HIGHLINE COLLEGE

Registered Nursing Program

**NURSING
STUDENT HANDBOOK
2017-2018**

August 1, 2017

PROGRAM APPROVED BY:
Washington State Department of Health
Nursing Care Quality Assurance Commission
111 Israel Road SE
Tumwater, WA 98501
Tel: 360-236-4700
Website: http://www.doh.wa.gov

PROGRAM ACCREDITED BY:
Accreditation Commission for Education in Nursing (ACEN)
3343 Peachtree Road NE, Suite 850
Atlanta GA 30326
Tel: 404-975-5000
Website: http://www.acenursing.org

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INTRODUCTION

Welcome to the Associate Degree Nursing Program at Highline College!
Successful completion of this program will qualify you to sit for the National Council
Licensure Examination for Registered Nurses (NCLEX-RN). Beyond preparing you for
that examination, however, the faculty of this program strives to prepare highly
qualified nurses who are prepared for professional practice. To that end, the faculty
practice according to the following:

Mission Statement:

"We the faculty of the Highline College nursing program are committed to preparing competent
novice practitioners who integrate effective communication and critical thinking into providing
holistic care for diverse populations. Our graduates will demonstrate respect, compassion, and
cultural sensitivity, and uphold ethical and legal principles in their practice of
nursing." (May 17, 2011)

Nursing Program Philosophy:

- The nursing faculty shares a vision that the practice of nursing makes a difference in our world.
- Nursing integrates the art of caring with scientific knowledge to promote the safety and well-being of the client, family, and community.
- Professional nursing is a dynamic and interactive process that views the client, family, and community holistically.
- The nurse-client relationship is a therapeutic alliance based on communication, concern, and respect.
- As a leader on the healthcare team, the registered nurse's role is to provide and coordinate care; educate clients, families, and others; and advocate for diverse client populations.
- The nursing process is utilized as the framework for application of evidence-based knowledge, critical decision-making, competent intervention, and comprehensive evaluation in health promotion, illness prevention, and health management across the life-span.
- Nursing fosters life-long learning through continuing education and critical inquiry.
- The nurse adheres to legal and ethical standards.
- The registered nurse acknowledges that individual health outcomes influence the health and productivity of the community, identifies the determinants of health, and strives for elimination of disparities in health and provision of healthcare.
- The nursing faculty share knowledge, clinical expertise, and a passion for nursing with our students.
- In a collaborative milieu of peers and educators, our students construct meaningful knowledge, leading to cognitive, behavioral, and affective changes.

The purpose of this Student Handbook is to provide crucial information to nursing students in
the program. It is essential that you become familiar with its contents. When questions arise
regarding policies and procedures, this handbook will serve as the guide to answering them.

Sincerely,
Teri Trillo, RN, MSN, CNE
Nursing Program Coordinator

ESSENTIAL QUALIFICATIONS FOR HIGHLINE NURSING STUDENTS

The Highline College Nursing Program signifies that the holder of the Associate of Applied Science Degree-Registered Nursing (AAS-RN) has been educated to competently practice nursing in all healthcare settings and to apply for RN licensure in the State of Washington.

The education of a nurse requires assimilation of knowledge, acquisition of skills, and development of judgment through patient care experiences in preparation for independent, semi-autonomous practice where making appropriate decisions is required. The practice of nursing emphasizes collaboration among physicians, nurses, allied health care professionals and the patient.

The curriculum leading to the AAS-RN from this School requires students to engage in diverse, complex, and specific experiences essential to the acquisition and practice of essential nursing skills and functions. Unique combinations of cognitive, affective, psychomotor, physical, and social abilities are required to satisfactorily perform these functions. In addition to being essential to the successful completion of the requirements of the AAS-RN, these functions are necessary to ensure the health and safety of patients, fellow candidates, faculty and other healthcare providers.

The essential abilities necessary to acquire or demonstrate competence in a discipline as complex as nursing and needed for successful admission and continuance by candidates for the AAS-RN at Highline College, in addition to the standards of behavior and academic conduct set forth in the Nursing Program handbook and the Highline College Student Conduct Code. Students must be able to perform the essential elements either with or without reasonable accommodations, including but not limited to the following abilities:

Motor Skills
Candidates should have sufficient motor function so that they are able to execute movements required to provide general care and treatment to patients in all health care settings.
For example: for the safety and protection of the patients, the candidate must be able to perform basic life support, including CPR, and function in an emergency situation. The candidate must have the ability, within reasonable limits, to safely assist a patient in moving, for example, from a chair to a bed, or from a wheelchair to a commode.

Sensory/Observation
Candidates must:
- be able to acquire the information presented through demonstrations and experiences in the basic and nursing sciences
- be able to observe a patient accurately, at a distance and close at hand, and observe and appreciate non-verbal communications when performing nursing assessment and intervention or administering medications
- be capable of perceiving the signs of disease and infection as manifested through physical examination; such information is derived from images of the body surfaces, palpable changes in various organs and tissues, and auditory information (patient voice, heart tones, bowel and lung sounds)

Communication
Candidates must:
- communicate effectively and sensitively with other students, faculty, staff, patients, family, and other professionals

- express his or her ideas and feelings clearly and demonstrate a willingness and ability to give and receive feedback
- must be able to:
  ◦ convey or exchange information at a level allowing development of a health history;
  ◦ identify problems presented;
  ◦ explain alternative solutions; and
  ◦ give directions during treatment and post-treatment
- be able to communicate effectively in oral and written forms
- be able to process and communicate information on the patient's status with accuracy in a timely manner to members of the health care team (the appropriate communication may also rely on the candidate's ability to make a correct judgment in seeking supervision and consultation in a timely manner)

Cognitive
Candidates must:
- be able to measure, calculate, reason, analyze, integrate and synthesize in the context of undergraduate nursing study
- be able to quickly read and comprehend extensive written material
- be able to evaluate and apply information and engage in critical thinking in the classroom and clinical setting

Behavioral/Emotional
Candidates must:
- possess the emotional health required for the full utilization of his or her intellectual abilities
- exercise good judgment
- promptly complete all responsibilities attendant to the diagnosis and care of patients and families
- be able to maintain mature, sensitive, and effective relationships with patients, students, faculty, staff and other professionals under all circumstances, including highly stressful situations
- have the emotional stability to function effectively under stress and to adapt to an environment that may change rapidly without warning and/or in unpredictable ways
- be able to experience empathy for the situations and circumstances of others and effectively communicate that empathy
- know that his or her values, attitudes, beliefs, emotions, and experiences affect his or her perceptions and relationships with others
- be able and willing to examine and change his or her behavior when it interferes with productive individual or team relationships
- possess skills and experience necessary for effective and harmonious relationships in diverse academic and working environments

Professional Conduct
Candidates must:
- possess the ability to reason morally and practice nursing in an ethical manner
- be willing to learn and abide by professional standards of practice
- not engage in unprofessional conduct
- possess attributes that include compassion, empathy, altruism, integrity, honesty, responsibility and tolerance
- be able to engage in patient care delivery in all settings and be able to deliver care to all patient populations including but not limited to:
  ◦ children

- ◦   adolescents
- ◦   adults
- ◦   developmentally disabled persons
- ◦   medically compromised patients, and
- ◦   vulnerable adults

Reasonable Accommodation for Disabilities

The Highline College Nursing Program is committed to ensuring that otherwise qualified students with disabilities are given equal access through reasonable accommodations to its services, programs, activities, education and employment for students with disabilities. The Nursing Program works closely with Access Services in this process. Access Services is the contact point for students with permanent or temporary sensory, physical or psychological disabilities interested in requesting reasonable accommodations due to the effects of a disability.

Students who wish to request reasonable accommodations are encouraged to contact Access Services to start the process for documenting their disability and determining eligibility for services prior to the start of the program. While this process can be started at any time, reasonable accommodations may not be implemented retroactively so being timely in requesting your accommodations is very important. Access Services does have policies regarding the type of documentation required in order to diagnose different disabilities and a process for requesting accommodations. To learn more about the process for establishing services through Access Services, please contact their office at;

Mailing Address:
Highline College
Access Services
P.O. Box 98000 M/S 99-180
Des Moines, WA 98198-9800

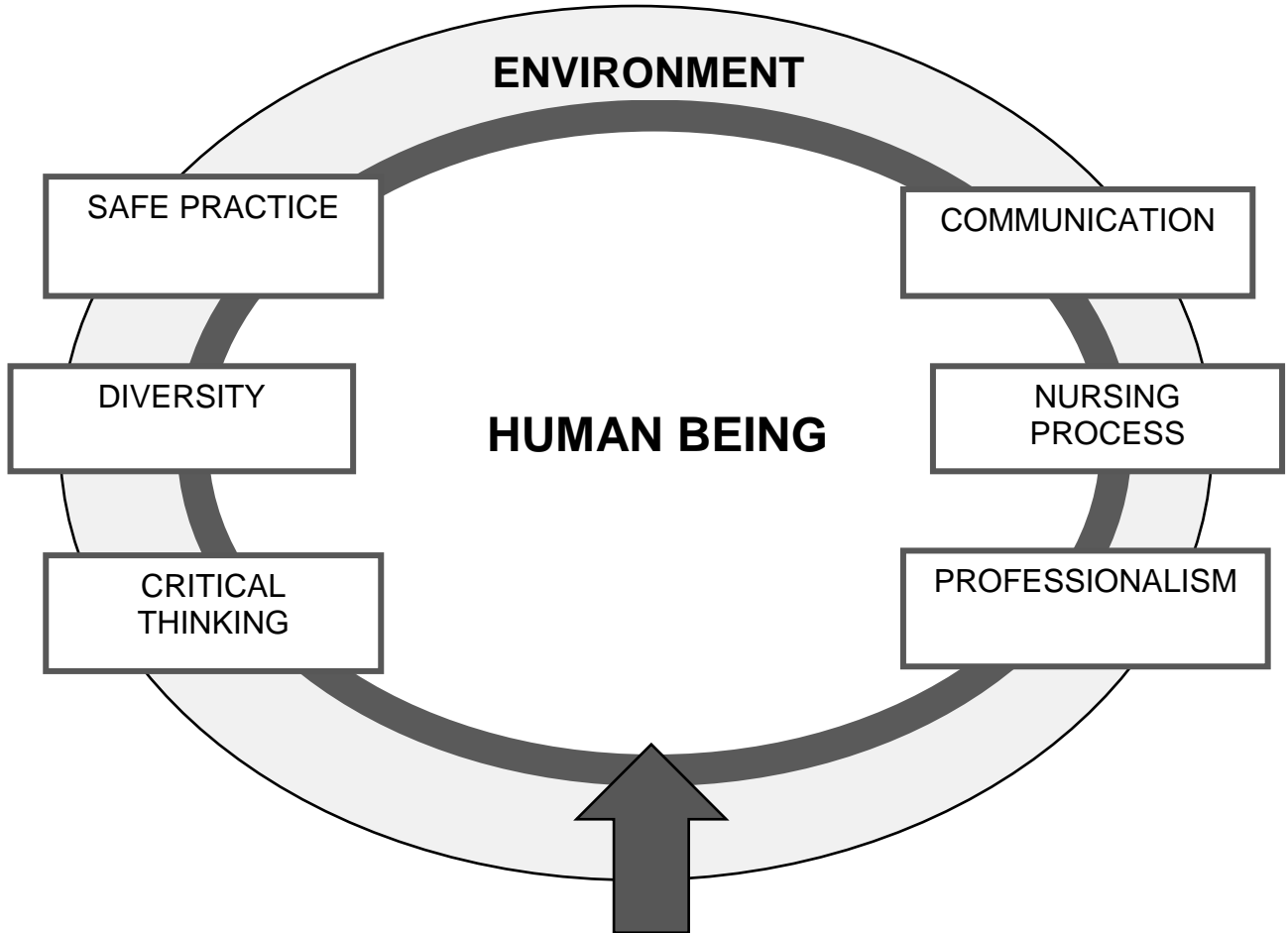Office Location:
Building 99, Room 180
(campus map)

Email:
access@highline.edu

Students with disabilities are expected to perform all the essential functions of the program with or without reasonable accommodation. The Highline College Nursing Program will work with the student and the respective campus disability office to provide reasonable and appropriate accommodations. While The Nursing Program will make every effort to work with our students with disabilities to accommodate their disability-related needs, it is important to note we are not required to provide requested accommodations that would fundamentally alter the essential functions or technical standards of the program.

Essential Qualifications language adapted with permission.
- Katz JR, Woods SL, Cameron CA & Milam S. (2004). Essential Qualifications for nursing students. Nursing Outlook, 52, 277-288.
- University of Washington: School of Nursing. (2014). Memo 27: Essential Qualifications for BSN and ABSN Students. Retrieved August 12, 2016 from, https://nursing.uw.edu/students/training/policies/behaviors-bsn/

HIGHLINE COLLEGE
ASSOCIATE DEGREE NURSING PROGRAM
CONCEPTUAL FRAMEWORK AND ORGANIZATION

ENVIRONMENT

SAFE PRACTICE

COMMUNICATION

HUMAN BEING

DIVERSITY

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CONCEPTUAL FRAMEWORK

Nursing spans a very broad range within science and art: human life, preventive health care, illness, healing, and health education to name just a few. As a relatively new profession, there exists much debate regarding what the practice of nursing is and how it ought to be approached educationally. The Nursing (ADN) Program developed a conceptual framework to be used as a tool to aid students in developing an integrated concept of nursing that they will be able to implement in their professional practice. The conceptual framework serves much the same purpose as the framework of a house—it is the foundation and structure within which various concepts can be studied systematically and in relationship to one another.

Mission Statement

The Nursing Program Mission Statement provides the foundation for the conceptual framework of the program curriculum. Nursing graduate outcomes are derived from the Nursing Program mission.

Nursing Graduate Outcomes

The Nursing Program has the responsibility to the public to assure that its students and graduates are competent. In order to facilitate this, the program utilizes the following as criteria to measure competence.

The outcomes listed below delineate competencies which have been developed by graduates at the point of completion of the Nursing Program. Objectives for theory, clinical and laboratory courses are based on these outcomes. Students/graduates who achieve these outcomes are prepared for excellence in nursing practice.

Nursing Graduate Outcomes

1. Employ critical decision making to prioritize and appropriately attend to client specific needs, using data collection and analysis, problem identification, care planning, care delivery and evaluation of care.
2. Provide accurate verbal and written communication using appropriate technology, while adapting to consider the needs of culturally and educationally diverse clientele and interdisciplinary health care team members.
3. Demonstrate proficiency in psychomotor skills, computation, therapeutic communication, client education and use of technology in provision of nursing care.
4. Function as an effective team member of the healthcare team, practicing collaborative leadership, delegation and client advocacy to provide goal-oriented care.
5. Perform optimally in the dynamic health care system by incorporating the best evidence available into client care and continuing education.
6. Adhere to scope of professional practice and contribute to the profession through participation in professional organizations and sociopolitical awareness.

Student Learning Outcome Domains

Six student learning outcome domains are consistent throughout the Nursing Program curriculum: *Critical Thinking, Communication, Diversity, Nursing Process, Safe Practice,* and *Professionalism.* Specific learning objectives for every domain are identified in each course, and student learning objectives progressively increase in complexity with successive quarters of coursework. In performance of these objectives students assume the nursing role in various environments with diverse human beings.

The Human Being

The core focus of nursing, and thereby of student learning outcome domains, is the human being. The human being is viewed holistically, encompassing biological, psychological, and sociocultural dimensions. Along with examining phenomena that are characteristic of all human beings, acquiring an awareness and understanding of the uniqueness of each human being is essential.

The Environment

The environment is viewed from two perspectives: (1) as the context in which human interactions occur; and (2) as a significant determinant of human growth and development. Aspects of the environment include, but are not limited to physical, social, economic, and political facets. Reciprocal influences among environmental facets and the human being are explored throughout the student learning outcome domains.

NURSING PROGRAM CURRICULUM ORGANIZATION

The Nursing Program curriculum consists of six consecutive quarters (excluding summers) identified as Levels 1-6. A new cohort of students begins each quarter. Two year RN students begin in level 1. LPN-RN articulation students begin in level 4. All levels include theory coursework and clinical practicum. Most levels also include a psychomotor skills (lab) component.

For each level there is one lead instructor as well as a variable number of additional full-time and/or part-time instructors.

Nursing Program Coursework Schedule

1st Quarter	2nd Quarter	3rd Quarter
Nurs 101: (7 credits) Level I: Introduction to Nursing Nurs 111: (5 credits) Practicum I: Wellness Settings (*Focus areas: Nursing Skills Lab, Childbirth, Community sites*)	Nurs 102: (7 credits) Level II: Alterations in Wellness Nurs 112: (5 credits) Practicum II: Alterations in Wellness (*Focus areas: Nursing Skills Lab, Geriatric Nursing, Community Sites*)	Nurs 103: (7 credits) Level III: Acute Care Nurs 113: (5 credits) Practicum III: Acute Care (*Focus areas: Nursing Skills Lab, Medical-Surgical Nursing, Community Sites*)
4th Quarter	**5th Quarter**	**6th Quarter**
Nurs 200: (1 credit) (LPN-RN only) LPN-RN Articulation Seminar Nurs 201: (5 credits) Level IV: Complex Care Nurs 211: (4 credits) Practicum IV: Complex Care (*Focus areas: Medical-Surgical and Psychiatric Nursing*) Nurs 224: (3 credits) Level IV: Culture, Health & Illness	Nurs 202: (7 credits) Level V: Critical Care Nurs 212: (5 credits) Practicum V: Critical Care (*Focus areas: Medical-Surgical, Pediatric Nursing, Community Sites*)	Nurs 203: (4 credits) Level VI: Leadership/ Transition to Practice Nurs 213: (8 credits) Practicum VI: Preceptorship

The Pinning Ceremony for each quarter's graduating class is held on the Wednesday of Final Exam week.

PROGRAM POLICIES AND PROCEDURES

All students admitted to the Nursing Program are required to read the Nursing Student Handbook of the Highline College Associate Degree Nursing Program. The Nursing Student Handbook is updated every fall quarter. Students will be required to acknowledge that they have read and will comply with all program policies and procedures in the current handbook and any revised handbooks throughout their time in the program. Students must comply with the most current handbook policies and procedures regardless of when they started the program.

In addition to program policies and procedures, nursing students must also abide by the Essentials Qualifications for Highline Nursing Students (page 4) and the Highline College Student Conduct Code found here;
http://apps.leg.wa.gov/WAC/default.aspx?dispo=true&cite=132I

GENERAL INFORMATION / PROGRAM POLICIES

I.   **Fees**

Fees are collected at registration as described below. The HC Online Class Schedule lists course fees. **All fees are nonrefundable.**

Laboratory Fees:
A laboratory fee will cover the cost of consumable materials used in the Health Occupations Learning Lab.

Other fees:
Other fees include fees for required NCLEX-RN predictor tests and clinical placement.

II.   **Health Insurance**
Health insurance is required. No student may attend clinical without proof of current accident insurance on file. Information regarding health insurance through the college is available in Bldg. 6. Accidents occurring in the clinical area must be reported to the nursing instructor and department coordinator. Emergency first aid treatment at the clinical site and more extensive care with the student's personal care provider is the financial responsibility of the student. An HC Accident/Incident Report must be filed in the office of the Nursing Program Coordinator.

III.   **Required Standardized Testing**
During the final quarter of the Nursing Program, students will be charged a fee to purchase one standardized achievement test supplemental to class evaluation. It is mandatory that students successfully complete this exam. Students who do not meet the predetermined passing score will need to retest at their expense OR provide evidence of completion of a NCLEX-RN prep course. Additional standardized tests may be offered at various times throughout the program to familiarize students with the NCLEX-RN exam process.

IV. **Background Check**

A check of student's background for criminal history information is required annually. Certain crimes on the record may prevent a student from achieving course outcomes. The clinical agency may not allow a student to enter their facility due to the results of the background inquiry.

V. **Health**

Students are required to submit documentation to support completion of requirements for the *Clinical Passport* form by the established deadline **prior to any clinical placement**. The Nursing Program Assistant reviews each student's documentation and contacts the student for further clarification as needed.

Students are responsible for maintaining current status of their health and safety requirements throughout the program.

It is the responsibility of the student to notify the instructor if, due to illness or injury, s/he is unable to perform the activities listed in the document: *Necessary Skills & Abilities for Nursing Students* (see Appendix). The student must provide a written request for restrictions or modifications. A written statement from a primary care provider may be required. The faculty will determine if restrictions allow the student to meet course objectives.

Students May Not Attend Clinical Activities When They:

A. Have any health or safety requirements that are not current.
B. Are experiencing the acute phase of a communicable disease.
C. Are under the influence of alcohol or any drug (prescription or non-prescription) that affects motor and/or cognitive function.
 Students are required to follow the clinical facility's policies regarding positive urinalysis drug testing.
D. Are physically or mentally unable, for any reason, to concentrate on clinical concerns and provide safe client care.

VI. **Communicable Diseases Policy**

Refer to: http://www.immunize.org/catg.d/p2017.pdf (CDC Guidelines for Healthcare Personnel)

VII. **Standards of Conduct**

All Highline students must abide by the Highline College Student Conduct Code (http://apps.leg.wa.gov/WAC/default.aspx?dispo=true&cite=132I)

Additionally, the following standards of conduct apply to Highline nursing students;

A. Cheating, plagiarism, and other forms of academic dishonesty are unacceptable.
B. Verbal and written communications must be truthful.

C   Disorderly, abusive, or bothersome conduct will not be tolerated.

D. Social Networking

- Students shall not use online social networking to harass, threaten, or discriminate against other students, faculty, staff, or any member of the public.
- Confidentiality of students, faculty, staff, and clinical clients shall be maintained at all times.
- Client information or clinical situations shall not be discussed on social networking sites.
- Students shall not use social networking to share contents of tests or assignments resulting in academic dishonesty (plagiarism, cheating).

On campus computing resources and network capacity may not be used for illegal purposes. Examples of illegal purposes include:

- Intentional destruction of or damage to equipment, software, or data belonging to HC or other users.
- Intentional disruption or unauthorized monitoring of electronic communications.
- Unauthorized copying of copyrighted material.

The use of/posting of unauthorized (where permission has not been obtained from involved parties) pictures, logos, videos, or HC Nursing Program materials is prohibited. Students using online social networking who identify themselves as associated with HC Nursing Program must clearly state that any views or opinions made do not represent the HC Nursing Program. Faculty and staff have the right to monitor any comments or discussions about HC Nursing Program employees, students, clinical sites/patients, or other matters directly related to the HC Nursing Program.

Social networking, texting, e-mail, and other recreational computer use will not be done during class or clinical time.

E. Smoking

Highline College campus policy allows smoking only in designated areas on campus. All clinical sites are non-smoking facilities.

F. Cellular Phones

When in the classroom, Health Occupations Learning Lab, or clinical setting, cellular phones must not be heard. Cell phone conversations must be conducted outside the lab, the classroom, or the clinical unit.

G. Children

Children are not allowed in classrooms or in the Health Occupations Learning Lab.

H. Electronic Communication

Electronic communication is essential for success in the Nursing Program. Announcements and course materials may only be available electronically. Students are responsible for reading email and Canvass postings on a daily basis. Students may be required to submit assignments electronically. These policies support HC's Campus Sustainability campaign, and promote technological competence.

I. Student Opportunities for Faculty/Course/Program Evaluation

Students have the opportunity to evaluate instructors and courses on a quarterly basis. Program evaluation is done through formal and informal survey methods.

VIII. **Outside Working by Student**
Working more than 16-20 hours per week or taking additional coursework may inhibit satisfactory clinical progress and academic achievement. Faculty may recommend that students reconsider work or additional coursework commitments when academic progress is jeopardized. Students are urged to seek counseling and/or assistance from the Financial Aid Office.

IX. **Financial Aid**
Financial aid is processed through the Financial Aid Office, located in Building 6. A number of grants, loans, scholarships, tuition waivers, and jobs are available to qualified students.

Additional funding may be offered to nursing students. The student should contact the HC Foundation Office and Women's Programs and check the bulletin boards in the Health Occupations Learning Lab for information regarding these avenues for financial assistance.

X. **Student Organizations**

A. All students have the opportunity to participate in HC student government, clubs, organizations, and activities sponsored by various groups on campus.

B. All nursing students are members of the HC Student Nursing Club. Nursing students may also apply for membership in the National Student Nurses Association (NSNA). Members of NSNA are eligible to be elected as HC Student Nursing Club officers. There is a fee for NSNA membership.

C. The HC Student Nursing Club is a chapter of NSNA, and is governed by its bylaws.

D. The mission of NSNA is to:

    a. Organize, represent, and mentor students preparing for initial licensure as registered nurses, as well as those nurses enrolled in baccalaureate completion programs
    b. Convey the standards and ethics of the nursing profession
    c. Promote development of skills needed to be responsible and accountable members of the nursing profession
    d. Advocate for high quality health care
    e. Advocate and contribute to advances in nursing education.

I.   **Theory Courses**

A.   **Class Attendance**
Theory class attendance is strongly recommended. In accordance with the HC Grading Policy, students who have not attended at least 50% of the scheduled class sessions held during the first 31 calendar days of the academic quarter may be withdrawn from the course by the faculty.

B.   **Academic Progression**
In order to successfully pass each theory course, students must achieve a cumulative point score of 80% on exams and quizzes. Once this requirement has been met, course activity and assignment points will be added to provide a final course grade. The final course grade must be at least 80%. Percentages are not rounded up (e.g. 79.9% is not a passing grade).

C.   **Evaluation**
All theory and self-managed learning courses are graded using a numerical grade point. In the Nursing Program, the grade assigned for each course is based upon the raw score percentage of total achieved points divided by total possible points:

Total number of correct test items & other points (assignments)
Total number of test items & other points

Instructors may award bonus points on tests. Bonus points do not alter the original point value of the test.

D.   **Medication Calculation Proficiency**
The ability to accurately calculate medication dosages is essential for client safety. During each quarter of the Nursing Program, students must achieve the required proficiency level appropriate to that level (see course syllabus for required proficiency levels). Failure to achieve the required proficiency level will result in remediation activities, followed by a second opportunity to test. Failure of the second test will result in establishment of a Probationary Contract. Students who are already on a probationary contract may be asked to withdraw or may be dismissed from the program.

E.   **Extra Credit**.
Instructors may elect to offer students opportunities for extra credit points, not to exceed 2% of the total points available in the given course. Extra credit points are only available to students who are successfully passing the course (i.e. 80% or above). Extra credit will not allow an otherwise failing student to pass.

F. Grading Scale

Percentage	Decimal Grade	Percentage	Decimal Grade
95 - 100%	**4.0**	**72%**	**1.9**
94%	3.9	71%	1.8
93%	**3.8**	**70%**	**1.7**
92%	3.7	69%	1.6
91%	**3.6**	**68%**	**1.5**
90%	3.5	67%	1.4
89%	**3.4**	**66%**	**1.3**
88%	3.3	65%	1.2
87%	**3.2**	**63%-64%**	**1.1**
86%	3.1	60%-62%	1.0
85%	**3.0**	**58%-59%**	**0.9**
84%	2.9	56%-57%	0.8
83%	**2.8**	**55%**	**0.7**
82%	2.7	54%	0.6
81%	**2.6**	**53%**	**0.5**
80%	2.5	52%	0.4
79%	**2.4**	**51%**	**0.3**
78%	2.3	50%	0.2
77%	**2.2**	**49%**	**0.1**
75%-76%	2.1	48%	0.0
73%-74%	**2.0**		

G. Late Assignments and Activities
Late assignments and activities are subject to a penalty of a 10% decrease in grade per calendar day the assignment is late, unless prior arrangements have been made with the instructor.

H. Rescheduled Examinations
Students are expected to be in attendance at each scheduled exam. If personal illness or family emergency occurs, students must contact the instructor prior to the test and make arrangements to take the exam at the earliest possible date and no later than one week after its originally scheduled date. The exam will then be proctored and timed by the campus Testing Center. The instructor will not be present to clarify any questions about exam items. Students should anticipate taking planned test reschedules prior to the testing date. Test rescheduling will be provided at the instructor's discretion.

HC Nursing Program policy regarding rescheduled exams:

1. 2-year students may reschedule two exams over six quarters without deduction from the exam score. LPN-RN students may reschedule one exam over three quarters without deduction to the exam score.

2. All subsequent rescheduled exams will have a 10% score deduction.
   Example: If student earned 100%, test score would drop to 90%.
3. If a student's circumstances (e.g. illness, emergency) result in missing multiple exams within an episodic time period, all such exams will be counted as one reschedule (e.g. 3 missed final exams in one week = 1 reschedule).
4. Quizzes may be made up and may be counted as rescheduled exams at the discretion of the nursing instructor.

I. **Test Confidentiality**

Nursing instructors may assign seating for tests at their discretion.

II. **Laboratory Practicum**

A. **Skills**

The initial introduction of each skill will be an opportunity to observe and practice new nursing skills. Information will be presented through lecture, readings, audiovisual aids, and simulations. Instructors will provide demonstrations to small groups.

Proficiency in a skill requires independent practice and collaborative learning with fellow students. The student must expect to practice the skill a minimum of three times before testing. Additional time is available in the Lab for independent practice.

Students will be required to demonstrate the skill to an instructor before performing the skill in the clinical setting. Students must meet minimum criteria to pass the Return Skills Demonstration (RSD): 100% proficiency in critical skills, no greater than two areas which require assistance by the faculty and no areas in which the student is dependent on faculty in order to complete the skill. If the student does not meet the minimum criteria on the first attempt, they must repeat the RSD according to the course syllabus. Unsatisfactory performance of the same skill on the second RSD will result in course failure.

B. **Health Occupations Learning Lab Policies**

1. Scrubs will be worn for all scheduled lab time.
2. All cell phones must be turned to the silent mode in the lab. Cell phone conversations must be taken outside of the lab.
3. Eating is allowed in designated areas only. No food or drink is allowed in computer areas.
4. There are library reference materials available for writing papers or research assignments. These materials may be checked out through the Information & Classroom Support Technician in the Health Occupations Learning Lab. Any library materials that have been checked out and not returned are subject to a fee and holding of grades until the item is returned or the fee is paid.

III.   Clinical Courses

A. Attendance
Punctual attendance is mandatory for all clinical courses and clinical community experiences. When unexpected situations arise that force a student to be late or prevent a student from attending, the student must report the absence to the instructor and the assigned clinical unit <u>PRIOR</u> to the beginning of the clinical shift.

Students are expected to attend all assigned clinical rotations in order to allow for sufficient learning to meet clinical course objectives. Students absent for two days of a clinical rotation risk course failure. Students absent for three days of a clinical rotation will be required to withdraw from the Nursing Program.

Clinical facilities have the right to refuse student placements at their site for any reason(s) congruent with their policies. In the event this occurs, the HC Nursing Program is not obligated to place students at another site.

B. Assignments
Written assignments are critical tools both for learning and for evaluation of progress. Realistic deadlines for assignments are established and must be met.

C. Clinical Site Assignments
Student clinical site assignments will be determined by faculty. Students cannot change clinical sites without instructor permission.

D. Selecting Your Clients
Proper client preparation is outlined for each clinical rotation. Follow guidelines provided by clinical faculty each quarter. It is expected that you will select a variety of clients, with diagnoses consistent with what you are studying in theory classes (whenever possible), as well as clients who need medications or procedures which correspond to lab skills for the quarter.

E. Dress Code
The HC Nursing Program has a standardized dress code designed to promote an easily identified professional image and to maintain infection control standards. All HC nursing students are required to abide by this dress code for any activities related to a clinical course. If modifications cannot be made immediately, the student may be required to leave the clinical setting.

1.   **General Requirements**:
     The following guidelines apply to all clinical situations, even those where a uniform is not required.

     A. <u>ID:</u> Students will obtain a picture ID badge from the college (Building 6). The badge **must be worn at all clinical experiences**.
     B. <u>Hair:</u> Worn off the collar and arranged neatly (pulled back in a ponytail or pinned up). Beard/mustache must well-groomed.
     C. <u>Nails:</u> Manicured and short-to-medium length. No nail polish. **No acrylic nails.**

D. **Jewelry:** No visible jewelry.

E. **Earrings/Body Piercing / Tattoos**. Small posts, one in each ear allowed. Ear gages must have plugs. Other body piercings must be covered or removed. Tattoos must be covered.

F. **Make-up:** Minimal.

G. **Perfume:** Absolutely no perfume/cologne of any type. Many people are allergic to the chemicals used in the fragrance; others find it offensive.

H. **Body:** Good hygiene is essential (bathing/showering/deodorant as needed).

I. **Gum:** No gum chewing at clinical.

J. **Documentation:** No gel pens are to be used.

2. **Clinical Uniform:**

A. **Scrubs:** Uniforms must be purchased at the Highline College book store or be pre-approved by a nursing faculty member. The Highline RN Program patch is to be ironed or sewn onto the upper left portion of the uniform top (at level of the heart).

B. **Shoes:** No backless shoes, no open-toe shoes, no crocs are allowed. Shoes must be all neutral tone and solid color.

C. **Sweaters:** Students are not to wear their own sweaters with the college uniform. If a t-shirt or turtleneck is needed under the uniform for warmth, it must be plain white, black, gray, or navy.

F. **CPR Cards**
Students must have a current American Heart Association Healthcare Provider Basic Life Support (BLS) card. It must be submitted to the Nursing Program Assistant on entry into the program. The card must be current throughout the Nursing Program.

G. **Licensed Practical Nurses**
Licensed Practical Nurses must maintain a current and unencumbered license while enrolled in the Nursing Program.

H. **Safe Clinical Practice**
The faculty will provide a safe laboratory and clinical practice for the student. Laboratory practice and evaluation may require activities that necessitate physical interactions between students.

Parenteral injection practice will take place only in the Health Occupations Learning Lab. Injections will be done on models only. In the clinical setting instructor observation is required for every parenteral injection until the student is evaluated to be independent. Medications administered by intravenous push (excluding saline/heparin flush and IV piggy-back (IVPB) meds) may only be administered with the instructor's or a staff RN's direct supervision.

Nursing students are never to administer IV chemotherapy, experimental drugs, or medications by epidural route. Nursing students are not to administer blood or blood products. Nursing students are not to accept verbal or telephone physician orders.

I.   Professional Boundaries
As part of maintaining professional nurse-client boundaries, students shall not have personal contact in any form with present or past clients. This includes, but is not limited to, sharing telephone numbers, email, or social media addresses.

J.   Previous Employment
Students who have been employed by healthcare systems and were terminated from their employment may not attend a clinical rotation at these facilities. In such cases, students should immediately notify the Nursing Program coordinator.

K.   Evaluation of Clinical Performance

Evaluation of students' clinical performance is documented weekly in each student's *Clinical Evaluation Form,* which is kept in the student's file folder. Students should view this form weekly and must initial the last page of the document indicating they have done so.

Weekly ratings are formative evaluations, intended to give the student information about his/her performance. These reflect the instructor's evaluations for that week only. Information about a student's progress and/or need to improve should not be a surprise to the student at the end of the quarter.

The *Clinical Evaluation Form* criteria are based on six student learning outcome domains (see page 9). Within each domain, specific objectives are identified. These objectives progressively increase in complexity throughout the nursing program.

.   Rating Clinical Performance:

The rating scale for each learning objective in the *Clinical Evaluation Form is:*

> *0 = Objective not met*
> *1 = Objective met*

A formative rating of 0 is not a failure. It is anticipated that new or difficult experiences will result in this lower rating, as students are in the process of learning. The goal for students is to attain level 1 ratings by the end of each clinical course, however many students do not initially achieve these ratings.

Students are encouraged to meet with the instructor 1:1 to discuss concerns they have.

Unsafe/Unethical Practice and Misconduct

Nursing students are expected to demonstrate <u>safe and ethical</u> behaviors in all theory courses, clinical, and community site settings. Unsafe and/or unethical actions are identified (but not limited to) the following examples:

Examples of unsafe/unethical actions that will result in dismissal from the Nursing Program:

1. Falsifying client care records (e.g. recording that medication administration, treatments, or observations were done when they were not, or recording that they were done before their actual completion).
2. Engaging, in or attempting to engage in sexual misconduct with a current client, family member or colleague.
3. Causing or contributing to the physical or emotional abuse of a client.
4. Violating the confidentiality of information concerning a client.
5. Theft of medications, supplies, equipment or any items belonging to the client, agency, or institution.
6. Providing client care while impaired by alcohol or drugs (prescribed or non-prescribed).
7. Failure to disclose prior convictions with criminal background information will result in Nursing Program dismissal.

Examples of unsafe/unethical actions that will result in disciplinary action, with possible dismissal from the Nursing Program:

1. Failing to assess or evaluate a client's status, or failing to report an incident involving actual or potential harm to a client.
2. Failing to implement nursing interventions as required by the client's condition or failing to question an order or action when in doubt.
3. Failing to document accurately or intelligibly.
4. Giving false information regarding clinical/community site attendance.
5. Performing activities for which the student is unprepared; failure to obtain adequate instruction or supervision in the performance of activities.
6. Attending clinical while impaired by any mental or physical condition.
7. Breaking something that belongs to the facility or to a client and not reporting it.
8. Leaving the clinical unit/facility without informing the clinical instructor.
9. Violating professional boundaries with present or past clients.
10. Academic dishonesty: e.g. cheating on exams/quizzes, plagiarism.

For a more complete description of unsafe/unethical actions, refer to the ANA Code of Ethics for Nurses found here;
http://nursingworld.org/MainMenuCategories/ThePracticeofProfessionalNursing/EthicsStandards/CodeofEthics.aspx

STUDENT-INSTRUCTOR CONFERENCES AND STUDENT CONTRACTS

I. Student-Instructor Conferences

Instructors may meet with students for a variety of reasons. For a clinical course situation, the conference may be recorded on the *Clinical Evaluation Form.* If not a clinical course, or if the clinical instructor wants an additional record of the conference, a *Record of Student-Faculty Conference* form may be completed. A copy is given to the student, one is kept by the instructor, and one is kept in the student's permanent file.

II. Learning Contracts

A Learning Contract (see Appendix) results from an assessment of the student's performance revealing some deficits. While the student satisfactorily meets many course objectives, there are some that require the student's immediate attention and improvement in order to meet the level at which the student should be performing. This contract is established to clarify specific problem areas and direct the student's learning.

When instituting a Learning Contract, the student and instructor meet privately to review the contract, establish a plan, and set deadlines. A copy of the contract is given to the student.

If the criteria are met within the designated time frame, the contract is removed. If the criteria are not met, the student will progress to a Probationary Contract. A student may continue on a Learning Contract into the next quarter(s). If a second contract is required for the same issue, it must be a Probationary Contract.

III. Probationary Contracts

A Probationary Contract (See Appendix) results when the student demonstrates significant deficits or unsuccessful completion of a Learning Contract.   A Probationary Contract may be established even if a Learning Contract has not been used previously.

When instituting this contract, the student and the instructor meet privately to review the contract, establish a plan and review deadlines. A copy of the contract is given to the student. In general, the contract emphasizes specific objectives that are not currently being met.

The Probationary Contract remains in effect until the student graduates from the Nursing Program. Only one Probationary Contract may be established per student during the Nursing Program. Failure to fulfill the terms of a probationary contract will result in withdrawal or dismissal from the Nursing Program.

Students may be required to withdraw or be dismissed from the Nursing Program without having a Learning Contract or Probationary Contract.

I. Program Withdrawal

Students may withdraw from the Nursing Program for personal reasons, or be required to withdraw due to course failure. In such cases students will be allowed one opportunity to re-enter the program, <u>space permitting</u>. Students must re-enter within one year of withdrawal.

Course failure occurs if the student:

A. Achieves, or will achieve a cumulative grade less than 2.5 (80%) on exams and quizzes in a required nursing theory course.

B. Achieves, or will achieve a final course grade less than 2.5 (80%) in a required nursing theory course.

C. Fails a practicum course, with or without a learning or probationary contract. Failure of a practicum course may occur for many reasons, including, but not limited to: (1) failure to meet practicum course objectives; (2) failure to satisfactorily meet the conditions of a Probationary Contract.

Note: Any pre-existing Learning Contract or Probationary Contract will remain in effect upon Nursing Program re-entry.

Provisions for Re-Entry Due to Withdrawal -- Course Failure

The nursing faculty subscribes to the philosophy that failure in an initial attempt does not negate the possibility of eventual program success.

Students who have failed a <u>practicum course</u> may elect to:

A. Withdraw from the Nursing Program and register for all required courses in the quarter of re-entry.

B. Continue theory coursework for credit for the quarter in which the clinical course failure occurred. In such instances, in the quarter of re-entry, the student is only required to register for practicum coursework; however must attend 90% of all theory courses.

Note: Students re-entering the Nursing Program after a practicum course failure must retake the clinical course and pass its objectives at a completely satisfactory level in order to proceed. No Probationary Contract will be permitted in the re-entry practicum or in any future practicum. Students who have failed a <u>theory course</u> must register for practicum and theory course in the quarter of re-entry.

II.   **Program Dismissal**

Students may be dismissed from the Nursing Program for the following:

- Violation of program policies
- Failure to fulfill the terms of a probationary contract
- Unsafe/unethical behaviors

Note: Students dismissed from the Nursing Program are not eligible for Nursing Program re-entry.

GRIEVANCE PROCEDURES

Instructional Grievance Procedure

Highline College provides a process through which students can seek resolution of complaints about instructional matters. Typically, these matters include grades and classroom practices. Excluded from this process are those complaints for which other specific remedies are provided such as Title IX discrimination claims or program dismissal. An attempt should be made to resolve all instructional complaints in an informal manner. The interests of all are best served when complaints are resolved at the lowest possible level of the administrative structure.

Step 1: Discussion with Faculty Member
The student should first discuss the situation with the faculty member involved, before meeting with anyone else. Any employee of the college receiving a complaint concerning a faculty member shall encourage the complainant to meet with the faculty member involved.

Step 2: Discussion with Department Coordinator and/or Division Chair
If the student has already discussed the matter with the faculty member or refuses to do so, and desires to pursue the complaint, the student will be directed to meet with the division chair if the complaint is against a full-time faculty member, or with the department coordinator if the complaint is against a part-time faculty member. Upon hearing the complaint, the chair or department coordinator should attempt to facilitate resolution by encouraging further discussions between complainant and the faculty member, using a third-party intermediary if necessary.

Step 3: Written Grievance to Division Chair and Faculty Member
If all attempts at an informal resolution have failed, the student must submit in writing to the chair and the faculty member involved the complaint and a chronology of the attempts at resolution. The faculty member may choose to send the chair a written response to the complaint. After reviewing the complaint with the parties involved, the chair will provide, in a timely manner, a written response to the complainant and faculty member, which includes the chair's resolution to the complaint. Failure of the faculty member to comply with the resolution, if applicable, will be considered the same complaint and will be appealed to the chair.

Step 4: Appeal to the Vice President for Academic Affairs
If the student wishes to pursue the matter, he or she must provide to the vice president for Academic Affairs all written materials initially provided to the chair and the response from the chair.

Upon reviewing the complaint with the appropriate parties, the vice president for Academic Affairs (or designee) will provide an opportunity for the faculty member and the complainant to submit additional materials related to the written complaint. The vice president for Academic Affairs (or designee) may consider other related complaints in reaching a resolution.
Prior to issuing a written response, the faculty member will have the opportunity to review all written materials the vice president for Academic Affairs (or designee) has considered in resolving the complaint(s). Copies of the vice president for Academic Affairs' (or designee's) resolution will be sent to the complainant and the faculty member.

Program Dismissal Grievance Procedure.

Students who have been dismissed from the Nursing Program may request an independent review of the dismissal decision. This review process will determine whether or not the established program dismissal procedures were followed. This review will not review grievances related to grades or individual faculty. For grievances related to grades or individual faculty, see the Instructional Grievance Procedures in previous section. For further information regarding the dismissal review process, see the *Health Occupations Dismissal Review Form* in appendices.

LETTER OF RECOMMENDATION/REFERENCE INFORMATION

The HC Nursing Program faculty will, at their discretion, prepare honest and personalized letters of recommendation or reference information.

Students should check with the places where they intend to apply to determine if a specific form of reference letter is required, or if certain student abilities must be addressed in the letter.

Students should contact their instructor(s) for permission to be used as a reference source.

The following guidelines have been established for requesting letters of recommendation or references:

1. Requests for letters of recommendation must be received in writing by the faculty member **at least two weeks** prior to when they are needed.

2. In general, it is best to seek a letter of recommendation from the most recent clinical instructor. Theory instructors with whom the student has had extensive contact are another good source; however, they may not be able to comment on the student's clinical performance.

3. References (written and verbal) are based on the student's performance in the Nursing Program.
    Dependability, punctuality, integrity, leadership potential, and ability to function as team members are areas that employers are interested in, as well as academic and clinical competence.

STUDENT GUIDELINES FOR WRITTEN ASSIGNMENTS

Academic Writing

Scholarly work requires that you use sources to give credibility to your writing, to ensure accuracy of your factual content, and to give a knowledge base for you to build on in your critical application of the material for your specific paper. However, you need to <u>integrate</u> the sources into your own writing, not merely lift the sources—we are not asking you to merely compile content from different authors into one edited work. In order to do this without plagiarizing another author's work, you need to give credit to your sources.

One obvious way to use resource materials is to directly quote another author's work. Using quoted material should be done sparingly. Quotations should be used for emphasis (e.g., a powerful statement made by an expert in the field), to present material from an author that you will elaborate on (e.g., applying the quoted material to your specific client, arguing for or against the author's position), or when there is no other way to state or rephrase the information without substantially and negatively altering its meaning. If you use a quotation, you need to copy the original material exactly and enclose it in quotation marks ("…"). If you need to alter the quoted material in some way, you need to indicate your editing: replace deleted words/phrases with ellipses (…), enclose altered words in [brackets], and follow grammatical or spelling errors with (sic) to indicate you recognize the original author's error.

As much as possible, you need to paraphrase or adapt other people's writing to integrate it into your own. There are several ways to do this to avoid plagiarism but also to retain accuracy of the original facts and ideas. One way is to use multiple sources—read pathophysiology content from two or more texts before writing your paper to expose you to multiple ways of presenting the material. Another way is to take brief notes on the key points from your source and write your paper from your notes, not the actual source. You need to substantially alter the wording, phrasing, and sentence and paragraph structure in order to avoid violating the spirit of the copyright/fair use laws that protect individuals' original work.

References should be cited whenever you have used the source for a given sentence, section, or paragraph, even if you have not directly quoted the material. Technical information, statistics, and lists are examples of information that should be referenced. If you have questions about using and citing references, speak to your instructor or seek out HC campus writing resources (tutors at the Writing Center, writing/American Psychological Association (APA) texts) to help you with this.

Formal papers require a reference list and citations in the text immediately following direct quotations or very close paraphrases. Less formal paperwork (e.g., Client Care Sheet/Nursing Care Plan--CCSs) does not require separate reference lists; however, sources still must be cited to avoid plagiarism.

Requirements For Formal Papers

Research and other types of papers are <u>formal college-level written assignments</u>. They must be word-processed, double-spaced, grammatically correct, and well organized. APA format must be used for all formal papers.

HC LIBRARY PLAGIARISM MODULE

http://library.highline.edu/findit/iris/use/use_home.php

APPENDICES

THE NURSING PROCESS

The registered nurse must have a means for applying knowledge to actual client care. The nursing process is the methodology used in the nursing profession to accomplish this task. It is an orderly manner of determining the client's problems, making plans to solve them, implementing the plan and evaluating the effectiveness of the plan in resolving the identified problems. Optimally, the nurse works with the client throughout this process so that the client is actively involved in identifying problems, in planning care and in evaluating the outcome of care. (ANA Standards of Nursing Practice 2009).

1.   Assessment

An RN uses a systematic, dynamic way to collect and analyze data about a client, the first step in delivering nursing care. Assessment includes not only physiological data, but also psychological, sociocultural, spiritual, economic, and life-style factors as well. For example, a
nurse's assessment of a hospitalized patient in pain includes not only the physical causes and manifestations of pain, but the patient's response—an inability to get out of bed, refusal
to eat, withdrawal from family members, anger directed at hospital staff, fear, or request for more pain medication.

Framework for Assessment: Functional Health Patterns (FHP):

All human beings have in common certain functional patterns that contribute to their interaction with the environment, health, illness, and quality of life. The FHP focus on the client's usual ways of living and directs attention to all of the factors that impact the individual. These patterns are the focus of nursing assessment. Use of FHP for assessment provides a standardized data collection method that can be used for any setting, client age, or condition. Use of the FHP in assessment focuses on the nursing model rather than the medical model.

While the human being may be studied in terms of parts such as Functional Health Patterns, it is critical to remember that the client is first and foremost a <u>whole</u>. The nurse should recognize the separate functioning of each part, and yet must continually integrate all parts into a unified view of the individual as a unique human being. This requires an ongoing examination of each part, its effect on all other parts, and the relative equilibrium of the system as a whole.

2. **Diagnosis**
   The nursing diagnosis is the nurse's clinical judgment about the client's response to actual or potential health conditions or needs. The diagnosis reflects not only that the patient is in pain, but that the pain has caused other problems such as anxiety, poor nutrition, and conflict within the family, or has the potential to cause complications—for example, respiratory infection is a potential hazard to an immobilized patient. The diagnosis is the basis for the nurse's care plan.

3. **Planning Outcomes / Planning Care**
   Based on the assessment and diagnosis, the nurse sets measurable and achievable short and/or long-range outcomes (goals) for the client; e.g. moving from bed to chair at least three times per day; maintaining adequate nutrition by eating smaller, more frequent meals; resolving conflict through counseling; or managing pain through adequate medication. Accordingly, the nurse then plans care interventions to facilitate achieving such goals.

4. **Implementation**
   Nursing care is implemented according to the care plan, so continuity of care for the client during hospitalization and in preparation for discharge is assured.

5. **Evaluation**
   The client's progression towards achieving the planned outcome(s) is evaluated. Both the client's status and the effectiveness of the nursing care are evaluated in this step. As a result of this evaluation, the nursing diagnosis and subsequent steps may be deemed obsolete and no longer necessary; otherwise, the nursing process should be re-implemented, beginning with assessment, in order to determine which step(s) of the process require modification.

While the nursing process can be viewed as a sequence of steps, it is actually a circular process, with continual evaluation of each step and modification of actions within step(s) based on such ongoing evaluation.

Client Information pertaining to each step of the nursing process is documented in the client's chart.

1)   **Health Perception—Health Management:** the client's awareness of personal health and well-being, health practices, understanding of how health practices contribute to health status, and relevance to current activities and future planning.

2)   **Nutrition—Metabolic:** the client's description of food and fluid intake, and relationship of intake to metabolic needs; includes indicators of ineffectual nutrition or metabolic functioning. Problems in this pattern may arise from a physiologic, psychological, or sociologic base.

3)   **Elimination:** the description of all routes and routines of the client's bowel and bladder functioning; includes any aids to excretion.

4)   **Activity—Exercise:** the client's overall activities of daily living, self-care, and recreational activity. Because the individual's energy level and mobility are affected by proper functioning of the neuromuscular, cardiovascular, and respiratory systems, nursing diagnoses related to dysfunctions in these systems are included. Emphasis is on activities of major importance to the client.

5)   **Sleep—Rest:** the client's 24-hour routine of rest, relaxation, and sleep. The pattern is based on a 24-hour day and looks specifically at how an individual rates the adequacy of sleep, rest, and relaxation in terms of both quantity and quality.

6)   **Cognitive—Perceptual:** the client's cognitive functional performance and sensory performance. Includes the adequacy of sensory modes, such as vision, hearing, taste, touch, and smell and the compensation or prostheses used for disturbances. Reports of pain perception and how pain is managed also are included. Cognitive functional abilities such as language, memory, and decision-making are addressed. The cognitive-perceptual pattern deals with thought, thought processes, and knowledge, as well as the way the patient acquires and applies knowledge. A major component of the process is perception, which incorporates the interpretation of sensory stimuli.

7)   **Self-Perception—Self-Concept:** the client's self-assessment regarding attitudes, ability, worth, and verbal and nonverbal communication. As the nurse interacts with the client, the most important knowledge the client contributes is self-knowledge. It is this knowledge that determines the individual's manner of interaction with others. This knowledge base is most often labeled "self-concept". One's self-concept is composed of beliefs and attitudes about the self, body image, self-esteem, and abilities.

8)   **Role—Relationship:** the client's assessment of all roles, related responsibilities, and interrelatedness between these factors and other people. Includes perception of the major roles and responsibilities in their current life situation. Satisfaction or disturbances in family, work, or social relationships and responsibilities related to these roles are included.

9) <u>Sexuality—Reproduction</u>: the client's satisfaction or dissatisfaction with their sexuality; includes any dysfunction in sexual reproduction.

10) <u>Coping—Stress Tolerance</u>: the client's effectiveness or non-effectiveness in dealing with difficult situations, how these situations are handled, the client's reaction to the situation, and support available. Describes general coping pattern and effectiveness of the pattern in terms of stress tolerance.

11) <u>Value—Belief</u>: ideas held in esteem by the client; guiding principles for overall lifestyle. This pattern looks specifically at how the individual not only retains faith and enhances his or her value-belief system in times of stress, but also at how physical illness can interfere with the individual's ability to practice religion and maintain beliefs, values, and spiritual life. Also considers how a person's judgment, interpretation of, and maintenance of faith can affect or interfere with health care practices.

NECESSARY SKILLS & ABILITIES FOR NURSING STUDENTS

In order to be successful in the Highline College Nursing Program, a student must be able to consistently perform certain physical and mental tasks in a variety of settings. The following is a Job Description for Nursing Students that outlines these requirements.

General Job Description:
The nursing student is responsible for performing client assessment, planning care delivery, performing nursing interventions, teaching clients and family members about their medical condition, and evaluating the effects of care. This includes reviewing the client's chart; assessing the client's current condition; clarifying complaints and concerns; communicating this information to the health care team; and understanding and implementing physician's orders. The student will assist clients with meals, position them, transfer them out of bed, and assist with walking. Direct care includes administering medications; completing nursing procedures such as catheterization, suctioning, and wound care; and responding to emergencies as they occur. This is an active, busy position requiring the ability to keep track of a large number of activities at one time.

Essential Functions:
Essential functions necessary for this program include the use of the senses to gather information (e.g., detecting color changes in the skin, hearing heart and lung sounds through a stethoscope, palpating pulses, and feeling hot/cold skin). Nursing requires the use of speech, reading, and writing to communicate with clients, families, and other health care professionals. The job will require the ability to synthesize information from a variety of sources and apply it in making decisions regarding client care. The student must have emotional stability and flexibility to function effectively in situations of stress, while placing client needs first.

Working Environment:
There are many settings in which the nursing student will gain experience; i.e., hospital, skilled nursing facility, clinic or other community setting. The most physically demanding is in a hospital or skilled nursing facility setting.

Percent of Time Spent:
Standing and walking are both frequent and alternating for the entire workday. Occasional sitting is possible when taking clients' history or recording on the client's chart.

Sitting ___10_%   Standing ____50____%   Walking ____40____%

Machines, Tools or Moving Equipment:
Nursing students will use a variety of medical supplies and equipment to include but not limited to: stethoscope, blood pressure cuffs, medications, Patient Controlled Analgesia (PCA) machines, IV poles, IV tubing and pumps, Continuous Passive Movement (CPM) machines, syringes, lifts, hospital beds, and bladder scanners.

While Working The Student Must:			**Activities**
	YES	**NO**	
Twist-----------------------	X		Occasional twisting while working in clients' rooms to work around tables and chairs while caring for the client. Occasional stooping and/or bending to retrieve supplies from lower storage areas. Will push/pull a variety of medical equipment on wheels as well as clients in wheelchairs or on stretchers. Continuous grasping and handling of medical supplies, equipment, medications, and client care items required for client care. Will reach full range of motion with majority of work being at waist level, with some reaching overhead to hang IV's and below waist to measure and empty drainage units.
Stoop/bend----------------	X		
Squat-----------------------	X		
Kneel----------------------	X		
Crawl----------------------	X		
Climb----------------------	X		
Push/Pull------------------	X		
Grasp/ Handling---------	X		
Reach over shoulders---	X		
Reach at waist------------	X		
Reach below waist-------	X		

	YES	**NO**	
Lifting to 10 lbs.----------	X		Continuous lifting of medical supplies and equipment weighing up to 25 lbs. Some assisting of 2-person lifting of clients. Identifying specific weights lifted in a transfer is difficult because it is dependent upon the amount of assistance the client is able to offer.
Lifting 11-20 lbs.---------	X		
Lifting 21-50 lbs.---------	X		
Lifting over 50lbs.--------	X		

	YES	**NO**	
Carry to 10 lbs.------------	X		Continuous carrying of medical supplies and equipment weighing up to 5lbs. Some carrying of items weighing up to 25-30 lbs. Will use carts to transport.
Carry 11-20 lbs.-----------	X		
Carry 21-50 lbs.-----------	X		
Carry over 50lbs. ---------		X	

This job may be modified: YES__X____   NO

During each shift nursing students are assigned to perform client care that includes direct care functions and administration of medications and treatments. Lifting assistance is usually available for items that are too heavy. The student could be relieved of some emergency response duties, but would have to be prepared to administer emergency care if other personnel were not available to do so.

Highline College
Associate Degree Nursing Program

LEARNING CONTRACT

STUDENT_____LEVEL: _____

INSTRUCTOR _____ DATE_____

PURPOSE
Assessment of your performance reveals deficits in your learning progress in Nursing _____. While you satisfactorily meet many criteria, there are some that require your immediate attention and improvement in order to achieve the level at which you should be performing. This Learning Contract is established to clarify specific problem areas and direct your learning activities.

FOCUS
The evaluation criteria, which are below standard, have been listed here below.

REQUIREMENTS
a. Unless otherwise noted, you must achieve the required level of ratings on all listed criteria.
b. You are expected to achieve all other course objectives and complete regular assignments as per the course syllabus. Any additional required assignments and their specific deadlines are as follows:
_____**Due Date:** _____

PROCEDURE
Complete the section on the back of this sheet with your plan to improve your performance. If the contract extends into the next course, you must meet with your upcoming instructor prior to the first clinical shift. Signing below acknowledges your intention to fulfill the contract. If you choose not to comply, you must make an appointment with the Program Coordinator immediately, per the Grievance Procedure.

EVALUATION
This learning Contract will be evaluated _____. Evaluation of outcomes will be noted on the back of this form and discussed with you. Failure to fulfill this contract will result in a Probationary Contract or course failure.

SIGNATURES:

Instructor _____**Date** _____

Student_____**Date**_____

PLAN FOR PERFORMANCE IMPROVEMENT:

EVALUATION OF CONTRACT:

SIGNATURES:

Instructor_____**Date**_____

Student_____**Date**_____

STUDENT _____

LEVEL OF PROGRAM_____

INSTRUCTOR _____   **DATE**_____

PURPOSE
Assessment of your performance reveals significant deficits in your progress. You are below standard in a sufficient number of areas that you are not meeting the criteria and are in jeopardy of failing Nursing _____. This Probationary Contract is established to emphasize the identified deficits and mandate your immediate attention/improvement in these areas.

FOCUS
The evaluation criteria, which are below standard, have been listed here below.

REQUIREMENTS
a. Unless otherwise noted, you must achieve the required level of ratings on all listed criteria.
b. You are expected to achieve all other course objectives and complete regular assignments as per the course syllabus. Any additional required assignments and their specific deadlines are as follows:

_____**Due**_____

_____**Due**_____

PROCEDURE
Complete the section on the back of this sheet with your plan to improve your performance. If the contract extends into the next course, you must meet with your upcoming instructor prior to the first clinical shift. Signing below acknowledges your intention to fulfill the contract. If you choose not to comply, you must make an appointment with the Program Coordinator immediately, per the Grievance Procedure.

EVALUATION
This Probationary Contract will be evaluated _____. Evaluation of outcomes will be noted on the back of this form and discussed with you. Failure to fulfill this contract will result in failure of Nursing_____ and termination from the Nursing Program.

SIGNATURES:

Instructor _____**Date** _____

Student _____ **Date**_____

x

PLAN FOR PERFORMANCE IMPROVEMENT:

EVALUATION OF CONTRACT:

SIGNATURES:

Instructor_____**Date**_____

Student_____**Date**_____

HIGHLINE COLLEGE

Health Occupations Program
Dismissal Review Form

The purpose of the Health Occupations Program (HOP) dismissal review process is to provide students who have been dismissed by one of the College's health occupation programs with an independent review of their dismissal decision. Upon receiving all of the required materials, the Division Chair shall convene the HOP Dismissal Review Committee. The task of the committee is to determine whether or not the established program dismissal procedures were utilized appropriately and equitably in determining the student's dismissal from the program. The HOP Dismissal Review Committee will <u>not</u> review grievances related to grades or individual faculty. Students should be referred to the Faculty Complaint Process for grievances related to grades or individual faculty.

Students wishing to have their dismissal decision reviewed must submit the following materials to the appropriate Division Chair within ten business days of receiving their dismissal notification;

1. A completed Health Occupations Program Dismissal Review Form,
2. A copy of the exit interview letter (if applicable),
3. A copy of any learning contracts or probationary contracts (if applicable).

The committee shall consist of the following individuals;

1. The Dean of Instruction for Professional/Technical Education (ex officio),
2. The appropriate Division Chair (If the Division Chair has previously administered a faculty grievance for the same student, an alternate Chair shall be selected.),
3. The Vice President for Student Services or designee,
4. A Health Occupation faculty member from outside the department.

As part of the review process, the committee may request additional information including, but not limited to, transcripts, test scores, and performance reviews. The committee may also choose to interview the student and/or the program faculty. Notification of the committee's findings and recommendation will be provided to the Vice President for Academic Affairs. Following review by the V.P. for Academic Affairs, notification will be provided to the student and the program coordinator.

I understand the Health Occupations Program dismissal appeal process and agree to follow the requirements and deadlines as stated above:

Signature: _____   Date: _____

July 2014

Health Occupations Program
Dismissal Review Form

Date: _____ Dismissal Quarter: _____

Name of Program: _____

Name _____ SID _____
          Last   First

Address _____ Phone _____

City _____ Zip _____ Email _____

1) Please describe in detail why you are asking the committee to review your program dismissal. You should include any evidence that indicates that the program dismissal policies were inappropriately or inequitably applied in your case.

2) What outcome would you like to see as a result of this review process?

Student Signature _____ Date _____

July 2014