



*Department of Health Sciences*

*Associate of Applied Science  
in Nursing*

# *Student Handbook*



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## Mission

The Associate of Applied Science in Nursing program provides a foundation for excellence in nursing practice. The program prepares the graduate as a generalist to provide competent nursing care in a variety of health care settings. Graduates will recognize the value of lifelong learning and community service as characteristics of professional development. Articulation is valued by the faculty in an effort to facilitate nursing career mobility and graduates are encouraged with faculty support to return to higher educational programs to complete undergraduate and graduate nursing programs.

## Philosophy

The philosophy of the nursing program is consistent with the general purposes of liberal education at Mesa State College and with professional nursing standards and guidelines. The program integrates general education and nursing knowledge to formulate a basis for nursing practice; facilitates the development of value-based behaviors; prepares graduates to utilize data related to biological, psychological, socio-spiritual, cultural and developmental needs; and promote, maintain, and restore health.

This program prepares a proficient practitioner who values the lifelong process of self-evaluation, self-acceptance, and learning that supports the continual acquisition of requisite skills. Graduates of the program are prepared to continue in the role of a proficient nurse who functions in a caring manner within increasingly complex health care settings.

Each **learner** possesses unique experiences, interests, values, attitudes, motivations, learning styles, and capabilities that must be recognized and cultivated. Students have a responsibility to actively participate in the educational process and are encouraged to join faculty in planning for this approach. **Faculty** utilize alternative and non-traditional teaching-learning strategies, in accordance with academic requirements of the College, recognized standards of nursing practice, and societal expectations. Learning is achieved through progression from simple concepts to complex theories in an environment that is conducive to a higher level of understanding. The faculty further believes in quality improvement in nursing education, which is apparent in continuous outcome's based assessment of the program's mission and goals.

The faculty identifies patients as individuals, families, groups, or communities, who continuously interrelate within their environment. Patients, as recipients of knowledgeable nursing care, are complex with physiological, psychological, social, spiritual, and cultural components. Patients function in independent, interdependent, or dependent roles, and may seek to receive nursing interventions related to health promotion and maintenance, as well as health restoration and end-of-life care.

**Health** is viewed as patterns of interrelationships with the environment. One of these patterns may be disease. Health and illness are not polar opposites, but are part of a rhythmic process, and part of the whole expression of life. Within this framework, the delivery of resources is an interdisciplinary collaborative effort among health care professionals.

**Environment**, as defined by each individual, family, group, community, or global population, is the total context in which people exist. Environments encompass one's physical surroundings, social values, and personal beliefs that influence people's perceptions and interactions in regard to health.

Environments change in response to individuality; biological factors; societal values; cultural diversity; technological advances; health care legislation; and consumer expectations.

The **Associate Degree Nurse's** ascribed roles are derived from the science and art that is inherent in a practice discipline. Professionalism is a key component of nursing and requires the demonstration of accountability for one's own behaviors while adhering to the accepted standards of practice.

In utilizing the nursing process to meet human needs, the nurse enacts the following roles as defined by NLN's *Educational Outcomes of Associate Degree Nursing Programs: Roles and Competencies* (1990).

1. **Provider of Care:** practicing competently and safely in a variety of health care settings with patients of diverse socio-cultural identities across the life span. It includes cognitive, psychomotor and affective abilities which are based in knowledge of health; acute and chronic health deviations; nutrition; pharmacology; communication; human development; teaching-learning principles; current technology; humanities; and biological, social, and behavioral sciences.
2. **Manager of Care:** planning and coordinating care for an individual or group of patients with health care needs. It includes the knowledge and skills necessary to prioritize care; to delegate in a professional manner; and guide others to efficiently use time and resources; and recognize when assistance is needed. These actions require an understanding of the principles of patient-care management, communication and delegation, legal parameters of nursing practice, and roles and responsibilities of the health care team.
3. **Member within the Discipline of Nursing:** actively promoting the advancement of the profession. It includes understanding ethical and legal standards for practice, the importance of evidence-based research; rules and regulations governing the practice of nursing; the value of promoting professional organizations; understanding the impact of political, economic, and societal forces that affect one's practice; and using effective means of communication within the work setting.

Revised 9/4/08

## Program Outcomes

The outcomes are derived from the program mission, philosophy, and current professional guidelines for nurse education programs. Upon completion of the program, students will have demonstrated the ability to apply the following skills while delivering care:

1. **Professional Behavior:** Behaviors that are characterized by a commitment to the profession of nursing.
  - a. The graduate adheres to standards of professional practice, is accountable for her/his own actions and behaviors, and practices nursing within legal, ethical, and regulatory frameworks.
  - b. Professional behaviors also include a concern for others, as demonstrated by caring, valuing the profession of nursing, and participating in ongoing professional development (NLN, 2000).
2. **Communication:** An interactive process through which there is an exchange of information verbally, non-verbally, and in writing while using current information technology.
  - a. Included in this process are the nurse, patient, significant others, diverse members of the healthcare team, and community agencies.
  - b. Effective communication demonstrates caring, compassion, cultural awareness, is directed toward promoting positive outcomes while maintaining a trusting relationship.
  - c. Therapeutic communication is an interactive verbal and non-verbal process between the nurse and patient that facilitates coping with change, developing positive interpersonal relationships, and integrating new knowledge and skills (NLN, 2000).
3. **Assessment:** The collection, analysis, and synthesis of relevant data for the purpose of evaluating the patient's health status.
  - a. Comprehensive assessment provides an individualized evaluation of the patient, including physical, developmental, emotional, psychosocial, cultural, spiritual, and functional status dimensions.
  - b. Assessment involves the orderly collection of information that establishes the foundation for individualized competent nursing care, and includes: identification of available resources to meet patient needs; review of baseline data for future comparisons; and ongoing assessment as required to meet the patient's changing needs (NLN, 2000).
4. **Clinical Decision Making:** Encompasses the performance of accurate assessments, the use of multiple methods to access information, and the analysis and integration of this knowledge to formulate clinical judgments.
  - a. Effective clinical decision-making results in the utilization of appropriate nursing interventions, providing accurate and safe care; and the promotion of the patient and significant others toward positive outcomes.
  - b. Evidence based practice and the use of critical thinking provide the foundation for appropriate clinical decision making (NLN, 2000).
5. **Caring Interventions:** Nursing behaviors and actions that assist patients in meeting their needs.
  - a. These interventions are based on knowledge and understanding of the natural and behavioral sciences, nursing theory, nursing research, and past nursing experiences.

- b. Caring is the "being with" and "doing for" that facilitate patients in achieving desired results.
  - c. Caring behaviors are nurturing, protective, compassionate, and individualized.
  - d. Caring creates an environment of hope and trust, where patient choices related to cultural values, beliefs, and lifestyle are respected (NLN, 2000).
6. **Teaching and Learning:** Processes that are used to promote and maintain health and reduce risks that are implemented in collaboration with the patient, significant others, and various members of the healthcare team.
- a. Teaching encompasses the provision of health education to promote and facilitate informed decision-making, achieve positive outcomes, and support self-care activities.
  - b. Integral components of the teaching process include assessing learning style and readiness to learn, prior knowledge, teaching style, evaluating responses to the teaching, and modifying teaching methods based on identified patient responses.
  - c. Learning involves the assimilation of information to expand one's knowledge base resulting in behavioral changes (NLN, 2000).
7. **Collaboration:** The shared planning, decision making, problem solving, goal setting, and assumption of responsibilities by those who work together cooperatively.
- a. Collaboration occurs with open professional communication among the patient, significant others, peers, interdisciplinary personnel, and community agencies.
  - b. Collaboration requires consideration of patient needs, priorities and preferences, available resources and services, shared accountability, and mutual respect
  - c. The nurse functions as an advocate, liaison, coordinator, and colleague while team member's work collaboratively to meet patient needs and achieve positive outcomes.
  - d. The nurse participates within a team to provide individualized care across healthcare settings (NLN, 2000).
8. **Managing Care:** The efficient, effective use of human, physical, financial, and technological resources to meet patient needs and support organizational outcomes.
- a. Effective management is accomplished through the processes of planning, organizing, directing, and controlling resources.
  - b. The nurse, in collaboration with the healthcare team, uses these processes to assist the patient to move toward positive outcomes in a cost efficient manner, to transition within and across healthcare settings, and to access resources (NLN, 2000).

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## **Student Nurses Scope of Nursing Practice**

Student nurses will be held liable for their own acts of negligence committed in the course of clinical experiences. If they are performing duties that are within the scope of professional nursing, they will be held to the same standard of skill and competence as Licensed Practical nurses. A lower standard of care will not be applied to the actions of nursing students.

Rhodes, Ann M. and Miller, Robert D. *Nursing and the Law*, 4<sup>th</sup> Edition, An Aspen Publication, 1984, page 163.

## Scope of Practice

**Definition of Nursing Delegation:** Delegation of nursing function is per occurrence and is limited to patients that are stable and where the outcome of the delegated task is predictable. It is the responsibility of the delegator to verify adequate skills of the delegatee. Delegation of care is only allowed within the RN scope of practice.

(Accessed from website <http://www.dora.state.co.us/nursing/scope/scope.htm#lpn> on 3/29/2007.)

REGISTERED NURSE	PRACTICAL NURSING	NURSING ASSISTANT
<b><u>ASSESSMENT</u></b>		
<p><b>Independent, dependent and interdependent functions</b></p> <p>Assess and evaluate health status of individuals:</p> <p>Collect objective and subjective data</p> <p>Analyze, report and record data</p> <p>Validate, refine and modify data</p>	<p><b>At the direction of RN, APN, licensed physician, dentist, or podiatrist</b></p> <p>Contribute to assessment of health status:</p> <p>Collect, report, and record objective/subjective data</p> <p>Observe conditions or change in condition</p> <p>Collect data and report signs and symptoms of deviation from normal health status</p>	<p><b>At the direction and under the supervision of RN or PN</b></p> <p>Collect, report and record basic objective and subjective data</p> <p>Observe and report change in signs and symptoms or deviations from normal health status</p>
<b><u>IDENTIFICATION OF HEALTH CARE PROBLEMS</u></b>		
<p>Utilize all data to identify and document health care problems</p>	<p>Assist in formulating lists of needs/problems</p>	<p>Provide basic patient information which assists the licensed nurse in making lists of problems and needs</p>
<b><u>ESTABLISHES GOALS</u></b>		
<p>Collaborate with patient, family, significant others and health team to:</p> <p>Identify present and predicted needs</p> <p>Establish short and long-term goals</p> <p>Set realistic and measurable goals</p>	<p>Contribute to setting realistic short and long-term goals</p>	<p>Provide basic information regarding the patient which assists the licensed nurse in setting goals</p>

<b><u>PLANNING A STRATEGY OF CARE</u></b>		
<p>Develop a written care plan to include:</p> <p>Cultural, ethical, spiritual aspects and decisions regarding treatment</p> <p>Measures to support human functions and maintain hygiene, comfort and safe environment</p> <p>Educational and counseling needs to promote, maintain, restore health.</p> <p>Utilize community resources for continued care Prioritize needs</p> <p>Review and revise care plan as necessary</p>	<p>Participate in development of written care plan</p> <p>Recognize, understand, respect cultural, spiritual, religious backgrounds, beliefs, needs/rights to choice</p> <p>Assist in identification of measures to support human function and maintain hygiene and comfort</p> <p>Maintain environment conducive to well-being</p> <p>Assist in assuring access to community resources</p> <p>Participate in identification of priorities</p> <p>Participate in reviewing and revising plan of care</p>	<p>Contribute to the development and revision of the plan of care by providing basic information regarding the patient which assists the licensed nurse in the development and revision of the plan of care</p>

<b><u>IMPLEMENTING STRATEGY OF CARE</u></b>		
<p>Consider complexity of care, educational preparation and facility policies when delegating* care</p> <p>Remains responsible for all delegated* acts</p> <p>Delegate* /assist staff in implementing care</p> <p>Delegate*/assign duties as specified in rules and regulations</p> <p>Initiate, provide, assist with delegated* care</p> <p>Verify medical orders are accurate, properly authorized; no documented contraindications</p> <p>Administer prescribed medications and IV therapy</p> <p>Develop and initiate plan to provide patient education and counseling</p>	<p>Carry out functions taught in approved PN program</p> <p>Assist patient with ADLs; encourage self-care Provide direct care, comfort measures, emotional support to patients whose condition is stable or predictable</p> <p>Under Direct Supervision: Provide care, interventions; and communicate response for patients whose condition is complex or unstable)</p> <p>Assist with rehabilitation (e.g., ROM, alignment, body mechanics)</p> <p>Provide environment conducive to safety and health</p> <p>Administer prescribed treatment and medication, except by intravenous route (IV certified PN's - see</p>	<p>Carry out functions taught in approved nursing assistant programs</p> <p>Complete basic duties assigned by a licensed nurse</p> <p>Provide total personal care or assist patient with ADLs; encourage self-care</p> <p>Provide physical care, comfort measures, emotional support to patients whose conditions are stable or predictable</p> <p>Assist with basic restorative nursing, bladder training</p> <p>Provide a safe and healthy environment</p> <p>Repeat patient teaching instructions as given by the RN</p>

<p>Document interventions and responses</p> <p>Communicate interventions and responses</p> <p>Make judgments, decisions and modify care as needed</p>	<p><b>Advanced Educational Preparation</b>                      Perform selected IV therapy functions as delegated* and supervised by RN</p> <p>Document prescribed interventions and responses</p> <p>Assist and provide reinforcement with patient teaching</p>	<p>Document and communicate completion of assigned duties and patient responses</p>
<p><b><u>MAINTAINING SAFE AND EFFECTIVE CARE</u></b></p>		
<p>Evaluate environment and initiate plan to provide a safe environment</p> <p>Institute standard procedures to stabilize patient's condition or prevent serious complications in emergency situations</p> <p>Act as patient advocate</p>	<p>Maintain safe environment</p> <p>Consult/seek guidance from RN and others as necessary</p> <p>Initiate standard emergency procedures until RN or physician is available</p> <p>Apply principles of asepsis and infection control</p> <p>Participate in development, revision and implementation of policies and procedures</p>	<p>Maintain safe environment</p> <p>Seek guidance from a licensed nurse as necessary</p> <p>Perform CPR when necessary</p> <p>Follow principles of asepsis and infection control</p> <p>Share pertinent information with a licensed nurse</p>
<p><b><u>EVALUATING RESPONSES TO INTERVENTIONS</u></b></p>		
<p>Utilize identified goals to:</p> <p>Determine data needed to evaluate outcome of care</p> <p>Document and communicate evaluation data</p> <p>Evaluate effectiveness of common treatments/tasks, document and communicate outcomes of care given</p> <p>Use evaluation data to reassess patient status, revise care plan to reflect needed changes in nursing intervention.</p>	<p>Evaluate effectiveness of common treatments/tasks, document and communicate outcomes of care given</p> <p>Assist with collection of evaluation data</p> <p>Contribute to modification of plan of care</p>	<p>Document and communicate patient responses</p> <p>Assist with collection of data</p>

<b><u>MANAGING PRACTICE OF NURSING</u></b>		
<p>Provide direct care; assign and/or delegate* functions according to education and demonstrated competence</p> <p>Supervise staff to whom nursing functions are assigned! delegated*</p> <p>Provide leadership in formulating, interpreting, implementing and evaluating nursing service objectives and policies</p> <p>Direct and evaluate quality of nursing service</p>	<p>Assign duties to ancillary workers as specified in rules and regulations</p> <p>Assist ancillary workers to carry out assigned care</p> <p>Supervise ancillary workers to whom care is assigned</p>	N/A
<b><u>COLLABORATION WITH OTHER HEALTH PROFESSIONALS</u></b>		
<p>Communicate significant changes in patient status</p> <p>Consult as necessary to meet patient needs</p>	<p>Share pertinent information</p>	<p>Share pertinent information</p>
<b><u>ADVANCED EDUCATIONAL PREPARATION</u></b>		
<p>Document completion of comprehensive program including supervised clinical; <b>OR</b> has previously acquired the additional knowledge/judgment/skill and can provide evidence thereof to employer</p> <p>Maintain evidence (both RN and employer) of original documentation and demonstration of acquired knowledge/judgment/skill</p> <p>Verify additional duties are within RN scope of practice</p> <p>Follow written policies and procedures approved by medical staff, nursing and agency administration</p>	<p>* * Complete Board approved IV certification course including supervised clinical; OR document completion of such from another state</p> <p>Maintains evidence (both PN and employer) of original documentation and demonstration of IV knowledge/judgment/skill</p> <p>Follows written IV policies and procedures approved by medical staff, nursing and agency administration</p> <p><b>** Advanced Educational Preparation for PN's in Colorado is limited to IV certification.</b></p>	N/A

## NSNA Student Bill of Rights

**The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).**

1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
3. Each institution has a duty to develop policies and procedures which provide and safeguard the students' freedom to learn.
4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.
5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.
6. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
7. Information about student views, beliefs, political ideation, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.
8. The student should have the right to have a responsible voice in the determination of his/her curriculum.
9. Institutions should have a carefully considered policy as to the information which should be a part of a student's permanent educational record and as to the conditions of this disclosure.
10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.
11. Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.
12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership or representation on faculty committees.

13. The institution has an obligation to clarify those standards of behavior which it considers essential to its educational mission, its community life, or its objectives and philosophy.
14. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.
15. As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.
16. Students have the right to belong or refuse to belong to any organization of their choice.
17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.
18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.
19. Dress code, if present in school, should be established with student input in conjunction with the school director and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.
20. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.
21. Students should have a clear mechanism for input into the evaluation of nursing faculty.

Rev. 7/08

## ***National Student Nurses Association, Inc. Code of Academic and Clinical Conduct***

### **PREAMBLE**

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments.

The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

### **A CODE FOR NURSING STUDENTS**

As students are involved in the clinical and academic environments we believe that ethical principles are a necessary guide to professional development. Therefore within these environments we:

1. Advocate for the rights of all clients.
2. Maintain client confidentiality.
3. Take appropriate action to ensure the safety of clients, self and others.
4. Provide care for the client in a timely, compassionate and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff and peers to mentor nursing students.
12. Refrain from performing any technique or procedure for which the student has not been adequately trained.
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the clients, self or others.
14. Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.
- 19.

***Adopted by the NSNA House of Delegates, Nashville, TN on Aprils 6, 2001***

## Policies

### ***Academic Advising***

#### I. Purposes:

- A. To explain the roles of the student and the advisor in the academic advising relationship.
- B. To insure that students make satisfactory progress toward a degree.
- C. To set standards for satisfactory progress in the nursing program.

#### II. Policy:

##### A. Academic Advising

1. Students are responsible for contacting their assigned advisor for initial advising prior to each semester's registration and at any other time that the student and advisor may deem necessary.
2. Students are strongly encouraged to have their advisor review their course load, but the advisor's signature is not necessary for the student to proceed with the registration process.
3. The help of a faculty advisor does not relieve the student of the fundamental responsibility for establishing and maintaining his/her own academic program. Students are responsible for full knowledge of the provisions of their program.
4. For courses requiring "permission of the instructor" as an alternate to a stated prerequisite course, the students must receive such permission before registering for class. Instructors reserve the right to withdraw any student who does *not* have permission.
5. Mesa State College advisors maintain a minimum of 5 scheduled office hours per week, which are scheduled for the purpose of being available to students.
6. Students must contact course instructors to have appropriate forms signed when adding or dropping classes or withdrawing from the program.
7. The advisor will refer the student to the college registrar regarding evaluation of courses for credit and other appropriate matters.
8. Students are responsible for picking up and completing *Intent to Graduate* forms from the Registrar's Office, and for making an appointment with their advisor the semester prior to graduation to complete the program sheet and petition to graduate.
9. Students are responsible for making sure all copies of transcripts from other colleges are current and on file in the nursing department. Student must provide a transcript evaluation from Registrar's Office.
10. Students must provide current Mesa State College transcript obtained from the Registrar's Office.

## B. Personal Counseling

1. Students may discuss personal problems with an advisor in a confidential, accepting atmosphere.
2. Advisors will refer students for appropriate counseling when the problems are beyond the problem solving abilities of the advisor and advisee.
3. The Dean of Student Service is available to provide counseling and referral services to students seeking personal, career or substance abuse counseling and resources.

Date: 01/05

## ***Academic Dishonesty***

1. Definition: Intentional act of fraud, in which an individual claims credit for work belonging to another individual.
2. Purpose: To identify policy related to cheating, plagiarism, or knowingly furnishing false information.
3. General Information:

Examples of cheating include, but are not limited to:

- A. Looking at another individual's work with the intent to use it on tests, assignments, or presentations.
- B. Bringing notes to a testing situation on paper or electronic device, not allowed by the instructor.
- C. Sharing or posting course work/assignments for clinical on the internet other than organized group study guides for tests or authorized by the instructor.
- D. Assisting others in cheating or plagiarizing.

Examples of plagiarism include, but are not limited to:

- A. Submitting of another individual's work as one's own whether it was obtained from print or electronic source.
- B. Unauthorized collaboration.
- C. Forging an academic document.
- D. Taking someone's ideas during class discussion without citing the individual and circumstances of the lecture.
- E. Paraphrasing without citing the source.
- F. Submitting in whole or substantial portions written or oral academic work without appropriate citation.

4. Policy:

- A. Upon entrance into the program, all students will be required to sign a statement regarding academic dishonesty. This is in effect for the entire program of study.
- B. The signed form should be turned in to the administrative assistant to be kept in the student's file.
- C. Students on flexible schedules will complete the form in the first nursing course of the academic program.
- D. Students should also read the Mesa State College Student Handbook sections on student conduct: Cheating, Plagiarism, Academic Integrity, and Discipline as these apply to all Mesa State College Students.
- E. Information of any kind used for any department course/clinical remains the property of the department.

5. Group Work:

- A. While the student might choose to participate in a study group, each student is responsible for his/her own assignment. Collaboration, rather than division of labor, is expected.
- B. Group presentations require the same standards as study group.

6. Sanctions and Disciplinary Action for Academic Dishonesty:

Faculty members reserve the right to enforce sanctions for academic dishonesty. Such sanctions include, but are not limited to:

- A. Lowering grades or complete failure for assignments, tests, or the entire course.
- B. Withdrawing student from course at any time at the discretion of the nursing department.
- C. Students identified as violating academic honesty will be subject to disciplinary action up to and including expulsion from the program.
- D. Students who observe academic dishonesty can file a written report and turn it into the head of the department.
- E. Students may appeal sanctions for academic dishonesty reports made against them. Students should first appeal against the person writing the sanctions against them. If the student is not pleased with the result of the appeal, the student may then appeal to the Dean of Students.

Date: 01/07

### ***Bringing Children to Class***

- I. Purpose: To ensure a conducive learning environment for all students.
- II. General Information
  - A. Children should not be brought to class. It is unreasonable to expect children to maintain decorum for lengthy class periods. Material presented may not always be appropriate for children.
  - B. In an emergency situation, and only with course instructor's permission, a child may be brought to class. If the child's behavior becomes disrupting or distracting, the child's parent must immediately remove the child from the classroom.

Date: 01/05

### ***Cardio-Pulmonary Resuscitation (CPR) Certification***

- I. Purpose: To assure that the student maintains certification.
- II. General Information:
  - A. Students must have a current CPR card upon entry into the nursing program.
  - B. Students must maintain a valid CPR certification throughout the remainder of the program.
- III. Procedure:
  - A. The student must attend a basic CPR course approved by the American Heart Association, as follows:
    - BCLS-C from the American Heart Association
  - B. The student must present a valid CPR certification card to the program coordinator at the beginning of each academic year.

Date: 01/05

### ***Class/Clinical Attendance***

- I. Purpose: To outline student responsibilities regarding attendance in class and in clinical sessions.
- II. Class Attendance:
  - A. Attendance and participation in class is expected. Students are responsible for preparing for class by completing reading and class assignments. Students will receive 10 points for each class attended, for a total of 150 points over the semester. Students who arrive late or leave early will have 5 points deducted for that day of class. Students who are absent will receive a 0 for the day. It is the student's responsibility to contact the instructor for any information that has been missed.
- III. Clinical Attendance:
  - A. Clinical attendance on time is required. Students are responsible for preparation for and caring for selected patients. The amount of time needed to prepare and attain competency

will vary. Practice outside of scheduled clinical time may be needed. Please talk with the nursing faculty if something is needed.

- B. All assignments will be submitted on the due date.
- C. Clinical hours are required and must be made up; this includes ALL clinical settings and lab times. Therefore, students must take all measures to avoid clinical absence. In the rare event that clinical absence is necessary it is the student's responsibility to coordinate with the instructor all make up hours and clinical paperwork **with in 48 hours**. If there is no contact with the instructor with in the 48 hours the student will not be able to make up the hours or paperwork and will receive an unexcused absence. *See Clinical Make Up form in appendices.*
- D. Clinical agencies and faculty members must be notified one hour prior to the clinical experience if this experience will be missed.
- E. Five percentage points will be subtracted off the final clinical grade for each of the following:
  - 1. Tardy more than twice
  - 2. If a student is unprepared for a clinical assignment (*e.g.*, inappropriate dress, incomplete preparation) she/he will be sent home.
  - 3. A no-call/no-show in clinical.
  - 4. An unexcused absence.

Date: 01/08

### ***Collective Bargaining Activities***

- I. Purpose: To clarify the role of students in collective bargaining activities in clinical agencies.
- II. Policy:
  - A. When functioning in the student role, individuals will maintain a position of neutrality in relation to collective bargaining activities at agencies used for clinical experiences.
  - B. In the event of a work stoppage, the faculty will evaluate the appropriateness of the site for the scheduled learning experience.
  - C. If it is determined that the facility would not provide the desired learning experience, alternate methods of meeting clinical objectives will be utilized.
  - D. If a faculty member or student is assigned to an institution where they are also an employee, as an independent professional, he/she will assume accountability for action regarding strike notice activities during non-working or non-clinical assignment hours.

Date: 01/05

### ***Colorado Nursing Articulation Model***

- I. Purpose: To provide guidelines for advanced placement of Licensed Practical Nurses (LPN) into the Associate of Applied Sciences nursing program.
- II. General Information:

**A. Registered Nurses will follow the Colorado Nursing Articulation Model.**

B. For progression to the Nursing Associate Degree:

- A. Must meet program admission requirements.
- B. Must be a graduate of a practical/vocational nursing program, any state.
- C. Practical/vocational nurses must hold a Colorado license in good standing.
- D. May transfer in or be awarded credit equivalent to approximately one year of nursing courses. Credit to be held in escrow until equivalent of one full time semester of nursing course work has been completed.
- E. Testing may or may not be required.
- F. No more than 35 additional semester hours of nursing credits may be required for those receiving credit for one year of nursing courses.
- G. No more than 78 total semester credit hours may be required for the associate degree.

VARIABLES	0-3 YEARS AFTER GRADUATION	3+ TO 10 YEARS AFTER GRADUATION	10+ YEARS AFTER GRADUATION
Nursing Credits:	No testing required. No work experience required.	No testing required if during last 3 years have had: 1. nursing work experience of 1000 hours, or 2. a CCNE-approved* refresher course, or 3. an experience approved by the accepting college.	Testing required. In addition, during last 3 years have had: 1. Nursing work experience of 1,000 hours, or 2. a CCNE-approved* refresher course, or 3. an experience approved by the accepting college.
Non-Nursing Credits: *Colorado Council on Nursing Education	May be transferred from colleges (subject to individual college policies); vocational-technical credits are not transferable.	May be transferred from colleges (subject to individual college policies); vocational-technical credits are not transferable.	May be transferred from colleges (subject to individual college policies); vocational-technical credits are not transferable.

Date: 01/05

## **Confidentiality**

- I. Purpose: To provide guidelines about Mesa State College's Department of Health Sciences position on Confidentiality related to patient care issues.
- II. General Information:
  - A. At the beginning of each level students will view the video, "Confidentiality: Ethical and Legal Considerations" by Medcom/Trainex, found in the ATL.
  - B. The student will receive printed information about Confidentiality in NURS 206 (see after this policy in this handbook), and will be required to sign a form stating agreement to comply with this policy.
  - C. The form must be signed and a copy returned to the Department to be placed in student's file before student will be allowed to attend clinical.

Date: 01/05

### **Confidential Nature of Medical Information**

A confidential communication is one that contains information given by one person to another under circumstances of trust and confidence with the understanding that such information must not be disclosed. Clearly, information about a patient—gathered by examination, observation, conversation, or treatment—is the type of confidential information the law has always protected. In the academic setting a patient may be extended to include a guest classroom speaker or individual whose knowledge or experience is used to assist with the students' learning. Thus, both nurses and physicians are legally and morally obligated to keep secret any information about a patient's illness or treatment that is obtained in the normal course of their professional duties. Indeed, the observance of confidentiality is one of the fundamental tenets of the Code for Professional Nurses adopted by the American Nurses' Association. This is also addressed in the *NSNA Code of Academic and Clinical Conduct (see Appendices)*.

In general, if information from a patient's chart is disclosed without the patient's express consent, or without a court order or express statutory authority, the hospital—as well as those who actually made the disclosure—may be held liable in damages should the patient be able to prove invasion of privacy or perhaps defamation of character.

### **Breach of confidentiality will result in disciplinary action up to and including immediate expulsion of the student(s) involved.**

Bernzweig, Eli P. *The Nurse's Liability for Malpractice*, 5<sup>th</sup> Edition, C.V. Mosby Company, 1990, page 362.

#### *Invasion of Privacy*

Our legal system has long recognized the distinctive right of every person to withhold his or her person, personality, and property from unwarranted public scrutiny. This right—called the right of privacy—includes the freedom to live one's life without having one's name, photograph, or private affairs made public against one's will. The legal concept of the patient's right of privacy is one with which every nurse should become familiar, since even a negligent violation thereof can have serious legal consequences.

All members of the health care team are duty bound to treat patients with decency, respect, and the greatest degree of privacy possible. At the very least, this means that the patient should be seen, examined, and handled only by those persons directly involved in his or her care and treatment. Unnecessary exposure of the patient's body or unwarranted discussion of his or her care with third parties will give rise to a legal cause of action for invasion of privacy, with appropriate damages assessed against the offending party. The nurse must always be alert to any witting or unwitting violation of the patient's right of privacy.

In conclusion, when entering a hospital, a patient places the integrity of his or her person and reputation in the hands of all health care personnel who attend him or her, and they must always be aware of their legal and ethical responsibility to preserve and protect the patient's right to privacy.

Bernzweig, Eli P. *The Nurse's Liability for Malpractice*, 5<sup>th</sup> Edition, C.V> Mosby Company, 1990, pages 364, 365.

*Statutes of Nurse Practice Act 12-38-117. Grounds for Discipline*

(1) The board has the power to revoke, suspend, withhold or refuse to renew any license, to place on probation a licensee or temporary license holder, or to issue a letter of admonition to a licensee in accordance with the procedures set forth in subsection (3) of this section, upon proof that such person:

(k) Has violated the confidentiality of information or knowledge as prescribed by law concerning any patient;

McLaren, Bonnie J. *Colorado Statutes Affecting Nursing Practice*, 2<sup>nd</sup> Edition, Professional Education Systems, Inc., 1990, pages 55, 56.

*Student Nurses*

Student nurses will be held liable for their own acts of negligence committed in the course of clinical experiences. If they are performing duties that are within the scope of professional nursing, they will be held to the same standard of skill and competence as registered professional nurses. A lower standard of care will not be applied to the actions of nursing students.

Rhodes, Ann M. and Miller, Robert D. *Nursing and the Law*, 4<sup>th</sup> Edition, An Aspen Publication, 1984, page 163.

*Please print and sign the Confidentiality Agreement form, and return to the LPN-AAS office.*

Date: 01/05

**Course and Faculty Evaluation**

I. Purpose: To assist faculty in strengthening course offerings and improving the quality of teaching in the nursing program.

II. Policy:

A. Course Evaluations:

1. Each course in the curriculum is evaluated on a rotating basis. Students evaluate the course in relation to whether course objectives have been met, and whether the teaching methodologies were effective in fostering their learning.
2. Students are requested to identify, strengthen and to make realistic suggestions for course improvement.

3. Course evaluations need not be signed by the student evaluator.
4. Forms for course evaluation are provided to the students by each course instructor.
5. The course evaluations are analyzed by the instructor to determine student perceptions of course strengths and weaknesses.
6. The results of the analysis are shared with the nursing faculty at the close of each semester.
7. The instructors consider student suggestions to strengthen course offerings in revising and updating courses.

B. Evaluation of Faculty:

1. The process of evaluation for faculty is designated in the Mesa State College *Handbook for Professional Personnel*.
2. The students are encouraged to provide constructive feedback in relation to areas for improvement and to identify the strengths of the faculty member.
3. Faculty evaluations need not be signed by the student evaluator.
4. The student evaluations of faculty are analyzed and submitted to the Chair. The results are communicated to the faculty member.
5. Faculty members incorporate student suggestions which will strengthen the quality of teaching in the program.

Date: 01/05

### ***Dress Code***

I. Purpose: To set standards for students' appearance in the clinical laboratories.

II. General Information:

- A. A professional appearance and attitude must be maintained while in clinical area.
- B. The student is required to follow the dress code stipulated by each clinical agency.
- C. The Mesa State College name pin (with first name and last initial) which is ordered shortly after school begins must be worn with uniform or lab coat during the clinical experience.
- D. Gum chewing is not allowed on clinical units.
- E. Anything which will cause offensive mouth odors should not be eaten prior to or during clinical experience
- F. Clean hair is worn short or arranged in such a manner that it does not interfere with nursing care. Long hair must either be anchored above collar level or restrained in an appropriate manner. Hair color should be a natural color.
- G. The only acceptable jewelry includes a watch, wedding ring(s) and a single, small, plain post style ear stud. No obvious jewelry in any body part, except ear lobes, is acceptable. A student with a pierced tongue must wear a clear stud.

- H. Laboratory coat is required at certain times during the clinical experience which must be suit-coat length or longer and have 3/4 length or longer sleeves. When wearing a laboratory coat, jeans, halters, shorts, leggings and exercise attire are not acceptable.
- I. Only white, long sleeved shirts may be worn under scrubs.
- J. Students are expected to maintain appropriate personal hygiene. Use of personal fragrances, such as lotion, perfume and aftershave is inappropriate. Students must make every attempt to eliminate smoking and other offensive odors from clothes.
- K. Student must make an attempt to cover any body art.

### III. Female Student's Uniform/Appearance

**Style** Teal blue standard dress, pantsuit, or skirt/pants uniform. Uniforms must be of a heavy weight material, so that underclothing cannot be seen. No white denim. Tuck-in tops are approved if of modest design. No cuffs (like sweats) and no dress shorts type uniforms allowed. Midriff and/or cleavage must not be visible, even when bending and lifting.

**Length** Hem of dress uniform must be at least knee length.

**Shoes** White (regulation) leather or nursing shoe type, cleaned and polished. No canvas tennis shoes, boots, sneakers, or sandals. Clogs must have a back strap.

**Hose** White or natural hose are worn with dress uniform. Students may wear white anklets in their shoes that do not exceed the top of the shoes when wearing a dress-type uniform.

**Nails** Nails must be clean, short and neatly trimmed. If polish is worn, it must be clear or a pale neutral shade and not chipped. No artificial nails may be worn.

### IV. Male Student's Uniform/Appearance:

**Pants** Teal Blue uniform top and pants. No denim. Uniforms must be of a heavy weight material, so that underclothing cannot be seen.

**Shoes** White (regulation) leather or nursing shoe type, cleaned and polished. No canvas tennis shoes, boots, sneakers, or sandals. Clogs must have a back strap. Crocks must have no open dots – must be solid.

**Socks** White only.

**Hair** Facial hair needs to be clean shaven or a well trimmed beard. Chest hair may not be visible, even when bending and lifting.

**Nails** Must be clean, short and neatly trimmed.

### V. Uniform Code Modifications:

**Pants:** Black/khaki (Dockers style); no capris or denim

**Skirts:** Knee length or full length, no denim

**Shirts:** Mesa State College polo shirt (*any color*) with *embroidered MSC logo* (This shirt can be obtained through the college bookstore the first semester of the program.)

All other dress code requirements apply as delineated under general information. Shoes and socks must follow dress code in this situation..

Rev. 09/08

### ***Email Addresses***

- I. Purpose: To enhance relevant communication within the Department of Health Sciences.
- II. General Information:
  - A. Electronic communication will facilitate information in a timely and consistent manner.
  - B. Students are given free email addresses as part of the college community.
- III. Policy:
  - A. Student must have an MSC email account upon entering the program, which may be obtained from the Computer Lab in the Library.
  - B. It is the student's responsibility to check his/her email address on a routine basis. Important student announcements and program information will be sent to all nursing students via email.

#### ***To forward your campus mail to another email system:***

This is handy for students who already are using another system, such as Hotmail, AOL or Yahoo, to get all of their mail at one address. To forward your campus email to another system:

- Log onto your campus email account per above;
- Click "Preferences";
- Scroll down to "Forwarding";
- Put a check mark in the box next to "Enabled";
- In the box next to "Forward to:" type in the email address to which you want your mail forwarded;
- Scroll all the way to the bottom and click the "Apply" box;
- Finally, run a test to make sure it is working by sending a test message to yourself at students.mesastate.edu.

Date: 01/05

### ***Exit – ATI RN Comprehensive Predictor Examination***

- I. Purpose: To define the obligation and process for the exit examination.
- II. General Information
  - A. In July of 1985, Article XII of House Bill 1187, enacted by the Colorado General Assembly, mandated that institutions of higher education in Colorado demonstrate student's improvement in knowledge, capacities and skills between entrance and graduation.
  - B. The Exit Examination will be given in the last semester of the year of expected graduation.
  - C. Students must achieve a passing score on the Exit Examination for the Associate of Applied Sciences program in nursing.

- D. Students will be notified of the required score for passing the Exit Examination at the start of the semester.

III. Policy:

- A. The dates for the taking of the Exit Examination will be announced to students in the senior level courses at least one month prior to the time.
- B. Students will sign up for one of the posted dates and time to take the examination.
- E. If a student does not receive a passing score, the test must be re-taken within two weeks.

Date: 01/08

## ***Family Educational Rights and Privacy Act (FERPA)***

### **GENERAL POLICY**

The Family Educational Rights and Privacy Act (FERPA) provides students who are enrolled in an institution of postsecondary education the right to inspect, review, and challenge their educational records. Mesa State College has the responsibility of maintaining and protecting the confidentiality of students' official educational records. Mesa State College also supervises the access to and/or release of educational records of its students. FERPA now covers enrolled and former students, including deceased students. Students who are not accepted to Mesa State College, or if accepted, do not attend, have no rights under FERPA.

### **PRIVACY**

No person shall have access to, nor will Mesa State College disclose any personal identifiable information from, a student's records without the written consent of the student *except*:

1. To school officials, including faculty, staff, and student workers, who have a legitimate educational or administrative interest in the records (*i.e.*, performing appropriate task related to position, student's education, service, etc.).
2. To other schools in which the student seeks to enroll.
3. To certain officials of the U.S. Department of Education, and state and local educational authorities, in connection with certain state or federally supported educational programs.
4. In connection with a student's request for or receipt of financial aid, as necessary to determine the eligibility, amount or conditions of the financial aid, or to enforce the terms and conditions of the aid.
5. To organizations conducting certain studies for or on behalf of the College.
6. If required by a state law requiring disclosure that was adopted before November 19, 1974.
7. To accrediting organizations to carry out their functions.
8. To comply with a federal judicial order or a lawfully issued subpoena having jurisdiction over Mesa State College (upon reasonable effort to notify the student of the order or subpoena in advance of compliance, unless ordered by subpoena not to do so).
9. To parents of an eligible student who claim the student as a dependent (according to Internal Revenue Code of 1954, Section 154) for income tax purposes on their most current federal tax return.
10. To appropriate parties in a health or safety emergency (if necessary to protect the health and safety of students or other persons).

11. After completion of the College disciplinary process, to parents of students under 21 years of age, and to certain victims of student misbehavior as defined by FERPA.
12. As it relates to Directory Information unless the student restricts Directory Information in writing.

### **DIRECTORY INFORMATION**

Mesa State College may, without the consent of the student, release to persons outside the institution information designated as Directory Information in accordance with the provisions of FERPA. Directory Information shall include information in an educational record which would not generally be considered harmful or an invasion of privacy if released, including but not limited to:

1. Student name, address, telephone number
2. date and place of birth
3. major fields of study
4. participation in officially recognized activities and sports
5. weight and height of athletic team members
6. photograph
7. dates of attendance to include enrollment status (*i.e.*, full time or part time)
8. degrees and awards received
9. most recent educational institution attended
10. e-mail address

**Note:** *At any time, a student may request to the Registrar's Office that Directory Information not be released to other parties without written permission. This request will be honored until the student requests in writing that Directory Information be disclosed.*

### **ACCESS TO STUDENT EDUCATIONAL RECORDS**

FERPA provides current, former students, and parents of dependent students the right to inspect, review, and challenge their educational records. Students are permitted to inspect and review their educational records with a maximum of 45 days after the request is received. Students may not review financial information received from their parents or guardians, confidential letters and recommendations placed in their files prior to January 1, 1975, academic records containing information regarding other students, administrative, disciplinary, law enforcement, student health records, and/or records which are maintained in the sole possession of the maker. While students who have a financial hold or past due account (all holds included) have a right to inspect their academic records, no transcript will be released to the student or other party until holds are reconciled. Bankruptcy, however, removes any financial obligations the student has to Mesa State College.

### **PROCESS TO CORRECT RECORDS**

Upon review, a student may request to the Registrar, in writing, to have his/her educational records amended due to inaccuracies, misleading information or a violation of privacy rights. If the request is denied, the student will be notified in writing and informed of the right to a formal hearing with a hearing officer who is a disinterested party. This hearing office may, however, be an official of the

College. Should a hearing be requested, the student may pick up the appropriate forms at the Registrar's Office. The decision of the hearing officer will be final.

**PLEASE CONTACT THE REGISTRAR'S OFFICE (970-248-1555) IF YOU HAVE ANY QUESTIONS REGARDING THIS POLICY**

***Grading/Testing***

- I. Purpose: To describe the system for grading, the examination process and grade reporting.
- II. General Information
  - A. Instructors have the freedom to determine the grading scale for individual courses.
  - B. All sections of the same course will follow the same grading scale.
  - C. Instructors will determine the components that comprise the final grade in a course and include this information in the course syllabus, along with course expectations.
  - D. The commonly used grading system in nursing is:

93-100%	=	A
85-92%	=	B
76-84%	=	C
70-75%	=	D
69 and below	=	F
- III. Academic Standards

Academic standards will be followed as explained in the Mesa State College Catalog.
- IV. Examinations
  - A. The faculty member may administer unit, midterm and final examinations as part of the evaluation process.
  - B. The faculty member may assign an alternate learning project to examine mastery of course content when appropriate.
  - C. The class must meet during the final examination period to fulfill standard requirements for semester instructional time.
  - D. Students are expected to take examinations at scheduled times. With prior approval of the faculty member, an examination may be taken at another time. The students and the faculty member must make specific arrangements for date and time and location.
  - E. Special testing needs must have documentation provided by the appropriate campus student support services?

## V. Grade Reporting

- A. Final grades must be submitted to the Records Office by the deadline. Grades are entered online and instructions are provided by the Registrar.
- B. Faculty members may not post grades unless written authorization is given by the students.
- C. Final grades are posted on Maverick online section of the MSC website.
- D. A copy of the final grade submitted by faculty is kept on file in the department office.

Date: 01/05

## **Grading Criteria**

I. Purpose: To provide descriptions of the letter grades used in the AAS Program.

### II. General Information

The following information provides guidelines for evaluation of clinical practice. The descriptions indicate how well the student has met outcomes or objectives for the course and/or clinical lab.

The descriptors (1,2,3,4) are defined as:

1. Degree of supervision required for the selected course's level of clinical practice (considers safety and accuracy of student performance).
2. Competence of nursing care, such as problem solving, setting priorities, observation skills, appropriateness in designing care strategies, dexterity, and interactions with clients, staff and peers.
3. Depth and breadth of preparation for clinical practice and ability to apply theory and skills in clinical setting.
4. Motivation and readiness for clinical practice as well as demonstration of interest and self-directed learning.

The A (4) student:

1. Consistently functions with little or no guidance, except in very complex situations
2. Demonstrates outstanding performance of nursing care
3. Demonstrates superior knowledge and consistently integrates appropriate knowledge with skills
4. Is consistently self-directed in his/her approach to learning (*e.g.* initiates new learning experiences)

The B (3) student:

1. Generally functions satisfactorily with minimum guidance in the usual clinical situation
2. Demonstrates above average performance of nursing care
3. Solidly demonstrates accurate and appropriate knowledge and usually integrates knowledge with skills
4. Recognizes learning opportunities but may require assistance in utilizing them

The C (2) student:

1. Functions safely with moderate amount of guidance in the usual clinical situation
2. Demonstrates average performance of nursing care
3. Demonstrates adequate knowledge and requires moderate assistance in integrating knowledge with skills
4. Requires some direction in recognizing and utilizing learning opportunities

The D (1) student:

1. Usually requires intense guidance for the performance of activities at a safe level
2. Clinical performance reflects difficulty in the provision of nursing care
3. Demonstrates gaps in necessary knowledge and requires frequent assistance in integrating knowledge and skills
4. Requires frequent and detailed instruction regarding learning opportunities

The F (0) student:

1. Is considered unsafe to practice without constant, intense guidance
2. Failed to meet clinical objectives
3. Frequently lacks necessary knowledge and skills and is unable to integrate these into practice
4. Requires constant, detailed instruction regarding learning opportunities and is often unable to utilize them

## ***Graduation***

I. Purpose: To identify requirements for graduation from Mesa State College with a Associate of Applied Science degree in Nursing.

II. Policy:

A. Graduation requirements

1. To graduate from Mesa State College with a Associate of Applied Science degree, a student must:
2. Have been regularly enrolled for at least 2 semesters, including the semester during which graduation requirements are met, and must have earned a minimum of 16 semester hours at Mesa State College for an associate degree.
3. Meet with their advisor to complete their program sheet.
4. After the program sheet is approved by the Department Chair, the student must file with the Registrar an application for graduation *during the semester preceding the semester in which graduation requirements are to be met.*
5. Satisfy all general and specific requirements of the college including the fulfillment of all financial obligations.
6. Have removed from the official record all marks of deficiency in those subjects for credit toward graduation.

7. The catalog used to determine graduation requirements is the academic year in which the student enrolls in the first nursing course.

#### B. Scholastic requirements

1. Only lower division courses will be accepted in fulfilling general education requirements.
2. Students are required to complete the curriculum or course of study in which they initially enroll, provided courses needed to complete the program are available. The student cannot choose part of the program from one catalog and part from another. If a student resumes study or begins a new course of study at Mesa State College after having been absent from college for one academic year or more, the student must follow the curriculum or course of study at the time of re-enrollment unless the school concerned gives written authorization for the student to pursue a different curriculum or course of study.
3. Mesa State College reserves the right to evaluate on a course by course basis any transfer credits earned 15 or more years prior to enrollment, which the student wishes to apply toward any degree.
4. Nursing course credit which is earned 5 or more years prior to the semester of graduation and meets degree requirements must be revalidated. (See Revalidation of Nursing Courses Policy.)
5. Science courses (BIOL 209 and 209L, BIOL 210 and 210L and BIOL 241) required by the program must have been taken within the last five (5) years to fulfill graduation requirements. If the course was not taken within the last five (5) years, the course must be re-taken or competency proven by a challenge examination. The challenge examination process may only be accomplished if a college-level course has been successfully completed previously with a letter grade of "C" or higher awarded. The five-year requirement is waived for LPNs who have been working in the nursing field since taking courses. The final approval for all accepted support course requirements and/or challenge examination will be made by the Department of Health Sciences.
6. A cumulative GPA of 2.0 or higher must be maintained in all courses that apply to the AAS degree.
7. An overall cumulative GPA of 2.0 is required for graduation.

#### C. Associate of Applied Science Degree in Nursing requirements:

1. Students who meet requirements for the associate degree in nursing must complete a minimum of 78 semester hours.
2. Of the 120 credit hours, a minimum of 60 semester hours must be in nursing courses. There must be 33 semester hours of lower division general education courses selected as indicated in the College Catalog, plus 2 semester hours in Human Performance and Wellness physical activity courses.

#### D. Graduation with Honors

To graduate with Honors or Distinction, the student's cumulative grade point average will be used in the determination of inclusion in the Honors/Distinction categories listed

below. Each year during formal commencement ceremonies Mesa State College recognizes the following categories of academic achievement:

1. *With Distinction* – Associate degree graduates with cumulative grade point averages of 3.50 to 3.74.
2. *With High Distinction* – Associate degree graduates with cumulative grade point averages of 3.75 to 4.00.

Exceptions for students not explicitly meeting the criteria for a particular category may be recommended to the Vice President for Academic Affairs by the academic dean or director of the school of those students who are receiving a degree in that school. The grade point average for honors/distinction at commencement does not include final-term, in-progress courses. The ultimate honors/distinction recognition to appear on the permanent record/transcript will reflect the appropriate category based on the inclusion of the final-term course grades required for the completion of degree requirements.

Date: 01/08

## ***Grievance and Appeals***

### I. Purpose:

To provide guidelines and a process for timely and fair resolution of complaints or problems related to grades, school and departmental policies/rules/regulations, or academic decisions for students in Health Sciences programs at Mesa State College.

### II. Policy:

#### A. Grievance/appeal related to a grade.

1. Schedule a meeting with the clinical preceptor, instructor or faculty member within five (5) days to discuss the grievance. If the problem is resolved through the initial meeting, no further action is indicated.
2. Failing successful resolution, the student may wish to appeal, doing so within five (5) working days by filing a written appeal with the appropriate Program Director. The Program Director will render a decision in writing, with explanation, within 10 days.
3. If dissatisfied with the Program Director's decision, within five (5) working days, the student will file a written appeal with the Department Head.
4. The Department Head will investigate and render a decision in writing within 10 days. If the student still does not believe the conflict has been resolved, the student is directed to the Mesa State College Student Handbook (p.23) for further steps to be taken.  
<http://www.mesastate.edu/main/policies/studenthandbk/2006-2007AcademicStudentPolicies.pdf>

#### B. Grievance/appeal related to a sanction for Academic Dishonesty

1. Students should first direct their appeal in writing to the faculty member who imposed the sanction.

2. Students who do not agree with the result of the decision made by the faculty member may appeal that decision in writing to the appropriate department head.
  3. When the decision regarding the appeal is not resolved within the department, the student may appeal in writing to the Academic Dishonesty Committee. The point of contact for that complaint is the Office of the Vice President for Student Services and Outreach.
  4. In instances when the Academic Dishonesty Committee issued the sanction that is being appealed, the appeal should be directed to the Office of the Vice President of Academic Affairs.
  5. The Mesa State College Student Handbook includes information related to academic dishonesty (p. 23)  
<http://www.mesastate.edu/main/policies/studenthandbk/2006-2007AcademicStudentPolicies.pdf>
- C. Grievance/appeal related to a Campus Student Conduct hearing or sanction
1. A decision reached by Campus Student Conduct hearing or a sanction imposed may be appealed by accused students within five (5) working days of the decision. Such appeals shall be in writing and shall be delivered to the Vice President for Student Services and Outreach or his/her designee.
  2. The Mesa State College Student Handbook includes information related to appeal of a Campus Student Conduct hearing or sanction (p. 8)  
<http://www.mesastate.edu/main/policies/studenthandbk/2006-2007AcademicStudentPolicies.pdf>
- D. Grievance/appeal related to a program policy, rule or decision
1. Schedule a meeting with the program director to discuss the grievance or ask the elected student representative to bring the grievance to the PN faculty meeting. If the problem is resolved through the initial meeting, no further action is indicated.
  2. Failing successful resolution, the student may wish to appeal, doing so within five (5) working days by filing a written appeal with the Department Head. The Department Head will render a decision in writing, with explanation, within 10 days.
  3. If the student still does not believe the conflict has been resolved, the student may wish to file a written appeal to the Vice President of Academic Affairs within five (5) working days. The Vice President of Academic Affairs or her/his designee will render a final decision in writing, with explanation, within 10 days.
- E. Grievance/appeal related to a departmental, rule or decision

1. Schedule a meeting with the Department Head to discuss the grievance. If the problem is resolved through the initial meeting, no further action is indicated.
  2. Failing successful resolution, the student may wish to appeal, doing so within five (5) working days by filing a written appeal with the Vice President of Academic Affairs. The Vice President of Academic Affairs will render a decision in writing, with explanation, within 10 days.
- F. Grievance/appeal related to a college, rule or decision
1. Attend (or schedule) a meeting with the Associated Student Government (ASG) leadership to discuss the grievance. ASG leadership will identify a strategy for discussion, mediation, or challenge of the college policy or rule with appropriate campus representatives. If the problem is resolved, no further action is indicated.
  2. Failing successful resolution, the student may wish to appeal, doing so within five (5) working days by filing a written appeal with the President of Mesa State College. The President or her/his designee will render a decision in writing, with explanation, within 10 days.

Date: 09/08

## ***Immunizations***

- I. Purpose: To provide information and guidelines for vaccinations required for admission and ongoing progress in the nursing program.
- II. General Information
  - A. Hepatitis B
    1. Hepatitis B is a common and serious disease which causes acute and chronic inflammation of the liver. It is spread by significant contact with blood, blood products or body secretions of patients who are either acutely or chronically infected with the virus. It may be spread by such contacts as needle sticks, household or sexual contact with Hepatitis B carriers, through hemodialysis, by receiving blood or blood products or concentrates, or by close contact with groups having a high incidence of this disease.
    2. There is now a safe, highly effective, licensed vaccine for the prevention of Hepatitis B. The vaccine against Hepatitis B, prepared from recombinant yeast cultures, is free of association with human blood or blood products. The vaccine is given in three injections. Following the initial injection one dose is given at one month and the third dose is given at a 6-month interval after the first.
    3. Student must have received the series of shots in order to continue in the program. Documentation that student has started the series is required on admittance to the program and dates of completion of the series must be submitted to the department.

B. Tetanus

A current Tetanus (Td) vaccination must be documented for admittance into the nursing program. Tetanus boosters are required every 10 years and must be current to continue in the program.

C. Measles, Mumps, Rubella

Documented immunity to Measles, Mumps, and Rubella are required for admittance into the nursing program. Immunity may be documented by one of the following:

1. Born before 1/1/57 (date of birth)
2. Documentation of physician-diagnoses measles
3. Documentation of two doses of vaccine
4. Laboratory evidence of immunity to measles (titer)

D. Tuberculosis

There is no recommended vaccination for tuberculosis. Student must obtain a two-step PPD (TB skin test) on admission to the program and maintain yearly documentation of negative PPD status or negative chest X-ray.

E. Student who are pregnant are referred to their physician for advice re: safety of immunization during pregnancy. A written waiver for immunizations must be submitted to the department.

F. Due to increased risk of exposure during clinical or college environment, students are encourage to obtain meningococcal and influenza vaccines.

01/05

## ***Math Competency***

III. Purpose: To assure basic math competency prior to admission to the nursing program and continued math competency throughout the program.

IV. General Information

- A. Students applying to the Nursing program will take a pre-admission math test in the Auto-tutorial Lab (ATL) prior to submitting their admission application. (No calculator use allowed).
- B. A passing score of 90% will add one point to the admission score.
- C. Applicant must call the ATL Coordinator (248-1113) to schedule an appointment.
- D. Failure to achieve 90% necessitates evidence of remedial math work from a variety of options by April 1 for fall admission and by November for spring admission.

*Options for remedial math work:*

- Math lab—student must provide evidence from lab personnel of enhanced competency.
- Private tutor—evidence of enhanced competency must be provided.

- Computer disk—must supply evidence of successful completion of program.
- D. Absence of completion of remedial work postpones admission to the nursing program.
- E. Continued 90% competency in math is required for continuation at each semester after admission to the program.

Date: 01/05

## ***Pathogens-Bloodborne /Needle Stick Exposure Policy***

### **I. PURPOSE**

- a. To provide a protocol for students in the Department of Health Sciences to receive appropriate treatment after exposure to a bloodborne pathogen.
- b. To provide systems and processes to minimize occupational exposure to bloodborne pathogens
- c. To comply with the OSHA Bloodborne Pathogen Standard 29 CFR1910.1030

### **II. POLICY**

The Department of Health Sciences at Mesa State College has established and maintains the following Exposure Control Plan to eliminate or minimize occupational exposure to bloodborne pathogens.

A copy of the Exposure Control Plan is kept in the department Policy and Procedure Manual. The plan is available to all employees upon hire and is reviewed for all employees during orientation and annually thereafter. All students are oriented to the policy before clinical rotations involving exposure to bloodborne pathogens.

The Exposure Control Plan is reviewed and updated as needed, but no less than annually by the Policy Committee and designated employees to:

- Reflect changes in technology that eliminate or reduce exposure to bloodborne pathogens.
- Document consideration and implementation of appropriate commercially available and effective safer medical devices

#### **A. Program Administration:**

The Department Head is responsible for the implementation of the Exposure Control Plan (ECP). He/She will maintain, review and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures.

Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

Employees and students who experience an exposure incident will immediately report their exposure as indicated on the Exposure Flow Chart and report to the facility's designated medical provider for confidential medical evaluation and follow-up.

## **B. Exposure Determination:**

Classifications in which all students and employees have occupational exposure:

- Lab Instructors
- Clinical Instructors
- Students

Tasks and procedures in which occupational exposure may occur:

- Handling of blood, blood products or body fluids or contaminated objects
- Invasive procedures
- Phlebotomy or vascular access procedures and care thereof
- Contact with lab specimens
- Wound care
- Contact with mucous membranes or non-intact skin
- Handling or disposal of medical waste
- Cleaning or processing contaminated equipment
- Suctioning or sputum induction
- CPR
- Handling of soiled linen
- Cleaning or decontamination of environmental surfaces

## **C. Methods of Implementation and Control**

- All applicable employees and students will utilize universal precautions and treat all blood and/or other potentially infectious materials as infectious regardless of the perceived status of the source individual.
- Engineering and Work Practice Controls as further described in this Exposure Control Plan
- Housekeeping
- Labels
- Hepatitis B Vaccination
- Post exposure evaluation and follow-up
- Employee Training
- Record Keeping

## **D. Engineering and Work Practice Controls:**

Mesa State College institutes appropriate engineering and work practice controls to eliminate or minimize employee exposure to bloodborne pathogens. All clinical settings are also mandated to implement engineering and work practice controls.

New developments in exposure control technology such as needleless systems are evaluated and implemented as they become available and/or on an annual basis. Mesa State College also conducts ongoing evaluation of tasks and medical devices that carry a risk of exposure and solicits input from faculty and students during lab and clinical rotation in the identification, evaluation and selection of engineering and work practice controls.

All students and employees are instructed and trained in the appropriate use of engineering and work practice controls during orientation and at least annually and more often when necessary such as when new tasks are introduced, when tasks are modified or when job classifications are added or modified.

Engineering and Work Practice Controls that are instituted include:

- Hand washing practices including practices to be used in the absence of hand washing facilities.
- Provision of personal protective equipment
- Standard Precautions
- Needleless systems
- Containment of contaminated sharps and biohazardous waste

### **E. Work Practice Controls**

Students and employees are instructed to wash hands after removal of gloves and whenever there is a likelihood of contamination. Contaminated skin area should be washed as soon as possible.

Waterless hand washing products are permitted for use before and after gloving. When hands/gloves become visibly contaminated with blood or other potentially infectious materials hands should be washed as soon as possible with antimicrobial soap and water.

If blood or other potentially infectious material contacts mucous membranes, those areas should be washed or flushed with water as soon as possible following contact.

Contaminated needles are not to be recapped, bent or broke off. Shearing or braking of contaminated needles is prohibited. They must be deposited in a sharps container immediately after use. If recapping is necessary, only a one-handed technique is allowed.

Sharps containers are provided to students in the lab area and in all clinical settings. This ensures that they are puncture-resistant, color-coded or labeled with a biohazard warning label and leak-proof on the sides and bottom.

All sharps containers must be closed when they are 2/3 full prior to removal or replacement to prevent spilling or protrusion of the contents during handling or storage.

Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure such as patients' homes.

Food and drink must not be kept in refrigerators, freezers, shelves and cabinets or on countertops or bench tops where blood or other potential infectious materials are present.

All procedures should be carried out in a manner that minimizes splashing, spraying, splattering and generation of droplets of blood or other potentially infectious materials such as emptying of bedpans, commodes.

Specimens of blood or other potentially infectious materials are to be placed in fluid-proof, biohazard

labeled shipping containers provided by the agency

Regulated waste material is to be placed in a biohazard labeled container, which is to be closed before removal to prevent spillage or protrusion of contents.

Equipment that may be contaminated with blood or other potentially infectious materials is to be examined and decontaminated as necessary prior to service of shipping. Employees and students should adhere to universal/standard precautions and use appropriate personal protective equipment when handling such equipment.

No parenteral or invasive procedures will be performed in the campus lab except on mannequins.

## **F. Personal Protective Equipment (PPE)**

All PPE is provided to employees and students at no cost.

PPE is chosen based on the anticipated exposure to blood or other potentially infectious materials. The PPE will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees clothing, skin, eyes, mouth or other mucous membranes under normal conditions of use and for the duration of time for which the protective equipment will be used.

The follow personal protective equipment is provided at the clinical facility:

- Disposable gloves
- Safety goggles with side shields
- Face shields
- Masks
- Aprons
- Non-permeable disposable gowns
- Pocket mask for CPR with one-way valve

### **1. Gloves**

Gloves should be worn where there is a reasonable expectation of contact with blood, OPIM, non-intact skin and/or mucous membranes; when performing vascular access procedures, with a reasonable likelihood of blood exposure; and when handling or touching contaminated items or surfaces.

Hypoallergenic gloves or other similar alternatives shall be available to employees allergic to regular gloves.

Disposable gloves are not to be washed or decontaminated for re-use, and are to be replaced as soon as practical when they become contaminated or as soon as possible if they are torn, punctured or when their ability to function as a barrier is compromised.

Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Utility gloves should be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

## 2. Other PPE

Appropriate face and eye protection should be worn when splashes, sprays, spatters or droplets of blood or other potentially infectious materials pose a hazard to the eyes, nose or mouth.

All garments that are contaminated should be removed immediately or as soon as possible.

All personal protective equipment should be removed and placed in a designated container prior to leaving the immediate patient care area.

## G. Housekeeping

All environmental surfaces are cleaned with an EPA approved germicidal on a regular cleaning and decontamination schedule.

Areas contaminated with blood or other potentially infectious materials should be:

- Cleaned with the use of appropriate PPE and a solution that is effective against Hepatitis B & C, HIV and OPIM
- Decontamination should be done with a 1:10 dilution of chlorine bleach (or other approved disinfectant) immediately after contamination (i.e. spill or leakage)
- Decontamination should be done for 10 minutes

## H. Handling of Waste Material:

- Used sharps containers are to be closed, placed in a red plastic bag and transported to the agency office.
- The sharps container is placed in the large plastic container in the storage room for pickup by a contracted.
- Broken glass that may be contaminated should never be picked up by hand. Use mechanical means such as a brush and dustpan, forceps or tongs to pick up broke glassware.

## I. Laundry

Handle contaminated laundry as little as possible, with minimal agitation. Avoid contact of clothing with contaminated laundry or use barrier aprons or gowns.

Wet contaminated laundry should be placed in leak-proof containers before being transported for laundering

Contaminated linens should be washed with detergent in water at least 140-160 degree F for 25 minutes.

## J. Signs and labels:

Warning labels are placed on containers of regulated waste, refrigerators containing blood or other potentially infectious materials and other containers used to store or transport blood or infectious materials and/or when appropriate, the used of red biohazard containers.

The label will be a fluorescent orange or orange-red biohazard label as illustrated with lettering in a contrasting color.



### **Vaccination:**

Students in the Health Sciences Programs are at increased risk for exposure to Hepatitis B. Prior to enrolling in the program, the student will be required to:

- a. Receive the Hepatitis B vaccination series (three vaccinations)
- b. Vaccination is encouraged unless:
  - There is documentation that the employee has previously received the series
  - Antibody testing reveals the employee is immune
  - Medical evaluation shows that vaccination is contraindicated
- c. Sign a *Refusal of Hepatitis B Vaccination* declining the vaccination.

Students agreeing to receive the vaccination series must complete the series within the six month designated time frame. Students are responsible for getting the vaccination from their private physician and for covering the cost of the vaccinations. Verification of all vaccinations/immunity must be provided to the Department of Health Sciences. Vaccination status of all students will be maintained on file in the Health Sciences Department. It is the student's responsibility to keep their immunization records current.

### **III. PROCEDURE**

#### **A. POST EXPOSURE EVALUATION AND FOLLOW-UP**

Should an exposure incident occur, the student shall:

- Wash the affected area with soap and water or other appropriate solution
- Flush exposed mucous membranes with water
- Contact the clinical instructor immediately. The appropriate incident forms for the agency must be completed.
- The designated medical provider or emergency room (for after hours care) will immediately conduct a confidential medical evaluation and follow-up.
- Faculty will document the incident and follow up for permanent record.
- ***Please note: If the student participates in a non-contracted activity the cost for PEP is at the student's expense***

The written opinion of the treating physician will be limited to the following information:

- The employee has been informed of the results of the evaluation
- The employee has been told about any medical conditions resulting from exposure to the blood or OPIM, which requires further evaluation or treatment

***All other findings shall remain confidential and will not be included in the Written Report***

## **B. PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT**

The Department Chair will review the circumstances of all exposure incidents to determine:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used
- Protective equipment or clothing that was used at the time of the exposure incident
- Location of the incident
- Procedure being performed at the time of the incident
- Employee's training

If it is determined that revisions need to be made, the Chair will ensure that appropriate changes are made to this ECP,

#### **IV. FACULTY/STUDENT TRAINING**

All students and clinical faculty who have occupational exposure to bloodborne pathogens will receive training during orientation and at least annually thereafter. Clinical faculty may complete this at their primary workplace or campus.

Training will include at least the following information:

- The epidemiology, symptoms and modes of transmission of bloodborne pathogen diseases
- An explanation of the OSHA standard
- An explanation of the exposure control plan and where employees can obtain a copy
- An explanation of methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials, including what constitutes an exposure incident
- A review of the use and limitations of engineering controls, work practices and PPE
- An explanation of the types, uses, location, removal, handling, decontamination and disposal of PPE
- An explanation of the criteria for PPE selection
- Information about the Hepatitis B vaccine series including information on its efficacy, safety, method of administration, the benefits of being vaccinated and that the vaccine will be offered free of charge.
- Information on the appropriate actions to take and persons to contact if an exposure incident involving blood or other potentially infectious materials occurs, including the method of reporting the incident and the medical follow-up that will be made available.
- Information on the post-exposure evaluation and follow up that the employer is required to provide for the employee following an exposure incident
- An explanation of the signs and labels and/or color coding required by the standard and used by this organization
- An opportunity for interactive questions and answers with the person conducting the training session

Training records are completed for each employee upon completion of training. Training documents contain the following information:

- Dates and times of the training sessions
- Contents or a summary of the training sessions
- Names and qualifications of persons conducting the training
- Names, signatures and job titles of all persons attending the training sessions.

The original records are maintained in a secure file cabinet in the Health Sciences Department. Copies of documents verifying attendance at the training sessions become part of each employee's personnel record and student's personal file.

Training records are available upon request to the employee, the employee's authorized representative, those within the organization with access to medical records, to the Assistant Secretary of Labor for OSHA or designated representative or the Director of NIOSH or designated representative and as otherwise required/stipulated by law and regulation.

## **V. RECORDKEEPING**

### **A. Medical Records**

Human resources is responsible for maintenance of the required medical record in accordance with 29 CFR 1910.20 "Access to Employee Exposure and Medical Records."

The Director of Human Resources is responsible for maintenance of the required medical records. These confidential records are kept in the Human Resource office for at least the duration of employment plus 30 years.

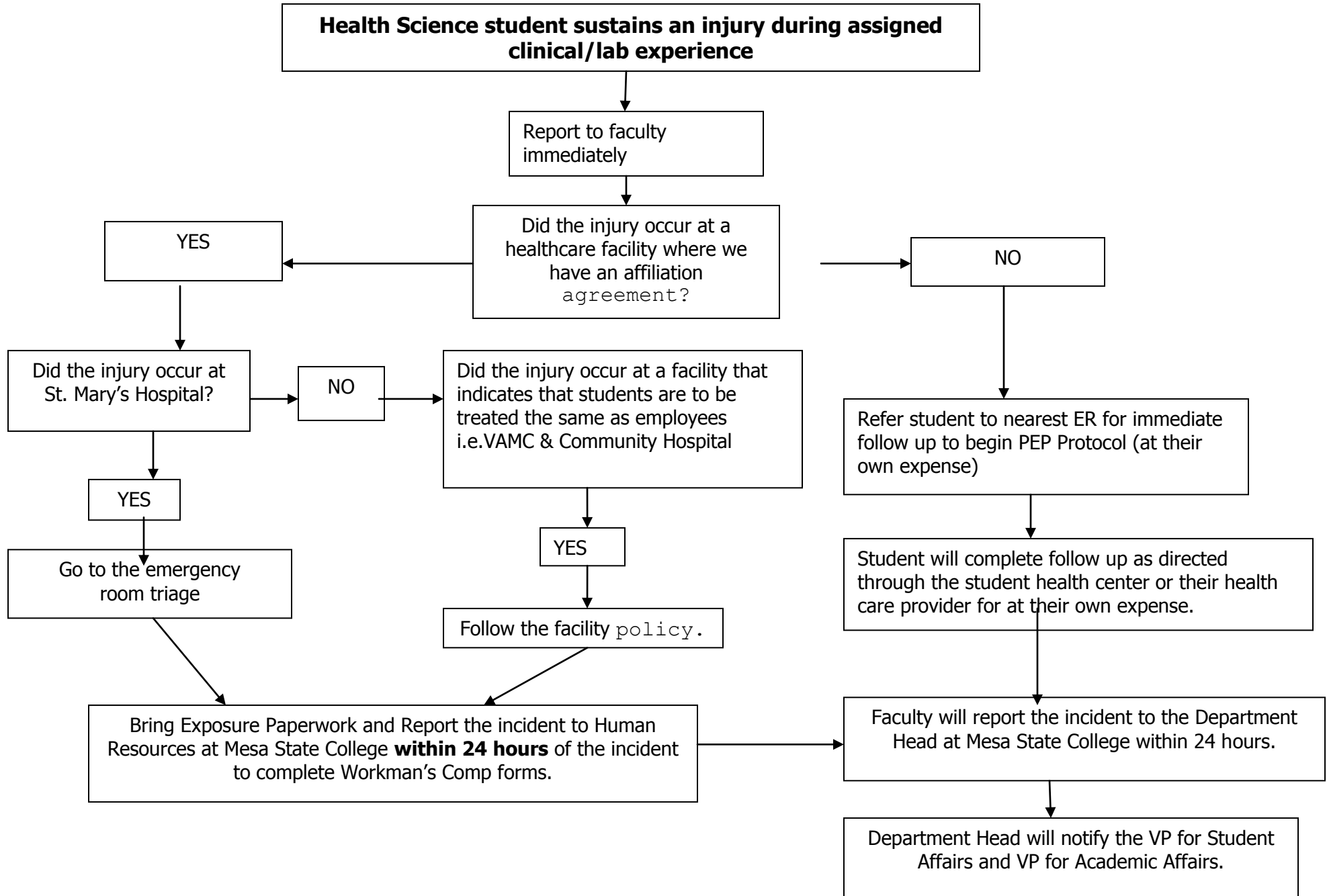
Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to the Director of Human Resources.

### **B. OSHA Recordkeeping**

The Director of Human Resources is responsible for maintenance of the OSHA 300 Log.

Individual facilities are responsible for maintenance of the Sharps Injury Log.

Rev 7/08



## ***Professional Behavior in the Academic and Clinical Setting***

I. Policy: To provide guidelines for faculty concerning student behavior in the classroom and the clinical setting.

II. General Information:

A. As students prepare for transition into professional life, certain behaviors are expected, consistent with safe and ethical professional nursing practices in the classroom and in the clinical setting.

B. Professional behavior and respect for classmates, faculty, preceptors and guest speakers is expected at all times. This is also addressed in individual course modules.

Examples of non-professional behavior include:

- Tardiness to class and clinical
- Sleeping in class
- Interruption of class by talking, passing notes, use of cellular phones, pagers, etc.
- Use of profanity, name-calling
- Being rude and hostile to faculty or classroom presenters or in clinical setting
- Intimidating others

C. Assigned coursework should be original for each class or clinical.

D. When student behavior interferes with the conduct of class or the clinical experience or when safety of members of the campus community is endangered, such behavior will result in disciplinary action up to and including immediate expulsion from the program.

Date: 01/05

## ***Progression***

I. Purpose: To set standards for satisfactory progress in the nursing program.

II. General information:

A. All program prerequisite and general education courses must be completed before beginning the nursing program. Some exceptions may be made by the Admission Committee on an individual basis.

B. Nursing 206 Advanced Medical Surgical Nursing I and Nursing 288 Health and Physical Assessment for Nursing must be completed with a passing grade before other nursing courses can be taken.

C. Students must attain at least a grade of C in all required courses in the curriculum, including electives, and maintain a cumulative grade point average (GPA) of 2.0 or higher for all college courses. This policy applies regardless of when or where the course was taken. A "D" grade or lower in any required course is not acceptable.

D. Any student without a passing grade of "C" or above in required nursing classes may not progress to the next nursing course and will have to re-take the course the next time it is offered as space is available. This requirement also pertains to non-nursing pre- or co-requisite courses.

- E. Students enrolled in nursing courses having both theory and clinical components must take these components concurrently. If a student receives a grade of less than "C" in either component (theory and/or clinical) both components must be repeated. The student may not progress to the next nursing course and will have to retake both components the next semester that the course is offered as space is available.
- F. All nursing courses must be completed or revalidated within 5 years from the semester the first nursing course was taken. This includes transfer of nursing courses from other institutions.
- G. Students must repeat any nursing courses if he/she receives a grade below a C. If a student fails a second nursing course (below a C) he/she will have to withdraw from the program and will not be re-admitted. If a student fails more than one course in a semester, the situation will be reviewed by faculty and treated on an individual basis.
- H. A student may not obtain credit by examination for a failed course.
- I. A student may not obtain credit by examination to improve a grade.
- J. Advisors will maintain a current progress record on the program sheet for each advisee.
- K. Faculty members may withdraw a student due to unsafe clinical practice or behavior jeopardizing professional practice at any time during the semester.

Date: 01/08

### ***Re-Admission***

I. Purpose: To inform students of the policy/process for re-admission into the nursing program.

II. General Information:

- A. All students petitioning to return to the program should complete an application for re-admission. These forms may be secured from the administrative assistant of Associate of Applied Science in Nursing.
- B. The number of spaces for returning students is limited and varies from semester to semester. Students seeking re-admission to the nursing program should submit applications for by the posted deadline for spring admission.
- C. Any nursing course may be repeated one time, if the faculty approve. A second failure in any nursing course means that the student must withdraw from the program, and the faculty believes the student should pursue alternate goals.
- D. If a student fails a course due to unsafe physical or emotional care of patients, the faculty may decide to not allow the student to repeat the course.
- E. **Students will be admitted to the program only twice regardless of reason for leaving. Attendance in any nursing class or portion of nursing classes is considered an admittance.**

III. Process:

- A. Students who withdraw from or fail to complete the first nursing course must apply for admission into the program with the rest of the applicants to the program. These individuals will be considered according to the criteria utilized for the other applicants.

- B. Students who withdraw from or fail to complete any clinical nursing course may petition for re-admission. If space is available, re-admission will be considered.
- C. If a student is readmitted after having been absent for one academic year or more, he/she must follow the curriculum outlined in the catalog which is current at the time of re-enrollment.
- D. Student must complete re-admission form.

Date: 01/08

### ***Student's Liability Insurance***

- I. Purpose: To comply with Agency's requirements that all students entering clinicals must have proof of liability/malpractice coverage.
- II. General Information:
  - A. According to agency mandate, the policy must be comprehensive general liability insurance covering bodily injury and property damage liability with minimum coverage limits of \$1,000,000 per occurrence/\$2,000,000 general total limit, and medical professional liability insurance with minimum coverage limits of \$1,000,000 per claim/\$3,000,000 annual aggregate. Each student shall be required to provide a Certificate of Insurance as evidence of such insurance coverage prior to participation in any clinical experience within the program.
  - B. Students are required to obtain this at their own expense and maintain throughout the program. Information will be provided by the Department of Health Sciences.

Date: 01/05

### ***Criminal Background Investigation***

#### **POLICY – for New Students:**

- I. Purpose: To maintain a safe and productive educational and clinical environment, potential students who have been accepted into one of the health sciences programs will undergo a criminal background investigation.
- II. General Information
  - A. Beginning in 2004 the Joint Commission on Accreditation of Hospital Organizations (JCAHO) began requiring criminal background checks on all employees and students who attend a JCAHO accredited hospital for clinical laboratory experience.
  - B. To comply with agency requirements, the Mesa State College Department of Health Sciences will begin criminal background checks on students prior to admission to the programs.
  - C. Students will be accepted into the Department of Health Sciences program pending successful background investigation.
  - D. Mesa State College has partnered with American DataBank (<http://www.mesacx.com>) to provide these background checks.
  - E. The CRIMINAL BACKGROUND CHECK will include a record of all convictions. Only conviction information will be considered. A "conviction" is considered to be a

verdict, a guilty plea or a Nolo Contendere ("No contest") plea. If the investigation reveals information that could be relevant to the student's application, the designated individual or committee within the Department may request additional information from the applicant. If the investigation reveals more than minor traffic convictions, it shall be reviewed by the designated committee.

- F. The existence of a conviction does not automatically disqualify an applicant from entering the programs. Considerations may include, but are not limited to: the date, nature and number of convictions; the relationship the conviction bears to the duties and responsibilities of the position and successful efforts toward rehabilitation. Any decision regarding admission is at the discretion of the Department Head/committee.
- G. Information obtained for the purpose of and during the background investigation will be retained by the Department Head in a separate file from the student's records. Reasonable efforts will be made to ensure that results of criminal background checks are kept as confidential as possible with a limited number of persons authorized to review results.
- H. The following criminal offenses that appear on a background investigation may disqualify an applicant for admission to the Department of Health Sciences program.
  - 1. A crime of violence as defined in section 18-1.3-406. C.R.S.
  - 2. Crimes against persons (homicide, assaults, kidnapping and unlawful sexual behavior) as defined in Title 18-3-101 through 18-3-405.5 and 18-6.5-101.C.R.S.
  - 3. Any act of domestic violence, as defined in Title 18-6-800.3. C.R.S.
  - 4. Any crime of child abuse or incest, as defined in Title 18-6-401 and 18-6-301. C.R.S.
  - 5. Any offense involving moral turpitude (prostitution, public lewdness, indecent exposure, etc.), unlawful sexual behavior as defined by Colorado law.
  - 6. Any crimes of theft, burglary or robbery except misdemeanor shoplifting.
  - 7. Felony crimes of arson, criminal mischief, fraud or forgery.
  - 8. Any felony conviction for drug abuse or distribution in the 10 years prior to application.
  - 9. Multiple Driving Under the Influence (DUIs) or Driving with Ability Impaired (DWAI) offenses.
  - 10. Any felony or misdemeanor in another state, the elements of which are substantially similar to the elements of any of the offenses listed above.

### III. Procedure

- A. Upon notification for need for background investigation the incoming health sciences student will access the American DataBank website <http://www.mesacx.com>. New students who refuse to complete this section or who do not answer truthfully and fully may not be allowed to enter any of the programs.
- B. The disclosure and written consent is on the web. The student is instructed to download two copies and sign and return one copy to the Department of Health Sciences office and keep the other for their file.
- C. Students must complete the application on line including payment of associated fees, directly to American DataBank (Approximate cost (\$60.00))

- D. American DataBank will send report electronically to the Department Head of the Department of Health Sciences. The student may review the criminal background investigation information received by the department by contacting the Department Head or designee.
- E. The designated individual/committee will review all criminal background investigation results. If adverse information is considered relevant, the committee will notify the applicant in writing. The committee will be responsible for making the final decision regarding whether results will disqualify an applicant from admission.
- F. If the applicant disagrees with the accuracy of information obtained, he/she may request in writing a review of the accuracy of the information. The process of application will be on hold pending results of the review.  
If the applicant feels that there are extenuating circumstances to be considered may submit a written request to the Department Head/committee. These individuals may make exceptions where it is deemed to be in the best interests of the Mesa State College Department of Health Sciences.

Date: 10/05

### ***Student Representative to Faculty Meetings***

- I. Purpose: To outline the responsibilities of the student representatives at faculty meetings.
- II. General Information:
  - A. Attendance at these meetings will provide experience for students in working with faculty related to department concerns.
  - B. The students serve as a liaison between the students and faculty.
  - C. Designated students may serve on ad-hoc committees.
- III. Procedures:
  - A. A student representative shall be elected from each class to attend faculty meetings.
  - B. A representative from the Student Nurse Association (SNA) is encouraged to attend.
  - C. Students will be elected as determined by SNA procedure.
  - D. The representative from the Student Nurse Association will be selected by the membership.

Date: 01/05

### ***Students' Response to Emergency Situations at Clinical Facilities***

- I. Purpose: To assure students know how to respond to emergency situations (*i.e.* fire, codes, security, etc.) at clinical facilities.
- II. General Information:
  - A. Emergency demonstration/training is included within the NURS 206 course.
  - B. Information regarding security, fire, codes, etc., is included in clinical orientation for NURS 206, as well as other nursing courses.

Date: 01/05

## **Substance Abuse**

- I. Purpose: To apprise the student of rules regarding substance abuse related to class and clinical attendance in the Mesa State College Department of Health Sciences.
- II. General Information:
  - A. Chemical dependency may impact all aspects of life negatively and is a condition that can be treated successfully.
  - B. Dependency may result from any mind-altering substance that produces psychological or physical symptomology. These include alcohol, over-the-counter or prescribed medication, illegal drugs, toxic vapors, or synthetic designer drugs.
  - C. According to the Mesa State College Student Handbook, students must comply with state and federal laws concerning dangerous drugs. Offenses may result in prosecution by civil authorities and/or disciplinary action by the College.
  - D. Students are responsible for coming to the clinical area mentally alert and physically capable to care for assigned patients/clients.
  - E. The faculty has the responsibility to intervene when patient or student safety and clinical performance are compromised by a student who is chemically impaired.
  - F. Students who may have a substance abuse problem typically will exhibit a pattern of objective, observable behaviors that eventually compromise client safety and clinical standards of performance. In most cases the patterns of possible substance abuse emerge slowly over a period of several semesters; occasionally a faculty member will encounter a student who exhibits clear evidence of intoxication or the influence of a chemical substance. Faculty should be alert for behavioral evidence of signs/symptoms of possible substance abuse (See list below).
  - G. Chemical dependency can be identified in a professional substance abuse evaluation and treatment programs are available to those with chemical dependency.
  - H. After acceptance to the Department of Health Sciences, students must refrain from any illicit drug use or alcohol abuse. Peers and/or classmates are encouraged to report any suspicions of substance abuse to the faculty. Those reporting such information will remain anonymous.
  - I. Students may be subjected to drug screening prior to participating and at random during clinical rotations at some health care facilities.
  - J. The Department of Health Sciences expects their students to be ambassadors for Mesa State at all times when professional uniforms are worn, both on campus and off campus (i.e. scrubs, Mesa State polo shirts). Illegal drugs and/or alcoholic beverages must not be consumed when professional attire is worn, neither on campus nor in the community.
- III. Procedure:
  - A. If an instructor suspects that a student is under the influence of any mind-altering substance which may interfere with safe clinical performance, the student will be asked to leave the clinical area. The instructor must objectively document the behavioral symptoms noted and indicate how client safety and clinical performance were compromised by the student's actions. If any student is suspected of drug or alcohol abuse, the student may be required to submit to a drug and/or urine screening at the student's own expense,

immediately after the occurrence. Transportation should be arranged to take the student home safely or to an appropriate treatment facility.

- B. This action will count as an absence and an appointment will be scheduled for an informational meeting within three working days between the student, instructor(s), and department head.
- C. A pattern of possible substance abuse may emerge slowly over a period of several semesters and observed by more than one faculty member. If an instructor identifies a suspected pattern of signs and symptoms of substance abuse, they are to objectively document the behavioral symptoms noted and consult with other faculty who have interacted with student to verify the suspected substance abuse. Once a pattern is established that strongly suggests substance abuse, the student is contacted and an appointment is scheduled for an informational meeting within working three days between the student, instructor(s), and department head.
- D. If a student has a positive pre-clinical or random drug or urine screening, an informational meeting will be held within three working days between the student, instructor(s), and department head. If they are in a clinical rotation when the positive drug screening result is obtained, they will be asked to leave the clinical area. Transportation should be arranged to take the student home safely or to an appropriate treatment facility.
- E. Informational meeting: The purpose of the informational meeting is to make the student aware of the faculty's suspicions and to review the policy and procedure. The informational meeting will include the student, faculty who identified the problem and the department chair. The faculty will present the documentation concerning the student's behavior and provide the student an opportunity to discuss the observations. The student's behaviors, faculty's recommendations for follow-up, student's written response to the allegations, and the date and time for the intervention meeting is documented and signed by all parties in the meeting. The original document is placed in the student file, and a copy is given to the student.
- F. Intervention meeting: The purpose of the intervention meeting is to review the student's behavior and clinical performance, discuss the policy for impaired student nurses and its implementation, discuss the academic consequences related to the policy violation, and secure the student's agreement to seek a comprehensive substance abuse evaluation. The intervention meeting will include the student, faculty who identified the problem and the department chair, and a representative from student affairs. Documentation is completed that articulates the problem behaviors, any academic consequences, the students' agreement to seek a professional evaluation for a potential substance abuse problem, and the student's understanding that failure to abide by the recommended treatment plan will result in dismissal from the program.
- G. The student will be referred to the campus affiliated Student Health Services and/or PsychHealth services for substance abuse evaluation. If the student refuses to obtain an evaluation, he or she is administratively dismissed from the program. There are three general outcomes anticipated from the substance abuse evaluation:
  - 1. The evaluation DOES NOT substantiate the alleged substance abuse by the student. If this occurs, all documentation related to the alleged incident is removed from the student's file and the student may return to all courses without negative academic consequences.

2. The evaluation DOES substantiate the alleged substance abuse by the student, but the student refuses to abide by the policy of enrollment in a treatment program and ongoing monitoring. If this occurs, the student is dismissed from the program.
3. The evaluation DOES substantiate the alleged substance abuse by the student, and the student agrees to abide by the policy. If this occurs, the student signs an agreement to participate in a treatment program and to have his or her progress monitored by the Department Chair. The student is allowed to continue in the program as long as he or she is compliant with the treatment contract.

## **SIGNS & SYMPTOMS OF POSSIBLE SUBSTANCE ABUSE**

### ***Psychological Problems***

Irritability  
Moodiness  
Tendency to isolate self

### ***Social Changes***

Eats alone  
Avoids social gatherings  
Avoiding faculty/peers  
Avoiding group work

### ***General Behavioral Changes***

Inappropriate responses  
Nervousness  
Elaborate excuses for behavior  
Intolerance of others  
Suspiciousness

### ***Changes in Personal Appearance***

Change in dress  
Unkempt appearance  
Flushed complexion  
Red eyes  
Swollen face  
  
Hand tremors

### ***Mental Status Changes***

Forgetfulness  
Confusion  
Decreased alertness  
Impaired judgment in the clinical area

### ***Changes in Performance***

Deteriorating productivity  
Excessive absenteeism  
A pattern of tardiness  
Leaving clinical area frequently  
Unsafe clinical performance/placing clients  
at risk  
Late assignments with elaborate excuses  
for not meeting deadlines

### ***SYMPTOMS***

Odor of alcohol  
Slurred speech  
Unsteady gait  
Errors in judgment

Rev.11/87,3/88,11/94,11/97,5/99,01/07

### ***Test Blueprint***

I. Purpose: To provide description of test plan structure that will be followed for each nursing course.

II. General Information:

Knowledge of course content that is evaluation via written test will follow Bloom's Taxonomic Classification System, as follows:

- A. Knowledge — Verbatim recall of specific information that has been presented in class through lecture, handouts, videos, computer programs, etc. EXAMPLE OF VERBS USED: to define, distinguish, recall, list, recognize
- B. Comprehension — Paraphrasing information; does not imply understanding. EXAMPLE OF VERBS USED: to translate, paraphrase, rephrase, restate, rearrange
- C. Application — Ability to use learned concepts in specific situations. This includes knowledge gained in a new situation. EXAMPLES OF VERBS USED: To apply, generalize, relate, organize, classify
- D. Analysis — to break an idea, problem, disease, communication, or any process into parts. This includes breaking apart something that is known and making it new learning for the student. EXAMPLES OF VERBS USED: To contrast, deduce, categorize, discriminate, analyze
- E. Synthesis — to take previously learned information, form new patterns or wholes and create something new. EXAMPLES OF VERBS USED: To propose, plan, produce, design, synthesize, formulate
- F. Evaluation — to make a value judgment regarding how actions or materials meet certain criteria. Should be a deduction made by students based on their studies. This step is not achieved through use of multiple choice questions and is not to be confused with the evaluation step in the nursing process. EXAMPLES OF VERBS USED: To judge, assess, validate, standardize, appraise

### III. Procedure:

- A. NCLEX Test blueprint for distribution of program content is as follows:

Safe effective environment

- Management of care 13-19%
- Safety and infection control 8-14%

Health promotion and maintenance 6-12%

Psychosocial integrity 6-12%

Physiological integrity

- Basic care and comfort 6-12%
- Pharmacological & parental therapies 13-19%
- Reduction of risk potential 13-19%
- Physiological adaptation 11-17%

Date: 01/05

### ***Transfer Students***

I. Purpose: To provide documentation saying that students left previous program in good standing.

#### II. Policy:

- A. Student must have official letter saying that they left former program in good standing.
- B. Student may be asked to sign form giving permission to contact former school.
- C. Student must apply to Mesa State College and request a transcript evaluation.
- D. Admission to LPN-AAS program depends on space availability.
- E. Student may be asked to audit classes depending on length of time since attended nursing classes.

Date: 04/05

### ***Withdrawal, Probation and Suspension***

I. Purpose: To identify conditions related to withdrawal, probation and suspension.

II. Policy:

The AAS program will follow the policies as outlined in the current Mesa State College Catalog.

Date: 01/05

**Appendices:**



**MESA STATE COLLEGE**  
*Department of Health Sciences*

I have read, and agree to comply with, the policies in the student handbook.

\_\_\_\_\_  
Print Student Name

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
MSC Student ID #

\_\_\_\_\_  
Date

*(This form is to be signed by student and turned  
in to the LPN-AAS Administrative Assistant)*



**MESA STATE COLLEGE**  
***Department of Health Sciences***

**Academic Honesty Agreement**

Any evidence of plagiarism, any form of cheating or knowingly furnishing false information will result in disciplinary action up to and including immediate expulsion of the student(s) involved. (Mesa State College Student Handbook and Mesa State Catalog.)

Student's Name (Print) \_\_\_\_\_

Student's Signature \_\_\_\_\_

Date \_\_\_\_\_

*(This form is to be signed by student and turned in  
to the LPN-AAS Administrative Assistant)*



**MESA STATE COLLEGE**  
***Department of Health Sciences***

**Confidentiality Agreement**

I have watched the video on confidentiality “Confidentiality: Ethical and Legal Considerations” by Medcom/Trainex. Also, I have read the information on confidentiality contained in my LPN Nursing student handbook.

Patients, medical staff, and employees have a legal right to privacy. All students must exercise extreme caution and sensitivity with communicating or accessing information about patients and clinical facility operations: careless talk, inquiry in the system, repeating rumors or unauthorized access can result in serious harm to patients and their families or employees. Such communication and inquiry is limited to necessary disclosures required by individuals having a need-to-know.

Clinical facility standards prohibit employees and others with direct access to protected information about a clinical facility, its patients or their families, medical staff or its employees except when properly authorized. The release of all confidentiality information must meet all policy and legal requirements. **Complete confidentiality is expected.**

I understand and agree to comply with the confidentiality requirements as set by the Department of Health Sciences programs at Mesa State College. If I should break patient confidentiality, I understand that I may be removed from the program.

Student’s Name (Print) \_\_\_\_\_

Student’s Signature \_\_\_\_\_

Date \_\_\_\_\_

*(This form is to be signed by student and turned in to the LPN-AAS Administrative Assistant prior to attending clinicals at a facility off campus.)*



**MESA STATE COLLEGE**  
***Department of Health Sciences***

I have read the Substance Abuse Policy. By signing this agreement, I understand and agree to comply with the stipulations of the policy.

\_\_\_\_\_  
Print Student Name

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
MSC Student ID #

\_\_\_\_\_  
Date

*(This form is to be signed by student and turned in  
to the LPN-AAS Administrative Assistant)*



## Clinical Makeup Agreement

\_\_\_\_\_ has missed a clinical day on \_\_\_\_\_ on the \_\_\_\_\_ unit. He/she must makeup this clinical within the next two weeks. The responsibility is up to you to have the make up day completed within two weeks of the missed clinical day. Makeup day will be on \_\_\_\_\_ with \_\_\_\_\_.

Signature of Student: \_\_\_\_\_

Signature of Preceptor: \_\_\_\_\_

Signature of Instructor: \_\_\_\_\_