ASN Nursing Student Handbook

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**2017 – 2018**

### Nursing Program

#### Salish Kootenai College

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**ASN Program**

**Introduction**



Please read the handbook carefully. You will be asked to sign a form at the end of the handbook indicating you read and understand the policies of the Nursing Program. Policies may change annually or more frequently, based on need. The nursing faculty reserves the right to change polices during the academic year. If changes are made, students will be notified in writing.

**Salish Kootenai College Nursing Program**

The purpose of the ASN Student Handbook is to familiarize you with the SKC Nursing Program beliefs, organization, and policies that guide the program. The SKC Catalog, SKC Student Handbook, and the Montana Nursing Practice Act are other useful documents to review.

The Nursing curriculum is systems-based, in both didactic (classroom) and clinical applications. Classes involve students in interactive learning processes and simulation. The High Fidelity Lab houses adult and pediatric simulators. Out of house clinical experiences are scheduled with a time for focused assessments and projects, as well as total patient care.

Increasing patient diversity in health care settings makes it imperative nursing students acquire culturally congruent nursing skills. Therefore, a core competency for Salish Kootenai College and the Nursing Program is cultural congruency. All faculty are clinical experts committed to weaving cultural experiences throughout the curriculum with a focus on Native American health issues.

**Accreditation**   
The Northwest Commission on Colleges and Universities (NWCCU) ﬁrst accredited Salish Kootenai College in 1984 as a two-year institution of higher education. This accreditation was reaffirmed in 1989, 1993, 2003 and 2013. In 1998, the Commission accredited the College at the bachelor degree level.

**Nursing Accreditation Agencies**

SKC Nursing Program is approved by the Montana State Board of Nursing and accredited by the Accreditation Commission for Education in Nursing (ACEN).

Accreditation Commission for Education in Nursing

3343 Peachtree Road NE, Suite 850

Atlanta, Georgia 30326

404-975-5000

www.acenursing.org

**Montana Board of Nursing**  
**301 South Park**   
**P.O. Box 200513**  
**Helena, MT 59620-0513**  
**Phone: 406-841-2300**

**http://bsd.dli.mt.gov/license/bsd\_boards/nur\_board/board\_page.asp**

Faculty and Staff Directory

The responsibilities of the SKC Nursing Director include leadership for the academic programs, recruitment/ retention of students, and special projects. The faculty implement curriculum, teaching theory and clinical components. Team-teaching is the underlying strategy for instruction in nursing courses. Each faculty member may have individual responsibility for teaching a course or may be a member of a teaching team.

Guest presenters participate in classes for special topics. Nurses, hospital staff, community agency partners, and other health team members interact with students in the classroom and clinical setting in a variety of roles, but do not hold instructional or evaluative responsibilities.

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Program Director

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### Who to Call

For information about your nursing student records or general information: Nursing Program Office, John Peter Paul Building, (406) 275-4922

For advising, mentoring, and retention issues, contact your assigned Nursing faculty advisor.

For technical questions regarding Nursing computers/equipment: IT Help Desk (406) 275- 4357

For technical question regarding Schoology, SKC email: IT Help Desk, (406) 275-4357

For Interlibrary Loan or Library information, call: Jani Castillo, (406) 275-4874

For business information such as tuition and fees: (406) Dawn DeLay, 275-4967

Bookstore: Dawn Benson, (406) 275-4832

For information on financial aid and scholarships: Career Center, (406) 275-4824

**SKC Nursing Program Student Chain of Command**

NSGD Clinical

Chain of Command

NSGD Course

Chain Of Command

**Student**

If student has an issue with a Clinical course, Student needs to meet with the Clinical Instructor

**Student**

If student has an issue with a NSGD course, Student needs to meet with the Course Instructor

**Clinical Instructor**

Resolution reached, end of chain.

If no resolution, Student and Clinical Instructor meet with Clinical Coordinator.

**Course Instructor**

Resolution reached, end of chain.

If no resolution, Student and Course Instructor meet with Director of Nursing.

**Director of Nursing**

Resolution reached, end of chain.

If no resolution, student, Clinical Coordinator will meet with Director of Nursing.

**Director of Nursing**

Resolution reached, end of chain.

If no resolution, the Director of Nursing will meet with SKC Administration for resolution.

**Director of Nursing**

Resolution reached, end of chain.

If no resolution student and Director of Nursing

will meet with the Vice President of Student Affairs.

**SKC Nursing Program-Mission**

The mission of the SKC Nursing Program is to provide Native American students with the competencies required for professional nursing practice and leadership in rural and tribal communities. The Program promotes collaborative partnerships and relationships with individuals and communities to enhance their health, well-being, and cultural identity.

**SKC Nursing Program-Philosophy**

Nursing is a caring profession that supports the human response to health and illness. The goal of nursing from a Native American cultural perspective is to promote balance and connectedness of the family or community. Similarly, a western cultural perspective is to promote wellness, prevent disease, and manage chronic illness. Holistic nursing interventions support health as perceived and valued by the person, family, or community.

Nursing practice is a relationship-centered process guided by concern for the person and the desire to uphold human dignity. Fundamental to this process is respect for diversity of lived experiences, cultural practices, and life ways. Nursing practice is guided by belief in the connectedness among the four dimensions of person, knowledge of lifespan changes, respect for the environment, and advocacy for self-determination. Wisdom, respect for others, respect for the earth, generosity, timeliness, bravery, and fortitude are examples of Native American values reflecting congruence with the culture of nursing.

Nursing practice is an art and a science, drawing from its own body of scholarly and scientific knowledge. Other disciplines, such as humanities, Native American studies, biological and social sciences play significant roles in informing nursing practice. The “art” of nursing includes establishing and maintaining interdisciplinary and collaborative relationships focused on the health goals of the person and community. The “science” of nursing involves critical inquiry and evidence-based knowledge. The nursing process is a framework incorporated in the Salish Kootenai College Nursing curriculum.

Ethical-legal frameworks and standards, changing technology and health care systems, and complex rural and global issues influence nursing practice. Anticipated outcomes of nursing care include patient empowerment, patient safety, and reduction in health disparities. Nurses demonstrate confidentiality, cultural congruency, and fiscal accountability. Nurses are personally and professionally accountable to effectively communicate, teach, lead, and manage quality health care and to serve as self-directed role models, life-long learners, and advocates for social justice.

Nursing Education

Nursing education at Salish Kootenai College provides a learning environment for students to acquire the knowledge, skills, and values necessary to become competent nurse generalist clinicians. Progressive levels of nursing education support career mobility and expanded scopes of practice in alignment with the Future of Nursing initiative. Each level of nursing education provides a foundation for further professional education.

Nursing education responds to advances in science, technology and changes in nursing practice. Graduate competencies of critical thinking, culturally congruent care, communication, and citizenship are facilitated through structured learning activities, active learning, independent study, and student reflection. Learning takes place in a variety of contexts on campus, in the community, and through an online format. Clinical education includes campus-based practice, low and high fidelity labs/simulations, project focused learning, total patient care, and community-based care that encourages application of classroom learning. Education is a life-long commitment to personal and professional growth and development involving self-evaluation and reflection on personal goals.

The SKC learning community supports cultural competence and mutual respect between and among faculty, students, and community partners. Faculty members are role models, mentors, facilitators, and resource persons responsive to the learning needs of students. The Nursing Program embraces Knowles Theory of Adult Learning principles. Students are adult learners who enter the educational process with life experiences, prior learning, and preferred ways of discovery. Students are expected to practice, acknowledge errors, and learn from such incidents to grow as individuals and professionals. Students are responsible for identifying their learning needs and preferences by utilization of appropriate learning resources to develop knowledge, skills, reasoning, and ethics as effective health care professionals.

Organizational Framework

The unifying organizing framework for the ASN and RN/BSN programs is derived from the mission and philosophy statements of the Nursing Program and represented by the Medicine Wheel. The statements guide the determination of educational outcomes, course objectives, and sequences of course concepts and content.

The major concepts and threads provide the unifying themes for content and objectives throughout nursing coursework. The sub-concepts reflect the differentiation of practice between the Associate Nurse and Baccalaureate Nurse.

Figure 1 depicts the organizing concepts and threads. The Medicine Wheel is chosen as a symbol to integrate selected Native American and Nursing culture concepts. A brief description of the meaning of the Medicine Wheel to many indigenous people follows in Figure 1.

The four educational outcomes, or core competencies, ***Critical thinking****,* ***Culturally Congruent Care, Communication****,* ***and******Citizenship*** fundamental to nursing practice, are threaded throughout courses in the curriculum. The four core competencies were selected for special emphasis in the curriculum. The competencies are enmeshed in the educational outcomes of the Nursing Program. Definitions of critical thinking, communication, culturally congruent care, and citizenship include:

* Critical Thinking is a creative, disciplined, reflective, and self-directed activity leading to a justifiable and rational decision. Critical thinking is a holistic process that incorporates tradition, multiple perspectives, solutions, and diverse ways of knowing, to produce effective patient outcomes.
* Communication is the respectful dynamic process of human interaction that honors individual patterns, multiple ways of interaction, and relationship-based care. Communication through listening, oral, non-verbal, written, and informatics modalities leads to respectful human connections, and effective patient outcomes.
* Culturally Congruent Care begins with the awareness of one’s own system of values, beliefs, traditions, history, knowledge and respect for the systems of others. Development of culturally congruent care is the continuous process of integrating knowledge, skills, and attitudes that enhance cross-cultural communication and effective patient interactions. Environment, community, and tradition provide the context for respectful adaptation of care that is congruent with patient beliefs and values.
* Citizenship is informed and committed participation in the life of the community through creative and collaborative action at local, national, and global levels. Nursing uses ethical and professional frameworks to recognize, and address community issues, role model behaviors that respect the rights of others, provide community service, and advocate toward social justice.

The metaparadigms are **Patient, Environment, Health,** and **Nursing Roles**. The threads are salient to current trends in nursing practice and special needs and values of Native American people, rural populations, and national/societal trends and needs. National standards, such as those from Healthy People 2020 Objectives, National League of Nursing (NLN) ASN Competencies, American Association of Colleges of Nursing (AACN) Baccalaureate Competencies, and Accreditation Commission for Education in Nursing (ACEN) Criteria, and Institute of Medicine (IOM) Reports document these trends.

The SKC Nursing Program offers two distinct nursing degrees: ASN and RN to BSN. The metaparadigms and threads are introduced in the first quarter of the program. They are examined and applied at more complex levels each succeeding quarter. Didactic and clinical components are integrated throughout each quarter. The following section introduces the metaparadigms and their application in each quarter of the curriculum.

The Patient

The focus of the nursing curriculum is the patient, who can be defined as an individual person, family, community, or population. The ASN level examines the patient as a person, family, or group with similar patterns of health alterations. A person is a holistic being who grows and develops across the lifespan in response to conditions in the environment. Though each patient functions in patterns similar to other humans, each has unique individual characteristics, beliefs, and values. A patient’s interactions with the environment result in a dynamic state of health. Each patient, group, and community perceives health differently. Nursing is a practice discipline that supports the patient in achieving balance or health at an optimum level.

The SKC Nursing Program is based on the Curriculum Model and includes courses such as, Medical Surgical nursing, Pediatric Nursing, Psych Mental Health Nursing, etc. Individuals, families, and groups of patients are the focus of the ASN Program. Individuals, families, communities, and populations are explored at the RN to BSN level.

Environment

The environment is the totality of the internal and external factors interacting dynamically with the patient and influencing the level of health. Intrapersonal, interpersonal, and extra-personal events influence the patient patterns of response. The internal environment is unique to each patient, based on genetic and physiological conditions and life experiences. The external environment consists of components such as the family, tribe, global community, sociocultural, economic, technological trends, and the physical world.

An overview of these concepts is introduced in the fall quarter of Level I. The influence of family relationships and culture on health and health practices is explored in subsequent quarters in relation to structure and function of physiological systems and subsequent management of disease and injury processes. In Level II, the roles of environment in managing complex in mental and physical health alterations across the lifespan are explored. In the RN to BSN focuses on the role of groups, communities, populations, multiple determinants of health, rural community complex health systems, and global systems as sub-concepts of environment.

Health

Health is a dynamic state of balance, defined by the world-view of the patient. Illness is defined by each patient’s experience of imbalance (health alterations). Healing is the process by which health is restored to an optimum level of wellness of the individual patient. The patient can simultaneously experience varying levels of health or illness in the four dimensions. Health promotion activities can prevent the occurrence of acute and chronic health alterations. Some health alterations occur commonly in a person, family, or population throughout the lifespan. Complex health alterations experienced by individuals, families, communities, and populations are the focus of national Healthy People 2020 Objectives.

Other sub-concepts of health include acute and chronic alterations in health, both common and complex. Alterations in balance are introduced as a progression from simple to complex across the curriculum. An acute alteration is one that needs immediate intervention to restore balance. A chronic alteration is one that may continue across a period of time or lifespan with anticipated long-term trajectories.

Nursing Roles

Nursing roles increase in complexity at each professional stage.

Role of the Associate of Science Nurse:

The associate nurse provides holistic care in healthcare settings for groups of individuals and families with acute and chronic health patterns and alterations in health. The nurse assesses patients holistically using: critical thinking, the nursing process, and evidence-based practice. The nurse uses clinical reasoning and decision-making to implement culturally congruent nursing interventions. The nurse teaches and advocates for patients to promote and maintain health. The nurse uses effective communication skills and collaborates with patients and other health team members to coordinate care. The nurse prioritizes, delegates, and evaluates outcomes of nursing care. Information management systems may be used to integrate data and document patient care. In the citizenship role, the nurse is accountable for personal and professional practice, lifelong learning, and community service.

The nursing roles specifically address the differentiated education model of nursing in which each nurse contributes to the greater whole of patient care. The roles reflect the commonalities and differences in practice and nursing education focus for the ASN and BSN.

The new graduate Associate nurse functions within a structured institutional/agency setting within a given time frame, providing and managing/coordinating direct care to the patient and family. As a member of the health care team, the Associate nurse is accountable for ethical practice, lifelong learning, and service. The roles are relatively structured and well established. Components of the Associate nursing roles include relationship-based care, assessment, clinical decision-making, teaching and learning, and collaboration. These nursing roles are introduced in the first quarter of Level I, and applied to increasingly complex health alterations in Levels I and II.

Role of the Bachelor of Science Nurse:

The baccalaureate nurse provides holistic care for individuals, families, communities, and populations with complex acute and chronic health patterns and alterations. The nurse uses knowledge of healthcare systems to target risk reduction, health promotion, and disease management. Broad perspectives of environmental, sociopolitical, and global issues coupled with multiple determinants of health determine the design, coordination, and evaluation of healthcare.

The nurse uses holistic assessment, therapeutic communication, critical thinking, and culturally congruent strategies to promote effective patient outcomes. The nurse serves as information manager, assisting individuals and populations in interpretation and application of healthcare related information. The nurse critiques, applies, and participates in nursing research to promote evidence-based practice. The nurse collaborates within a multidisciplinary team to promote individual, family, and population-based health. The nurse designs and evaluates nursing care to provide quality and cost-effective healthcare. The nurse uses leadership and management skills to promote change within the nursing profession, health systems, and communities. In the citizenship role, the nurse is accountable for the advancement of nursing standards, ethical/legal practice, professional nursing, and community service.

Educational Competencies

The National League for Nursing Educational Competencies for graduates of the Associate Degree Nursing Program are a threaded component of the organizational framework of the SKC nursing curriculum. Additionally, the American Nurses Association Standards and the AACN Essentials of Baccalaureate Nursing are used to inform and guide the curriculum.

**The Medicine Wheel**

The Medicine Wheel was chosen to represent the organizing framework of the Nursing Program because its many meanings reflect the very essence of nursing. We use this symbol respectfully and in honor of the wisdom of our elders who understood the connectedness of all things.

The Medicine Wheel is a symbol used by many Native Americans since the beginning of time. Some tribes do not use this symbol. Tribal groups and individuals differ in the meanings and uses of the Medicine Wheel. It has been used to depict the four cardinal directions, the four winds, the four dimensions of a person, the four stages of the life cycle, and ways to search for truth in the seen (physical) and unseen (spiritual) worlds.

According to Bopp et al., (1984), there are quotations useful in beginning to understand some meanings interpreted from the Medicine Wheel.

“...the medicine wheel can be used to help us see or understand things we can’t quite see or understand because they are ideas and not physical objects” (p. 9).

“The medicine wheel teaches us that the four symbolic races are all part of the same human family. All are brothers and sisters living on the same Mother Earth” (p.10).

“The medicine wheel teaches us that we have four aspects to our nature: the physical, the mental, the emotional, and the spiritual. Each of these aspects must be equally developed in a healthy, well-balanced individual through the development and use of volition (i.e. will)” (p. 12).

“All human beings have the capacity to grow and change. The four aspects of our nature (the physical, the mental, the emotional, and the spiritual) can be developed when we have a vision of what is possible and when we use our volition to change our actions and our attitudes so that they will be closer to our vision of a happy, healthy human being” (p. 16).

“Values are the way human beings pattern and use their energy. If there is not a balance between our values concerning ourselves and our values concerning others, we cannot continue to develop our true potential as human beings. Indeed, if there is an imbalance , individuals, and whole communities suffer and even die” (p. 18).

Adapted from: Bopp, J., et al. (1984). *The Sacred Tree*. Lethbridge, Alberta: Four Worlds Development Press.

**Figure 1.1 ASN Medicine Wheel**

**Patient:**

* Individual
* Family
* Group

**Environment:**

* Multiple determinants of health
* Complex health systems

**Holistic**

**ASN Role:**

* Provider of care
* Manager of Care
* Member of the profession

**Health:**

* Health promotion
* Risk reduction
* Illness management





**Critical Thinking**

**Communication**

**Culturally Congruent Care**

**Citizenship**

ASN Curriculum Plan

As outlined in online course catalog 2017-2018 located at www.skc.edu.

**Learning Activities**

Students participate in a variety of learning activities and situations leading to mastery of the course objectives.

Classroom

The introduction and readings/preparation includes an overview of the content. During the scheduled class, a variety of learning activities may occur. Lecture is not the primary method of instruction. Activities include cooperative learning groups and structured presentation of concepts in a variety of learning styles. Simulation case studies facilitate practical application of didactic learning.

Clinical Practicum

1) Clinical activities integrate concepts from classroom or lab class sessions beginning with the first quarter of Level I. Students apply concepts while caring for patients of all ages and in various clinical settings.

1. Clinical activities are structured to meet program outcomes and student learning styles. Students progress from simple to complex patients, and from individual patients to groups of patients and families. Prior to assignment in the clinical area, students practice and demonstrate competency for nursing skills through “competencies” in the Skills Practice Lab and Simulation Lab. Students are scheduled to return to the Skills Practice Lab and/or Simulation Lab during most clinical rotations for patient care decision-making simulations, which are increasingly complex. At the end of most quarters, students must complete a final competency decision-making simulation in the Skills Practice Lab or the Simulation Lab.
2. Clinical activities include Skills Practice Lab, Simulation, outpatient, and inpatient settings. Simulation activities in the Nursing Practice Laboratory are planned for practice, demonstration of proficiency and decision-making. Additionally, simulated activities can be used in the event of adverse weather conditions for long distance travel and unavailable patient experiences to achieve course objectives. Agencies used as clinical sites include hospitals, long-term care centers, preschool/day care centers, health programs, schools, physicians’ offices, and clinics. All sites are approved by their respective accrediting agency.

4) Refer to page 42 for a complete list of clinical agency sites. Clinical activities take place on and off the Flathead Reservation. Students must often travel from five to sixty-five miles. Students are responsible for their travel to clinical, including their own transportation, hotel cost, food etc. Clinical hours vary with the activity and objectives.

5) The focus of clinical practice changes as the student progresses through the program.

1. Clinical activities culminate in a preceptorship during the sixth quarter. The preceptorship is a capstone experience structured to facilitate the transition from student to graduate nurse. During this time, students are paired with a practicing nurse who provides a one-to-one learning experience. Preceptors and students are oriented to the process with a preceptorship manual and workshop prior to beginning the rotation. During the preceptorship, the students focus on clinical decision-making, care management, and participation as members of a multi-disciplinary team. The close relationship between preceptors and students supports mastery of individualized learning objectives as well as the program learning outcomes. Students exhibit increased confidence, skill, and independence over the course of the preceptorship.

7) Throughout the ASN program, students participate in community service activities, planning, and implementing health oriented projects for groups of patients across the lifespan.

**Campus Resources**

The Nursing Program offices and classes are housed in the John Peter Paul Building on the north end of campus. The space includes nursing offices, classrooms, practice laboratory, simulation lab and media lab. Students are encouraged to participate in activities on other parts of the campus also.

Classrooms

Most nursing courses are located in classrooms in the John Peter Paul Building. General education courses are scheduled throughout the campus. For student convenience, SKC WiFi is available in the John Peter Paul building.

Skills Practice Lab

The Skills Practice Lab is a setting for students to develop competence in skills and procedures that are performed in the clinical setting.

Simulation Lab

Students develop skills in clinical decision-making in the Simulation Lab through the use of simulated clinical experiences using adult and pediatric simulators.

Mobile Computer Lab and Computers

Thirty Chrome books are used as a mobile lab. Faculty are able to check out the computers for classroom use. Students are able to check the computers out for use in the John Peter Paul building only. The Chrome books are Internet based computers. Students are able to check their email and search the web for research purposes. Non-internet based programs cannot be downloaded on the Chrome books.

Computers are located in Room 208. The computers have Microsoft Office to assist students with writing papers and other course assignments.

Mobile Computer Lab and computers are available to students during regular working hours.

D'Arcy McNickle Library

The library houses references, texts, and journals for nursing and health related fields. A Reserve Shelf at the librarian's desk holds materials that cannot be checked out of the library. A TV/VCR monitor, individual study carrels, computer room, group study rooms are available for student use. Computer access includes the Internet for databases such as CINAHL, PubMed, INFOTRAC, and PSYCINFO, and the Cochrane Database. Documents not available at SKC can be obtained through Inter-Library Loan. Nursing students are strongly encouraged to utilize the library resources. Please check the library for current hours of operation.

Copy Machines

Copy machines for student use are available in the Nursing Office. Papercut Print cards are required for use of all SKC printers and copy machines. The Print cards will be handed out in Institute in the amount of $10.00 per quarter.

Bulletin Boards

Please check the Nursing Program bulletin boards daily for announcements concerning nursing classes, financial aid, job opportunities, Student Nursing Organization (SNO) meetings, conference announcements and news articles of nursing interest.

Schoology

Schoology is the learning management system (LMS) used by SKC. It is a LMS designed to be more user- friendly and with more possibilities. Schoology is used in all online and hybrid courses at SKC>

“Schoology is now in every corner of the world. We’ve grown and so has our community, but our mission is just the same. We’ll continue to advance what's possible in education.” (Schoology web page, www. Schoology.com).

**Program Costs**

An itemized list is available upon request at the Nursing Program’s front desk.

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**GENERAL POLICIES**



**The policies discussed on the following pages guide students and faculty in the daily operations and expectations of the Nursing Program. The policies are congruent with those outlined in the SKC Catalog and SKC Student Handbook. Copies of these documents are available in the Student Services Offices and on the SKC Website at www.skc.edu**

**Student Activities/Committees**

The Nursing Faculty believes that student participation in Nursing Program decision-making enhances the educational program and facilitates the growth and development of students as health care professionals. The Nursing Program committee meets monthly. Ad hoc sub-committees may be formed as deemed necessary. All students are encouraged to attend this meeting. Students will be excused when individual student issues are on the agenda.

## Employment

Students are encouraged to carefully consider the time commitment for classes, study, family life, travel, leisure activity, and other life responsibilities prior to scheduling outside employment while attending the nursing program. **It is strongly recommended students not work more than 20 hours per week.** See appendix K for work report form. **It is mandatory that the student does not work the eight (8) hours prior to the clinical practicum activities.**

To provide safe, quality care, the caregiver must be rested and alert. Students who appear too fatigued to safely give care will be sent home from the clinical practicum and the Progressive Student Improvement Counseling (PSC) Policy will be initiated.

Students seeking outside employment in health agencies are cautioned to clearly understand that the scope of practice of a nursing student as set forth by the **Montana State Board of Nursing** is different from that of a nursing assistant, medical assistant, EMT, and other allied health personnel. If you are employed as any of the above in a hospital, long term care facility, medical office or clinic, your scope of practice does not include those skills you employ while administering care as a student nurse. **To do so will place you in jeopardy of practicing nursing without a license and therefore vulnerable to a lawsuit** **and dismissal from the Nursing Program**. The Montana Nurse Practice Act allows students enrolled in a school of nursing to provide nursing care only under the supervision of an approved faculty instructor.

## Study Time

Generally, for any college course, it is expected that students spend approximately two hours in outside study and preparation for each hour spent in class. Clinical practicum courses in nursing also require additional outside study hours to adequately prepare for assuming the care of patients in the clinical area. **In the nursing program, students enrolled in 12 or more credits will spend more than 40 hours per week in class and in preparation for class.**

**Credit Hours**

According to SKC policy for lecture classes, one credit hour equals one hour of class per week. In the Nursing Program, one credit hour is equal to three hours of clinical practicum activity.

## Health Policies

The SKC Program of Nursing philosophy views health as a state of balance of the person. As nurses, we must model behaviors that promote, maintain, and restore balance. Our personal health is inseparable from the health of our community. Therefore, the following personal health promotion policies are implemented to guard the health and safety of students, families, and patients.

Students accepted into the Nursing Program must submit a health record completed prior to entrance into Nursing Institute. The health record includes a health history, health examination by a primary care provider, and evidence of current immunizations and/or titers. The health form is reviewed by the Director and kept in a secure locked file, per HIPAA and FERPA guidelines.

The following immunizations are required or recommended by the Salish Kootenai College Nursing Program, clinical agencies and/or Montana state law for healthcare providers. Healthcare workers are at risk for contracting and/or spreading these communicable diseases. Consequently, our students need to demonstrate immunity through adequate immunization coverage and serologic (titer) documentation.

**Immunization Requirements:**

1. Each student is required to receive the full series of the Hepatitis B vaccine.
   1. (#1) immediately, (#2) at least 30 days after first dose, (#3) six months after first dose.
2. If the student HAS NOT had a Hepatitis B titer drawn in the past, or the result unknown/unavailable, a titer is to be drawn to verify Hepatitis B antibody presence:
   1. If the titer is *non-reactive*, a booster is to be administered and a repeat titer is to be drawn 4-8 weeks after the booster.
   2. If the student *remains* non-reactive, a repeat of the full 3-dose series is required (the previous booster being the 1st of the three-dose series) and a follow-up titer is to be drawn 4-8 weeks after the final vaccination of the series.
   3. If the student is *still* non-reactive, they are to be considered for workup of a chronic Hepatitis B infection (at the discretion of the healthcare provider) and are labeled as non-reactive to the vaccine.
      1. If the student is labeled as non-reactive, this does not limit their ability in the nursing program, however they are to be educated on the possible risk of contracting Hepatitis B if exposed.
3. If the student HAS had a Hepatitis B titer drawn at any point in time and it was *reactive*, the student is considered immune and no further workup is necessary.

*Measles, Mumps, Rubella (MMR) Vaccine*:

1. If a student has written documentation of vaccination with 2 doses of live MMR vaccine administered at least 28 days apart, no further work up is necessary and the student is considered immune.
2. If the student has only received *1 of the 2* required doses, a titer is required. If the titer is determined *negative*, the student is required to receive a booster dose of the MMR vaccine.
3. If no documentation is available, a titer is required. If the titer is determined *negative*, the student is required to receive both doses of MMR vaccine, 28 days apart. No other action is necessary.
4. Any student born before 1957 is considered immune and no other work up is needed.

*Tetanus, Diphtheria, and Pertussis (Tdap) Vaccine*:

1. Regardless of time frame, if the student has never received a dose of Tdap (i.e. has only received DTap or TD vaccine), the student is required to receive the Tdap vaccine.
2. If the student HAS received the Tdap vaccine, however it has been greater than 10 years, the student is required to receive a booster dose of the TD vaccine.

*Varicella (Chicken Pox) Vaccine*:

1. Regardless of time frame, immunization status, and/or previous active infection, all students are required to have a varicella titer drawn.
2. If the titer demonstrates no evidence of immunity, the student is to receive 2 doses of the varicella vaccine, administered 4-8 weeks apart. No further action is necessary.

*Influenza*:

**ALL** SKC nursing students are required to receive the annual influenza vaccine by October 31st

of every school year. No exceptions.

*Tuberculin (TB) PPD Skin Test*

* + - 1. All students must complete a 2-step PPD skin test or a QuantiFERON Gold (QFT-G) blood test annually. If a student chooses to complete the 2-step TB skin test, the two tests must be 7-21 days apart.
      2. Any student previously infected with TB requires a chest x-ray annually.
      3. Any student that has been given the TB vaccine requires a QuantiFERON Gold (QFT-G) blood test OR a T-SPOT TB (T-Spot) test. If positive, the student must have a chest x-ray.

Recommended

1. Polio series (Childhood immunizations, with booster)
2. Meningococcal meningitis vaccination

Students must provide verification of current health status and immunization status, which meet the college and clinical agencies health requirements before they will be allowed to attend Nursing Institute.

**Prevention of Exposure to Pathogens**

Healthcare providers serve individuals without discrimination on the basis of age, race, religion, sex, sexual preference, national origin, communicable disease, or handicap. While providing care, nurses may come in contact with body fluids of patients. Consequently, nursing students are at risk for exposure to diseases such as hepatitis B, hepatitis C, AIDS, tuberculosis, and meningitis among others.

To reduce the risk of exposure, the Centers for Disease Control (CDC) and the Occupational Safety and Health Administration (OSHA) publishes preventative guidelines and standards. Accordingly, students who provide direct patient /patient care must:

• Receive training about blood-borne diseases.

• Be immunized with hepatitis B vaccine.

• Follow Standard (Universal) Precautions when caring for individuals.

• Follow an established testing protocol of the healthcare institution, agency, and SKC Nursing Program in the event of a needle stick or other contamination of blood while in the student role.

These procedures protect students, patients, family members, and other healthcare workers from infections and/or communicable diseases. Nursing students are educated about CDC and OSHA guidelines on an annual basis. The instruction includes epidemiology of blood-borne diseases, Standard (Universal) Precautions, testing procedures, and confidentiality. Documentation of the instruction will be on file in student folders in the Nursing Office (See Appendix J.). The training module content outline, protocols for vaccination, and steps to follow in event of exposure to blood are available to students in the SKC Accidental Exposure Policy.

**Needlestick Policy and Post-Exposure Plan (PEP)**

Students must immediately report any exposure to pathogens to their clinical instructor. The student will be evaluated in the nearest emergency or occupational health facility. The Needlestick Policy and post exposure prophylaxis regimen conforms to current CDC guidelines. These guidelines can be accessed at <http://www.cdc.gov/ncidod/hip/guide/phspep.htm>.

Accidental Exposure

A student who suspects or has a confirmed accidental exposure to blood and/or body fluids must follow agency protocol and immediately report the exposure. An exposure is defined as:

1. Needle stick or cut caused by a needle or sharp that was actually or potentially contaminated with blood or body fluids.

2. Mucous membrane (splash to the eye or mouth) exposure to blood or body fluids.

3. Cutaneous exposure involving large amounts of blood or prolonged contact with blood, especially when the exposed skin was chapped, abraded, or afflicted with dermatitis.

Upon exposure, contact the clinical instructor immediately.

The financial obligation incurred for any recommended testing and/or treatment is the

responsibility of the student.

**Healthcare Coverage**

The purpose of required health insurance is to ensure students receive immediate quality health coverage in the event of an accidental injury incurred during clinical practice. All students enrolled in the Nursing Program must show annual proof of health insurance coverage before attending Nursing Institute. Proof of insurance may be demonstrated by a health insurance card issued in the student’s name, or by submitting a letter of verification from the health insurance provider agency, company, or tribal organization.

**Students may not officially enroll in the program of nursing until the Nursing Office receives proof of health care coverage. The student pays the cost of own health insurance coverage directly to the health insurance provider.**

**Pregnancy**

Students who become pregnant should notify the Nursing Program Director as soon as possible. The pregnant student and appropriate faculty will meet to develop a plan to complete the course requirements pre- and post-delivery. **Pregnancy does not excuse the student from fulfilling all requirements and obligations of nursing courses including clinical practicum activities.**

**Illness or Injury**

In the event of an illness, injury, or other health concerns, the policies of the college and clinical agency will be followed. Should an illness or injury occur in the clinical setting, students must first notify the **clinical instructor** immediately. Students are referred to the emergency room, urgent care, or physician, as appropriate. Students must follow the clinical agency’s occupational health guidelines. The clinical instructor will review the provider’s discharge instructions with the student and determine if the student can return to the clinical setting. The SKC Nursing Program is not liable for any illness or injury incurred during clinical practicum activities.

Students will not attend clinical practicum activities or administer patient care if they are physically ill, injured, or impaired.

If a student has any of the following symptoms:

* Temperature of 101 F (oral) or above
* Active vomiting (1 episode per 30 minutes)
* Active diarrhea (1 episode per 30 minutes)
* Persistent uncontrolled productive cough
* Obvious contagious conditions, such as head lice or pink eye
* Any injury that impacts the ability to give safe care (any restriction of mobility requires a provider’s note and prior discussion with the clinical instructor/coordinator)
* Any impairment that impacts the ability to give safe care (fatigue, alcohol, drugs, or prescribed medications)

If a student has any of the above symptoms, the student must call the clinical instructor one to two hours before the start of the clinical practicum day and email the clinical coordinator. If a student reports to clinical practicum with any of the above conditions, they will be sent home. Following an illness and/or injury resulting in an absence of more than 2 days, the student must present a physicians full medical release to their clinical instructor prior to resuming clinical activities. The student must follow the guidelines for reporting absences to the clinical instructor.

For any clinical practicum absences refer to the clinical guidelines section of this handbook.

**Reasonable Accommodations**

Reasonable accommodations are provided for eligible students with identified disabilities. The College complies with the Rehabilitation Act of 1973 and the Americans with Disabilities Act. Students may contact the College’s Disability Officer, Linda Pete ([linda\_pete@skc.edu](mailto:linda_pete@skc.edu)) (406.275.4968) or consult the SKC web page for Students with Disabilities for more information.

Nursing, as a practice discipline, requires specific cognitive, sensory, affective, and psychomotor abilities. It is the intent of the SKC Nursing Program to:

• Assist students to identify core performance requirements necessary for success in the nursing program

• Comply with the **Americans with Disabilities Act,** which assures every American**,** that “reasonable accommodation” will be made for otherwise qualified individuals with disabilities

• Ensure patient/patient safety in the provision of care

Students should review the following list of core performance expectations that have been identified by the Southern Council on Collegiate Education for Nursing (SCCEN) Task Force on the Americans with Disabilities Act of 1990. After reviewing the list of functions essential to nursing, the student with a disability is encouraged to notify the Director of the nursing program so that an attempt to accommodate the student can be made. Students should be aware that compliance with this request is voluntary but failure to notify the program regarding special needs may jeopardize successful completion of program requirements. Students who are unable to meet the following Core Performance and Essential Functions of Nursing may be unable to successfully meet classroom and clinical objectives.

Core Performance/Essential Functions of Nursing

(Adapted from SCCEN ADA Task Force Recommendations)

| **Essential Function** | **Description** | **Examples** |
| --- | --- | --- |
| Observation | Use of the senses | -Assess color change in the skin, hear heart, lung, and breath sounds.  -Respond to signals, alarms, and other displays indicating urgent patient need, and take immediate action. |
| Communication | Perform activities requiring accurate and efficient interpretation and communication of information non-verbally and in English, both written and spoken. | -Respond to a physician order  -Read and record information  -Enter data into a patient record  -Direct assistive staff  -Interact effectively with patients, families, and health care team members  -Understand non-verbal communication  -Use computer technology |
| Intellectual/Conceptual | Ability to problem solve | -Measure fluids and size  -Calculate drug dosages, among others  -Reason, analyze, prioritize, and synthesize data |
| Behavioral/Social | Perform effectively under stress | -Function effectively under stress  -Flexible, adapt to changing situations  -Demonstrate concern for others |
| Motor | Physical ability, coordination, stamina | -Lift, bathe, position, and transport patients  -Move efficiently enough to meet the needs of several patients in a timely fashion  -Carry out lifesaving procedures, such as CPR  -Draw up and give injections  -Operate equipment and devices such as thermometers, BP cuffs, and IV pumps  -Efficiently operate equipment in emergency situations  -Insert and/or maintain patient catheters/tubes  -Capacity to walk and stand 8-12 hours, with minimal break |
| Physical | Prevent spread of infectious diseases | -Maintain immunization status  -Maintain standard/universal precautions to prevent contact with airborne and blood borne pathogens |

**Substance (Drugs and Alcohol) Use and Abuse**

Substance abuse is a serious and growing problem among healthcare providers. More than 10% of nurses in Montana will have problems with substance abuse at some time during their career. Chemical dependency is an illness that can be successfully treated. Alcohol and chemical abuse/dependency is not considered a protected disability if it interferes with a person’s ability to work or poses a threat to the property or safety of others (Alcohol and Disability Act, 1998).

**Alcohol or drug abuse can be identified by behaviors indicative of substance abuse.** Examples of substance use/abuse behaviors include, but are not limited to:

•Abnormally dilated or constricted pupil •Slurred speech or poor balance

•Erratic behavior •Poor judgment

•Inappropriate appearance or actions •Alcohol on the breath (old or fresh)

Faculty/Staff/Peer Reasonable Suspicion / Event Identification

In the event that a student exhibits behaviors that indicate impaired or unsafe actions, the supervising faculty, staff, or peers have the responsibility to identify and report the problem. The faculty member or designated clinical staff intervenes with the student immediately. The priority of the faculty and staff is patient safety, followed closely by the immediate safety and well being of the student.

**Substance Abuse Policy**

**Substance use/abuse is not acceptable for a nursing student while on campus, in the clinical setting, or when participating in college-related activities. Nursing instructors and staff have the obligation to safeguard patients. The student must immediately leave the classroom, clinical practicum activity, or college activity to meet with the instructor in a private place for assessment. Instructors will require drug testing if the student is exhibiting signs and symptoms of impairment. Please note that a third party will be present when you are asked to submit to drug testing. A student who is taking prescriptive or any medication or supplement that may result in signs of mental or physical impairment must consult with an instructor before attending clinical and/or class. Students are reminded that random drug testing is implemented in the program of nursing. Students will be responsible for any cost incurred with drug testing. A student failing to submit to drug testing is cause for immediate dismissal. Results of the drug test will be disclosed to the Director of the Nursing Program.**

A confidential process to address incidences of student impairment includes prevention, identification, intervention, evaluation, treatment, and readmission. Only the student, Director, appropriate faculty and clinical/counseling staff are involved. In the event that the student is licensed, a report will be made to the appropriate state regulatory board.

Self-identification

Students who self-identify as experiencing difficulty with substance abuse will be given full support in following a treatment plan. The student will be referred to a chemical dependency counselor.

SKC Nursing Drug Screening Policy

All incoming nursing students must complete a negative urine drug screening prior to clinical practicum. Drug screenings will be scheduled during nursing institute. If a student does not pass the initial urine drug screening, or is not present for their scheduled screening appointment, they will be allowed to retest **once** at their own expense. If they do not pass the second urine drug screening, they will be dismissed from the program. Evidence of all controlled substance prescription medications must be provided to the Nursing Program Director prior to the initial drug screening. The Nursing Program Director reserves the right to question any controlled substance prescriptions and related diagnoses. All controlled substance prescriptions will be submitted to the clinical agencies for approval prior to continuation in the program. Allowance into the clinical environment is at the discretion of the SKC clinical agencies. Not being allowed into clinical automatically results in dismissal from the program.

Evaluation and Treatment

A PSC to Improve Performance/Behavior will be instituted and the student must meet with the instructor and Nursing Program Director or designated representative within 24 hours. If it is determined that medical evaluation, counseling or other measures are warranted, a Performance Improvement Plan (PIP) will be initiated at that time. If the urine test results are positive, the student must undergo chemical dependency evaluation or be dismissed from the program. The evaluation must be conducted by an approved certified chemical dependency counselor in an agency with a standard monitoring program in place. Evaluation by a primary healthcare provider and/or mental health counselor may also be indicated. The student must enter into an Intervention Track Contract based on the treatment plan prescribed by the counselor.All evaluation, treatment, and ongoing drug testing is at student expense.

Continued Enrollment and/or Readmission as a Nursing Student

Continuation in the nursing program will be based on:

* Documentation of continued progress in the treatment plan.
* Documentation of negative random urine screens while enrolled as a nursing student at SKC.
* Documentation from the counselor and primary health care provider that the student can provide safe and effective care for patients in the clinical setting.
* Cessation of signs and symptoms of impaired behavior.

The student will be dismissed from the program of nursing if they decline to be evaluated or refuse to follow, or cannot follow a treatment plan.

**Student Records**

Salish Kootenai College Nursing Program is committed to maintaining the confidentiality of Student Records in accord with public law 98-380, The Family Educational Rights and Privacy Act of 1974 (FERPA), as amended. A file system has been established for all Nursing Program Student Records. Once enrolled, all students (past and present) have access to their school records, except those excluded by law, such as parents’ financial records and confidential letters of reference.

The College and Nursing Program does not release educational records without written consent from the student. SKC and the Nursing program may utilize redacted student records for grant and funding purposes.

A student may review their Nursing Program Student Records in the presence of a Nursing Program staff or faculty member. The file must be reviewed in the presence of the Nursing Director. Documents contained within the file may not be removed from the file. If a student desires a copy of their student file**,** a written request must be completed by the student and submitted to the Nursing Office at least 5 business days in advance of requested date of release.

## CPR Certification

**Students are not permitted to register for courses unless documented proof of current CPR certification through June of graduation year is provided.** Students must be certified for BLS health care provider CPR of infants, children and adults through the American Heart Association. If CPR Certification lapses, the student is not allowed in clinical until it is current and will jeopardize their continuation through the program.

## Criminal Background Check

## Criminal Background Checks will be conducted.  Students will be charged a fee for the background check at the time of registration for classes. If a background check indicates evidence of criminal behavior, the student must meet with the Director of the Nursing Program within 5 school days of receiving the background check results. The student will not be able to attend clinical practicum activities or assume patient care during that time period. Outcome of a background check is contingent upon infraction found and may include, but not be limited to, change of clinical site rotation, change of clinical assignment, or dismissal from the nursing program.

**Liability Insurance**

Nursing students are legally and ethically accountable for the care provided to assigned patients. Financial liability may result if a patient is physically or emotionally injured due to a nursing error or omission while under your care. Therefore, students must purchase liability (malpractice) insurance annually for coverage while enrolled in the nursing program. The insurance policy is purchased at registration and is billed annually as an additional nursing fee. Healthcare Providers Service Organization provides the School Blanket Professional Liability Insurance policy. All students enrolled in the nursing program are covered from their entry date into the program of nursing to their date of graduation or exit from the program.

**Housing and Transportation**

Students are responsible for housing and for transportation to and from clinical practicum activities, which take place on-campus and at distant healthcare settings. Clinical practicum activities may require overnight lodging.

**Uniform and Dress Policy**

The purpose of the uniform and dress policy is to maintain professional standards of grooming and safety for the student and patient. Credibility as a healthcare provider is influenced by appearance and behavior. While in the clinical setting, nursing students represent SKC, the Nursing Program, and the profession of nursing, and are assessed, in part, by dress and grooming. The SKC dress code is similar to codes of other healthcare agencies in Montana. Student uniforms are ordered through the Nursing Office and charged to the student's individual account.

Clinical Dress: Acute care, long-term care, Simulation Lab, and Clinical Competency Lab

1. The student nurse uniform consists of the SKC nursing program uniform and closed toe and closed heel, black hose or socks. Both women and men must wear the school uniform pants and top and may wear a plain, white t-shirt underneath the top. Jeans or stretch pants are not allowed. A watch, with a second hand, bandage scissors, Kelly forceps,black ballpoint pen, stethoscope and penlight are considered part of the student nursing uniform. The student must also carry their Clinical Passport at all times as part of their nursing uniform.
2. The uniform must fit properly and be clean and wrinkle free at all times.
3. To minimize the spread of pathogens to patients, yourself and your family, uniforms are to be worn only in the clinical setting. Students are strongly encouraged to wash their uniforms after each clinical day.
4. There will be no be no “bosoms, bellies, or butts” visible while wearing the uniform, standing or bending.
5. **The College logo** must be stitched on the front of the uniform, which will be arranged by the nursing office.
6. **Student name tags** are worn centered on the left side of the uniform top or lab coat and must be visible at all times. The student name tag is considered an integral part of the student uniform. The tag must be worn at all times during any clinical practicum activity. If the student fails to wear the name tag, they will be given a warning the first time. If the student fails to wear a nametag the second time, the student will be sent home from clinical and receive a PSC. The third infraction will result in failure of clinical for that quarter.

# Dress for pre- or post-clinical visit to the clinical area

1. Jeans, shorts, exposed midriff, visible undergarments, canvas tennis shoes, clogs, or exposed feet are not acceptable in clinical settings.
2. Students must abide by dress code of clinical site when on facility property.

Dress for out-of-hospital assignments

1. Dress for specific out-of-hospital clinical assignments are included in the guidelines of the individual clinical facility for that clinical assignment.
2. Please check with your clinical instructor prior to the activity if you are unsure of dress code.

General guidelines

1. **Shoes:** Black rubber-heeled oxfords or leather athletic shoes. Canvas tennis shoes and open toe or heeled shoes are not acceptable. Shoes must be clean; shoelaces must be washed frequently and kept clean.
2. **Hose/socks:** Plain black ankle or knee socks are to be worn with pants.
3. **Jewelry:** Modest jewelry, such as a watch, small earrings, small chain necklace, and wedding rings are acceptable. Dangling earrings are not allowed. Necklaces are not allowed. Students with pierced ears may wear no more than two small (3mm or less) earrings in each ear. Tongue piercing or visible body piercing, with the exception of ear piercing, must be removed prior to arrival at the clinical setting. SKC does not assume liability for student injury as a result of their body art/jewelry.
4. Body art/tattoos: must be covered at all times during clinical.
5. A white lab coat or jacket may be worn over the uniform in cold weather. The nametag must be clearly visible at all times.
6. Chewing gum is not allowed during clinical practicum, clinical skills lab or simulation lab.
7. **Please be aware that SKC and clinical instructors will have the final approval of acceptability of student dress in the clinical setting. Students will be sent home if dress is inappropriate so as not to jeopardize clinical placement for all students in that facility.**

# Personal Hygiene:

# Students must adhere to the following conditions for clinical practicum and classroom activities. Noncompliance will result in the student being asked to leave the facility.

1. Bathing, oral care, and use of unscented deodorant before arriving to the clinical setting **is essential.**
2. Perfume or scented aftershaves are not to be worn in the clinical setting.
3. Hair must be clean and well groomed and worn off the collar. Long hair must be kept up and back as to not touch the patient at any time. Moustaches and beards must be clean, well groomed, trimmed, and maintained, not to exceed 1 inch in length.
4. Makeup should be minimal.
5. Fingernails are to be short and well manicured. Nail polish or artificial nails (including gel manicures) are not allowed in the clinical area.
6. Smoking odors are unacceptable in the classroom or clinical setting. **No smoking is permitted during any clinical practicum activities, including breaks, unless a smoking jacket is worn. Students who attend clinical with obvious smoke odors will be sent home.**

**Cell Phones**

Absolutely no cell phones or other multimedia devices (any device including a camera) will be allowed in the clinical unit. Cell phone use or other multimedia device on the clinical unit will result in dismissal from the nursing program.

Any student causing disruption to the learning environment using a media device will be asked to leave the class. No student has the right to disrupt or impede other students’ learning.

Cell phones, laptops, ipads or any other recording device in the classroom used for recording must have prior consent from the instructor of the course. For purposes of recording, cell phones may be left at the front of the room. If not recording, cell phones must be put away during the class period. If cell phones are abused, students will receive a verbal warning. If the behavior is not corrected, it will lead to a PSC and progress to a PIP, and subsequent dismissal.

**Social Media**

Absolutely no patient information can be used on social media sites such as Facebook, MySpace, Twitter, etc. Patient information may include but not limited to demographical data, pictures, disease progress notes, room numbers, facility names, or any other identifying information. The Nursing Program will take swift action to protect patient confidentiality with resultant dismissal of the student from the program if student found in violation of this mandate.

Students are not allowed to form a closed Facebook group using the SKC name without the SKC Social Media Administrator’s permission (406) 275-4835.

Professionalism and civility are expected of SKC nursing students at all times, including with the use of social media. Disparaging comments, inflammatory speech, and bullying verbal behavior will not be tolerated.

**Civility**

SKC and the Nursing Program respect all individuals. There is zero tolerance for bullying and uncivil behavior exhibited between and among students, faculty, staff, and program guests. Uncivil behavior includes: eye rolling, sarcasm, name calling, mean spirited comments, gossip, prejudicial comments, lying, threats, intimidating remarks and action, and similar offences. Title IX and accompanying federal are in each course syllabi mandates (Title IX Campus Coordinator, Rachel Andrews-Gould is available at 275-4985). Any uncivil behavior will result in an investigation, following due process resulting in a possible PSC and progressive discipline. If at anytime students feel they are victims of uncivil behavior, they should contact faculty and/or staff of the Nursing Program, and/or Campus Security (406-239-6297) (or 211 from a campus phone).





**ACADEMIC POLICIES**



**Progression Policy**

The student must maintain a minimum grade of "C" or better in all required nursing courses and co-requisite general education courses and support nursing courses to continue progression through the nursing program and qualify for graduation.

General education and nursing courses must be taken in sequence or prior to the co-requisite nursing courses. Students who drop a course or receive a grade less than “C” will not progress to the next quarter of the nursing program.

A student must be in good standing in order to progress (continue) in the Nursing Program. Students must complete the following assessments successfully in each Nursing course in order to remain in good standing in the Nursing Program:

* Kaplan Exams: Some Nursing Courses have a Kaplan Exam to measure competency. The score required to meet the established benchmark changes each year based on national standards. The instructor will inform students of the benchmark score required for the course.
* Competency: The competency exam consists of performance measures with a simulated patient. The student will be assessed in critical thinking and clinical skills. A student will have two (2) attempts to demonstrate competency. Failure to pass the Competency Skill Exam in two (2) attempts will result in dismissal from the program.
* Quarterly Medication Calculation exam: Students will be required to calculate medication administration each quarter. The student must pass the quarterly medication calculation test with score of 90%. Students will be given two (2) attempts to attain a score of 90%. Failure to pass the Medication Calculation Exam in two (2) attempts will result in dismissal from the program.
* Exams: The student must attain a cumulative score of 75% on exams. The combined percentage calculated from the exams will determine whether or not a student has reached the 75% required to pass the nursing course. A course may require more than two (2) exams. Only the exams will be used to calculate the score, quizzes will not be considered in this grade. Quizzes and assignments will be considered in the overall course grade after the 75% exam requirement has been met.
* Clinical Performance: Students must maintain satisfactory progress and performance during their clinical practicum rotations. The student’s clinical evaluation is conducted using a nursing clinical evaluation tool. Students will be provided with an assessment of their clinical performance at midterm and at the end of the quarter. Nursing Instructors clearly define the criteria and expectations a student must be able to demonstrate to receive a passing score in their clinical performance.
* The student who receives a “D” or lower for the course grade will not progress in the program.
* Students will have two (2) attempts to reach the benchmark on designated Kaplan Exams, medication calculations and the competency test. Grades for the course will be based upon the grades received on all course assignments and exams combined. However, a student who completes all of the course requirements successfully but does not achieve an average combined score of 75% on their course exams will receive a D for the course. If a student does not attain the required 75% to pass the course, then the student will not be permitted to progress (enroll in Nursing Courses) in the Nursing Program during the next academic term.
* Progression: A student who is not able to progress will no longer be considered to be in the Nursing Program and must reapply for readmission to the Nursing Program. The Nursing Program will request supporting documents for readmission.  The student must demonstrate the ability to be successful, explain the reason or circumstance that prevented them from progressing and present a plan that clearly shows the steps they have taken to assure that their individual situation has been remediated. An application for Readmission is due by May 1st for readmission to the following academic year. A student may be readmitted one (1) time only.

### Mastery Criteria

The Student Record must demonstrate continued professional growth and development as the student progresses through the ASN curriculum. The mastery component of nursing courses includes activities/behaviors that must be mastered at a satisfactory (S) level or attaining 90% or greater on the Quarterly Medication Calculation exam. Mastery of all components in nursing courses is considered to be essential to safe nursing practice and professional behavior. The mastery components of nursing courses may include, but are not limited to, satisfactory completion of all clinical objectives, attaining a minimum score of 90% or greater on Quarterly Medication Calculation exams, passing Skills Lab competencies satisfactorily, and satisfactory completion of self evaluations as requested. Mastery Criteria activities that may vary from quarter to quarter are listed in each course syllabus.

### Course Failure Policy

In the event of course failure as defined in the Progression Policy, the student must request an appointment with the Director of Nursing within ten (10) working days from the date of notification of failure and complete an exit interview. Students who withdraw or fail any nursing course may reapply to be considered in the upcoming admission pool.

### Progressive Student Improvement Counseling Policy

It is the responsibility of the individual student to demonstrate professional behavior and to progress satisfactorily in academic work and clinical practice. Faculty members meet with students on a regular basis to provide feedback on individual student progress. If an area of needed improvement is identified, or if a student is not progressing satisfactorily in the classroom or clinical area, the instructor will initiate a PSC. If the guidelines of the PSC are not met by the indicated date, the instructor will initiate a Performance Improvement Plan (PIP). If an infraction occurs that is of severe consequence, a PIP will be instituted even though it may be the first occurrence.

### Problem Solving Conference (PSC)

Documentation will be initiated by the student’s instructor on an approved PSC form and must include:

* Date the behavior was observed
* Date of the Problem Solving Conference
* Clear, concise documentation of the behavior or performance issue in need of improvement
* Goals for student improvement
* Date by which the goals are to be met
* Date of follow-up conference
* A statement indicating the consequences of failure to meet the present goals
* Signature of the instructor and student
* An area reserved for student comments.

Two copies of the PSC documentation must be completed; one copy is to be given to the student at the completion of the conference, the second copy is to be retained in the student’s permanent file.

### Performance Improvement Plan (PIP)

If the behavior /performance addressed in a PSC does not improve, a PIP will be instituted. Documentation will be initiated by the instructor on the appropriate PIP form and must include:

* Date of the Performance Improvement Plan
* Dates of previous PSC with the student which addressed the performance/behavior currently at issue
* Clear, concise documentation of the behavior previously receiving a PSC, or if the infraction occurs that is of severe consequence a PIP may be instituted even though it may be the first occurrence.
* Clear, concise documentation of the behavior or performance issue in need of improvement.
* Specific goals for student improvement
* Clear and emphatic consequences of failure to attain goals for student improvement
* Date of follow-up conference
* Signature of instructor and student
* An area reserved for student comment.

If the performance/behavior is of severe consequence, recommendations for immediate dismissal from the program of nursing will be referred to the Director of the Nursing program. Detailed documentation must accompany a recommendation for dismissal.

### Removal from the Classroom or Clinical Setting

Students will be removed from the classroom, clinical setting, or Nursing Program activities for unsatisfactory/unsafe conduct. Clinical agencies will deny student access to clinical sites for unsatisfactory/unsafe student conduct. Should either of these types of incidents occur, the faculty/staff member will immediately notify the Director of the Nursing Program. Written documentation of the event will be documented and retained in the student’s permanent file. A PSC, PIP, or dismissal from the program will be based on information gathered and recommendation of the Director of the Nursing Program.

### Examples of Unsatisfactory/Unsafe Student conduct

The following list is representative, but not all encompassing, of behaviors that will lead to dismissal from the program of nursing.

* Failure to meet educational outcomes at each level of the program
* Failure to achieve a grade of “C” or better in required course work, including Medication Calculation course required on failure to meet benchmark of 90% or greater on Quarterly Medication Calculation exams.
* Failure to improve performance of “unsatisfactory” on clinical evaluations after counseling and practice in Clinical Skills Lab.
* Failure to consistently maintain competencies already demonstrated or learned, or incorporate these competencies into practice and skills
* Excessive absences or tardiness to classroom, Skills Practice Lab, Simulation Lab, or clinical activities as delineated in the Attendance section in the ASN Handbook
* Student performance and/or negligence which may cause physical or emotional jeopardy to a patient, peer, or employee of the nursing program
* Failure to report a patient -care error immediately to the clinical instructor and appropriate clinical nursing staff
* Fraudulent or untruthful documentation in a medical record (EHR)
* Unprofessional conduct: ex: violation of confidentiality, disrespectful behavior towards patients, peers, staff, or faculty, either in the classroom, Skills Practice Lab, Simulation Lab, Media Lab, or clinical setting
* Dishonesty, plagiarism, cheating or submission of documentation or verbal data which is untruthful or fraudulent
* A pattern of lack of participation and/or preparation in assigned learning activities, including classroom and clinical settings.

### Cause for Dismissal from the Nursing Program

Dismissal from the nursing program will occur if:

* Student performance/behavior does not improve after receiving PIP for performance/behavior that demonstrate a failure to grow professionally and academically
* Student performance/behavior is considered to be of a serious nature

### Examples of Performance/Behavior Considered to be of a Serious Nature

The following list is representative, but not all encompassing, of behaviors that will lead to immediate dismissal from the program of nursing:

* Omission and /or commission, either verbal or non-verbal, which threatens the emotional or physical safety of patients, peers, staff, faculty or others
* Behavior that is disorderly, disruptive, impedes the educational process or activities of the college community
* Failure to improve behavior after counseling for the identified behavior
* Dishonesty, plagiarism, cheating, fraud, stealing, destruction of property
* Violation of Federal statues or college policy
* Misuse of chemicals, alcohol, or drugs
* Possession of a weapon on campus, in a clinical agency or any college related activity

### Due Process

Student objections related to rules, policies, or faculty/staff conduct should be resolved using campus resources in the following order:

1. Consult with the instructor involved.
2. If resolution is not achieved, student and instructor consult with the Director of Nursing.
3. If resolution is not achieved, Director of Nursing will consult with the Academic Vice President. After this meeting the student will be advised of the next step, which may include a meeting with the Director of Nursing and Academic Vice President

Students may bring an advocate of their choosing at any time throughout the Due Process procedure.

### Grievance/Grade Appeal Process

If a grievance remains after following the Due Process procedure, refer to the SKC Student Handbook for specific steps if the objection cannot be resolved within the nursing program.

### Attendance Policies

Attendance is mandatory in nursing classes, clinical laboratory, campus post-conference and lab class, and in assigned college laboratory practice sessions. Attendance/class participation is calculated into each course grade (see syllabus). A pattern of absence and tardiness will jeopardize passing a course. If an avoidable absence is necessary the student must notify the instructor via email before class period starts.

Upon arrival and departure to the clinical setting, students are required to report to the faculty and staff nurse on the assigned unit. Anytime you leave the clinical unit, notify the clinical instructor and staff nurse. In the clinical area, failure to notify the clinical instructor of an absence or tardy not only demonstrates lack of respect and unprofessional behavior but also **failure to provide for patient safety.**

One clinical absence will result in a PSC. Two clinical absences, regardless of quarter obtained, will result in a PIP. Third absence, within one academic year, will result in dismissal from nursing program. All clinical absences must be made up. The instructor will determine make up.

If the absence is due to health related issues and the student is absent for three or more consecutive class/clinical sessions, a written health status report stating the reason for the absence, date of return to campus, and activity restrictions, if any, must be signed by the primary healthcare provider and given to the instructor before the student is permitted to return to program activities.

Students who are absent from class, Skills Practice Lab, Simulation Lab, or clinical are unlikely to meet the course objectives and complete the course of study successfully.

### Student Responsibility in the Event of Absence/Tardiness

If an avoidable absence is necessary the student must notify the instructor via email before class period starts.

Clinical absence or tardy must be reported directly to the clinical instructor (phone number provided on clinical rotation form) at least one hour before clinical begins. The student must call personally. It is not permissible to have a member of the family or a friend call in an absence or tardiness for the student.

### Bad Weather Policy

Students are expected to plan ahead during winter to allow for additional driving time or plan alternative transportation. Announcements for College closure are broadcast on local radio stations. If the College is closed, there are no classroom or clinical activities. Bad weather will not be an excuse for missed exams, absences or tardiness.

Sign up for Rave Wireless for Emergency Notifications. To register, please visit https://www.getrave.com/login/skc and click on the register button located on the lower left. If you are already registered and want to add or change your contact information, please visit the same web site and sign in using your user information. For more information on SKC's Alert System see http://skc.edu/?q=node/65. Contact the SKC Help Desk with any problems you may encounter.

## Academic Progress/Grading

A letter grade is awarded for each course based on the criteria found in each syllabus. There are both letter grades and Pass/Fail (P/F)-Satisfactory/Unsatisfactory (S/U) components of each course.

**Students must obtain a "C" or better in the letter grade component and a "P" or “S” in the P/F or S/U component to progress to the next level in the program of nursing**.

# Letter Grades

Grades are based upon examinations and/or other assignments based on the following grading scale. Partial points will be rounded appropriately.

A = 92-100%

B = 83-91%

C = 75-82%

D = 63-74%

F = 62% or better

**Testing**

Students must be on time for all exams. Once the doors are closed to a testing area, no one will be admitted to this area. Only under unusual, extenuating circumstances, such as emergencies, does the faculty consider alternative testing times. Alternative testing times are not guaranteed.

Exams outside of the scheduled testing time are considered on a case-by-case basis. The faculty cannot give test results to any student until all students have taken the exam and results are analyzed. Students who do not take the exam at the scheduled time, if allowed to take the exam at an alternative time, will have a 10% deduction in the exam grade score.

An average of 75% on the combined exams must be achieved to pass a required nursing course. Students scoring less than 75% on any exams must make an appointment with their advisor and/or the course instructor for review of the material and development and implementation of a success-building plan, which is to be reviewed and evaluated on a date set by the student and advisor and/or course instructor.

Exam Review Policy: Each student will be allowed to review their exams after grades are posted. The review will take place in a group tutoring session with a nursing tutor. The time for these reviews will be announced at the beginning of the quarter. You will be asked to leave all of your personal belongings including cell phones and backpacks in a designated location for the review. To maintain the security of the test no note taking is permitted. Any infraction on review policy will result in program dismissal.

### Written Assignments

Grading criteria for individual class assignments are contained in the course syllabus and/or rubrics distributed in class. It is recommended students keep a personal copy of all written assignments submitted to the instructor for grading. **All assignments must be completed to pass the course.**

# Late Assignments

Students are expected to submit assignments to the course instructor on the date and time specified. If students are unable to complete the assigned work by the date and time specified, it is strongly recommend they meet with the instructor prior to the due date to discuss the reason the work will not be submitted on time.

If an assignment is late, a 5% reduction will be made for each day (24 hour period) the assignment is late for a total of 5 days; if the assignment is more than 5 days late, a grade of "0" will be issued, but the assignment must still be submitted for a successful completion of the course.

### Clinical Evaluation

Campus Lab is defined as activities taking place in the Skills Practice Lab and/or Simulation Lab.

“Clinical” refers to learning activities in clinical facilities, post conference, Campus Lab classes, small group labs, and clinical evaluation conferences. Students must receive a Satisfactory (S) grade based on achievement of objectives in each of the above settings.

**Students are required to attend and actively participate in Skills Practice Lab, small group labs, and post conferences, and complete group lab practice prior to Clinical Competency, Lab simulations and check-offs.**

Clinical grades are not awarded until the summative evaluation conference is completed. Students who do not meet with the clinical instructor for the summative evaluation conference at the end of the quarter will not pass the course.

A written midterm and summative evaluation summary, signed by the student and faculty member, is placed in the permanent Student Academic Record in the Nursing Office.

# General criteria for satisfactory and unsatisfactory performance in clinical

Each clinical course lists the objectives to be achieved. The objectives are developed to encourage students to apply knowledge learned in theory to clinical settings. The instructor documents student progress on a weekly basis. Students complete written weekly assignments as determined by the clinical instructor. Clinical Instructor-prepared evaluations are shared with students at midterm and the end of quarter and as needed to evaluate student progress in meeting course objectives.

**In order to pass the course, each clinical objective must be met.**

**Satisfactory** is defined as: A safe, accurate, and consistent pattern of performance; needs minimal verbal/nonverbal cues to accomplish behavior; meets objective. Satisfactory performance is attainment of objectives for the course. Students are expected to apply knowledge and skills learned in previous clinical and non-clinical courses when administering nursing care. To demonstrate this, students must consistently:

1. Utilize learning opportunities available
2. Demonstrate retention of skills from quarter-to-quarter
3. Improve performance with practice
4. Recognize and correct own mistakes
5. Improve behavior following constructive feedback
6. Recognize and communicate own learning and supervisory needs
7. Exhibit the ability to perform patient care with minimal instructor guidance
8. Demonstrate professionalism and accountability
9. Demonstrate appropriate critical thinking and clinical judgment
10. Assume responsibility for nursing care of increasing numbers of patients across the curriculum and/or as assigned by the clinical instructor based on acuity and student learning needs

**Unsatisfactory** is defined as: Unsafe, unsuccessful attempts to demonstrate required behaviors. Instructor/RN must give detailed instructions or repeatedly demonstrate or intervene. Does not meet course objectives. Unsatisfactory performance is a pattern of failure to attain the objectives of the course. This may occur if a student consistently:

a. Fails to engage in learning activities, which lead to attainment of the objectives.

b. Demonstrates marked difficulty with previously learned behaviors.

c. Fails to improve with practice.

d. Fails to recognize and/or assume accountability for own mistakes.

e. Fails to improve following constructive feedback.

f. Fails to communicate needs to instructor.

g. Requires a level of supervision unusual for this level of learner.

h. Fails to demonstrate professional behaviors

i. Does not recognize inadequate reporting or assessment findings

1. Fails to be able to increase responsibility and care in the number of patients assigned.
2. Does not recognize the importance of reporting abnormal assessment findings to the appropriate nursing staff personnel or the clinical instructor
3. Fails to demonstrate clinical judgment and critical thinking

Details regarding satisfactory/unsatisfactory performance are provided in the clinical evaluation tool. This tool will be reviewed with the student during orientation to the clinical facility. In the event a student demonstrates unsatisfactory performance, a PSC or PIP must be initiated.

**Clinical Rotation Schedules**

Each quarter, clinical rotation schedules are posted indicating the weekly clinical assignment areas. A maximum of 10 students are assigned to provide direct patient care in any one area of the acute care setting. Students who are not assigned to an acute care setting may be assigned to a community-based clinical setting, the Skills Practice Lab, or Simulation Lab. Specific clinical assignments are posted on each agency unit. Occasionally, assignments are changed at the last minute due to a patient 's discharge or change in health status. Changes in assignments may be made **only** by the clinical instructor and in agreement with the agency staff.

**Clinical Preparation Activities**

When assigned an acute care or long-term care patient the clinical instructor will contact the student with key data related to the assigned patient(s) or area. The student will obtain relevant data by:

1. Reading the history & physical reports, the current health status in the physician

and nursing progress notes of the individual's clinical record.

2. Reading the current nursing and medical care plans located in the patient electronic medical record.

3. Researching textbooks regarding the individual's medical diagnosis and recommended nursing care.

4. Preparing worksheets or care plans according to course clinical objectives.

5. Completing assigned clinical paperwork and clinical check-offs

**The student must turn in all clinical paper work to the clinical instructor when assigned. Student will not be allowed to attend clinical if clinical work as outlined above has not been completed.**

Failure to prepare adequately for clinical practicum activity will result in an unsatisfactory grade for the clinical day and will result in dismissal from the unit and/or initiation of PSC and/or PIP.

The clinical coordinator is responsible for arrangement of clinical practicum “make up” days. Clinical practicum “make up” days are not guaranteed.

### Clinical Practicum Policies

1. During the assigned clinical activity, students must report to the clinical instructor and designated staff member when arriving and leaving the nursing unit or agency.
2. Students are responsible for transportation to and from clinical agencies.
3. In the event of an accident or injury, the student should: (a) notify the clinical instructor immediately, (b) file a report with the clinical agency, (c) and the Nursing Program.
4. Visiting patients outside of clinical hours is not appropriate.
5. Due to legal reasons, students may not accompany patients outside of the clinical area.
6. Accepting monetary or valuable gifts from a patient is unprofessional and prohibited; accepting other gifts, regardless of value, is strongly discouraged.
7. Photographing of patients by students is not permitted under any circumstances.
8. Personal phone calls and/or visits with members of the student's family or friends during clinical is not allowed. The student should instruct their family that, in the event of an emergency, the family member should call the nursing office at 275-4909 and state the student's name and nature of the emergency. The nursing office will then immediately notify the clinical instructor of the emergency, including a phone number where the calling party may be reached. Refer to cell phone policy.
9. Students must be familiar with and adhere to the policies of the clinical agencies in order to remain in clinical at that facility.

Preparation for Out-of-Hospital Activities

Clinical activities for some objectives may best take place in community based settings; clinics, physician offices, the Skills Practice Lab, or the Simulation Lab. Guidelines for clinical activities are reviewed with the student prior to the planned clinical experience. Students are expected to prepare adequately for such activities. **Failure to achieve the objectives of the activity will result in an unsatisfactory grade for that week and may jeopardize the student’s ability to be successful in the program of nursing.**

# **Skills Lab**

1. Prompt attendance and active participation in lab classes is **mandatory**.
2. Attendance will be reflected in the course grade.

**Skills Lab Policy**

Performing nursing skills safely and competently is an essential component of nursing practice and the student must be able deliver safe and competent patient care. At the end of selected quarters, students will complete a comprehensive skills competency test. It is the responsibility of the student to be prepared for the comprehensive skills competency test. Students are expected to practice and retain skills learned in previous courses. Skill building practice time includes activities such as independent or supervised practice in the skills lab. Nursing skills are introduced in each Quarter of Level I & Fall Quarter of Level II.

# **Assigned Lab Practice Times**

Consult the course schedule for assigned Skills Practice Lab and Simulator Lab times. All of the above are mandatory attendance sessions. Students will not be able to test for competency if assigned lab practice hours are not completed.

# **Skills demonstration process and pass or fail outcomes**

#### Skills practice lab & demonstration general process: students first review and observe a demonstration by an instructor; second, practice the skill with each other and/or individually; third, “buddy-up” and check each other on performance; and lastly, demonstrate the skill competently to an instructor. The skill demonstration is called a competency because the student has demonstrated ability to perform the skill competently.

1. Skills demonstration
   1. Nursing skills are reviewed and demonstrated by instructors.
   2. Skills review can be achieved through viewing videos and practice with a lab partner. If additional assistance is needed, the student should consult with the Skills Practice Lab Coordinator.
2. Skills practice and assessment of competence
   1. Required Skills Practice Lab time is scheduled each week.
   2. Activities that promote success in competencies include:
      1. Independent study with readings, workbooks, videos, and skills practice with a lab partner.
      2. Interactive learning with peer observation, faculty/staff observation and coaching, group case studies.
   3. Students often need more than the minimum required mandatory practice time to achieve competency. Plan to schedule extra time in the nursing labs!
   4. Evaluation criteria are objective and are provided on the competency evaluation forms on Schoology.
   5. Students must demonstrate designated skill competency with faculty prior to performing the skill in the clinical practicum setting. If the student successfully demonstrates competency it is recorded in the Clinical Passport booklet.
   6. Students can ask for a copy of the competency evaluation form with faculty feedback.
3. Skills Lab Competency Testing
   1. **Level I** 
      1. Skills lab testing for level I will be a midterm and final of skills learned in that quarter. Midterm may be up to two assigned skills and final will be up to three skills. Final will be cumulative.
   2. **Level II**
      1. Skill Testing for level II will be a competency midterm and final. These will be cumulative.
      2. Competency testing assesses the student's ability to integrate the knowledge, skills, and attitudes of concepts and skills learned during that and previous quarters in a simulated setting Typically, the scenario involves patient assessment, communication, at least one nursing skill, prioritization of care, and documentation. The Human Patient Simulator may be utilized during competency exams.
   3. **Skills Lab Competency Testing** 
      1. All formal skills lab testing will have two attempts.

Initial Testing:

* + 1. **Pass:** The grade is recorded.
    2. **Fail:** Prior to second/final testing, the student is required to spend a minimum of four hours in the lab remediating lab skills and content. The student will schedule this time with the lab instructor. The student will attend clinical but will be unable to perform the unsuccessful skill until second/final testing is passed. A PIP will be initiated and the student will have up to one week to complete second/final attempt.
  1. Second attempt:
     1. **Pass: The grade is recorded.**
     2. **Fail: Results in failure to progress.**

**If a student is absent during a scheduled competency time, the student will receive a “fail” for that session. A PIP is instituted for a student who fails the first competency demonstration.**

1. Passport Policy
   1. Passports are REQUIRED at clinical practicum activities
   2. If lost, the student must pay for the replacement in the amount of $5.00 US.
   3. If lost, the student must also REPEAT all previous competency for all skills done prior to losing the passport BEFORE they may be performed in clinical again.

#### Clinical Agency Sites

Clinical sites are utilized across Western Montana for the ASN program. Many of the sites are listed below, and some new sites will be identified during the school year. Use of sites varies from year to year. There are no guarantees for specific student placement.

Acute Care:

* Kalispell Regional Medical Center
* Community Medical Center
* St. Luke Community Healthcare (hospital and ECF)
* St. Patrick Hospital and Health Science Center
* North Valley Hospital
* Marcus Daly Memorial Hospital
* Clark Fork Valley Hospital
* St. Joseph Medical Center
* Montana Stat**e** Hospital at Warm Springs (psychiatric/neurological health)
* Blackfeet Community Hospital, Blackfeet Service Unit, Billings area IHS

Community-Based Sites:

* Flathead Reservation
* Tribal Health clinics
* Polson/Ronan Public Schools
* Two Eagle River School
* Salish Kootenai College Day Care
* CSKT Early Childhood Services
* Mission Valley Christian Academy
* Physicians’ offices
* Kicking Horse Job Corps Center
* St. Joseph Home Health
* Lake County Home Health Agency
* Western Montana Medical Clinics
* Lake County Health Program
* Flathead Valley
* North Valley Hospital
* Home Options (FCHH)
* Public Schools
* Flathead City-County Health Program
* Dialysis Clinic, Inc.
* Clark Fork Valley Home Health
* Missoula Valley
* Partners in Home Care
* Missoula City-County Health Program
* Missoula Partnership Health Center

Long Term Care:

* Kalispell: Brendan House
* Ronan: St. Luke Extended Care Facility
* Missoula: Village Health Care Center, Columbia Falls, and Veterans Home

**Guidelines for Student Conduct**

Nurses are healthcare professionals who follow a **code of ethics** established by the American Nurses Association (www.ana.org). The Montana Nurse Practice Act, the statute regulating the practice of nursing, defines the rules governing the professional conduct of nurses

(<http://bsd.dli.mt.gov/license/bsd_boards/nur_board/board_page.asp>). Nursing students are expected to uphold these codes as a member of the SKC learning community. The ANA Standards of Nursing Practice (www.ana.org) also guide conduct and practice. Refer to the SKC Student Handbook for college student conduct guidelines.

**Nursing Program Success**

Student success is extremely important to the Nursing Program. In our curriculum and in our learning activities, we make it a priority to support students in their goal to earn the Associate of Science Degree in Nursing and to enhance a sense of satisfaction and personal growth during their educational journey.

A sense of belonging in the program and college community, of having support when needed, and of being part of a team promotes success. The faculty and staff are aware of the many challenges students face in the transition to the nursing student role. The curriculum is organized in a logical and sequential manner. The curriculum offers appropriate content to meet the educational outcomes and accommodate student learning styles. The nursing program fosters personal and academic growth by encouraging students to:

* Take responsibility for learning
* Approach learning as a life-long process
* Develop the skills of a critical thinker
* Role model caring behaviors

In addition to policies and curriculum, which enhance student success, the Nursing Program has in place a group of specific activities that also support students. The SKC Nursing Program success activities include:

* **Nursing Institute—**The Nursing Institute was developed to help offset the initial bewilderment students often feel at the beginning of the academic year. Students are required to attend all Institute sessions. Student engagement activities are a series of discussions and workshops designed to help students with the transition. Activities allow students to meet and interact with faculty before the start of classes. CPR classes and science review classes are also scheduled.
* **Advisement/Advisors—**Each student in the nursing program is assigned a faculty advisor at the beginning of first quarter of Level I. The student and advisor meet at least once during each quarter to plan enrollment in courses for the next quarter. The advisor helps the student through the process of course selection. Course approval by the advisor is mandatory to ensure the timely completion of all curriculum requirements for graduation.

**Students may pre-register/register for fall, winter and spring quarters only after consultation with the advisor. Only the assigned faculty advisor may sign registration forms, drop/add slips, etc.**

Students are encouraged to make appointments with the faculty advisor at the earliest indication of an academic problem. If a personal problem or circumstance influences academic progress, the advisor may refer students to the college and/or community support services.

**Clinical Instructors**

Students are assigned clinical instructors who supervise activities in the clinical setting. The relationship between students and the clinical instructors is, by nature, a very special one. Clinical instructors are the link to professional nursing practice, mentors in an environment that is very stressful, and coaches when it comes time to use the nursing skills practiced in the Skills Practice Lab or Simulation Lab.

**Nursing Support Courses (tutoring)**

Group tutoring sessions are scheduled each week. Individual tutoring sessions are also available. It is recommended that students attend all tutoring sessions to increase success in the nursing program.

**SKC Support Services**

Salish Kootenai College Student Services provides the following services for students:

* Classes on academic skills, test taking, job-seeking skills, personal growth and problems
* Free tutors and counselors
* Placement services for jobs while attending school and following graduation
* Financial aid resources
* Online help though SMART THINKING





**APPENDICES**



**Appendix A**

Guidelines for Professional Behavior

The purpose of Guidelines for Professional Behavior is to promote a professional learning environment within the Salish Kootenai College Nursing Program. Students and faculty bring with them a wide variety of cultures, experiences, and strengths. By focusing our energy toward creating a supportive and cooperative environment that provides a safe place to learn the practice of professionalism, we increase our opportunities for learning and working in caring surroundings.

As a member of the Salish Kootenai College Nursing Program, I agree to work to make the following a part of my daily routine to promote empowered partnerships.

**I will:**

* Realize I am accountable for the outcomes (consequences) of my actions.
* Commit to using the ***Problem Solving Process*** as outlined under Guidelines for Student Conduct in the Nursing Student Handbook
* Value your time and the contribution you make to this program
* Value my time and the contribution I make the this program
* Take responsibility for my own emotional well being
* Accept the diversity in our cultures, learning/ teaching styles, and personal communication styles
* Recognize that you know yourself best and will choose your own approach
* Promise to be honest and treat you with respect, courtesy, and professionalism
* Listen openly to new ideas, perspectives, and solutions
* Stay focused on joint goals and responsibilities for achieving them
* Participate as a team member in decision making
* Maintain confidentiality when I am used as a 'sounding board'
* Use only one (1) person as a 'sounding board' before I decide to either give feedback or drop the issue
* Foster open communication and a positive learning and work environment by:

1. Addressing specific issues and behaviors
2. Validating questionable information by researching the problem before drawing conclusions
3. Encouraging others to validate questionable information by "going to the source"
4. Acknowledging and apologizing when I have made a mistake or caused a misunderstanding
5. Addressing unsafe or unethical behavior directly and according to policies
6. Taking time to reflect on what was said, rather than blaming, defending, or rejecting
7. Asking for clarification of the perceived behaviors
8. Remembering that there is always a little bit of truth to every criticism
9. Staying focused on what I can learn from the situation

* Offer feedback by:

1. Using ' I ' statements (‘ I feel ' rather than ' you make me feel ‘)
2. Describing behaviors and giving specific examples
3. Limiting discussion
4. 36 hours

"Good people are good because they've come to wisdom through failure. We get very little from success you know." **William Saroyan**

Student Signature Date

**APPENDIX B**

# Salish Kootenai College Program of Nursing

# **Problem Solving Conference**

Student:

Date of Problem Solving Conference:

Date student notified:

**Describe the unsatisfactory behavior(s) or performance issue(s), which necessitate(s) a Problem Solving Conference (PSC)** (Use the reverse side of this form if additional space is needed)

**Instructor recommendation for improvement of behavior or performance issue observed:**

**Follow-up conference scheduled for**:

A **Performance Improvement Plan (PIP)** will be instituted if the student fails to demonstrate evidence of progressive improvement in the above stated behavior and/or performance issue(s), or if the student repeats those actions addressed during the this Problem Solving Conference.

**Student Comment:**

Student Signature Date

Instructor Signature Date

Witness Date

**1 copy to student**

**1 copy to be place in student's permanent file**

# **APPENDIX C**

# Salish Kootenai College Program of Nursing

# **Performance Improvement Plan**

Student:

Date of Problem Solving Conference:

Date student notified:

**Describe the unsatisfactory behavior(s) or performance issue(s) which necessitate(s) a Problem Solving Conference (PSC)** (Use the reverse side of this form if additional space is needed)

**Instructor recommendation for improvement of behavior or performance issue observed:**

**Consequences if plan not met:**

**Follow-up conference scheduled for**:

**Student Comment:**

Student Signature Date

Instructor Signature Date

Witness Date

**1 copy to student 1 copy to be place in student's permanent file**

**APPENDIX D**

Salish Kootenai College Nursing Program

**CONFIDENTIALITY AGREEMENT**

Students in the Salish Kootenai College Nursing Program will be working with patients and patient medical records in various types of health care facilities and in the classroom.

Student use of medical records and confidential patient information in the educational process requires:

1. All information about a patient, written or verbal, belongs to the patient. Any violation of confidential information about a patient is punishable in a court of law. Refer to the Health Insurance Portability and Accountability Act of 1996.
2. The professional Code of Ethics of the American Nurses Association stipulates that confidentiality of patient information is a part of professional responsibility and integrity.

Because of these legal and ethical considerations, any student enrolled in the SKC nursing Program who reveals contents of a medical record or information related to a patient’s private personal status is subject to reprimand and possible immediate dismissal from the SKC Nursing Program.

Further information is contained in the SKC Nursing Student Handbook.

Having understood the above, I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ do hereby agree to maintain confidentiality of all patient information to which I am exposed as a SKC Nursing student.

Student Signature Date

Program Director/Faculty-Witness Date

This agreement will remain on file in the student file and may be distributed to supervisors at all practicum sites to which students have been assigned.

**APPENDIX E**

Salish Kootenai College Nursing Program

**STATEMENT OF INFORMED CONSENT FOR PREVENTION OF COMMUNICABLE DISEASES**

Please place an “X” by each statement you agree to:

\_\_\_\_\_ I understand that SKC Health Programs (Nursing/Dental Assisting) involve the study and care of people throughout the life span and that these people may be well or ill. By participating in care giving activities, I may be exposed to infectious diseases, such as Hepatitis B, Acquired Immunodeficiency Syndrome (AIDS), and other infectious and/or communicable diseases.

\_\_\_\_\_ I agree to participate in HBV/HIV education experiences as required by SKC Health Programs and CDC and OSHA guidelines. I understand that testing, diagnosis, and treatment of any infectious and/or communicable disease, including those contracted while acting as a caregiver in my clinical experiences with SKC, will be my financial responsibility. I understand that health insurance is required.

\_\_\_\_\_ Hepatitis B vaccine and /or demonstrated proof of immunity is required prior to beginning my clinical experience with direct patient care. I will sign a refusal to consent form and release SKC from liability should I refuse to be immunized.

\_\_\_\_\_ In the event I am exposed to blood while giving patient care, I agree to follow the SKC Accidental Exposure Policy. Protocol established by the institution (see the agency’s Exposure Control Plan). I understand that this generally involved one year of blood testing and professional counseling for myself and/or significant others. I understand and acknowledge that there is no known cure for AIDS at this time.

\_\_\_\_\_ I am aware that the Privacy Act provides for confidentiality on any issue related to my health status. All information will be kept in strict confidence by the School of Nursing and used to provide counseling, health information, and referral.

\_\_\_\_\_ I understand that Section 8.32.1404 (14) of the Statutes and Rules of the Montana State Board of Nursing states that…”as a member of the nursing profession, the registered nurse shall…conduct practice without discrimination on the basis of age, race, religion, sex, sexual preference, national origin or handicap…” (The Americans with Disabilities Act, 1992, establishes communicable disease including AIDS as a handicap/disability).

\_\_\_\_\_ It is recommended that I inform faculty of changes in my health status, such as pregnancy or contraction of a communicable and/or infectious disease. I have been informed and understand that an altered state of my health, such as being infected with HIV, may increase my health risk in relation to care giving activities for patients with bacterial and viral diseases. I have been informed that some vaccinations are contraindicated or have decreased effectiveness in immunosuppressed conditions. I understand that I should seek sound medical advice for changes in my health status, as discussed in this paragraph.

This document has been read and explained to me. I fully understand the learning opportunities, potential risks and safeguard options, which are involved, in my role as a health student at Salish Kootenai College. I consent to follow policies and procedures as explained herein.

Student Signature Date

Witness Signature Date

**APPENDIX F**

Salish Kootenai College Nursing Program  
  
**Consent Form**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the undersigned, hereby authorize the Salish Kootenai College, Nursing Program to release:

Initial on the line:

\_\_\_\_\_ Contact information on a resource list distributed to all nursing classmates.

\_\_\_\_\_ Photographs and media for the purpose of information dissemination or publicity related to Salish Kootenai College.

\_\_\_\_\_ Student academic data, in-group form, for educational research, grant and accreditation, and/or other publications (excluding identifying information).

I acknowledge that I understand the purpose of the request and that authorization is hereby granted voluntarily.

**By my signature below, I consent to the release of the above listed information**

Student Signature Date

Witness Signature Date

APPENDIX G

Salish Kootenai College Nursing Program

Authorization to Share Information

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby give consent to Salish Kootenai College, Nursing Program, to release and provide the following information to any/all clinical contract sites (only as needed) to participate in clinical activities:

1. Criminal Background Check
2. Immunizations
3. CPR Verification
4. Contact Information
5. All forms completed per individual facility requirements, to include but not limited to: Pyxis, computer, and EHS.

I acknowledge that I understand the purpose of this request and that authorization is hereby granted voluntarily.

Student Signature Date

Witness Signature Date

APPENDIX H

Salish Kootenai College Nursing Program

**Acceptable Use of Technology Consent Form**

Examples of what is acceptable:

1. Use computers, printers, file servers, etc. to do class assignments.
2. Browse the Internet, send email, or transfer data files to complete class assignments.
3. Use a “fair share” of the technology resources at SKC to accomplish your class work or job.

Examples of what is unacceptable:

1. Use SKC resources for personal gain or private/public participation in activities counter to SKC Mission, Philosophy or Policies.
2. Copy or use software, graphics, video, or audio materials in violation of copyright or licensing laws.
3. Send harassing, threatening or obscene email, documents or pictures.
4. Access, view or print obscene or pornographic images or documents.
5. Use SKC technology resources to illegally access communication, computer, network or information services at SKC or elsewhere.
6. Use Internet “chat” services, especially audio chat services, for personal communication.

What will happen if you violate acceptable use:

1. If you are a student your actions are governed by the Student Handbook. You’ll be referred to the Student Services Director.
2. If you are a staff or faculty member your actions are governed by the SKC Policy and Procedures manual. You’ll be referred to your supervisor.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have read the Salish Kootenai College Acceptable Use of Technology Policy containing information and guidelines applicable to all students enrolled at Salish Kootenai College.

This policy was reviewed with me during the nursing student orientation. I understand the Acceptable Use of Technology policy, and I agree to abide by this policy while enrolled in the nursing program.

Student Signature Date

Witness Signature Date

APPENDIX I

Salish Kootenai College Nursing Program

STUDENT RESPONSIBILITY STATEMENT

This form will become part of the student’s permanent record.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have been given a copy of and have read the Salish Kootenai College Associate Degree Nursing Student Handbook containing general information and policies applicable to all nursing courses while I am enrolled in the Salish Kootenai College Nursing Program.

These policies were reviewed with me during the first week of the quarter. I agree to abide by these policies while enrolled in the nursing program.

Student Signature Date

Witness Signature Date

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, understand that the expenses for enrollment in the Nursing Program are higher than those for the general college student. While Salish Kootenai College assists students in obtaining financial aid, I am fully responsible for payment of tuition, fees, related education obligations and living expenses.

Student Signature Date

Witness Signature Date

**Appendix J**

STUDENT CONFLICT RESOLUTION FORM

**NOT TO BE USED FOR**

**GRADE CHANGES**

Salish Kootenai College Nursing Program is committed to deliver exemplary nursing education and has set forth the expectation that students, faculty, and staff contribute to an environment conducive to optimal learning. The Chain of Command as outlined in this document provides a means for students and faculty/ staff to resolve differences that could impede or thwart high-quality teaching and learning.

1. Student downloads form from the SKC Nursing website: nursing.skc.edu
2. Student must complete form and meet with instructor with whom the conflict involves. Both student and instructor sign and date the form, indicating the date of meeting and whether resolution was achieved. A copy of the form will go into student’s file.
3. If no resolution occurs, student, instructor, and Director of the Nursing Program will meet. If issue is resolved, no further action is taken.
4. If issue remains unresolved, the matter is then forwarded to Administration; the Director of the Nursing Program and the Vice President for Academic Affairs will meet to determine resolution. All parties will then be notified of decision.

\*\*\*For issues with clinical instructor, steps and due process are similar with the exception that the student must meet with the Clinical Coordinator if no resolution occurs between the student and the clinical instructor. After meeting with the Clinical Coordinator (with clinical instructor input), if no resolution has occurred, the Clinical Coordinator will meet with the Director of the Nursing Program.

Student Name:

Date:

Student’s SKC email:

Course Name:

Student’s concern (be as specific as possible with dates, location etc.)

Student’s potential solution to conflict: (what ideas do you have to resolve this conflict?)

Date of meeting:

Student signature indicating you have met with instructor:

Instructor signature indicating you have met with student:

Resolution achieved:

YES

NO

* If resolution achieved, please make copies for both student and instructor and one for student’s file.
* If no resolution achieved, please make copies for both student and instructor and one to submit to the Director of the Nursing Program for future action. If conflict involves clinical, then non-resolution between clinical instructor and student next goes up the Chain of Command to the Clinical Coordinator prior to the Director of the Nursing Program. **If applicable, this section to be completed by Clinical Coordinator (if applicable and the issue involves clinical)**

After the meeting with student (with clinical instructor input), the issue was resolved. How was the issue resolved?

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After the meeting with student (with clinical instructor input), resolution was not achieved. If no resolution was achieved, issue goes up Chain of Command to Director of Nursing Program

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# This section to be completed by Director of Nursing Program

After the meeting with instructor and student, the issue was resolved. How was the issue resolved?

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After the meeting, the issue was not resolved. Director explains why issue remains unresolved and forwards form to Administration (VPAA).

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VPAA and Director resolution.

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Instructor Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_

If applicable, clinical coordinator Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_

Director Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice President for Academic Affairs Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appendix K

## Employment

Students are encouraged to carefully consider the time commitment for classes, study, family life, travel, leisure activity, and other life responsibilities prior to scheduling outside employment while attending the nursing program. **It is strongly recommended students not work more than 20 hours per week.** **It is mandatory that the student does not work the eight (8) hours prior to the clinical practicum activities.**

**Date:­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Present Job: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Number of Hours working each week: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Schedule of times working each week:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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