RN/BSN Nursing Student Handbook

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**2016 – 2017**

### Nursing Department

#### Salish Kootenai College

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**Table of Contents**

|  |  |
| --- | --- |
| **RN/BSNProgram Introduction** | 3 |
| SKC Nursing Department | 4 |
| Accreditation/Nursing Accreditation Agencies | 4 |
| Faculty and Staff Directory | 4 |
| Mission | **5** |
| Philosophy | **5** |
| Organizational Framework | **7** |
| Program Outcomes | **11** |
| The Medicine Wheel | **12** |
| RN/BSN Curriculum Plan | **13** |
| Learning Activities | **14** |
| Campus Resources | **14** |
| Program Costs | **15** |

|  |  |
| --- | --- |
| General Policies |  |
| RN/BSN Activities/Committees | **17** |
| Health Policies | **17** |
| Health Record | **17** |
| Immunization Requirements | **17** |
| Pregnancy | **19** |
| Illness or Injury | 19 |
| Reasonable Accommodations | **19** |
| Core Performance/Essential Functions | **20** |
| Substance Use and Abuse | **21** |
| Substance Abuse Policy | **21** |
| Student Records | **23** |
| CPR Certification | **23** |
| Criminal Background Check | **24** |
| Liability Insurance | **24** |
| Housing and Transportation | **24** |
| Uniform and Dress Policy | **24** |

|  |  |
| --- | --- |
| **Academic Policies** |  |
| Admission Policy | **26** |
| Transfer Policy | **26** |
| Progression Policy | **26** |
| Course Failure Policy | **27** |
| Graduation | **27** |
| Standards for Academic Quality | **27** |
| Progressive Student | **27** |
| Improvement Policy | **28** |
| Due Process | **28** |
| Grievance/Grade Appeal | **30** |
| Attendance Policies | **30** |
| Grading Policies | **30** |
| Progression Policy | **31** |
| Clinical Evaluation | **31** |
| Clinical Practicum Policies | **31** |
| Guidelines for Student Conduct | **32** |
| RN/BSN Student Orientation | **32** |
| Advisement/Advisors | **32** |
| Preceptors | **32** |
| SKC Support Services | **33** |

|  |  |
| --- | --- |
| Appendices |  |
| Appendix A | **35** |
| Appendix B | **36** |
| Appendix C | **37** |
| Appendix D | **38** |
| Appendix E | **39** |
| Appendix F | **40** |
| Appendix G | **41** |
| Appendix H | **42** |
| Appendix I | **43** |

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**RN/BSN 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 Department. 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.

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**Salish Kootenai College Nursing Department**

The purpose of the RN/BSN Handbook is to familiarize you with the SKC Nursing Department: beliefs, organization, and policies that guide the program of learning, activities, and student outcomes. The SKC Catalog, SKC Student Handbook, and the Montana Nursing Practice Act are other useful documents to review.

The RN/BSN Nursing Program curriculum reflects a critical examination and revision of many components including sequence and content of science courses and support courses to reflect national professional nursing standards. The Nursing Program curriculum is in-depth, concept- and problem-based, in both didactic (classroom) and clinical applications.

An key concept in the RN/BSN Nursing Program is focused on provision of culturally congruent care. Faculty receive continuing educational training yearly to enrich cultural competence. Varied cultural experiences are woven throughout the curriculum.

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 and 1993. In 1998, the Commission accredited the College at the bachelor degree level. The next site visit for the College is scheduled for Fall 2013.

**Nursing Accreditation Agencies**

The RN/BSN program is accredited by the Accreditation Commission for Education in Nursing (ACEN). The next site visit for the RN/BSN program is scheduled for October of 2018.

Accredidation Commission for Education in Nursing

3343 Peachtree Road NE, Suite 850

Atlanta, Georgia 30326

404-975-5000

www.acenursing.org

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 responsibilities.

**Director of Nursing Program**

*Patricia A. Kelly, MSNCH, MPH, FNP-BC, NP-C*

*Director, Department of Nursing*

406-275-492

**Nursing Faculty**

Kristine Hilton, MSN, RN, CNE

RN/BSN Faculty

kristine\_hilton@skc.edu

275-4910

Margit Groessler, MSN, ARNP, FNP-C, CWCN

ASN/BSN Faculty

[margit\_groessler@skc.edu](mailto:margit_groessler@skc.edu)

(406) 275-4767

Melissa Jones, PhD, RN, CHPN

PT RN/BSN Faculty

[melissa\_jones@skc.edu](mailto:melissa_jones@skc.edu)

### Who to Call

For information about your nursing student records or general information: Nursing Department Office, John Peter Paul Building, 275-4909

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

For technical question regarding Moodle, SKC email: IT Help Desk, 275-4357

For Interlibrary Loan or Library information, call: Natalie Malaterre, 275-4874

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

Bookstore: MaryRose Morigeau-Bacon, 275-4722

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

**SKC Nursing Department-Mission**

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

**SKC Nursing Department-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 that reflect congruence with the culture of nursing.

Nursing practice is an art and a science, drawing from its own body of scholarly and intuitive knowledge. Other disciplines such as humanities, Native American studies, and social sciences play significant roles in infomring 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 and Gordon’s Functional Healht Patterns are frameworks 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/client empowerment, patient safety, confidentiality, cultural competence, fiscal accountability, and reduction in health disparities. 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. Articulated levels of nursing education support career mobility and expanded scopes of practice. Each level of nursing education provides a foundation for further professional education.

Nursing education responds to advances in science and technology and changes in nursing pracdtice. Graduate competencies of critical thinking, culturally congruent care, communication, citizenship, and clinical leadership 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 project focused learning, population 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 responsible for identifying their learning needs and preferences by utilization of appropriate learning resources to develop knowledge, skills, reasoning, and ethics as an effective health care professional. Students are expected to practice, acknowledge errors, and learn from such incidents to grow as an individual and professional.

Organizational framework

The unifying organizing framework for the ASN and RN-BSN programs is derived from the mission and philosophy of the nursing program and represented by the Medicine Wheel. The mission and philosophy 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.

**Educational Core Competencies**

The five 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 competencies are enmeshed in the educational outcomes of the Nursing Program. Definitions of critical thinking, communication, cultural competence, 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, and solutions, and diverse ways of knowing, to produce effective client outcomes.
* Culturally Congruent Care begins with the awareness of one’s own system of values, beliefs, traditions and history and 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 client interactions. Environment, community, and tradition provide the context for respectful adaptation of care that is congruent with client beliefs and values.
* 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 informatic modalities lead to respectful human connections, and effective client outcomes.
* 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 **Client, 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, NLN BSN Competencies, AACN Baccalaureate Competencies, NLNAC Criteria, and Institute of Medicine Reports document these trends.

SKC nursing curriculum is organized into three (3) Levels. An Associate Degree in Nursing (ASN) is awarded to those students who successfully complete Levels I and II. A Baccalaureate Degree in Nursing is awarded to those students who successfully complete Level III. 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 into one course at each quarter. The following section introduces the metaparadigms and threads and how these are applied in the RN/BSN curriculum.

Client

The focus of the nursing curriculum is the client, who can be defined as an individual person, family, community, or population. The BSN curriculum concentrates on communities and populations as the client. Each client, group, and community perceives health differently. Nursing is a practice discipline that supports the client in achieving balance or health at an optimum level.

Gordon’s functional health patterns comprise the sub-concepts under the client. The functional health patterns are health perception-health management, nutrition-metabolic, elimination, activity-exercise, cognitive-perceptual, sleep-rest, self-perception-self concept, role relationship, sexuality-reproductive, coping-stress tolerance, and value-belief. Each pattern is an integral component of the internal environment.

Environment

The environment is the totality of the internal and external factors interacting dynamically with the client and influencing the level of health. Interpersonal, intrapersonal, and extra-personal events influence the client patterns of response.

The internal environment is unique to each client, 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. The BSN curriculum 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 client. Illness is defined by each client’s experience of imbalance (health alterations).Healing is the process by which health is restored to an optimum level of wellness of the individual client. The client can simutaneously experience varying levels of health or illness in the four dimensions. Health promotion activities can prevent the occurrence of acute and chronic health alterations for communities and populations. 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. Common alterations in balance are those that frequently occur in a person, group, or population across the lifespan, such as health alterations due to aging. Complex alterations occur less frequently and may have serious complications such as diabetes, congestive heart failure, and trauma. Complex alterations in health require a higher level of critical thinking and an increased application of nursing and related theories.

Nursing Roles

Nursing Roles increase in complexity at each professional stage.

Role of the Associate of Science Nurse (ASN):

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 clients holistically using: critical thinking, the nursing process, and evidence-based practice in clinical reasoning and decision-making to implement culturally competent nursing interventions. The nurse teaches and advocates for clients to promote and maintain health. The nurse uses effective communication skills and collaborates with clients and other health team members to coordinate care. The nurse prioritizes, delegates care, and evaluates outcomes of nursing care. Information management systems may be used to integrate data and document client 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 client care. The roles reflect the commonalities and differences in practice and nursing education focus for the ASN and BSN relating to time, space, and complexity of activity/motion in practice.

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 client and family (activity/motion). 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 (BSN):

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 competent strategies to promote effective client 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

Educational Competencies for Graduates of Associate Degree Nursing Program (NLN, 2000) are also a threaded component of the organizational framework of the SKC nursing curriculum. Educational competencies include:

Relationship-centered care

The essence of relationship-centered care is the “moment when one human being connects to another. When compassion and care are conveyed through touch, a kind act, through competent clinical interventions, or thorough listening and seeing to understand the other’s experience, a healing relationship is created” (Koloroutis, 2004, p. 4-5). To provide such care, the critical relationships include the nurse’s relationship with the client and family, the nurse’s relationship with self, and the nurse’s relationship with students (Koloroutis, 2004).

Assessment

“Assessment involves collection, analysis, and synthesis of relevant data for the purpose of appraising the client’s health status” (NLN, 2000, p. 8). Systematic assessment involves the four dimensions of the client using Gordon’s functional health patterns. Assessment is the first step of the nursing process and clinical judgment models to make effective clinical decisions about client care.

Clinical decision-making

“Clinical decision-making encompasses the performance of accurate assessments, the use of multiple methods to access information, and the analysis and integration of knowledge and information to formulate clinical judgments. Effective clinical decision-making results in finding solutions, individualizing care, and assuring the delivery of accurate, safe care moves the client and support persons toward positive outcomes. Evidence-based practice and the use of critical thinking provide the foundation for appropriate clinical decision-making” (NLN, 2000, p. 8).

Teaching and learning

“Teaching and learning processes are used to promote and maintain health and reduce risks, and are implemented in collaboration with the client, significant support persons, and other members of the healthcare team. Teaching encompasses the provision of health education to promote and facilitate informed decision-making, achieve positive outcomes, and support self-care activities. Integral components of the teaching process include the transmission of information, evaluation of the response to teaching, and modification of teaching based on identified responses. Learning involves the assimilation of information to expand knowledge and change behavior” (NLN, 2000, p. 9-10).

### Collaboration

“Collaboration is the shared planning, decision-making, problem-solving, goal setting and assumption of responsibilities by those who work together cooperatively, with open professional communication. Collaboration occurs with the clients’ significant support persons, peers, other members of the healthcare team, and community agencies. The nurse participates in the team approach to holistic, client-centered care across healthcare settings. The nurse functions as advocate, liaison, coordinator, and student as participants work together to meet client needs and move the client toward positive outcomes. Collaboration requires consideration of client needs, priorities, and preferences, available resources and services, shared accountability, and mutual respect” (NLN, 2000, p. 10). Through coordination and management of care, the nurse may delegate components of client care to licensed and unlicensed personnel.

Koloroutis, M. (2004). Relationship-based care: *A model for transforming practice*.

Minneapolis: Creative Health Care Management, Inc.

National League for Nursing. (2000). *Educational competencies for graduates of associate Degree nursing programs.* New York: National League for Nursing.

### Educational Outcomes

At the completion of the BSN program, the graduate will:

1. Utilize critical thinking, nursing theory, and research to support decision making in nursing practice
2. Demonstrate culturally congruent care to reduce health disparities and improve effectiveness of health care systems.
3. Utilize effective written and verbal communication and information technology to collaborate effectively with health care members and disseminate nursing knowledge.
4. Maintain a commitment to citizenship, integrity, and lifelong learning in professional practice.

### Program Delivery

RN/BSN courses are delivered in a hybrid format, involving both on-campus and online components. Hybrid nursing courses include scheduled campus days and typically meet two to three times per quarter in a Thursday and Friday sequence. Face-to-face class hours are supplemented by independent study, small group work, and online course room and or e-mail discussion. RN-BSN students are expected to maintain a minimun of weekly contact with faculty by e-mail, phone, or online dialogue.

Clinical activities are designed as a clinical preceptorship. The RN-BSN student and faculty identify clinical sites based on: course objectives, RN-BSN student learning needs, and available clinical resources. Selection of preceptors is based on clinical expertise and academic credentials. Preceptors must be prepared at a baccalaureate or masters level. Faculty and clinical preceptors partner with the RN-BSN student to design, assess, and evaluate practicum outcomes for each student. Faculty members orient all preceptors and travel periodically to all clinical sites.

**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 Medicine Wheel



**Communication**



**Holistic**

**Client:**

* Individual
* Family
* Group
* Population
* Community

**Environment:**

* Multiple determinants of health
* Complex health systems

**BSN Role:**

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

**Health:**

* Health promotion
* Prevention
* Risk reduction
* Illness management

**Critical Thinking**

**Culturally Congruent**

**Care**

**Citizenship**

**Clinical Leadership**

RN/BSN Curriculum Plan

The baccalaureate program is designed specifically for RNs to enhance the level and complexity of their scope of practice while acknowledging prior learning and experience. The degree requirements for the Baccalaureate of Science degree include a total of 180 quarter credits. The curriculum builds upon Associate degree nursing coursework (98 credits). The full-time track can be completed in three (3) quarters (once all general education co-requisites are met). Part-time tracks may be completed in two to three years. Students must complete the degree within five (5) years of admission to the baccalaureate program. Coursework must be completed in sequence. Students are counseled to consult their academic advisor to ensure that academic plans follow program requirements.

### Preparation for Admission

* Admission requirements may be found under “Academic Policies” in this handbook.
* Workplace issues are integrated into course activities and assignments.
* Students must have a personal computer and e-mail. Hardware and software recommendations are available in the Nursing Department.
* Computer literacy must include Internet and word processing skills to succeed in coursework. Students unfamiliar with these skills should enroll in some form of computer training prior to entering the RN/BSN program.
* Prior to admission to core RN/BSN nursing courses Students must have completed the following coursework or equivalent with the grade of “C” or better:

**Learning Activities**

Classroom

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

The introduction, assigned readings, and preparation activities provide an overview of the content. Student inquiry questions direct study for the weekly online discussions. During the scheduled class a variety of learning activities may occur. Activities include cooperative learning groups and structured presentation of concepts in the preferred learning styles of the students. In-class activities are followed with case study related seminars directing students to critical thinking activities, clinical skills, and further study. The assignment section refers the student to concept related activities for completion prior to the class. This format enables students to see the “big picture” of a concept, not just separate parts.

Clinical Practicum

1) Clinical activities integrate concepts from classroom and student work experience. Students apply concepts while designing and implementing interventions for a specific community or population.

1. Clinical activities are structured to meet program outcomes and student learning styles. At the end of the RN/BSN program students deliver a professional presentation, which describes the process of assessment, diagnosis, planning/designing interventions, implementation of that plan, and evaluating outcomes for the community/population client.
2. Clinical activities take place on and off the Flathead Reservation. Students participate in selection of their clinical site in cooperation with their nursing instructor to assure appropriateness of location and best address learning objectives. Students are responsible for their travel to and from clinical, including their own vehicle, hotel cost, food etc. Clinical hours vary with the activity and objectives.

**Campus Resources**

The Nursing Department offices and classes are housed on the second floor of the John Peter Paul Building on the north end of the SKC campus. The RN/BSN Student can find nursing offices, classrooms, and media lab at this location.

Classrooms

RN/BSN courses are offered as hybrid campus /online or online classes. General education courses are available online or on campus. Hybrid courses require weekly online activities and **mandatory** participation in all day campus sessions scheduled one to three times a quarter. Participation in online activities will require approximately 6 to 20 hours of the student’s week.

Media Lab

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 able internet based computers. Student are able to check their email and search the web for research purposes. Non-internet based programs are not able to be downloaded on the Chrome books.

Two Mac Mini computers are loacted in the Nursing Testing Room. The Mac Minis have Microsoft Office to assist students with writing papers and other course assignments.

Mobile Computer Lab and Mac Minis are avaliable to students during regular working hours.

D'Arcy McNickle Library

Internet access to D’Arcy McNickle Library provides online availability to all nursing databases including CINAHL, PubMed, INFOTRAC, PSYCINFO, and the Cochrane Database. The library catalogue is also available online and enables the user to access holdings from the MSU consortium of libraries across the entire state of Montana. Documents and other holdings are available to the distance student through Inter-Library Loan. Inter-library loan requests may be submitted online at the D’Arcy McNickle website. Librarians are available for assistance by phone during regularly scheduled library hours of operation or by e-mail. Library personnel provide training to navigate online library services during RN/BSN program orientation.

Copy and Printer Machine

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. See Executive Assistant.

Telephone

A telephone is available for local calls in the nursing office. Please remember telephones in the instructor's offices are for staff use only.

Moodle

Moodle is the course management system (CMS) used by the Salish Kootenai College. It is an open source CMS that is used globally by more than 30,000 educational organizations to deliver online courses and to supplement traditional face-to-face courses. Moodle is an acronym for Modular Object-Oriented Dynamic Learning Environment. An Information Technology specialist, on staff with the Nursing Department, provides training to RN/BSN students during orientation activities.

**Program Costs**

An itemized list is available at the Nursing Department’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 Department. The policies are congruent with those outlined in the Salish Kootenai College Catalog and Salish Kootenai College Student Handbook. Copies of these documents are available in the Student Services Offices and on the SKC Nursing Website.**

**RN/BSN Student Activities/Committees**

The Nursing Faculty believes that student participation in Department decision-making enhances the educational program and facilitates the growth and development of colleagues as health care professionals. The Nursing Department committee meets twice a quarter and as needed. Ad hoc sub-committees may be formed as deemed necessary.

## Health Policies

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

# **Health Care Coverage**

RN-BSN students accepted into the nursing program must submit verification of health care coverage from a private insurer, employment group policy, Indian Health Service, Medicaid, or Medicare. Proof of health care coverage can be demonstrated by presenting a valid insurance identification card with the student’s name, or by submitting a letter of verification from the provider agency. An RN-BSN student not having proof of insurance **will not be allowed into the clinical setting.**

# **Health Record**

RN-BSN students must submit a completed Health Form (included in the admissions acceptance packet) immediately before entrance into RN/BSN courses. The health record includes a health history, health examination by a primary care provider, and evidence of current immunizations. The Health Form is reviewed by the Director and kept in a locked file separate from other records in the Nursing Office.

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

**Immunization Requirements:**

1. Each student is required to receive the full series of the Hep 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 to have a varicella titer drawn.
2. If the no evidence of immunity is determined, 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 annually. These two tests must be 7-21 days apart and are due by September 1st of every school year.
      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.
         1. The QuantiFERON Gold (QFT-G) blood test is NOT an acceptable substitution for a PPD test with the exception of the above criteria.

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 register for classes.

**Students may not officially enroll in the program of nursing until the Nursing Office**

**receives proof of health care coverage. Students pay the cost of health insurance coverage**

**directly to their health insurance provider.**

**Pregnancy**

Students who become pregnant during the program should notify the Nursing

Department as soon as this is known. Reasonable attempts will be made to build a flexible

clinical rotation around the anticipated date of birth. The pregnant student and appropriate

faculty will meet to develop guidelines delineating a plan to complete the course requirements

pre- and post-delivery.

**Illness or Injury**

In the event of an illness, injury, or other health concern, the policies of the college and clinical agency will be followed. When an illness or injury occurs in the clinical setting; students must immediately notify their faculty member. Injuries must be documented on agency forms. Students are referred to the emergency room, urgent care, or physician, as appropriate. An assessment by the faculty will determine if the student may return to the clinical setting and give safe nursing care. The Salish Kootenai College Nursing Department is not liable for any illness or injury incurred during clinical time.

Students may not attend clinical practicum or administer patient care if they are physically ill, injured, or impaired. The student must follow the guidelines for reporting absences to the clinical instructor.

**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 Tracie MacDonald, Dean of Students 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 client/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.

Students 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)

| **Essenrial 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 client 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 client record  -Direct assistive staff  -Interact effectively with clients, 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 clients  -Move efficiently enough to meet the needs of several clients 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 client catheters/tubes  -Capacity to walk and stand 8-12 hours, with minimal breaks |
| Physical | Prevent spread of infectious diseases | -Maintain immunization status  -Maintain standard/universal precautions to prevent contact with airborne and blood borne pathogens |

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

Substance abuse is a serious and growing problem among health care providers. More than 10% of nurses in Montana will have problems with substance abuse at some time during their career. 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). An RN-BSN Student who is taking prescriptions or other medication, which may interfere with safe care, should notify faculty so that alternative arrangements may be made.

**Substance Abuse Policy**

A process has been developed to address incidences of RN-BSN student impairment. This includes prevention, intervention, evaluation, treatment, and readmission. The process is confidential. Only the RN-BSN student, Nursing Director, appropriate faculty, and counseling staff are involved. Licensed individuals will be referred to the Montana Board of Nursing, Nurse Assistance Program (NAP).

Prevention

Chemical abuse content is integrated throughout the nursing curriculum. Contact the

Faculty for student and community services.

Self-identification

Students who self-identify as experiencing difficulty with substance abuse will be

given full support in following a treatment plan. Students may choose to meet

confidentially with the Director to discuss appropriate strategies.

Faculty/Staff/Peer Reasonable Suspicion / Event Identification

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

Students must immediately leave the classroom, clinical site, or college activity and meet with the instructor in a private place for assessment. If there is reasonable suspicion that alcohol or drugs are involved, the student must submit to a drug-screening test. The cost of the test is the student’s responsibility. If emergency medical intervention is warranted, the student will be escorted to the facility’s emergency department or to the closest emergency department available. Cost of transportation and treatment will be the student’s responsibility. **The student who refuses to undergo drug screening testing, or receive treatment, may be dismissed from the program of nursing for failure to follow policy guidelines**. A report will be made to the appropriate state regulatory/licensing board. If medical intervention is not warranted, the student will remain in a quiet private area or will be escorted home.

Evaluation and Treatment

Progressive Student Improvement Counseling 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 urine test results are positive, the student must undergo chemical dependency evaluation or withdraw 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 health care 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 urine monitoring 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 in the nursing program at SKC.
* Documentation from the counselor and primary health care provider that the student can provide safe and effective care for clients in the clinical setting.
* Cessation of signs and symptoms of impaired behavior.

The student may be dismissed from the program of nursing if they decline to be evaluated or refuse to follow, or cannot follow a treatment plan. The student who is dismissed or withdraws from the nursing program may apply for readmission after one year of documented rehabilitation. If readmission is grated, a Performance Improvement Plan (PIP) will be instituted and remain in effect from the time of readmission and as long as the student remains in the nursing program.

If, after readmission to the program of nursing, the student exhibits signs and/or symptoms of impaired behavior and continued use/abuse of a substance, and the use/abuse is documented, the student will be permanently dismissed from the nursing program and may not seek readmission.

**Student Records**

Salish Kootenai College Nursing Department 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 Department 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 Department does not release educational records without written consent from the student. Faculty may utilize student records for educational use only.

The SKC Nursing Department follows the College guidelines for Directory Information:

* Name
* Program of enrollment
* Period of enrollment
* Diplomas or Certificates awarded
* Dates of completion

A student may review their Nursing Department Students Records in the presence of a Nursing Department staff or faculty member. The file must be reviewed in the Nursing Department. 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 48 hours in advance**.

Students may add a response to a clinical evaluation or graded assignment. Students appealing a grade should follow the Grade Appeal or Grievance Policy specified in the SKC Student Handbook. If a student disagrees with the outcome of a grade appeal after following the Grievance Policy, the student may file a complaint with the US Department of Education concerning alleged failure of the Salish Kootenai College Nursing Department to comply with the requirements of FERPA. The name and address of the Office that administers FERPA is:

Family Policy Compliance Office

U.S. Department of Education

600 Independence Avenue, SW

Washington, DC 20202-4605

## CPR Certification

**Students may not register for nursing courses without documenting proof of current CPR certification through June of each year.** Students must be certified for BLS health care provider CPR of infants, children and adults through the American Heart Association or Red Cross classes. Written documentation must verify certification is valid through the months of October through June of the school year. Students are responsible for seeking appropriate certification classes. Should the Nursing Department offer a course prior to the beginning of the school year, a fee will be charged for training, testing, and certification.

According to the American Heart Association Instructor's Manual, students who do not pass the written test on the first attempt may retake the written portion of the test one time only. If a student fails the written portion of the course a second time, they will be required to retake the entire CPR course. If a student’s practical demonstration of CPR is unsuccessful, the instructor or designated representative will tutor the student to correct the specified deficit. **Students who do not correct the specified deficit, or who fail the CPR test twice** **will not progress in the nursing program.**

## Criminal Background Check

## Criminal Background Checks will be conducted using online Internet access. Students are responsible for this expense. 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 or assume patient care during that time period.

**Liability Insurance**

RN-BSN Students are legally and ethically accountable for the care provided to assigned clients. Financial liability may result if a client is physically or emotionally injured due to a nursing error or omission while under your care.. 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.

**Housing and Transportation**

Students are responsible for housing and transportation to and from clinical practicum activities. Clinical practicum may require one overnight per week. Many motels give nursing students discounted rates.

## 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 client. Credibility as a health care provider is influenced by appearance and behavior. While in the clinical setting, students represent the Salish Kootenai College, 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 health care agencies in Montana.

Clinical Dress

1. Professional dress suited for clinical site is required.
2. Jeans, shorts, exposed midriff, canvas tennis shoes, clogs or exposed feet are not acceptable in clinical settings while representing SKC.
3. A white lab jacket with the SKC nursing patch sewn to the upper left sleeve.
4. A name badge will be provided and must be worn during all clinical activities.

http://members.aol.com/poison64/nagifs/1chevronfire.gif

http://members.aol.com/poison64/nagifs/1chevronfire.gif

**ACADEMIC POLICIES**

http://members.aol.com/poison64/nagifs/1chevronfire.gif**Admission Policy**

RN-BSN Students interested in pursuing a baccalaureate of science in nursing degree through SKC must have a current unencumbered RN license and a cummulative GPA of 2.5.

All courses for the RN/BSN program must be completed with a grade of “C” or better. Applicants must submit required application documents as listed in the cuurent SKC Catalog, and submit official copies of all college transcripts. See the Salish Kootenai College Catalog for application deadlines. The RN/BSN Admissions committee will review application documents and supporting material.

RN-BSN Students may apply for either full-time or part-time status. All course work must be completed within five years of starting the RN/BSN program for degree conferral. RN-BSN Students are assigned a faculty advisor to assist in developing a curriculum plan.

RN-BSN Students will receive written notification of acceptance or non-acceptance into the program. Upon notice of acceptance into the RN/BSN program students will be required to submit the following additional documentation:

• A signed Admission Acceptance Disclaimer

• A completed Health Form

• Documentation of health care coverage

• Documentation of current CPR certification

* Current unencumbered RN license

• A current 2x2 photo or a photocopy of the student’s state driver’s license

RN-BSN Students must also attend a required orientation prior to the beginning of classes.

**Transfer Policy**

Students who wish to transfer prerequisites completed at other colleges or universities must submit official copies of transcripts from those institutions to the Nursing Department with their application packets. Courses for transfer consideration will be reviewed by the registrar’s office for final approval. Transfer students who wish to transfer nursing coursework must follow the transfer requirements of SKC and submit a letter of recommendation from the Director and/or member of the nursing faculty of the previously attended school to the SKC Nursing Department along with application materials. Students must provide course descriptions and syllabi of completed nursing courses.

**Progression and Graduation in the RN/BSN Program**

To continue progression through the RN/BSN program and qualify for graduation, the student must maintain a minimum grade of "C" or better in all required nursing courses and co-requisite general education courses. Students who receive a grade of "D, F, or W" in any course cannot progress in the RN/BSN program until they have repeated the course and received a grade of "C" or better. A course may only be repeated one time.

Core 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.

### 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.

If the student would like to repeat the course and continue in the nursing program, the student must submit a letter to the Director of Nursing within 90 days from the date of notification of failure. The letter must include:

* The student’s personal reflection detailing why the student did not complete the course of study successfully
* An in depth plan outlining personal and study related changes the student has made to assure success if readmission is granted
* The projected date of re-entry into the program if readmission is granted

**Graduation**

The student is responsible to complete an application for graduation and submit it to the Registrar’s Office in the month of March prior to graduation. Students should work closely with their advisor to ensure all requirements are met.

**Standards for Academic Quality and Professional Integrity**

Salish Kootenai College nursing faculty value high standards of academic quality and professional integrity. RN-BSN Students are expected to grow academically and professionally throughout the RN/BSN curriculum. The SKC Code of Academic Honor and the Campus Conduct Code, contained in the SKC Student Handbook, outline policies related to intellectual standards including plagiarism and dishonesty. RN-BSN Students are expected to be familiar with and adhere to these policies.

### 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 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 Problem Solving Conference (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 may 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 Performance Improvement Plan will be instituted. Documentation will be initiated by the student’s instructor on the appropriate Performance Improvement Plan (PIP) form and must include:

* Date of the Performance Improvement Plan
* Dates of previous PSCs 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

RN-BSN Students may be removed from the classroom, clinical setting, or Nursing Department activities for unsatisfactory/unsafe conduct. Clinical agencies may 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 recorded 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 can 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.
* Failure to improve performance of “unsatisfactory’ on clinical evaluations after counseling.
* Excessive absences or tardiness.
* Student performance/or negligence which may cause physical or emotional jeopardy to a client or peer.
* Failure to report a client-care error immediately to the clinical instructor and appropriate clinical nursing staff.
* Fraudulent or untruthful documentation in a medical record.
* Unprofessional conduct: ex: violation of confidentiality, disrespectful behavior towards clients, peers, staff, or faculty.
* 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 online discussions, classroom, and clinical settings.

### Dismiss from the Nursing Program

Dismissal from the nursing program will occur if:

* Student performance/behavior does not improve after receiving two Performance Improvement Plans (PIP) in the same or different quarters for the same performance/behavior
* Student receives two PIPs involving different performance/behaviors in different quarters that evidence failure to grow professionally and academically
* Student behavior that is 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 can 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 clients, 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 Montana statues or college policy
* Misuse of chemicals, alcohol, or drugs
* Possession of a deadly 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, consult with the academic advisor
3. If resolution is not achieved, consult with the Director of Nursing
4. If resolution is not achieved, consult with the 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 grievance procedure if the objection cannot be resolved informally.

### Attendance Policies

Each quarter may have required for on-campus attendance to fulfill credit requirements for the hybrid courses. See course calendars for specific required days.

Weekly online expectations are explained in course syllabi and other course documents.

### 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. In the event the College remains open during inclement weather, the clinical instructor may opt to cancel clinical to distant sites by initiating a ‘telephone tree’. Students must use good judgment regarding travel in winter weather.

## Academic Progress/Grading

A letter grade is awarded for each course based on the criteria found in each syllabus.

If a grade less than “C” or “W” is issued in a course of study, the course may be repeated one time only. Since nursing courses are offered only once a year, this will extend the length of time required to complete the course of study in 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 = 64-74%

F = 63% or below

### 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 personal copies of all written assignments turned in to the instructor for grading. All assignments must be completed to complete the course.

# Late Assignments

Students are expected to hand in 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 contact the instructor prior to the due date to discuss the reason the work will not be submitted on time.

Without prior approval from the instructor, all late written assignments will receive a 5% reduction 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 grad of “0” will be issued but the assignment must still be turned in for a successful completion of the course. Late weekly discussion work will receive a 10% reduction for each day (24 hour period) the discussion is late.

**Progression Policy:**

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:

Clinical Performance: Students must maintain satisfactory progress and performance during their clinical 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 will receive a “D” for the course grade and will not progress.

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 Department 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 remedied. An application for Readmission is due by June 15 for readmission to the following academic year. A student may be readmitted one (1) time only.

### Clinical Evaluation

See core nursing syllabi for clinical evaluation policies and details.

### Clinical Practicum Policies

1. During the assigned clinical activity, students must inform the clinical preceptor and the supervising nursing faculty of clinical plans, hours, and activities.

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 preceptor immediately, (b) file a report with the clinical agency, (c) and the Nursing faculty.

4. Visiting clients outside of clinical hours is not appropriate.

5. Due to legal reasons, students may not accompany clients 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 clients by is done only with written permission of the clinical agency and the client.

8. Personal phone calls and/or visits with members of the student's family or friends during clinica hours is not allowed. Cells phones must be off during clinical hours and according to facilility policies.

9. Students must be familiar with and adhere to the policies of the clinical agencies in order to complete clinical hours at that facility.

**Guidelines for Student Conduct**

RN-BSN Students are professionals that follow the **code of ethics** established by the American Nurses Association (ANA Website: www.ana.org). The Montana Nurse Practice Act, the statute regulating the practice of nursing in Montana, defines the rules governing the professional conduct of nurses (Montana SBON Website: http://bsd.dli.mt.gov/license/bsd\_boards/nur\_board/board\_page.asp). Students are expected to uphold these codes as a member of the SKC learning community. Refer to the SKC Student Handbook for college student conduct guidelines.

**RN/BSN Student Orientation**

The RN/BSN program orientation was developed to help offset the initial bewilderment students often feel at the beginning of the academic year. Students are required to attend the orientation sessions. Student Engagement Activities are a series of discussions and workshops designed to help students with the transition. Various activities allow students to meet and interact with faculty, clarify program expectations, and begin to network with peers before the start of classes.

**Advisement / Advisors**

Each student is assigned a faculty advisor at the beginning of the first quarter of the RN/BSN program. The student and advisor meet at least once during each quarter to plan enrollment in courses for the next quarter. The advisor helps students through the process of course selection. Course approval by the advisor is mandatory to ensure the completion of all curriculum requirements for graduation in a timely manner.

**Students may pre-register/register for Fall, Winter and Spring quarters only after consultation with their 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 other college or community support service.

The RN/BSN Faculty Advisor is Kristine Hilton. Contact her at [kristine\_hilton@skc.edu](mailto:kristine_hilton@skc.edu) and 275-4910.

**Preceptors**

Students are assigned preceptors in the clinical setting. Preceptors work for the clinical agency and supervise student work. The relationship between student and preceptor is by nature a very special one. Preceptors are the link to professional nursing practice, mentors in an environment, which can be very stressful, and coaches when it comes time to implementing concepts learned.

**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

http://members.aol.com/poison64/nagifs/1chevronfire.gif

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**APPENDICES**

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**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 Department 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 Department 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

**APPENDIX D**

Salish Kootenai College Nursing Department

**CONFIDENTIALITY AGREEMENT**

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

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

1. All information about a client, written or verbal, belongs to the client. 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 client 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 client’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 CollegeNursing Department

**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 client/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 client 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 Department  
  
**Consent Form**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the undersigned, hereby authorize the Salish Kootenai College, Nursing Department 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 Department

Authorization to Share Information

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby give consent to Salish Kootenai College, Nursing Department, 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 Department

**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.

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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 Department

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 RN to Bachelors of Science 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