness for which any health care worker would be restricted.

The student should be aware that HIV infection may cause immunosuppression and therefore increase the student's susceptibility to infections acquired from client-student interaction. The student who is HIV positive has a moral/legal responsibility to protect clients and others with whom they come in contact.

The determination of whether an infected student who is symptomatic should be excluded from providing direct care shall be made on a case-by-case basis by a team composed of appropriate college faculty/administrators and the student's physician.

Accidental Exposure

Accidental exposure is defined as accidentally being exposed to blood/body fluids through needle stick, or skin lesion/non-intact mucosal membrane of a patient with suspected or diagnosed Hepatitis B or C or with HIV.

The accidental exposure of a nursing student while in a clinical agency will be treated per that agency protocol.

When a student experiences a possible accidental exposure to a blood-borne disease while in a clinical practicum agency, s/he should be made aware that the agency policy will mandate that an incident report be filed. Students agree to the incident report and to follow agency policy or procedures by their signature on the form included with this handbook and by their continued enrollment in the program. While the College will make every effort to maintain confidentiality, the student's agreement to follow agency procedure may not allow total confidentiality. The student agrees to execute any releases required by FERPA in connection with the Agency actions pursuant to their procedures. The supervising faculty will follow the agency procedure for reporting accidental exposure.

The student should immediately notify the clinical instructor who will then immediately notify the supervisor within the health care facility where the accident occurred. Agency policies will be followed. The exposed student is encouraged by the Department of Nursing to have immediate testing and follow-up according to current Center for Disease Control recommendations. The decision to have testing or not, however, is the choice of the individual exposed.

The Director of Nursing must be notified immediately when a student has been accidentally exposed.

XIII. Substance Abuse Procedures

Northland Pioneer College has a great interest in the success of its nursing students, the safety of any patients they work with, and the continued viability of its nursing program. In addition, the community NPC serves also has a compelling interest in both patient safety and in the continued viability of the NPC nursing program. The public in the area served by the College also has a compelling interest in producing as many nursing graduates as possible. Shortages in skilled nurses directly impact the quality and availability of health care in NPC's area of service. Only students and nurses who are unimpaired by drug or alcohol use while they render care can properly attend patients, learn and understand proper procedures and adequately perform to the technical standards of their profession. As confirmed by the Arizona State Board of Nursing's regulations, illegal use of drugs, or of alcohol or prescription drugs in a manner that impairs patient safety disqualifies a student from licensure by the Board and subjects a licensed nurse to discipline including possible loss of license. Likewise, failure to report such illegal drug use or use of legal drugs or alcohol in a manner that impacts patient safety is cause for State Board discipline.

Based on the compelling needs indicated above, and in conjunction with NPC's adopted policies and procedures requiring a drug free environment on its property and in any of its activities, NPC requires all nursing students to: 1) consent to any drug testing, including random drug testing, or as may be required by any affiliated health care provider involved in administering a nursing clinical experience; 2) consent to and participate in pre-clinical drug test screening; 3) execute any consents that may be

required by any testing entity whether an affiliate or a laboratory to allow college personnel to receive test results and any connected medical information; 4) consent to and participate in any reasonable cause drug testing; 5) abide by the State Board Standards in relation to drug and alcohol use including reporting to the Director of Nursing or the Vice-President for Learning any student or nurse who violates the State Board rules.

General Procedures

A.   General Notice – This procedure shall be given to all nursing students upon acceptance into the nursing program. Nursing faculty and students shall sign an acknowledgment that they have read and understood this procedure. Failure to sign the acknowledgment shall result in disqualification from the program. In addition to receiving a written copy of the procedure, all entering nursing students and all students about to begin the clinical rotation shall receive instruction from the nursing faculty concerning this procedure. Specific mention shall be made of: the drugs tested for as set out below, the detrimental effects of drugs and alcohol and the lingering effects of drugs and alcohol in the body, and the consequences of either failing to consent to drug testing as required by this procedure or of a positive test. The Student Grievance procedure shall also be explained.

B.   Change in Procedure. NPC reserves the right to modify this procedure at any time without notice. Whenever this Procedure is changed, NPC shall provide notice of the change to all affected students. Failure to provide such notice, however, shall not affect the validity of this procedure. All nursing faculty and students are expected to be aware of the current provisions of this procedure at all times. Copies of current NPC Policy and Procedures are available at the learning resource centers in Holbrook, Show Low, Snowflake, and Winslow.

C.   Notice of Drugs Tested. Tests under Section II of this procedure shall include tests for
         drugs in the following categories:
         Amphetamines
         Barbiturates
         Benzodiazepines
         Cannabinoids
         Cocaine Metabolite
         Methadone
         Opiates
         Phencyclidine
         Propoxyphene

         Tests under Section III of this procedure include all those listed above and Alcohol and additional prescription drugs which may inhibit judgment. A more comprehensive detailed list of specific drugs tested for under this procedure may be obtained upon request.

D.   Confidentiality. Drug test results and related information shall be maintained in a separate file in a locked file cabinet. Only the Vice President for Learning and the Director of Nursing shall have access to the file unless one of the exceptions below applies. All drug testing results and related medical information shall not be disclosed to third parties unless disclosure is required by law, the information is needed by appropriate school officials to perform their job functions, disclosure is needed to override public health and safety concerns, or the student has consented in writing to the release of the information. The College shall have the right to use and disclose the results of drug testing required by this policy in connection with internal academic purposes and in connection with the defense of any student grievance and

any claims filed by a student, or by his/her personal representative, in any court of law or with any state or federal administrative agency including, but not exclusively, the Arizona State Board of Nursing when required by law regulation or subpoena.

E.   <u>Withdrawal</u>. At any time before a regularly scheduled drug test under this procedure a nursing student may withdraw from the nursing program or withdraw their application to participate in the clinical program or from the nursing program. A student may not withdraw from the nursing program if a drug test based on reasonable suspicion of illegal drug use or alcohol use while attending patients or working at an affiliated health care facility has been required. A refusal to take a drug test ordered on reasonable suspicion shall be considered a breach of this policy and cause for dismissal from the program.

F.   <u>Records Retention</u>. NPC shall maintain all consent forms, test results (including negative tests), chain of custody documents, any internal memoranda concerning the circumstances of the test and related medical information including negative test results for a period of at least five years or as required by the Department of Library Archives and Public Records, whichever is longer. The Director of Nursing shall keep a record of all training provided under this Procedure.

Pre-Clinical Screening for Use of Alcohol and Drugs

All students are to be screened for drugs prior to their first day of clinical practicum in any semester of the nursing program. A positive and unexplained test for any of the drugs listed in this procedure will result in the student being excused from the practicum and informed of the intention of NPC to dismiss her or him from the nursing program.

Procedure:

A.   Students are informed of the pre-clinical screening procedure and outcomes at the beginning of the semester as provided above.

B.   Students are notified by their instructors the maximum time frame in which to complete a urine drug screening at the designated place.

C.   Northland Pioneer College is to pay for this pre-clinical screening test.

D.   The Medical Exam Officer reviews the results of the urine specimens that are then sent to the Northland Pioneer College Director of nursing.

E.   Students with negative results are to start their clinical practicum per schedule.

F.   Students with positive results are advised of the results by the Director of Nursing, and are to follow subsection (F) and (G) of Section III "Reasonable Suspicion" Procedure section on pages 49 – 54 of the Student Handbook.

"Reasonable Suspicion" Testing for Use of Alcohol and Drugs Procedure

If the nursing faculty, clinical supervisor, or staff ("supervising nurse") in the clinical facility or college where the student is assigned have reasonable cause to suspect that the student is mentally or physically impaired due to alcohol or drug use immediately prior to or during the performance of his/her clinical duties the student will be asked to submit to a urine drug and alcohol screening test.

A.   An affiliated health care provider may choose to follow its procedures in connection with the

incident. In that case the NPC faculty member shall determine in consultation with the Director of Nursing and the Vice-President for Learning whether to proceed under this procedure in addition to any procedure required by the affiliated entity. Any test results obtained by an affiliated health care entity, whether a random, reasonable suspicion or regularly scheduled test, may be used by NPC under this procedure provided NPC administrators are satisfied that the affiliated entity's procedures are fair to the student. This procedure may be invoked whether or not an affiliated health care provider requires testing.

B.   If this procedure is invoked, the faculty member will have another faculty member or licensed health care professional confirm the suspicious behavior if possible. The faculty member or licensed health care professional must complete the form "Faculty Report for Reasonable Suspicion of Drug/Alcohol Use."

C.   The student will be removed from patient care assignment and/or college premises pending results of the test.

D.   The student will provide a urine specimen for alcohol/drugs test which will be paid for by Northland Pioneer College. The testing will be conducted by an agency contracted by NPC pursuant to the guidelines set out in this procedure, including, if requested, splitting the specimen for a follow up test. The student will be responsible for any charges associated with the split specimen storage or follow-up testing. The student shall cooperate in all testing procedures. Failure to cooperate constitutes grounds for dismissal from the program. Student cooperation shall include, but not exclusively:

    1.   Reporting to the collection site as soon as possible after notification to report.

    2.   Bring and show official photo identification to collection personnel.

    3.   Check outer garments with collection personnel.

    4.   Rinse and dry hands without soap (Hands should be clean).

    5.   While under indirect observation (collector in same room) provide a 45ml sample or stay at the site and consume fluids until such a sample can be provided.

    6.   Provide an oral temperature on request. If the oral temperature is outside the range of the specimen or you refuse to give it you will be required to provide a specimen while under direct observation.

    7.   Give the specimen to the collection personnel, and indicate whether you desire a split specimen. (You will be responsible for any charges associated with the split specimen storage or testing.) Then observe sealing and labeling of bottle(s), initial the label(s) and sign the collection form. You may, if you wish, indicate on the collection form any medications you are taking as a memory aid should the Medical Review Officer seek clarification or explanation of test results.

    8.   Cooperate with any other reasonable request of collection personnel and the Medical Review Officer.

E.   The Medical Review Officer will review the results of the urine specimen. If the test is positive, the Medical Review Officer may contact the student to obtain any explanation for the positive test results. The Medical Review Officer will inform the Director of Nursing at Northland Pioneer College of the outcomes. A copy of the written results will be sent to the Director of Nursing.

F.   If the results of the urine test are positive and inadequately explained for one or more illegal substance(s)[1]:

1.   The student will be informed of the results, will be excused from the practicum, and will be informed of the intention of NPC to dismiss him or her from the nursing program. The Student shall have 10 days to initiate a grievance in accordance with the NPC Grievance Procedure. The Student may contest or attempt to explain the results of the positive test through the Grievance Procedure. The Student will be given the opportunity to have the split portion of the sample tested at a laboratory agreeable to both the student and the college. The Student shall pay for any such second test. The results of the second test shall be considered in the grievance. Unless a grievance is properly initiated within that time, the tentative dismissal shall become effective.

2.   Any student dismissed under this procedure is encouraged to seek professional addictions counseling and/or enter an addictions treatment program.

3.   Involvement of the Arizona State Board of Nursing is required if the student is a Licensed Practical Nurse or LNA. The student waives any confidentiality of records pursuant to Family Education Rights and Privacy Act and any other federal law including 42 U.S.C & 290-2.

4.   After twelve months of absence from the nursing program, the student may petition for readmission per the Readmission Procedure in the Student Handbook. (Admission will be dependent on space availability.)

5.   Evidence of rehabilitation of alcohol/drug addictions is required as part of the readmission application.
        a.   Documentation of a completed program from a recognized treatment program.
        b.   Acknowledgment of continued attendance in an anonymous 12-Step program.
        c.   Evidence of after-care attendance upon completion of the treatment program.
        d.   Letter/documentation from treatment facility and/or therapist stating that the student would be able to function effectively and provide safe and therapeutic care for patients in a clinical setting.
        e.   A pre-admission drug screening exam and drug testing thereafter as

[1] Pursuant to A.R.S. § 15-108, NPC prohibits the possession and use of marijuana on all campuses and in all off-campus student activities, including internships and clinical learning experiences in health programs, regardless of whether the possessor or user is in possession of a medical marijuana card. Medical marijuana, or its metabolite, is not an accepted substance in urine drug screens and will result in a positive urine drug screen. Students with a prescription for medical marijuana are not considered exempt from urine drug screening.

required by the NPC or its affiliated entities.

G. If the results of the urine test indicate use of a prescribed medication, other than medical marijuana:
1. The student is to meet with the Northland Pioneer College Director of Nursing within 24 hours of the test results to discuss the use of the medication and related impaired clinical behavior/judgment.

2. The student will need to consult with his/her physician regarding the continuous use of the prescribed medication.
   a. If the student's physician discontinues the medication, and the student's behavior/judgment is no longer impaired, the Director of Nursing and the Vice-President for Learning in consultation with the Accessibility and Inclusion coordinator for the college, will make a decision regarding his/her returning to the clinical/classroom settings. Subsequent testing may be required.
   b. If the student is to remain on the medication and consequently exhibit impaired behaviors/judgment, the Director of Nursing in conjunction with the Accessibility and Inclusion coordinator shall make inquiry of the student whether any reasonable accommodation can be made so that the student can perform the technical standards required by the State Board of Nursing. If the student cannot or, with adequate instruction, will not be able to perform to the State Board technical standards (regulations), with or without reasonable accommodation, s/he will be asked to withdraw. If any of the student's actions place the health or safety of a patient at risk, he or she may be dismissed from the program.
      1) At any time, the student who withdraws under this subsection may petition for readmission per the Re-Admission Procedure in the Student Handbook. (Admission will be dependent on space availability.)
      2) The student is required to show evidence of change in or discontinued use of prescribed medication that contributed to the impaired behavior/judgment or that he or she can now perform or will be able to perform with adequate instruction the technical standards required by the State Board with or without reasonable accommodation.

H. If the results of the urine test are negative:
1. The student is to meet with the Northland Pioneer College Director of Nursing within 24 hours of the test results to discuss the circumstances surrounding the impaired clinical behavior.
   a. If the indicator was the odor of alcohol, the student will be mandated to discontinue the use of whatever may have caused the alcohol-like odor, before being allowed to return to the clinical setting.
   b. If the indicator was behavioral, consideration must be given to a possible medical or mental condition being responsible for the symptoms. Medical or psychiatric evaluation may be indicated.
   c. Based on the information proved in this meeting and any follow-up evaluations, the Director of Nursing will make a decision regarding return to the clinical/classroom settings.

I.   If a student refuses to submit to a urine drug screen, the student will be required to leave the clinical area and make an appointment with the Director of Nursing. The Director of Nursing may recommend that the student be dismissed from the nursing program for failure to conform to the guideline and procedure. Refusal to take a test constitutes grounds for dismissal from the program. The recommendation is not binding on the Administration.

J.   A second positive, inadequately explained result on an alcohol/drug screen shall have the same results as a first inadequately explained result. NPC does not discriminate on the basis of alcoholism or past drug addiction. Students should be informed, however that use of illegal drugs while a student in the program and use of alcohol during a clinical rotation or before a clinical rotation so that judgment is impaired during a clinical rotation will be grounds for dismissal from the program no matter the student's past history. In addition, students must be aware that Arizona State law prohibits an individual from obtaining a license from the State Board of Nursing for three years after any sentence or probation on any felony criminal conviction is concluded.

Testing Procedures

NPC shall contract for testing services with reputable laboratories. In procuring testing services, the following minimum testing procedures shall apply.

A.   Collection facilities must:
    1.   Be clean.
    2.   Well lighted.
    3.   Use toilet bluing agent.
    4.   Have no other source of water in the enclosure where collection occurs.

B.   Collection personnel must:
    1.   Contact NPC if the student fails to arrive for test.
    2.   Request a photo identification from the student.
    3.   Use a chain of custody control form.
    4.   Fill out necessary information on the chain of custody form.
    5.   Ask student to remove unnecessary coats or jackets or other unnecessary clothing.
    6.   Ask student to remove all personal belongings such as purse or briefcase. Student may retain wallet.
    7.   Instruct student to wash and dry hands without soap.
    8.   Remain present but outside stall or privacy area with only toilet with bluing agent while specimen is provided.
    9.   Note any unusual circumstances, behavior or appearance on custody control form.
    10.   Ask the student if he or she desires a split specimen. If the specimen is insufficient for splitting to two samples, require the Student to remain to provide sufficient specimen.
    11.   If the specimen is outside normal temperature range of 32 to 38C or 90 to 100 F and student will not provide oral body temperature or if the reasonable grounds exist to believe the student has altered a specimen, obtain a specimen by direct observation. Any decision to collect a specimen by direct observation shall be confirmed by a supervisor. Direct observation shall be only by one same gender collector.
    12.   Verify that at least 45ml collected for split sample.
    13.   Measure and document temperature of specimen(s).
    14.   Inspect specimen's color and inspect for contaminants.

15. Keep the specimens in view at all times until they are sealed and labeled.
16. Use tamper proof seals and label in presence of student.
17. Require student to initial the label(s).
18. Enter all identifying information for specimen on chain of custody form and in on site logbook.
19. Collector must sign chain of custody form.
20. Have student sign chain of custody form and logbook.
21. Have student sign any release form required by collection agency or laboratory.
22. Note any refusal by student to sign any release form required and immediately notify NPC of such refusal.
23. Prepare and mail specimen(s) if necessary as soon as possible but at least within 24 hours, safeguarding specimen until mailed.
24. Document the date and purpose of all handling or transferring of specimen(s) on chain of custody form. Handling should be kept to a minimum.

Nursing and Allied Health Division
Appendix

Clinical/Laboratory Incident Report

DATE OF INCIDENT: _____TIME OF INCIDENT: _____

STUDENT: _____ COURSE NUMBER: _____

CLINICAL INSTRUCTOR: _____

LABORATORY OR CLINICAL AGENCY AND LOCATION WHERE INCIDENT OCCURRED:

_____

LABORATORY OR CLINICAL AGENCY WHERE CARE WAS RENDERED

_____

AGENCY PRECEPTOR: _____

AGENCY INCIDENT FORM COMPLETED?   YES   NO
NPC INCIDENT FORM COMPLETED   YES   NO
DIRECTOR OF NURSING NOTIFIED   YES   NO

PLEASE NAME *ALL* PERSONS THAT APPLY TO THE FOLLOWING
DESCRIPTIONS:

THE INCIDENT WAS	NAME	TITLE	PHONE	DATE AND TIME
DISCOVERED BY:				
WITNESSED BY:				
REPORTED TO:				

STUDENT DESCRIBES EXACTLY WHAT HAPPENED:

_____

_____

_____

STUDENT DESCRIBES WHAT ACTIONS OCCURRED ONCE THE INCIDENT WAS NOTED:

_____

_____

_____

_____

STUDENT DESCRIBES DATE, TIME AND PLACE MEDICAL EVALUATION AND
TREATMENT OCCURRED:

_____

_____

_____

_____

STUDENT DESCRIBES WHAT COULD HAVE PREVENTED THE INCIDENT?

_____

_____

_____

_____

STUDENT'S RECOMMENDATIONS TO PREVENT RE-OCCURRENCE:

_____

_____

_____

_____

DESCRIPTIONS AND RECOMMENDATIONS FROM CLINICAL INSTRUCTOR:

_____

_____

_____

_____

_____

STUDENT SIGNATURE: _____ DATE: _____

INSTRUCTOR SIGNATURE: _____ DATE: _____

DIRECTOR SIGNATURE: _____ DATE: _____

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