

SPSCC Nursing

South Puget Sound Community College

Nursing Program

Student Handbook

2022-2023

SPSCC Nursing

WELCOME

We, the staff and faculty of South Puget Sound Community College, are so thrilled for you to be here while you pursue the wonderful profession of nursing. You have worked hard to get to this important step in your education, and we look forward to working with you and supporting your journey into Registered Nursing.

We believe that you chose South Puget Sound Community College not only because of your interest in nursing, but also because you feel that this program would best fit your needs. Be assured that we will work in partnership with you to facilitate your success.

This information will supplement the college catalog and SPSCC general student handbooks, which includes the Nursing Program's mission, vision, values, learning outcomes, and conceptual framework and contains specific policies, procedures, and guidelines impacting nursing students.

We hope this handbook will answer many of your questions and will be a reference for you throughout your time in the program. It is essential that you familiarize yourself with these policies, procedures, and guidelines. The content may not be announced verbally, therefore, it is advised that you keep this handbook available for reference until you graduate from the Nursing Program. If you have any questions after reading this handbook, please ask a faculty member for clarification.

You have chosen the nursing profession because of your interest in nursing and your desire to help others. The faculty and staff are eager to facilitate your personal and academic growth. After completing this program, you will have developed skills that you will use for the rest of your life. We wish you the best as a practicing RN because your future in the nursing profession reflects upon South Puget Sound Community College.

Have a fantastic 2 years!! You can do this! We believe in you! SPSCC Nursing Team

South Puget Sound Community College
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SPSCC Nursing

TABLE OF CONTENTS

INTRODUCTION.....	1
ACCREDITATION.....	1
SPSCC STUDENT RIGHTS AND RESPONSIBILITIES.....	1
NURSING PROGRAM MISSION, VISION & VALUES.....	3
NURSING PROGRAM CONCEPTUAL FRAMEWORK.....	4
NURSING END OF PROGRAM STUDENT LEARNING OUTCOMES (EPSLO).....	5
NURSING CURRICULUM AT SPSCC.....	5
Associate Nursing DTA/MRP Degree.....	5
Completing the Nursing Degree.....	5
Program Curriculum.....	6
Schedules.....	7
Initial Licensure Outside of Washington State.....	7
ACADEMIC.....	8
Guidelines for Admission and Retention in the Nursing Program.....	8
Change of Data.....	8
Commitment to Diversity.....	9
Orientation.....	9
Grades and Grading Scale.....	9
Retention Requirements.....	10
Progression Requirements.....	10
Withdrawal and/or Dropping Nursing Courses.....	11
Readmission of Nursing Students.....	11
Graduation Requirements.....	12
Pinning Requirements.....	13
Academic Integrity.....	13
Plagiarism.....	14
NCLEX Success.....	14
Examinations.....	14
Testing Accommodations.....	15
Tutoring.....	16
Exam Taking Tips.....	16
Standardized Testing.....	19
Dosage Calculation Exams.....	21
Student Success Plans.....	21
Student Health.....	23
Attendance.....	23
Professional Appearance Regulations.....	24

SPSCC Nursing

Inclement Weather	24
Library.....	24
Technology	24
Computer Lab.....	25
APPENDICES	26
Appendix A	27
Appendix B	28
Appendix C	30
Appendix D	32
Appendix E.....	33
Appendix F.....	34
Appendix G	35
Appendix H	37
Appendix I.....	38
STUDENT	42
Nursing Program Communication.....	42
Netiquette	42
Class Representatives.....	42
Cohort Meeting with the Dean	43
Guiding Principles for Student Conduct.....	43
Professional Failure	44
Student Grievance Process.....	45
Course and Curriculum Evaluations	46
Nursing Activities.....	47
Professional Advancement.....	47
SUMMARY	51
APPENDICES	52
Appendix A	53
Appendix B	54
Appendix C	55
SKILLS LAB	58
Lab Guidelines	58
Open Lab Guidelines	59
Latex Warning	59
Attendance	59
Professional Appearance Regulations.....	60
Skills Training Resources	61
Supplies/Equipment	61
Standard Precautions: Exposure to Bodily Fluids	62

SPSCC Nursing

Skills Demonstrations.....	63
Invasive Procedures	63
Your Rights and Responsibilities	64
Finger-sticks.....	64
Injections	65
Venipunctures	65
Incident Injury	65
SKILLS LAB APPENDICES	66
Appendix A	67
CLINICAL.....	70
Immunizations.....	70
Agency Requirements	71
Attendance	73
Inclement Weather	74
Professional Appearance Regulations.....	74
Nursing Clinical Assignments	75
Skills Performances	76
Confidentiality.....	76
Ethical and Legal Responsibilities of Students	76
Social and Electronic Media	78
Just Culture.....	80
Incident Reporting and Tracking.....	81
Student Accidents	82
Automated Drug Distribution Devices (ADDD)	82
Safe Medication Administration by Nursing Students.....	83
Preceptorship	83
Suspected Substance Abuse in the Student Nurse	84
CLINICAL SIMULATION	86
CLINICAL APPENDICES.....	87
Appendix A	88
Appendix B	92
Appendix C	94
Appendix D.....	95
Appendix E.....	96
REFERENCES.....	100
Verification Statement Form	101

SPSCC Nursing

INTRODUCTION

Welcome to the South Puget Sound Community College (SPSCC) Nursing Program! The Nursing Program is located at the Dr. Angela Bowen for Health Education Center (ABC) campus with clinical experiences provided in a variety of healthcare settings in the surrounding communities. Students completing graduation requirements for the Associate in Nursing Direct Transfer Agreement/Major Related Program (DTA/MRP) are eligible to apply for licensure as registered nurses (RN). We actively encourage all graduates to progress to a Bachelor of Science in Nursing (BSN) degree after completion of their nursing program at SPSCC.

SPSCC's Nursing Program has been created to meet the health care needs in the local region and communities that you serve. This will be accomplished through a dynamic, creative, and informed concept-based program grounded in excellence and evidence-based nursing practice. Dedicated individuals interested in becoming a Registered Nurse are prepared in our two-year program to provide safe & effective individualized care, facilitate compassion & comfort, innovate practice standards, advocate for updated care delivery models, and to be an active professional leader.

This handbook has been designed to provide you with the policies and procedures that you must adhere to and may need while attending SPSCC Nursing and has been broken into sections for the program, including academic and didactic content, as well as portions dedicated to laboratory, clinical, and simulation. We are hopeful that this will lead to clarity and ease of reference, while also allowing students to separate the sections as needed to organize their courses during the program.

ACCREDITATION

South Puget Sound Community College is accredited by the Northwest Commission on Colleges and Universities (NWCCU).

The Nursing Program is approved by the Washington State Nursing Care Quality Assurance Commission (NCQAC).

The South Puget Sound Community College Associate Degree in Nursing program is accredited by the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA) located at 2600 Virginia Avenue, NW, Washington, DC 20032, 202-909-2526.

SPSCC STUDENT RIGHTS AND RESPONSIBILITIES

The materials in the Nursing Handbook for the student of the Associate in Nursing DTA/MRP have been prepared to enhance the understanding of the principles and guidelines of the degree and program. These materials link both faculty and student rights and responsibilities that promote educational growth and development for successful course completion. (See Cohort Canvas Shell or the SPSCC website for the [SPSCC Code of Students Rights & Responsibilities](#).)

SPSCC Nursing

SPSCC faculty shall:

- Provide a high-quality nursing education program that promotes an education that
- Allows for individual differences and needs within the limitation of the program.
- Promote a learning environment that links theory and practice concurrently as much as possible, therefore strengthening the education process.
- Provide a curriculum that allows students to progressively build knowledge on previous concepts, while also linking concepts together to provide holistic client care.
- Provide feedback and guidance throughout the program as a faculty mentor and in class/clinical evaluations, student success forms, and professional guidelines which Empowers the student to become competent practitioners who are ethically and legally qualified to obtain and maintain a license to practice.

SPSCC students shall:

- Assume responsibility for self-direction and motivation that is necessary for successful course completion.
- Achieve outcomes, as outlined in the course syllabi, through successful didactic examination as well as lab and clinical practice.
- Progress in the predetermined/defined sequence of learning with the assistance of a faculty member(s).
- Demonstrate commitment and engagement to the learning process.
- Set aside differences, appreciating varying perspectives, and work together with peers, faculty, and healthcare members, for the mutual goal of client safety.
- Adhere to all guidelines and processes outlined in the program orientation and this student handbook.

SPSCC Nursing

NURSING PROGRAM MISSION, VISION & VALUES

Mission

The Nursing Program at South Puget Sound Community College prepares students to engage within the nursing profession, to thrive in the workforce, and to further advance their professional knowledge and practice. This is achieved through an emphasis on lifelong learning, integration of technology, and information derived from evidence-based practice. Our students will be supported to be successful within the nursing program at SPSCC and provided opportunities for a seamless transition to their BSN and beyond.

Vision

South Puget Sound Community College's Nursing Program is recognized as a leader in the South Sound region. Partnership with local stakeholders, innovative curricular design, and inclusion of a diverse student population prepare graduates to address diverse local and global community health and wellness needs. Graduates will be prepared to pursue further education and to become nurse leaders, innovators, and creative community partners in the continually evolving nursing profession.

Values

The values of the nursing program at South Puget Sound Community College reflect nursing and nursing education:

Caring

Compassion

Accountability

Empowerment

Respect

Effective Communication

Excellence with Integrity

Humor and Laughter

SPSCC Nursing

NURSING PROGRAM CONCEPTUAL FRAMEWORK

The SPSCC Nursing Program prepares you to take on the nursing arena through an integrated nursing curriculum that spans across the lifespan. This preparation builds upon foundational concepts and exemplars that advance from simple actions and client management to more complex care scenarios, actions and client management. This structured conceptual approach to curriculum design was specifically crafted to encourage depth of knowledge and student success. The SPSCC Nursing Program takes a fresh approach to preparing you to be a RN by presenting content in a fashion that enhances your obtainment of the knowledge, skills, and abilities requisite to be a safe, ethical, and effective care provider.

“Nurses provide integrated care in a variety of environmental settings to promote, maintain, and restore health in effort to support quality of life and loss/transition into death for individuals, families, groups, communities, and beyond.” (Re-Design Nursing Faculty, 2013).

Wellness → ===(promotion)===(maintenance)===(restoration)=== → Illness

Complex



Simple

SPSCC Nursing

NURSING END OF PROGRAM STUDENT LEARNING OUTCOMES (EPSLO)

Graduates of SPSCC's Nursing Program are prepared to use their skills in critical thinking and data analysis as well as their understanding of relationships and responsibilities to:

- Demonstrate the ability to assess, analyze, plan, safely implement, and evaluate nursing plans of care which address the holistic needs of diverse individuals, families, groups, and communities.
- Acquire & implement new scientific knowledge & use technology to enhance nursing practice.
- Communicate effectively in full partnership to facilitate delivery of care.
- Participate ethically and professionally in local and global communities as an entry level nurse.

See the table in [Appendix A](#) for more detailed information about these outcomes.

Furthermore, these program student learning outcomes interlink with professional standards in nursing that are referred to throughout the nursing curriculum. See [Appendix B](#) for a cross reference of program student learning outcomes and professional standards.

NURSING CURRICULUM AT SPSCC

[Associate Nursing DTA/MRP Degree](#)

SPSCC Nursing Program degree plan meets the requirements for Washington's Direct Transfer Agreement. The Nursing DTA/MRP Pathway Map can be found in [Appendix C](#). Also see [College Catalog](#) for Program Description of all Prerequisite general education and nursing courses.

[Completing the Nursing Degree](#)

To graduate from the nursing program at South Puget Sound Community College with an Associate in Nursing DTA/MRP degree, the student must complete the following:

1. Prerequisites:
 - ENGL& 101 – English Composition (B or better)
 - MATH& 146 – Intro to Stats (B or better)
 - PSYC& 200 – Lifespan Psychology (B or better)
 - BIOL& 241 – Anatomy & Physiology I (B+ or better) within seven years of admission
 - BIOL& 242 – Anatomy & Physiology II (B+ or better) within seven years of admission
 - BIOL& 260 – Microbiology (B or better) within seven years of admission
 - CHEM& 121- Intro to Chemistry (B or better)
2. General education requirements (*passing grade expected, however grades received in these courses may impact future educational opportunities*):
 - BIOL& 160 – General Biology w/ Lab OR BIOL& 211 – Majors Cellular (passing grade)
 - Communications, 5 credits from DTA list (passing grade)
 - Humanities, 10 credits from DTA list (passing grade)
 - PSYC& 100 – General Psychology (passing grade)

SPSCC Nursing

- NUTR& 101 – Nutrition (passing grade)
 - 3. Nursing programmatic courses with a **final grade of C+ (77.00%) or better**.
 - 4. It is the student's responsibility to be sure that all courses required for their certificate/degree are satisfactorily completed.
 - Education planner and faculty mentors are available if there are questions about the student's status in the program.
 - 5. Each student is required to submit a 'Petition for Graduation' to the enrollment office up to two quarters before and no later than one year after the final class (*this is completed during your Transition to Practice course, 6th quarter of the program*).
 - 6. The college has one graduation ceremony at the end of the spring quarter.
 - All students are encouraged to participate in the ceremony.
 - 7. A nurse pinning ceremony may be held at the completion of the sixth quarter.
 - Attendance is not mandatory, but all graduates are *strongly encouraged* to attend.
- **See [pinning requirements](#) for more details.

Program Costs

Information regarding program costs can be found on the [website](#), under 'Helpful Notes'.

Program Curriculum

Curriculum content is organized by concept. You will learn nursing-related concepts in each course and then progressively build knowledge on previous concepts, as well as learning to link concepts together to provide holistic client care. The following concepts are included in the curriculum listed by quarter of *introduction*. **Each quarter will build on the subsequent quarter, in complexity, in alignment with our conceptual framework.** This list shows when the concept is introduced only, however, multiple times throughout the program, these concepts will be discussed again with different exemplars. The course syllabi provide a complete list of the concepts and exemplars to be covered in each course.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Quarter 5	Quarter 6
Comfort Communication Culture & Diversity Elimination Ethics Grief & Loss Health Promotion & Wellness Immunity Integrative Health Professional Foundations Professionalism Reproduction Safety Sexuality	Cellular Regulation Fluids & Electrolytes Infection Inflammation Metabolism Oxygenation Perception Perfusion Perioperative/Pos toperative Care Pharmakenetics Sensory Thermoregulation Tissue Integrity	Addiction Cultural Humility Development Intracranial Regulations Mobility Mood & Affect Stress & Coping Trauma	Cognition Digestion Self	Healthcare Policy & Procedure Healthcare Systems	Leadership & Management Legalities Quality Improvement

SPSCC Nursing

Schedules

The quarterly class schedule for the nursing program, regarding all didactic courses (ex. theory, ethics, and psychosocial integrity), can be found in the course catalog for the college as well as online. These courses do not have sections, and therefore do not have any limitations surrounding registration.

The quarterly class schedule specific to lab and clinical courses can be found in the course catalog for the college online with specific times posted in the Cohort Canvas shell. Clinical simulation (CSim) is a component of your clinical course and schedule section options will be communicated through your course Canvas shell as well. The quarterly schedule provided by the nursing program will reflect accurate dates, rooms, and times.

Schedules posted will give you specific section ID to be enrolled in, therefore, please do not register for your nursing courses prior to the schedule being posted in the shell. Faculty try their best to get the schedule out as early as possible because we do understand the need to plan for childcare, work, etc., but we cannot accommodate student's special requests. The posted schedule is final with no changes. ****Once you have been admitted to the nursing program, your class spot is always available, but you must be registered prior to the first day of classes to maintain enrollment.*

If you must register for courses before the schedule is available due to financial requirements, register for the appropriate courses. When the schedule is finalized, you may need to switch to a different section ID. In that case, you would drop/add courses so that you are enrolled into the section assigned to you by the nursing program.

Initial Licensure Outside of Washington State

There are some students who plan on moving outside the state of Washington and therefore need to apply for initial licensure in a different state. The Board of Nursing Professional Licensure Requirements was recently updated in July of 2022.

In accordance with U.S. Department of Education Regulation 34 CFR 668.43 (a) (5) (v), SPSCC Nursing Program has reviewed RN licensing requirements from the following states to determine if a SPSCC nursing graduate would be eligible for RN licensure in that state. Most of the states reviewed had published information available, making it possible to determine that indeed, an SPSCC nursing graduate could receive their RN license. However, there were some states that had verbiage to the effect of "curriculum must be substantially equivalent" to the nursing curriculum qualifications in that state, and that this determination would be made by that state's Board of Nursing after reviewing the applicant's credentials. These states are noted under the column labeled "Unable to Determine that the Curriculum Meets the State Educational Requirements for RN Licensure." National Council of State Boards of Nursing (NCSBN) is a great resource for more information, found [here](#). See [Appendix D](#) for complete list.

SPSCC Nursing

ACADEMIC

Guidelines for Admission and Retention in the Nursing Program

Enrollment in the nursing program is limited because of availability in the clinical facilities in the community. SPSCC encourages all interested and qualified individuals to apply to the Nursing Program and does not discriminate or deny admission to students with disabilities. The practice of nursing requires the following functional abilities with or without reasonable accommodations. Nursing students must meet the following technical standards to progress through the program:

- Ability to grasp scientific concepts, set up and answer basic math & algebra problems
- Critical thinking sufficient for clinical judgment.
- Verbal and written communication sufficient to effectively interact with clients, peers, and others, both respectfully and with cultural humility.
- Ability to move from room to room, maneuver in small spaces, remain on feet for extended periods of time, and lift, up to 35 pounds.
- Gross and fine motor skills sufficient to provide safe and effective nursing care.
- Hearing sufficient to monitor and assess clients, e.g., hear heart and breath sounds and use a telephone.
- Visual acuity and color discrimination sufficient to read fine print, to observe and assess clients, e.g., identify skin tones such as pale, ashen, gray, or bluish.
- Tactile ability sufficient for physical assessment, e.g., palpate peripheral pulses.
- Computer literacy.
- Be able to meet the guidelines established by healthcare organizations and/or community partners during the clinical experiences.
- Legally be able to obtain a license to practice nursing in the State of Washington.

Change of Data

Data changes such as name, telephone, email and address must be reported to the Allied Health Administrative Assistant (AA) and assigned Education Planner. This is necessary to ensure grades are reported appropriately and information is sent to the correct address. Legal names **must** align with personal documentation and transcripts for the National Council Licensure Examination (NCLEX) application.

In addition, many students at some point during their nursing career reach out for references from staff, faculty and/or Dean. The SPSCC Nursing Team enjoys being able to tell others about the amazing things our students are doing, but to do so, we must know what you are doing. It is highly recommended that you notify the person you are seeking a reference from that you will use them as a reference and if any changes have occurred. Students must fill out the Authorization to Release Student Information for References Form ([Appendix E](#)) prior to SPSCC employees giving references.

SPSCC Nursing

Commitment to Diversity

SPSCC is a learning community that embodies social justice, equity and inclusion. SPSCC seeks to empower students, faculty and staff to fully participate in a society of increasingly diverse identities and experiences. SPSCC actively works to eliminate all forms of discrimination and provide an education that reflects the diversity of our community and a deeper understanding of the dynamics of power and privilege that perpetuate inequity and inequality.

Faculty, staff, and students will actively work towards contextually weaving multiculturalism and diversity throughout our learning as related to readings, lectures, and other assignments. In a learning community, students, staff, and faculty share the responsibility for the teaching and learning environment.

- Striving to foster a positive community discourse about issues of culture and differences including but not limited to race, ethnicity, color, socio-economic status, nationality, sex, gender, gender identity, gender expression, class, sexual orientation, age, religious beliefs, political beliefs, (dis)ability, and veteran status.

All our students need to be respected and appreciated as valuable members of our community. We encourage everybody's perspective and strive to create a safe environment for different points of view and courageous conversations.

Orientation

A mandatory nursing student orientation is provided prior to the first quarter of the academic year starting. This orientation will include current students, staff, and faculty and is an 'open' atmosphere where information is shared, program curriculum is explained, and students can ask, and get answers, to questions as they are welcomed into the program.

Grades and Grading Scale

The Nursing Program grading scale will be utilized for all nursing program core courses:

- 100.00%- 94.00%= A (4.0)
- 93.99%-90.00%= A- (3.67)
- 89.99%-87.00%= B+ (3.33)
- 86.99%-83.00%= B (3.0)
- 82.99%-80.00%= B- (2.67)
- 79.99%-77.00%= C+ (2.33)
- 76.99% or below = F (0) *Failure to meet minimum course requirements*

Grading policies for each course will be clearly established in each course syllabi. Assessments will be developed and weighted at the discretion of each faculty. Please see the lab, clinical and simulation sections for further details in those courses.

When determining final grades for any course, percentages will be calculated to the hundredths.

SPSCC Nursing

- *No rounding up of grades will occur.*
- Policy for 'Incomplete Grades' will follow SPSCC policy.

There is no individual opportunities for extra credit in the Nursing Program.

Retention Requirements

To progress to the next quarter, students must complete program courses with a **final grade of C+ (77.00%) or better in didactic courses and achieve an 'S' for lab, clinical, and clinical simulation**. In addition, students must meet all course requirements as described in the course syllabi which may include remediation for failed exams and/or skills lab deficiencies.

Students having academic difficulty are urged to seek mentoring from faculty. The Dean for Nursing is also available for mentoring.

Progression Requirements

The faculty and Dean for Nursing at SPSCC progress only those students who satisfy *all* requirements. Following admission, students may not progress if any of the following occurs:

- A student fails to meet deadlines for supplying immunization, health, background, and/or training records as required by the program in order to comply with state regulations and/or contracts with clinical agencies.
- A student does not achieve a final grade of 77% or above in a single course. Should this occur, the student will be removed from the program and unenrolled from *all* classes for the upcoming quarter.
 - If a student fails one of either nursing didactic, lab or clinical/simulation; all courses will be repeated, as courses are designed to be taken concurrently.
- A clinical agency (hospital, outpatient, nursing home, or other health care/clinical facilities) refuses educational access to the clinical areas to a student who does not meet the agency's standards for safety, health, and ethical behavior, or whose behavior is detrimental to the operation of the agency and/or client care.
- The clinical faculty determines that the student has not shown the level of proficiency needed to continue in the clinical assignment.
- A student fails to meet attendance standards for lab and/or clinical/simulation courses as specified under attendance.
- A student does not demonstrate a technical standard and/or essential skill/proficiency identified in this handbook, even if the student is otherwise in good standing.
- A student who is admitted and enrolled in the Nursing Program but fails to complete the entire program within three (3) academic years.
- The Professional Conduct Review Committee determines that a student should be expelled based on one or multiple professional failures.
- Students that are arrested and/or charged with a misdemeanor and/or felony must notify the Dean for Nursing within 5 school days.

SPSCC Nursing

- Failure to notify the Dean may result in dismissal.
- Official notification of removal from the program will come from the Dean of Nursing.

Upon being notified that a student has failed to meet standards or demonstrate proficiencies, the Dean of Nursing will notify the student and enrollment services that the student will not be progressing. Enrollment services will unenroll the student from all nursing courses for the following term.

The student may be eligible for readmission and should consult the appropriate sections of this handbook for information on applying for readmission. Students who are dismissed for professional failures *may not* be eligible for reentry.

Withdrawal and/or Dropping Nursing Courses

Students who voluntarily withdraw from the Nursing Program must follow the enrollment procedures of the college and are responsible for dropping or withdrawing from *all* nursing courses.

- College wide enrollment dates apply to the Nursing Program.
- Students are required to inform the Dean of Nursing in writing of their intent to withdraw.
- Students are encouraged to schedule an exit interview with the Dean of Nursing to discuss reasons for the withdrawal, potential readmission, etc.
 - There is no guarantee that a student who withdraws from the program, even in good standing, will be readmitted into the program.
- Students who withdraw may be required to repay some or all of their financial aid. Before withdrawing, students should speak with a financial aid advisor.

Readmission of Nursing Students

SPSCC encourages students who did not meet minimum standards to apply for readmission to the program the following year. No student is guaranteed readmission and reentry is dependent on space available within the program. Final decisions about the number of students readmitted each quarter will be determined by the Dean of Nursing.

Readmission is defined as re-entering the nursing program by a SPSCC nursing student at some point other than at the initial admission of the program. Students will be readmitted to the quarter in which they withdrew and/or failed. Students readmitted to the program will repeat all courses in the quarter in which they are readmitted. A student is eligible for reentry if all curriculum courses required in the quarter(s) prior to the quarter of entry have been completed. Students who were removed for professional failures *will not* be considered for readmission. To petition for readmission:

- A student must complete a Petition for Readmission form ([Appendix F](#)) the **quarter before** the application window would close, and return it to the Dean of Nursing.

SPSCC Nursing

- Applications for readmission are due by the following dates:
 - Fall – July 15
 - Winter – October 15
 - Spring – February 15
- Students will be notified by email of their readmission status by the following dates:
 - Fall – August 15
 - Winter – November 15
 - Spring – March 15
- The Nursing Team (*consisting of the Dean of Nursing and all full-time nursing faculty and staff*) will consider all petitions for readmission.
- The decision of the team will be based upon multiple factors related to the student's likelihood of future success in the program, including, but not limited to:
 - the student's pattern of behavior, regardless of the course;
 - the faculty(s) recommendation;
 - evidence of remediation;
 - the students plan for success moving forward;
- Students will be evaluated for readmission in the following order:
 - Category 1: Returning students who voluntarily withdrew and were passing all courses.
 - Category 2: Returning students who were not in good standing in a theory, lab, clinical, or preceptorship courses.
- The team's decision regarding readmission will be sent to the student by the Dean for Nursing.
- Returning students must reenter the Nursing Program within **one year** of first exiting from the Nursing Program.
 - If a student waits out more than three quarters (*summer not included*), they will be required to reapply to the Nursing Program through the general selection process.
 - ****Rare exceptions are at the discretion of the Nursing Team.**
 - Students who have failed any nursing course more than once (*or two nursing courses in one quarter*) or withdrew while not in good standing more than once, *will not* be considered for re-entry into the program.
 - For example: Student fails NURS 111, then returns and passes NURS 111, but fails any other nursing course, the student *cannot* return a second time.

Graduation Requirements

All students will apply for graduation during Transition to Practice course, the sixth quarter of the program. Degrees are awarded according to the policies, procedures, and requirement described in the college catalog.

Official transcripts, confirming degree completion, are delivered by Enrollment Services to

SPSCC Nursing

Washington State Nursing Care Quality Assurance Commission and/or the Board of Nursing in the state that the student has requested.

Completion of the nursing program and graduation from the college does not guarantee passage of the licensure exam. Application and passage of the exam is the sole responsibility of the student. ***More information can be found under National Council Licensing Examination section.*

Pinning Requirements

If a student is unable to attend pinning, said student must notify the Dean for Nursing. The Nursing Department Pinning Committee determines the place, date and time of the event and works in collaboration with the Student Nurse Association for funding the reception. The Nursing Program has a school pin that identifies the school from which the nurse graduated. Pins used at the ceremony may be either the official school pin or a family nursing pin.

Academic Integrity

Academic integrity is valued at SPSCC as a fundamental part of the learning process and is essential in nursing education. Nursing education prepares students for a career that is accountable and responsible to the profession, society and community receiving healthcare. Strong morals and ethics are required and all students are accountable for academic integrity.

Academic integrity is a priority and expected in the classroom, skills lab, and clinical settings and in any additional circumstances where a student represents the program. Education that is acquired by dishonesty can be detrimental to not only the student, but to clients/families and community citizens, both healthy and ill. Therefore, academic dishonesty opposes the goals of nursing education and will not be tolerated at SPSCC. This is a serious matter that may result in removal/dismissal from the program. Representing someone else's ideas as one's own or using others notes, aides or other means to improve grades on an assignment, project or exam will result in disciplinary action.

Examples of academic misconduct include, but are not limited to:

- Plagiarism - using materials without citing sources
- Cheating
- False documentation
- Omission of documentation
- Malpractice
- Receiving or providing unauthorized assistance on assignments, exams or finals.
- Using unapproved information and resources during testing.
- Altering an assignment or exam and submitting for re-grading.
- Making up data or references on assignments.
- Falsifying a client's medical record.
- The use of smart phones, watches, recorders or any type of technology to obtain information during reviews or exams.

SPSCC Nursing

Plagiarism

Plagiarism is presenting someone else's words, ideas, or data as one's own. When a student submits work that includes the words, ideas, or data of others, the source of that information must be acknowledged through complete, accurate and specific references. Papers and assignments must reflect college level writing with appropriate referencing.

The nursing program at South Puget Sound Community College uses the most recent American Publication Manual of the American Psychological Association (APA) for guidance in citations and formatting of their written work. Faculty will also use these standards when grading papers and determining potential plagiarism. Failure to document sources of information accurately, whether or not intentional, may constitute an act of plagiarism.

Academic dishonesty and/or plagiarism are violations of the SPSCC Code of Student Rights and Responsibilities [section 132X-60-090 \(3\)](#). The student will be subject to the provisions as outlined in the SPSCC student handbook and this may include course failure. See [Appendix G](#) for more information regarding Academic Integrity.

NCLEX Success

The program is dedicated to preparing students for successful graduation and passing of the NCLEX. This is seen with the use of ExamSoft for giving exams and the NCLEX style writing of questions. In addition, during your Transition to Practice course in 6th quarter, there is a three day, NCLEX preparation course will be provided to help you know what to study prior to taking the exam.

NCLEX exam is designed to begin giving the test taker questions beginning at the remembering level and continuously moving up through Bloom's Taxonomy ([Appendix H](#)). Our program conceptual framework is from simple to complex and our exams continue with this trajectory, by progressively getting more critical and complex, so that by the 5th quarter, exams require more analysis than remembering.

Examinations

Nursing examinations may include information from any previous taught material, including didactic, laboratory, clinical, and simulation content. Nursing courses may include a comprehensive final exam of all essential nursing didactic, laboratory, clinical, and simulation content appropriate to determine student achievement of course competencies and outcomes/objectives. Final exams are not available to review.

Nursing examinations will be taken utilizing the software ExamSoft. This allows for students to experience exams in a very similar way to the National Council Licensure Examination (NCLEX). Examinations will be taken in the designated computer labs unless otherwise instructed and during any exam, students will keep all personal items such as book bags, phones, smart watches/accessories, refreshments, hoodies and hats in a designated area. None of these items

SPSCC Nursing

will be allowed in the computer lab during testing and will be kept in a safe location. If you are worried about the safety of your personal belongings, please do not bring them into the testing lab. See rules from NCSBN [here](#).

Make up of exams may be made only under ***extenuating circumstances***. A zero will be given for any exam missed unless arrangements for the re-take have been made with the ***appropriate faculty prior to the scheduled exam time***. Faculty discretion will determine eligibility for exam make-up. A deduction of five (5) points from the exam will occur if the exam is not taken when originally scheduled. Repeated make-ups may be denied or result in more points deducted. Evidence of stealing, cheating or dishonesty is grounds for dismissal.

Nursing approved functions will have no penalty for missed exams as long as prior arrangements have been made by the student. *Arrival prior to exam start time is imperative to decrease stress, decrease interruptions to other students and to be available for any instructions. Doors to the computer lab will be locked once the exam begins.* If the student shows a pattern coming in late for exams, faculty may counsel student utilizing the professional guidelines form.

Exam analysis is performed on all didactic based exams and scores are determined by the results of the analysis. No exam can be retaken to improve a score.

Testing Accommodations

Students with documented disabilities who wish to request accommodation should contact [Access Services](#). You have the right to services and reasonable accommodations providing you meet the basic requirements to perform the activities of the program, that is, you are "otherwise qualified" to be at SPSCC.

Among the accommodations available are additional exam time, distraction decreasing equipment and/or assistive personnel (i.e., reader).

The National Council of State Boards of Nursing (NCSBN) determines how the NCLEX is given and requires students to provide documentation of approval from Nursing Commission/ State Board of Nursing. Nursing Care Quality Assurance Commission (NCQAC) requires documentation prior to applying for the NCLEX exam. Documentation requirements can be found [here](#).

Students should understand that without documentation of a true educational need, NCSBN will not approve testing accommodations. Since this is the licensing exam that students ultimately must pass to practice nursing, it is in the student's best interest to understand and be prepared to provide the appropriate documentation. See more in the [NCLEX Candidate Bulletin](#).

SPSCC Nursing

Tutoring

General tutoring is available through [Learning Support Services](#). Nursing tutoring is also available, free of charge for all students in the program. Contact information and availability will be shared quarterly on the Cohort Canvas shell.

Exam Taking Tips

Courses are structured to require a *minimum of 2-4 hours* of preparation for each course credit hour. An example is if a class meets a total of 4 hours each week, the student should expect to spend 8-16 hours outside of class each week on reading, writing assignments, studying for exams, etc.

It is *strongly recommended* to work *no more than 12-20 hours per week* in order to meet the demands of course work. The student should plan additional time for utilizing the library, computer lab and skills lab for required and recommended learning activities.

- **Hints for Studying**

Study techniques differ from person to person. To better understand your learning and/or studying technique, please reach out to a faculty member. Our faculty can help guide you to current assessments to help you to begin to understand your personalized style for learning and/or studying.

Other hints/tips for studying include:

- Find your learning style and use best techniques for your personal style.
- Read your notes EVERY day.
- Compartmentalize/Concept Map data and information.
- Utilize sayings/acronyms/mnemonics.
- Study in short intervals, taking a break every 20-30 minutes.
- Use yellow or lime green highlighter and/or yellow paper.
- Smell lavender, eat pasta, nuts and yogurt to decrease anxiety.
- Use positive self-talk and stay away from the negative talkers.
- Must take personal time for self and family.
- Exercise, this will increase oxygen to the brain and help decrease anxiety. A 10-minute walk will help.
- Focus on the nursing process – Assessment, Analyze, Planning, Intervention, Evaluation; including management, safety, labs, diagnostics, medications, teaching, health promotion, prioritization.
- Utilize the clinical judgment model:
 - Recognize Cues
 - Analyze Cues
 - Prioritize Hypotheses
 - Generate Solutions
 - Take Action
 - Evaluate Outcomes
- Remember your knowledge will be tested in scenarios, so study that way –

SPSCC Nursing

- What is this?
- What do I know about it, like how would I recognize it in my client?
- What can be done in this situation?
- What would I be teaching my client to help them get discharged and not have to keep coming to the hospital?

- **Hints for Exams**

Beginning in 2023, the Next Generation NCLEX (NGN) asks better questions to help nurses think critically when providing care and making the right decisions. NGN is about protecting the public and achieving the best outcomes for client, nurses, and institutions (NCSBN, 2021). More information about the types of questions can be found [here](#).

Other tips and hints for exams include:

- There are parts to the question: scenario; stem; options (this includes the correct answer and distractors).
- Read the stem first.
- Look for key words: first, initial, essential, severe, best, most important, priority, pregnant, adolescent, early/late, pre/post, before/during/after, on the day of/after several days, acute/chronic.
- Eliminate incorrect answers.
- Words that make it incorrect 99.9% of the time include: all, nothing, only, never, ever, always, any, none, total, everyone, nobody, completely, sole.
 - Absolutes are a no-no.
- Prioritize with ABC then safety, Maslow and/or nursing process.
- Treat each question individually, unless it says it is specifically linked.
- Answer with textbook and/or ideal world situation. This is your only client and all options are readily available.
- Use national standards and not local, regional or where you work.
- If you don't have a clue, reread the answers starting with the last one.
- Be positive about the exam.
 - WE LOVE EXAMS!

SPSCC Nursing

- **Examples**

1. Which statement indicates the client needs more instruction regarding insomnia?
 - a) "Milk would be good to drink before I go to bed."
 - b) "Foods with L-tryptophan are good for me."
 - c) "I will exercise at least 3 times a week."
 - d) "I will drink alcohol to help me relax."
2. An adult client had knee surgery. Post-op prescriptions include a narcotic every 3-4 hours as needed for pain. On the evening of surgery, the client asks for pain medication and was last medicated 3 hours ago. Which nursing action would be most appropriate for the nurse to perform first?
 - a) Assess the location and severity of the pain.
 - b) Reposition the client.
 - c) Administer the prescribed analgesic.
 - d) Refill the ice bag ordered for the knee.
3. The client is having venous problems, the nurse would expect to find what kind of signs and symptoms?
 - a) Edema, bruxism.
 - b) Swelling, regular pulse.
 - c) Coolness, hairless extremities.
 - d) Irregular heartbeat, decreased O₂ saturation.
4. Which client would the nurse see first?
 - a) A client with a temperature of 101°F.
 - b) A client that is vomiting.
 - c) A client who is actively bleeding.
 - d) A client with a history of depression.
5. Which action is most appropriate for a client with a thrombus in the lower extremity?
 - a) Elevate leg.
 - b) Monitor O₂ saturation.
 - c) Cool moist packs.
 - d) Encourage REM and NREM sleep.

ANSWERS: 1-d; 2-a; 3-b; 4-c; 5-b;

Other examples of NCLEX question types can be found throughout the variety of exams in the program (unit exams and ATI standardized exams). Full explanation and practice examples can be found on the NCLEX [website](#). Our exams integrate next generation NCLEX exam types throughout the curriculum, leaving the student well prepared for their testing experience.

SPSCC Nursing

Standardized Testing

The nursing program utilizes standardized testing. This is a means of providing both the students and the program information about individual student and/or cohort learning and progress, while assisting in preparation for licensure examination. The package of assessment and review materials provides students with a variety of assessment opportunities and learning resources. Standardized testing with ATI is integrated throughout the curriculum and will contribute to your grades.

Course syllabi will delineate which assessments are to be taken each quarter during the program and the timeline that they are due. The use of a combination of the practice and proctored assessments are used to achieve 5% of the course grade and can be obtained the following way:

Practice Assessment			
4 Points			
<i>Complete Practice Assessment A</i> Remediation: <ul style="list-style-type: none"> • Minimum 1-hour Focused Review on the initial attempt • For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>). 		<i>Complete Practice Assessment B</i> Remediation: <ul style="list-style-type: none"> • Minimum 1-hour Focused Review on the initial attempt • For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>). 	
Standardized Proctored Assessment			
<i>Level 3 = 4 points</i>	<i>Level 2 = 3 points</i>	<i>Level 1 = 1 point</i>	<i>Below Level 1 = 0 points</i>
Remediation = 2 points ~Minimum 1-hour Focused Review on the initial attempt ~For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>).	Remediation = 2 points ~Minimum 2-hour Focused Review on the initial attempt ~For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>).	Remediation = 2 points ~Minimum 3-hour Focused Review on the initial attempt ~For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>).	Remediation = 2 points ~Minimum 4-hour Focused Review on the initial attempt ~For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>).
<i>10/10 points</i>	<i>9/10 points</i>	<i>7/10 points</i>	<i>6/10 points</i>

SPSCC Nursing

Research has shown that hand writing the relearned material in the ALT, better supports the reinforcement of the remediation. Copying and pasting the material leads to busy work that does not stimulate the brain to truly reflect on the remediation.

A proctored comprehensive RN predictor assessment is given during the last quarter of the program, on campus in a proctored setting. This will comprise 5% of the total grade for the course, *separate* from any other standardized testing category and can be obtained the following way:

Practice Assessment			
4 Points			
Complete Practice Assessment A		Complete Practice Assessment B	
Remediation: <ul style="list-style-type: none"> • Minimum 1-hour Focused Review on the initial attempt • For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>). 		Remediation: <ul style="list-style-type: none"> • Minimum 1-hour Focused Review on the initial attempt • For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>). 	
Standardized Proctored Assessment			
95% or above passing predictability = 4 points	90% or above passing predictability = 3 points	85% or above passing predictability = 1 point	84% or below passing predictability = 0 points
Remediation = 2 points ~Minimum 1-hour Focused Review on the initial attempt ~For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>).	Remediation = 2 points ~Minimum 2-hour Focused Review on the initial attempt ~For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>).	Remediation = 2 points ~Minimum 3-hour Focused Review on the initial attempt ~For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>).	Remediation = 2 points ~Minimum 4-hour Focused Review on the initial attempt ~For each topic missed, complete an active learning template (ALT) as part of the required remediation process (<i>handwritten ALTs are preferred</i>).
		<i>Retake required</i>	<i>Retake required</i>
10/10 points	9/10 points	7/10 points	6/10 points

SPSCC Nursing

Dosage Calculation Exams

Accuracy when calculating dosage is essential. Many medication errors stem from inaccurate dosage calculations, which can lead to complications for clients, and in some cases, death. The ability to calculate dosage correctly is an essential proficiency for a Registered Nurse.

- Dosage Calculation quizzes will be given in labs on a regular basis.
 - Pencil, calculator and scratch paper will be provided.
- Dosage Calculation exams and quizzes with problems specific to the level and type of calculations required for medication administration and clinical management will be administered during each academic term and will progress in difficulty throughout the Nursing Program.
- Students must achieve a 95% or above to pass the dosage calculation required for clinical medication administration and the final dosage calculation assessments in all nursing courses. Students who do not achieve 95% or higher on final dosage exams will fail the course in which the exam is administered, regardless of overall standing based on other graded assignments and assessments.
- See course calendar for scheduling.

Student Success Plans

Student Success Plans are utilized to provide holistic support and guidance to students who experience difficulty meeting course outcomes. The aim of this policy is to intervene and facilitate program progression before a student has become deficient. This policy also helps to ensure honest and timely conversations between students and faculty about expectations for success and extracurricular obstacles to success. Students intended for participation are those whom have:

- Identified by self or faculty as being at risk of failing to meet academic standards in a course.

Procedure:

- Students, faculty, or Dean may initiate the Student Success Plan.
 - Students intended for participation are those who:
 - Are concerned they are at risk of failing.
 - Earn below a 77% on one or more, unit exams.
 - All students who score below a 77% on any unit exam, must meet with a faculty member, within one (1) week of grades being posted for the exam failed.
 - Failure to follow up with a faculty member, will result in professional guidelines write up (*please see [professional failures section for more details](#)*).
 - Miss more than one laboratory without prior communication or are otherwise not prepared and/or failing to pass skill competencies before the end of the term.
 - Miss more than one clinical without prior communication or are otherwise not prepared and/or failing to pass skill competencies before the end of the term.

SPSCC Nursing

- Miss more than one clinical simulation without prior communication or are otherwise not prepared and/or failing to pass skill competencies before the end of the term.
- A plan will be created using the Student Success Plan form ([Appendix I](#)). The Student Success Plan is a guideline and is not intended to replace student standards. Listed below are the steps for usage of the Student Success Plan:
 - The student and faculty member will develop a plan by listing factors affecting student performance and by identifying possible solutions.
 - Faculty can help directly and confidentially with many factors including, but not limited to:
 - time management
 - study skills
 - nursing skills
 - math and writing assistance
 - test-taking skills and review of past exams and nursing skills.
 - For factors outside the expertise of the faculty, the student will be confidentially informed of appropriate resources including, but not limited to:
 - Counseling Center
 - personal counseling
 - test anxiety
 - time management
 - Access Services
 - accommodations
 - Tutoring
 - study skills
 - math, writing assistance
 - Diversity, Equity & Inclusion Center
 - Safe Zones
 - Financial Aid
 - Financial Aid Office
 - Emergency Fund
 - Off Campus Resources as Deemed Appropriate
- If a student makes less than a 77% on a unit exam, the following steps should occur:
 - The student must schedule a meeting with a faculty member within 1 week of that exam.
 - The student and faculty will complete the first two (2) pages of the Student Success Form, identifying potential behaviors and/or circumstances that may be hindering the student's success.
 - Both student and faculty will sign page 2 of the form and then a copy will be provided to the student, with the original document turned into the Allied Health

SPSCC Nursing

- division for dean signature and placing in the student file.
- After the next scheduled unit exam, the student must schedule a follow-up meeting with a faculty member, within 1 week after that exam to evaluate the outcomes of the plan.
 - If other recommendations are made, this should be captured in documentation on page 3, 'Follow Up Meeting 1'.
 - Student and faculty will then sign, the student will receive a copy of the form, with the original being turned into the Allied Health division office.
 - If a student scores less than a 77% on a *second unit* exam, the above steps are followed once again, with documentation recorded under 'Follow Up Meeting 2'.
 - If a student scores less than a 77% on a *third unit* exam, the above steps are followed, however, the student **must** meet with a different faculty member and/or dean.
 - If the Student Success Plan is initiated from the student self-identifying, there may or may not be a need for follow up.
 - If the Student Success Plan is initiated related to the student missing lab, clinical, or clinical simulation, there should be a follow up the following week to review goals and/or as needed in relation to the concerns.
 - The student success plan will be considered complete when:
 - all success plan goals have been met,
 - circumstances contributing to the initial concern have been resolved and,
 - substantial improvement in performance continues for one additional quarter.

Student Health

Students will not attempt to attend class, lab, clinical, or simulation when the student has a fever or illness that could be contagious. SPSCC will follow the CDC and WA DOH guidelines regarding screening, tracing and quarantine for illnesses such as COVID-19. See the SPSCC website for most current [guidelines](#). Additional requirements may be needed for clinical (*see the clinical portion for details*).

Attendance

SPSCC's nursing program is rigorous and nursing courses prepare students for safe client care. It is expected that students attend each class, laboratory, simulation, and clinical session to develop the theoretical and practice components of the nursing role. Nursing students are expected to prioritize personal, work, and school requirements appropriately so their success is not impacted by routine absences. It is the responsibility of the student to notify the faculty *prior* to an absence.

Students must place emphasis on developing a sense of responsibility for their education. In this connection, students are held accountable for all work covered in a course despite valid reasons for absence from class; therefore, each student is expected to attend each class. Students should make all outside appointments at times that do not coincide with class, skills lab, clinical or simulation times.

SPSCC Nursing

Prompt attendance is encouraged as a courtesy to the learning experience of yourself, your cohort, and your faculty. Missed theory lectures may be recorded, however, lecture recordings are not guaranteed. If a student does miss a course of any kind, the student is responsible for the missed material.

- Attendance for didactic courses is instrumental to your success in the program.
 - Quizzes, in-class activities, and recordings may be missed with absences.
 - Points/grades for in class activities may not be made up.
 - Make up of exams may be made only under ***extenuating circumstances***. A zero will be given for any exam missed unless arrangements for the re-take have been made with the *appropriate faculty prior to the scheduled exam time*. Faculty discretion will determine eligibility for exam make-up. A deduction of five (5) points from the exam will occur if the exam is not taken when originally scheduled. Repeated make-ups may be denied or result in more points deducted. Evidence of stealing, cheating or dishonesty is grounds for dismissal.

Professional Appearance Regulations

Students should remember that they represent South Puget Sound Community College Nursing Department, particularly when dressed in the school uniform (*see lab, clinical, and clinical simulation sections for specific school uniform information*).

- Casual attire is permitted in the classroom.

Inclement Weather

There are times when inclement weather, natural disasters, power outages or other incidents can disrupt the operation of the college. If no announcements are made, we will operate normally. All college staff, faculty and students should monitor Omnilert messaging system. Omnilert information and emergency processes can be found on the SPSCC website: <https://spscc.edu/weather-alerts>

- Students should always check Canvas to ensure that faculty have not cancelled or rescheduled class/lab/clinical or simulation.

Decisions regarding college closure will normally be made by 5:30 a.m. on the day in question with messaging sent via Omnilert. Public Relations will post announcements on the college website and social media.

Library

See specific rules and regulations for the use of the library on the SPSCC [website](#).

Technology

Use of SPSCC and/or college computers and electronic devices within the computer lab and/or student lounge are for course work and academic pursuits (*example: registering for classes, checking school email, etc.*) only. SPSCC computers are not to be utilized for other personal work or play.

SPSCC Nursing

Computer Lab

The Allied Health computer lab will be available for use at designated times. Students are encouraged to utilize the computers to complete required and/or recommended learning activities. Computers and a printer can be found in the student lounge on the first floor. For use of the computer lab, students will need to request availability with the administrative assistant. Foods and liquids are ***not allowed*** in the computer lab.

Unauthorized removal of hardware, software or tampering with computer programs deprives other students and may result in expulsion from the program and/or legal action by the college. Children are not allowed in the computer lab.

SPSCC Nursing

APPENDICES

SPSCC Nursing

Appendix A

South Puget Sound Community College's Nursing Program and Student Learning Outcomes

To demonstrate the connections between purposeful program design, innovative curricular structure, and continuous program evaluation the following key is used throughout. The following table elaborates upon the student learning outcomes delineated by numbers. These are used throughout the syllabi to demonstrate how unit and course specific objectives link to the overall program design.

Nursing Care= (NC)

Continuous Improvement =(CI)

Communicate Effectively = (CE)

Participate Professionally =(PP)

Nursing Program Student Learning Outcomes			
#1 Utilize Integrated Nursing Care (NC)	#2 Pursue Continuous Improvement (CI)	#3 Communicate Effectively (CE)	#4 Participate Professionally (PP)
<i>Upon graduation from SPSCC Nursing Program, a graduate will be able to demonstrate the ability to assess, analyze, plan, safely implement, and evaluate nursing plans of care which address the holistic needs of diverse individuals, families, groups, and communities.</i>	<i>Upon graduation from SPSCC Nursing Program, a graduate will be able to acquire & implement new scientific knowledge & use technology to enhance nursing practice.</i>	<i>Upon graduation from SPSCC Nursing Program, a graduate will be able to communicate effectively in full partnership to facilitate delivery of care.</i>	<i>Upon graduation from SPSCC Nursing Program, a graduate will be able to participate ethically and professionally in local and global communities as an entry level nurse.</i>
1.1 Utilizes the nursing process to support & facilitate patient centered care across the lifespan (T) 1.2 Creates and maintains a safe & effective care environment: management of care and safety & infection control (T, R) 1.3 Promotes and support psychosocial integrity (R) 1.4 Promotes physical health and wellness: basic care and comfort, pharmacologic & parenteral therapies (Q)	2.1 Demonstrates the use of research to collect, analyze, implement and evaluate best practices in nursing care (Q) 2.2 Demonstrates the use of technology to provide collaborative care (T, Q) 2.3 Creates, integrates, and evaluates ideas, concepts, and/or information across a range of contexts, cultures, and/or areas of knowledge to make meaningful conclusions, judgments, and/or products. (T)	3.1 Conveys ideas & information with clarity & control while recognizing that communication is influenced by personal perspective. (C) 3.2 Adapts communication methods appropriate to purpose, content, audience and situation (C) 3.3 Implements therapeutic communication with diverse populations to facilitate culturally responsive care (R)	4.1 Practices in a manner consistent with a code of ethics for nursing practice. (E) 4.2 Analyzes the alternatives to and the consequences of an action or a decision through accountability and reflection (E) 4.3 Applies understanding of WA Nurse Practice Act to define the scope of practice as entry level RN (R, E) 4.4 Demonstrates leadership skills in planning care and collaborating with colleagues (R, E) 4.5 Demonstrates self-care to allow continuous engagement within the profession (R, E)

CWAs: Communicate Effectively (C), Think logically & critically (T), Evaluate & process quantitative & symbolic data (Q), Understand themselves in relation to others in a multi-cultural world (R), Understand ethical responsibilities & consequences (E)

SPSCC Nursing

Appendix B

SPSCC Program Student Learning Outcomes & Professional Standards

<p>Program Student Learning Outcomes</p> <p>1) Demonstrate the ability to assess, diagnose, plan, safely implement, and evaluate nursing plans of care which address the holistic needs of diverse individuals, families, groups, and communities.</p> <ul style="list-style-type: none"> • Professional Standards addressed: 1, 2, 3, 4, A, B, D, E, F, a, b, d, h, i, (I), (II), (III), (i), (ii), (iii), (iv), (v), (vii), (viii), (xii), (xvi), (xvii) <p>2) Acquire and implement new scientific knowledge and use technology to enhance nursing practice.</p> <ul style="list-style-type: none"> • Professional Standards addressed: 2, 3, 4, B, C, E, F, e, g, (I), (II), (xvi), (xvii) <p>3) Communicate effectively in full partnership to facilitate delivery of care.</p> <ul style="list-style-type: none"> • Professional Standards addressed: 2, 3, 4, A, B, D, E, d, e, h, i, (iii), (vii), (xi), (xviii) <p>4) Participate ethically and professionally in local and global communities as an entry level nurse.</p> <ul style="list-style-type: none"> • Professional Standards addressed: 1, 2, 3, 4, A, B, D, E, d, e, f, g, h, i, (I), (II), (III), (iii), (vi), (vii), (ix), (x), (xiii), (xiv), (xv), (xvi), (xvii), (xviii) 	
<p>NLN Associate Degree Competencies</p> <ol style="list-style-type: none"> 1. NLN Human Flourishing 2. NLN Nursing Judgement 3. NLN Professional Identity 4. NLN Spirit of Inquiry <p>More details found here.</p>	<p>QSEN Competencies</p> <ol style="list-style-type: none"> A. QSEN: Patient Centered Care B. QSEN Safety C. QSEN Informatics D. QSEN Teamwork and Collaboration E. QSEN Evidence-Based Practice F. QSEN Quality Improvement <p>More details found here.</p>
<p>ANA Nurses Code of Ethics Provisions</p> <p>a. ANA Provision 1: The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.</p> <p>b. ANA Provision 2: The nurse’s primary commitment is to the patient, whether an individual, family, group, community, or population.</p> <p>c. ANA Provision 3: The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.</p> <p>d. ANA Provision 4: The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.</p> <p>e. ANA Provision 5: The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.</p> <p>f. ANA Provision 6: The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.</p> <p>g. ANA Provision 7: The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.</p> <p>h. ANA Provision 8: The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.</p> <p>i. ANA Provision 9: The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain integrity of the profession, and integrate principles of social justice into nursing and health policy.</p>	

SPSCC Nursing

Functions of a registered nurse: [WAC 246-840-705](#)

Based on the principles of biological, behavioral, health, and nursing sciences. Such acts are grounded in the elements of the nursing process which includes, but is not limited to, the assessment, analysis, diagnosis, planning, implementation and evaluation of nursing care and health teaching in the maintenance and the promotion of health or prevention of illness of others and the support of a dignified death. The registered nurse using specialized knowledge can perform the activities of administration, supervision, delegation and evaluation of nursing practice; and

(I) Registered Nurses: The registered nurse performs acts that require substantial knowledge, judgment and skill

(II) Registered Nurses: The registered nurse functions in an independent role when utilizing the nursing process as defined in WAC 246-840-700(2) to meet the complex needs of the client.

(III) In an interdependent role as a member of a health care team, the registered nurse functions to coordinate and evaluate the care of the client and independently revises the plan and delivery of nursing care. A registered nurse may not accept delegation of acts not within his or her scope of practice.

Standards of Nursing Conduct or Practice: [WAC 246-840-700](#)

Standard I-Initiating the Nursing Process:

- (i)** (A) Assessment & Analysis
- (ii)** (B) Nursing Diagnosis/Problem Identification
- (iii)** (C) Planning
- (iv)** (D) Implementation
- (v)** (E) Evaluation

Standard II Delegation and Supervision:

- (vi)** (A) Delegating as defined in WAC 246-840-010(10);
- (vii)** (B) Supervising as defined in WAC 246-840-010(10);
- (viii)** (C) Evaluating the outcomes of care
- (ix)** (D) Delegate in community-based long-term care and in-home settings as provided by WAC 246-840-910 through 246-840-970 and WAC 246-841-405; and
- (x)** (E) Delegation of medication administration in a home health or hospice agency regulated under chapter 70.127 RCW, under a plan of care pursuant to chapter 246-335 WAC;

Standard III Health Teaching:

(3) The following standards apply to registered nurses and licensed practical nurses:

- (xi)** (a) communicate significant changes in the client's status to appropriate members of the health care team.
- (xii)** (b) Document the nursing care given and the client's response to that care; and
- (xiii)** (c) Act as client advocates in health maintenance and clinical care.

(4) Other responsibilities:

- (xiv)** 4(a) Have knowledge and understanding of the laws and rules
- (xv)** 4(b) Be responsible and accountable for his or her practice
- (xvi)** 4(c) Obtain instruction . . . as necessary before implementing new . . . procedure.
- (xvii)** 4 (d) Be responsible for maintaining current knowledge in his/her field of practice; and
- (xviii)** 4(e) Respect the client's right to privacy . . . as otherwise provided in the Health Care Information Act, chapter 70.02 RCW.

SPSCC Nursing

Appendix C

Nursing DTA/MRP Pathway Map ~ 138 Credits

Qtr. 1	Qtr. 2	Qtr. 3	Qtr. 4	Qtr. 5	Qtr. 6	Qtr. 7	Qtr. 8	Qtr. 9	Qtr. 10	Qtr. 11	Qtr. 12
Transition Studies	MATH 092 (5cr) <i>Mathematical Reasoning</i>	CMATH 146 (7 cr) <i>CLIPPERS Introduction to Probability and Statistics*</i> Includes ability to complete: MATH 095 MATH 096 MATH& 146 *some students may place directly into MATH& 146	CHEM& 121 (5cr) <i>Introduction to Chemistry</i>	BIOL& 241 (5cr) <i>Human A & P 1</i>	BIOL& 242 (5cr) <i>Human A & P 2</i>	NURS 111 (3cr) <i>Integrated Nursing Care I: Diversity</i>	NURS 121 (5cr) <i>Integrated Nursing Care II – Theory</i>	NURS 131 (5cr) <i>Integrated Nursing Care III – Theory</i>	NURS 211 (4cr) <i>Integrated Nursing Care IV – Theory: Diversity</i>	NURS 221 (4cr) <i>Integrated Nursing Care V – Theory</i>	NURS 231 (4cr) <i>Nursing Transition into Practice</i>
	ENGL 090 (5cr) <i>Integrated Reading and Writing I</i> ENGL 095 (5cr) <i>Integrated Reading and Writing II</i>	ENGL 098 (5cr) <i>Transitional English Composition</i> ENGL& 101 (5cr) <i>English Composition I</i>	PSYC& 100 (5cr) <i>General Psychology</i>	PSYC& 200 (5cr) <i>Lifespan Psychology</i>	BIOL& 260 (5cr) <i>Microbiology</i>	NURS 112 (3cr) <i>Integrated Nursing Care & Assessment I – Lab</i>	NURS 122 (2cr) <i>Integrated Nursing Care & Assessment II – Lab</i>	NURS 132 (2cr) <i>Integrated Nursing Care & Assessment III – Lab</i>	NURS 212 (2cr) <i>Integrated Nursing Care & Assessment IV – Lab</i>	NURS 222 (2cr) <i>Integrated Nursing Care & Assessment V – Lab</i>	NURS 232 (6cr) <i>Preceptorship</i>
	CCS 101 (3cr) <i>Pathways to Success</i>	BIOL& 160 (5cr) <i>General Biology w/Lab</i>		NUTR& 101 (5cr) <i>Nutrition</i>		NURS 140 (2cr) <i>Integrated Nursing Care & Assessment I – Clinical/Simulation</i>	NURS 141 (3cr) <i>Integrated Nursing Care & Assessment II – Clinical/Simulation</i>	NURS 142 (3cr) <i>Integrated Nursing Care & Assessment III – Clinical/Simulation</i>	NURS 240 (3cr) <i>Integrated Nursing Care & Assessment IV – Clinical/Simulation</i>	NURS 241 (3cr) <i>Integrated Nursing Care & Assessment V – Clinical/Simulation</i>	

SPSCC Nursing

Qtr. 1	Qtr. 2	Qtr. 3	Qtr. 4	Qtr. 5	Qtr. 6	Qtr. 7	Qtr. 8	Qtr. 9	Qtr. 10	Qtr. 11	Qtr. 12
			Choose One (5cr): (Humanities) CMST& 220 <i>Public Speaking</i> CMST& 210 <i>Interpersonal Communication: Diversity</i> CMST 240 <i>Intercultural Communication: Diversity</i>		Choose One (5cr): (Communication) ENGL& 102 <i>Composition II</i> CMST& 210 <i>Interpersonal Communication: Diversity</i> CMST& 220 <i>Public Speaking</i> CMST 240 <i>Intercultural Communication: Diversity</i>	PHIL 235 (2cr) <i>Ethics and Policy in Health Care I</i>	NURS 113 (2cr) <i>Pharmacology</i>	PSYC 235 (2cr) <i>Psychosocial Issues in Health Care I</i>	PSYC 236 (3cr) <i>Psychosocial Issues in Health Care II</i>	PHIL 236 (3cr) <i>Ethics and Policy in Health Care II</i>	NURS 233 (2cr) <i>Capstone Project</i>
						Choose One (5cr): (Humanities) FRCH& 121 <i>French I</i> HUM 121 <i>Multicultural America</i> HUM 140 <i>World Religions</i> PHIL 102 <i>Ethics</i> PHIL 103 <i>Science, Technology, and Human Values</i> SPAN& 121 <i>Spanish I</i>					

SPSCC Nursing

Appendix D

Board of Nursing Professional Licensure Requirements (Updated July 2020)

In accordance with U.S. Department of Education Regulation 34 CFR 668.43 (a) (5) (v), SPSCC Nursing Program has reviewed RN licensing requirements from the following states to determine if a SPSCC nursing graduate would be eligible for RN licensure in that state. Most of the states reviewed had published information available, making it possible to determine that indeed, an SPSCC nursing graduate could receive their RN license. However, there were some states that had verbiage to the effect of “curriculum must be substantially equivalent” to the nursing curriculum qualifications in that state, and that this determination would be made by that state’s Board of Nursing after reviewing the applicant’s credentials. These states are noted under the column labeled “Unable to Determine that the Curriculum Meets the State Educational Requirements for RN Licensure.”

Meets RN Licensing Requirements	Does Not Meet RN Licensing Requirements	Unable to Determine that the Curriculum Meets the State Educational Requirements for RN Licensure
Alabama		Hawaii
Alaska		Indiana
Arizona		Kentucky
Arkansas		Louisiana
California		Maryland
Colorado		Mississippi
Connecticut		New York
Delaware		North Dakota
District of Columbia		Northern Marietta Island
Florida		Tennessee
Georgia		
Guam		
Idaho		
Illinois		
Iowa		
Kansas		
Maine		
Michigan		
Minnesota		
Missouri		
Montana		
Nebraska		
Nevada		
New Hampshire		
New Jersey		
New Mexico		
North Carolina		
Ohio		
Oklahoma		
Oregon		
Pennsylvania		
Rhode Island		
South Carolina		
South Dakota		
Texas		
Utah		
U.S. Virgin Islands		

SPSCC Nursing

Appendix E

Authorization to Release Student Information for References

This signed form must be submitted in person or electronically to the Nursing Department.

Deliver to:
 SPSCC Nursing Program
 ABC building, room 202
 Email: nursing@spscc.edu
 Phone: 360.596.5285
 Fax: 360.596.5717

By completing this form, the student is authorizing a faculty member to release information for references for employment, scholarship, or educational purposes.

*Student Name			*ctcLink ID	
Street			Apt Number	
City		State		Zip Code
*Phone		*Email		
*Date of attendance				

Under federal legislation, The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99), I understand that my educational records cannot be released without my written permission. I, therefore, request that the information listed below be released to the following individual or organization.

Any agency/school requesting reference	Signature of Student:
OR	
Restricted to these Agencies:	Name of agencies or schools:
	Signature of Student:

*Student Name (Print)		Date	
*Signature of Student			

SPSCC Nursing

Appendix F

Nursing Program Petition for Readmission

Complete this Application and Return it to Dean for Nursing by the Dates Specified Below

Name:	ctcLink ID:	Last Quarter of Attendance:	Requested Quarter of Readmission:
Address:	Personal Email:		Day-time Phone:
<p>Attach any documentation related to withdrawal or dismissal from the program to this form, including correspondence with the Dean.</p> <p>Reason for not continuing in the program (be specific):</p>			
<p>Explain in detail why you are prepared to be successful if readmitted (attach a letter if more space is needed):</p>			
Signature:		Date:	
<p>Applications for readmission are due by the following dates:</p> <ul style="list-style-type: none"> • Fall – July 15 • Winter – October 15 • Spring – February 15 		<p>Students will be notified by email of their readmission status by the following dates:</p> <ul style="list-style-type: none"> • Fall – August 15 • Winter – November 15 • Spring – March 15 	
<p>FOR COLLEGE USE ONLY:</p>			
<p>ACCEPTED: ___ DENIED: ___ Date Notified: _____ Signature of the Dean: _____</p>			

SPSCC Nursing

Appendix G

Statement on Academic Honesty

Students at South Puget Sound Community College are expected to be honest and forthright in their academic endeavors because academic dishonesty disrupts the learning process and threatens the educational environment for all students. As members of the college community we all benefit from an open, honest, educational environment and therefore, we all bear a responsibility to encourage and promote academic honesty.

Forms of Academic Dishonesty – Definitions:

Plagiarism: Plagiarism is presenting someone else’s words, ideas, or data as one’s own. When a student submits work that includes the words, ideas, or data of others, the source of that information must be acknowledged through complete, accurate, and specific references. Verbatim statements also need to be enclosed in quotation marks.

In academically honest writing or speaking, the student will acknowledge the source whenever:

- Another person’s actual words are quoted.
- Another person’s idea, opinion or theory is used, even if it is completely paraphrased in the students own words.
- Facts, statistics, or other illustrative materials are borrowed – unless the information is common knowledge.

Cheating: Cheating or other forms of academic dishonesty that is intended to gain unfair academic advantage. The following list of offenses is not intended to be fully exhaustive of all potential instances of cheating:

- Copying from another student’s test or assignment or allowing another student to copy from a test or assignment.
- Collaborating during a test with any other person without instructor permission.
- Using the course textbook or other course materials during a test without instructor permission.
- Using prepared materials during a test (e.g., notes, formula lists) without instructor permission.
- Stealing, buying, or otherwise obtaining all or part of a test before it is administered.
- Selling or giving away all or part of a test that has not been administered, including answers.
- Bribing someone to obtain a test that has not been administered **or** information about the test.
- Taking a test for someone else or permitting someone to take a test for you.

SPSCC Nursing

Fabrication: Fabrication is the intentional use of invented information or the falsification of research or other findings with the intent to deceive. Examples include:

- Submitting as the students own work and academic exercise (e.g., written work, lab work, computer work, art work, etc.) prepared totally or impart by another. (The typing of a student paper by another person is permissible, but all corrections and rephrasing must be the student's own.)
- Inventing data or source information for research or other academic exercises.
- Citing of information not taken from the source indicated.
- Listing sources in a bibliography not actually used in the academic exercise.

Grade Tampering: Grade tampering involves changing, altering, or being an accessory to the changing and/or altering of a grade in a grade book, on a test, on an assignment, on a change of grade form, or any other official academic record.

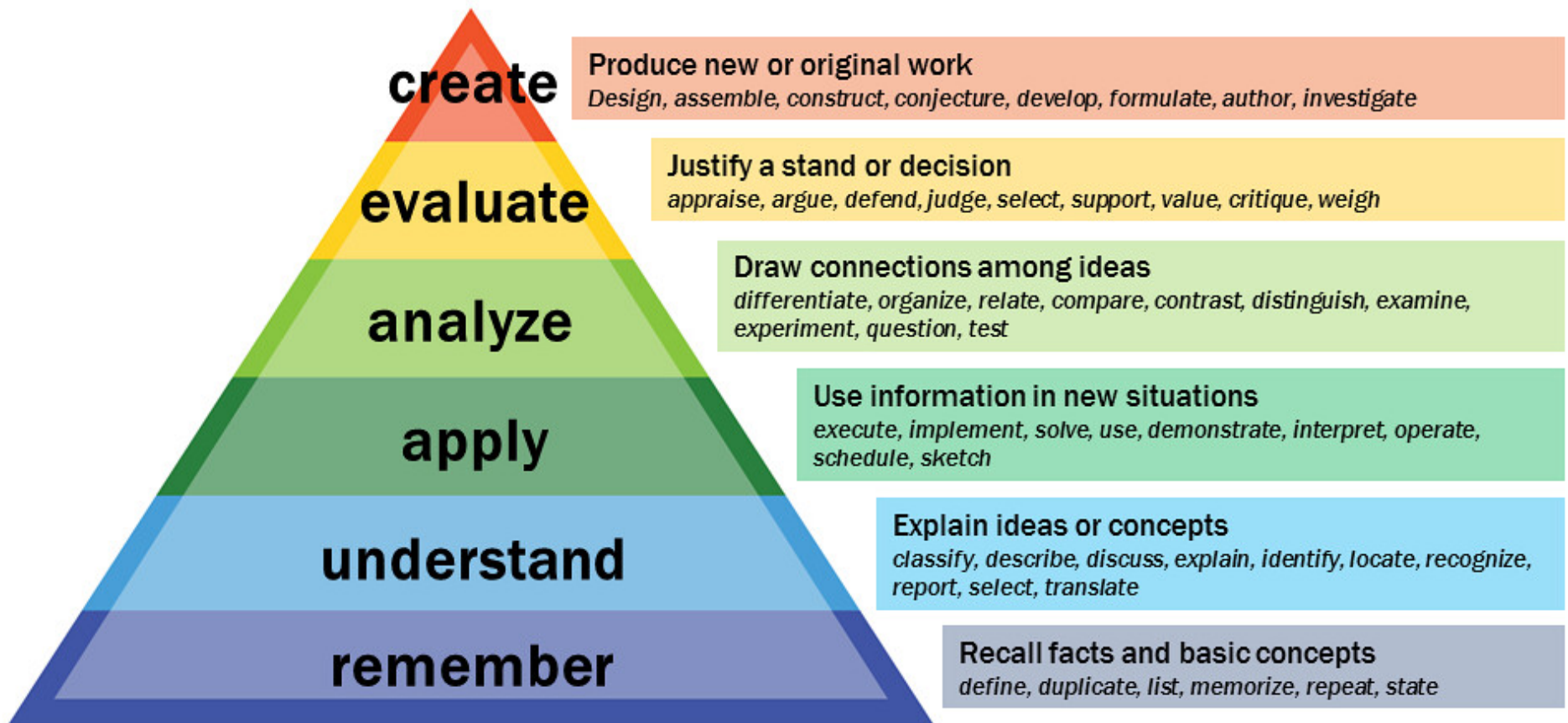
The consequences for engaging in any form of academic dishonesty vary based on circumstances. Students who engage in such activities may be dismissed from the college as outlined in the Code of Student Rights and Responsibilities. For more information regarding academic honesty on campus, see the following:

- Code of Student Rights and Responsibilities available in the Vice President for Student Services Office (building 25), the Library (building 28), the Student Union Building, this [link](#) and on the website: go to www.spscc.edu
 - Click on current students
 - Scroll down to Rights and Responsibility Policies
 - Click on Student Rights and Responsibilities or ask your faculty, Division Dean or Vice President for Student Services.

SPSCC Nursing

Appendix H
Bloom's Taxonomy

Bloom's Taxonomy



Vanderbilt University Center for Teaching

SPSCC Nursing

Appendix I Student Success Plan Form

This tool guides students and faculty to make a cohesive plan and pathway for continued growth and success.

Student Name: _____ Faculty Name: _____
 Date of Meeting: __/__/____ Course(s): _____ Quarter and Year: _____

Reason for Meeting: Identified by self or faculty as being at risk of failing to meeting academic standards in a course. (Select all that apply.)

Student Resources	Time Management	Test Taking	Study Skills	Housing and Food	Health Management	Identity	Program Expectations	Course Expectations	Learning Growth	Self-Identified Need
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Brain Storming

Factors That May Affect Performance:

Student Strengths:

Strategies for success:

SPSCC Nursing

Next Steps

Timeframe of implementation:

What will happen if the plan is unsuccessful:

Student comments after discussion with instructor:

Faculty comments after discussion with student:

Is there next scheduled meeting? Yes No

If yes, date:

Name and contact information for campus resources need to be accessed:

Counseling:

Tutoring:

Access Services:

Financial Aid:

Other (specify):

Please add all appropriate documents as indicated

I have read and acknowledge this form and associated policies (three or more will initiate a written warning of inadequate performance):

Student _____
(Signature)

Date ____/____/____

Instructor _____
(Signature)

Date ____/____/____

Dean _____
(Signature)

Date ____/____/____

(Copy provide to student and original to student file)



SPSCC Nursing

Follow Up Meeting 1:

Date: ____/____/____

Update to plan:

Goals met: Yes No

Next steps:

Student Signature: _____

Faculty Signature: _____

Follow Up meeting 2:

Date: ____/____/____

Update to plan:

Goals met: Yes No

Next Steps:

Student Signature: _____

Faculty Signature: _____



SPSCC Nursing

Follow Up Meeting 3:

Date: ___/___/_____

Update to plan:

Goals met: Yes No

Next steps:

Student Signature: _____

Faculty Signature: _____

Follow Up Meeting 4:

Date: ___/___/_____

Update to plan:

Goals met: Yes No

Next steps:

Student Signature: _____

Faculty Signature: _____

SPSCC Nursing

STUDENT

We encourage all students to participate in college wide and community events. All decisions of student activities that represent SPSCC Nursing Program should have faculty involvement and approval before being implemented.

Nursing Program Communication

SPSCC Nursing Program primary communication will be through your student email and course canvas shells. We strongly encourage you check your school email regularly. It is also recommended that you set up and allow for notifications from Canvas. Netiquette should be followed when using all forms of communication (*see below*).

- Each cohort will have a Canvas site where faculty and staff post program information or collect documents needed by the program or its accreditors.
- Student SPSCC email is the official communication tool while in the program.
 - Students should check email/Canvas regularly.
- Students are responsible for content of all communication sent by staff/faculty to their SPSCC email address.
- Students are responsible to review all communication avenues in Canvas (messages, announcements, etc.).
- Students should use SPSCC email address and/or the Canvas messaging tool to communicate with staff/faculty electronically.
- It is encouraged for students to follow up with a SPSCC email and/or Canvas message if anything has been left for review/consideration for staff/faculty.
 - Staff/faculty mailboxes are located in the Allied Health Division Workroom, on the 2nd floor, room 203.
 - Faculty offices are located on the ABC campus on floors 2 and 3.

Netiquette

Common courtesy and professional etiquette should always be employed in all forms of communication. Always address the recipient of the communication by name and sign the email with your name. Use of professional and/or non-inflammatory language when using email as communication, is a priority. Use a spell checker and employ appropriate grammar (*upper and lower case even when using email*). Students should demonstrate empathic understanding of others when communicating with classmates, college staff, and faculty.

***Faculty reserve the right to remove any discussion board postings that display inappropriate language and/or content.*

Class Representatives

Student class representatives will attend meetings of the Nursing Department and Nursing Advisory Committee when the program's policies, operations, and curriculum are under review or up for discussion and/or upon request from the class representatives.

SPSCC Nursing

Procedure:

- Class representatives and alternates will be selected during the first week of October for fall quarter. Class representative will:
 - be elected by classmates.
 - be one representative per cohort with an alternate.
 - serve until the beginning of the next academic year.
 - be responsible for convening meetings and collecting input about the nursing program's policies, operations, and/or curriculum from their cohort class.
 - may request to add items to department meeting agendas, provided that the agenda items relate to the program's policies, operations, and/or curriculum.
 - Individual grievances or complaints about a faculty or class will not be placed on an agenda.
 - These must be handled through the academic complaint process as specified in the college's Code of Student Rights and Responsibilities.
 - Agenda requests must arrive at least **forty-eight hours** before a scheduled meeting.
 - Decisions of the meeting chair regarding agenda items are final.
 - be willing to present and be on time to Nursing Department meetings.
 - attend each Advisory Committee Meeting (held in October and March each academic year).

Cohort Meeting with the Dean

The Dean of Allied Health and Nursing meets with each cohort on occasion to discuss program factors and/or activities. These are open meetings to allow students an opportunity to share concerns, provide feedback, and obtain answers to questions.

Guiding Principles for Student Conduct

As a student enrolled and admitted to the SPSCC Nursing Program, you are obligated to honor Washington state nursing law. All students must conduct themselves in a manner consistent [RCW, Chapter 18.130](#), Regulation of Health Professions – Uniform Disciplinary Act. As well as [RCW, Chapter 18.79](#), Nursing Care, and [WAC, Chapter 246-840](#), Practical and Registered Nursing. Please feel free to reach out if you have any questions or seek any clarifications.

Nurses and nursing students are held to high standards of professional and personal conduct. While in the nursing program, students must emulate the behaviors of professional licensed nurses including civility and respect ([Appendix A](#)). Each student must:

- follow the policies of South Puget Sound Community College and the Nursing Program as defined in this handbook.
- comply with the policies for care and conduct established by our community partners when working in their facilities.
- practice within the ethical, legal, and regulatory frameworks of nursing and the standards of professional nursing practice.

SPSCC Nursing

- report unsafe practices using appropriate channels of communication.
- demonstrate accountability for nursing care given by self and/or delegated to others.
- use standards of nursing practice to perform and evaluate client care.
- advocate for client rights.
- maintain organizational and client confidentiality.
- practice within the parameters of individual knowledge and experience.
- serve as a positive role model within the health care setting and, in the community, at large.
- recognize the impact of economic, political, social, and demographic forces on the delivery of health care.
- develop and implement a plan to meet self-learning needs.
- maintain appropriate professional boundaries in the nurse-client relationship.

***Adapted from NLN, 2002, pp. 7-11*

Professional Failure

The conduct of students reflects upon their personal integrity, that of the Nursing Program and SPSCC. Students must exhibit professional behavior and demonstrate competencies in all aspects of their practice as nursing students. Students are expected to conduct themselves in a professional manner at all times. Professional failures are actions that violate the standards of the nursing profession or the policies of the nursing program, the college and/or clinical partners. Depending on the violation, professional failures may negatively impact a student's grades. Even when a student is in good standing, extreme or multiple professional failures, may result in suspension or dismissal from the program and may preclude a student from being readmitted.

Examples of Professional Failures Include but are not limited to:

- endangering the physical safety of a client, classmate, staff, faculty, or member of the public.
- threatening the psychological safety of a client, colleague, classmate, faculty member, or member of the public.
- being asked to not return to a clinical unit and/or facility.
- violating professional ethics ([Appendix B](#)).
- assuming inappropriate independence when delivering care.
- violating client dignity, confidentiality, or privacy.
- unprofessional behavior or communication in all educational and academic environments.
- disruptive behavior in the classroom, lab, or clinical setting.
- belittling, devaluing, or failing to consider the culture, beliefs or values of other students, faculty, staff or member of the public.
- lacking the ability to work in a group in any learning or working environment associated with the Nursing Program.
- failing to communicate in a clear, timely or accurate manner.

SPSCC Nursing

- academic dishonesty.
- violating the program's social media policy as specified below.
- impairment due to drugs, alcohol, or other chemical substances in any learning or working environment associated with the nursing program.
- failing to comply with clinical agency guidelines.
- failing to comply with any policy of the college, including those specified in this handbook.
- failing to follow the lawful directives of program faculty, staff or clinical personnel.

Procedure:

Using the Professional Guidelines form ([Appendix C](#)), faculty will identify, in writing, students who fail to meet minimum professional standards and/or who demonstrate unsafe and concerning behaviors. These incidents will be evaluated by the Professional Conduct Review Committee (*consisting of the Dean for Nursing and two full-time nursing faculty*). This Professional Conduct Review Committee may determine to suspend or expel a student from the program depending on the severity of the circumstances and will notify the student and faculty member involved within 10 business days.

Students who are not expelled will receive documented counseling. The Professional Conduct Review Committee, with feedback from the faculty of record, will create a plan of correction that will address the documented issues. Adherence to the plan of correction will resolve the deficient performance issue.

All professional failures will remain documented in the student's academic file. ***Three professional failures of any type may result in expulsion from the nursing program.***

Student Grievance Process

As part of their nursing education, students must learn to resolve problems/concerns in an effective manner, using lines of communication (*chain of command*).

- If students are having difficulty or other problems (*such as grades, clinical expectations, questions about assignments/grades, clinical behavior, etc.*) in any course, the student should first ask the faculty member that the concern involves, in private, for help to resolve the issue.
 - This interaction may prove beneficial by shedding light on the issue or providing the student with a satisfactory reason for the event involving the faculty. Usually, this can resolve the situation.
 - If students are hesitant to speak to the faculty, it is suggested that they ask a faculty mentor to be present when meeting with the faculty member.
- If this does not result in resolution of the problem/concern, the student needs to seek the assistance of the Dean of Nursing.
- If the student believes the issues are not resolved, the next step includes following the steps covered in the SPSCC Code of Student Rights and

SPSCC Nursing

Responsibilities handbook, which is available on the college's [website](#).

- Additionally, a pdf copy of the SPSCC Code of Student Rights and Responsibilities Handbook is available in Canvas for each cohort.

Academic complaints are covered in the [SPSCC Code of Student Rights and Responsibilities](#) handbook in section 132X-60-080 (3).

- Students with an academic complaint including, but not limited to, grade disputes, should contact the faculty member within ten calendar days of the incident and attempt to resolve the issue(s).
- If unable to resolve the issue(s), the student should contact the appropriate dean or director within ten calendar days of contact with the faculty.
- If still unable to resolve the issue(s), the student should contact the supervising vice-president within ten calendar days within contacting the dean or director.
 - The decision of the vice-president shall be final.

Course and Curriculum Evaluations

Students have a professional obligation to evaluate their nursing courses and the Nursing Program as a whole during and at the end of each quarter and at the end of the program.

- In all evaluations, student identity will be kept confidential and data will be used in aggregate form only.
- Course evaluations assess classroom environment and faculty effectiveness and are administered near the end of each quarter.
 - Course evaluations will not be released to faculty until the term is completed and grades have been posted.
- Curriculum evaluations are important tools for curriculum development.
 - They are separate from course evaluations in that they do not deal with instructor effectiveness or classroom environment.
 - Curriculum evaluations are done electronically late in the quarter and ask questions about the design of the curriculum and how well it's serving the needs of students preparing to become registered nurses.
 - This will include all course, didactic, lab, clinical, and simulation.
- Student satisfaction surveys are completed in quarter three (3) and six (6) and give our program important data to see how our overall program and college are doing.
- Alumni surveys go out to graduates in late December, early January and are required by our accrediting bodies to assess a variety of elements, including employment status, and end of program student learning outcomes met.
 - Alumni data is integral to closing the loop regarding EPSLOs being met or unmet.

SPSCC Nursing

Nursing Activities

SPSCC will be chartering a chapter of the National Student Nurses Association (NSNA). This nationwide organization is dedicated to fostering the professional development of nursing students and preparing students for participation in professional nursing organizations. Benefits of membership in the NSNA include career planning opportunities, leadership development and community outreach opportunities, scholarship opportunities, and a subscription to Imprint, the professional magazine for student nurses. Students can also gain valuable perspective on political advocacy for nurses.

Nursing students are encouraged to become members of the NSNA. Each year, in collaboration with staff/faculty, the NSNA will help plan and implement portions of the pinning ceremony at the time of graduation.

For membership, enrollment questions, or ideas, please contact the SPSCC NSNA mentor. *(Applications and further information will be available at nursing orientation.)*

Other College Activities:

- Students are encouraged to participate in general college activities that are available to all students.
- Students are encouraged to initiate college-related activities that enhance the wellbeing of themselves, their peers, and their program.

Professional Advancement

Nurse Technician

Students enrolled in the nursing program may be eligible to work as nurse technicians after successful completion of quarter one (1) and per [WAC 246-84-521](#). This section provides written information on the legal role of the nursing technician as defined in [WAC 246-840-010](#) and [246-840-840](#).

Nursing technicians is defined as “a nursing student employed in a hospital licensed under chapter 70.41 RCW, a clinic, or nursing home licensed under chapter 18.51 RCW, who:

- Is currently enrolled in good standing in a nursing program approved by the commission and has not graduated; or
- Is a graduate of a nursing program approved by the commission who graduated:
 - Within the past thirty days; or
 - Within the past sixty days and has received a determination from the secretary that there is good cause to continue the registration period, as defined by the secretary in rule.
- No person may practice or represent oneself as a nursing technician by use of any title or description of services without being registered under this chapter, unless otherwise exempted by this chapter.
- The commission may adopt rules to implement chapter 258, Laws of 2003.

SPSCC Nursing

Procedure:

When a student finds a nurse technician job, the following should be followed:

- Student will review the legal responsibilities of the position found in [WAC 246-840-840](#).
- Information and applications for the licensure examination and state licensure are available from this [link](#). Click on Nursing Technician.
- Student will complete steps required to get education and employment verification.
 - Application Form
 - Education Verification Form
 - Employment Verification Form
- Submit Employment Verification Form to potential employer to verify the job offer.
- Submit the Education Verification Form to the SPSCC Allied Health AA.
- The AA will work in collaboration with the faculty and/or Dean to provide you with a skills

list and letter of good standing.

- Student must be in good standing in didactic, laboratory, simulation, and clinical courses to receive the letter of good standing.
- Both will be submitted to potential employer.
- Application and forms listed above, along with the application fee will be mailed to Department of Health, who will provide you with proof of successful application.

In the Nurse Technician role, the student must follow these guidelines at all times:

- At the successful completion of each quarter, students can request a new skills checklist from the nursing program AA and submit to the employer to verify completion of courses and qualification to perform more advanced skills.
- The student may function only under the direct supervision of a registered nurse who has agreed to act as supervisor and is immediately available.
- The student may gather information about clients and administer care to clients.
- The student may **not** assume ongoing responsibility for assessments, planning, implementation, or evaluation of the care of clients.
- The student may **never** function independently, act as a supervisor, or delegate tasks to licensed practical nurses, nursing assistants, or unlicensed personnel.
- You may **not** administer chemotherapy, blood or blood products, intravenous medications, scheduled drugs, nor carry out procedures on central lines.
- You may **not** perform any task or function that does not appear on the verification sent to the nursing technician's employer by the nursing program in which the nursing technician is enrolled.
- If the Nurse Technician is requested to perform any task not verified by the nursing program, the nursing technician must inform their supervisor that the task or function is not within their scope and must not perform the task.

SPSCC Nursing

The student must also follow these legal requirements:

- If you fail a course, you must **immediately** let the employer know about the failure.
- If you lack a 'good standing' with the nursing program you do not qualify to continue to practice as Nurse Technician and you **must** advise your employer of this change.
 - Your license will be placed in "inoperable" status until you return to a 'good standing' status.
 - To return to work as a Nurse Technician you must then submit a new application to the Department of Health (fees are waived) as outlined above.
- Students who take a leave from the nursing program **cannot** practice under the Nurse Technician license until they return to the program.
 - However, there will be no change in the status of the credential.
 - Upon re-entry to the program the student must submit a new application to Department of Health (fees are waived) as outlined above.
- Students may also opt to take the Nursing Assistant Certifying Exam upon successful completion of the first two quarters.
 - You may contact the Department of Health web site for further information.

License Practical Nurse (LPN)

Students who successfully complete quarter four (4) of the Nursing Program are eligible to take the National Council of State Boards of Nursing Licensure Examination for the Licensed Practical Nurse (NCLEX-PN).

Procedure:

- The application process for licensure examination and for state licensure should be started as soon as plans are initiated to test.
- Students will notify the Allied Health AA of intentions to sit for NCLEX-PN exam (*this allows for timeliness of necessary documents to be prepared*)
- Information and applications for the licensure examination and state licensure are available from this [link](#).
 - Click on Registered Nurse or Licensed Practical Nurse by NCLEX Examination.
 - The Professional Vocational Relationship Course (PVR) must be completed and a copy of certification of completions forwarded to the Allied Health Administrative Assistant.
 - Students sign a release of transcripts request for SPSCC Enrollment Services.
- Enrollment Services sends the student's transcripts to the Nursing Commission as soon as the certificate and/or degree is posted on the record.
 - A minimum \$7.00 charge is associated with transcript production.
- After a degree audit is performed, and necessary coursework is completed by the student, the Dean for Nursing sends a certificate of completion to the Washington State Nursing Care Quality Assurance Commission
- The testing company informs the state of receipt of application.
- The state reviews eligibility and then sends the student an 'Authorization to Test'.

SPSCC Nursing

- The student calls to make an examination appointment.
- The student must take appropriate identification and the 'Authorization to Test' to the examination.
- The testing company notifies the state of the examination results (pass/fail) and reports success rates to the school.
- The state notifies the student of the results.

Registered Nurse (RN)

Students who successfully complete the two-year Nursing Program are eligible to take the National Council of State Boards of Nursing Licensure Examination for the Registered Nurse (NCLEX-RN). During Transition to Practice course, 6th quarter, students will be guided on the how the process works. The exam is given all year after verification of completion of the nursing program, however we strongly encourage students to complete their exam as soon as possible after meeting graduation requirements.

Procedure:

- The application process for licensure examination and for state licensure should be started a minimum of 60 days prior to the end of the second year.
- Information and applications for the licensure examination and state licensure are available from this [link](#).
 - Click on Registered Nurse or Licensed Practical Nurse by NCLEX Examination.
- Students sign a release of transcripts request for Enrollment Services.
- Enrollment Services sends the student's transcripts to the Nursing Commission as soon as the certificate and/or degree is posted on the record.
 - A minimum \$7.00 charge is associated with transcript production.
- The Dean sends a certificate of completion to the Washington State NCQAC as soon as all coursework is completed.
- The testing company informs the state of receipt of application.
- The state reviews eligibility and then sends the student (now graduate) an 'Authorization to Test'.
- The graduate calls to make an examination appointment.
- The graduate must take appropriate identification and the 'Authorization to Test' to the examination.
- The testing company notifies the state of the examination results (pass/fail) and reports success rates to the school.
- The state notifies the graduate of the results and sends the nursing license.

SPSCC Nursing

SUMMARY

To conclude, the information within this handbook can facilitate and guide your educational experience. We encourage students to reference this document often as you navigate your courses. Along with course syllabi, handbooks are the contract and the terms to make sure we are all on the same page quarter by quarter, year by year. Please feel free to reach out to any member of the nursing team if you have any questions or seek any clarifications from the information provided in this document.

Below you will find references as well as appendices previously referenced throughout this handbook. We also ask that you please print the final page, [Verification Statement Form](#). This is a form that needs to be sign and dated as well as turn back in the first week of the academic year.

Thank you so very much for reviewing the information within the SPSCC Nursing Student Handbook for the 2022-2023 academic year. We are so looking forward to working with you as you continue your journey of learning the knowledge, skills, and attitudes it takes to cultivate health and wellness in our communities and world.



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APPENDICES



SPSCC Nursing

Appendix A

Civility & Respect

Professionalism and the inherent values of altruism, autonomy, human dignity, integrity and social justice are fundamental to the discipline of nursing. Inherent in professionalism is accountability and responsibility for individual actions and behaviors, including civility. Civility must be present for professionalism to occur.

- Communicate respectfully and listen carefully ☺
- Come to clinical prepared and on time ☺
- Share work equally among group members ☺
- Resolve conflicts directly and with respect ☺
- Be honest and non-judgmental ☺
- Be humble and fair ☺
- Stand for something good ☺
- Let things go and show forgiveness ☺
- Participate in stress reduction and self-care activities ☺
- Donate your time to good things ☺
- Engage in respectful interactions ☺
- Listen well while others are speaking ☺
- Assume goodwill ☺
- Encourage and inspire each other ☺
- Respect differences and be open to others' points of view ☺
- Make thoughtful contributions to group work ☺
- Be on time and respect one another's time ☺
- Use electronic and media devices for class purposes only ☺
- Sit near the door in anticipation of phone/text messages ☺
- Use the golden rule ☺
- Celebrate differences ☺
- Have fun!!

Each of us should be 100% accountable for civility. That way, we take responsibility for our own actions and set a professional example

Behave in ways that reflect the expert, efficient, ethical nurse we each aspire to be.

- THINGS TO BE AWARE OF:**
- FACIAL EXPRESSIONS**
 - SARCASM**
 - TOPE OF VOICE**
 - PROFANITY**
 - SPEAKING NEGATIVELY**
 - CELL PHONES**
 - PRESSURING FACULTY AND STUDENTS**

As members of the nursing department and student body, we agree to communicate and interact in a respectful and civil manner. All our discussions and interactions will be conducted in a respectful, civil and dignified manner. Everyone deserves to have respect and show respect to others.

SPSCC Nursing

Appendix B

ANA Code of Ethics for Nurses

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparity.
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy

(American Nurses Association, 2015).

SPSCC Nursing

Appendix C Professional Guidelines

Student Name: _____

Date: _____

This document is to assist the student in meeting professionalism expectations in academic, professional, or administrative settings in order to meet the standards of professionalism inherent in being a Nurse. The following areas will be considered in evaluation of the student.

Integrity & Honesty

- The student provided false information in an academic, professional, or administrative setting.
 - The student acted outside the scope of their role in an academic, professional, or administrative setting.
 - The student presented the work of others as their own.
 - The student used their professional position for personal advantage.
 - The student used the physical or intellectual property of others without permission or attribution.
 - Other behavior that demonstrated lack of integrity and/or honesty:
-

Client-Centered Care & Client Safety

- The student did not act in the best interest of the client.
 - The student did not demonstrate sensitivity to the needs, values or perspectives of clients, family members or caregivers.
 - The student did not establish appropriate rapport with clients, family members or caregivers.
 - The student did not demonstrate openness/responsiveness to the client's ethnic and cultural background.
 - The student did not respond to client needs in a timely, safe, or effective manner.
 - Other unprofessional behavior related to client-centered care and/or safety:
-

Respect

- The student did not demonstrate respect for the rights of others in academic or professional settings.
 - The student did not demonstrate respect in interactions with others.
 - The student did not establish or maintain appropriate boundaries with clients, family members, fellow students, faculty, or staff.
 - The student did not demonstrate equal respect for all persons, regardless of, race, gender, religion, sexual orientation, age, disability, or socioeconomic status.
 - The student did not demonstrate respect for the confidentiality rights of clients, research participants or others.
 - Other behavior that demonstrated lack of respect:
-

Service & Working within the Team

- The student did not function, collaboratively within the healthcare team.
 - The student did not demonstrate sensitivity to the requests of the healthcare team.
 - The student did not demonstrate the ability to collaborate with students, faculty, and staff in a learning environment.
 - Other behavior that impeded collaboration:
-

SPSCC Nursing

Responsibility

- The student was tardy, absent, and/or misses deadlines/appointments.
 - The student was disruptive or rude.
 - The student needed continual reminders in the fulfillment of responsibilities.
 - The student did not accept responsibility for his/her actions or errors.
 - The student could not be relied upon to complete his/her responsibilities in a timely manner.
 - The student did not adhere to policies, procedures and/or instructions.
 - The student did not dress in attire appropriate for the setting.
 - The student failed to follow, and/or manipulated clinic policies, including those for client assignment and management.
 - The student failed to adhere to protective equipment and/or infection control guidelines.
 - Other irresponsible behavior:
-

Responsiveness, Adaptability & Self-Improvement

- The student was resistant or defensive when provided with constructive feedback.
 - The student did not demonstrate awareness of his/her own limitations and/or willingness to seek help.
 - The student resisted adopting recommendations from faculty or others to improve learning or performance.
 - The student did not demonstrate adaptability in a client care, classroom, or laboratory environment.
 - The student did not correct his/her errors when were brought to his/her attention.
 - Other behavior that impeded self-improvement:
-

Student Signature: _____

Date:

Faculty Signature: _____

Date:

Follow Up Comments:

***Copy will remain in student's file for remainder of program and may factor into quarterly evaluations and readmissions*



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Skills Lab Section

SPSCC Nursing

SKILLS LAB

The skills labs are an integral part of the innovative nursing program at SPSCC. Labs simulate the clinical environment and give the student the ability to learn and practice safely without causing harm to clients. Students have opportunities to overcome fears and insecurities while working with a variety of task trainers, simulators and current practice clinical equipment. The goal for SPSCC nursing labs is to provide the environment for students to become competent with nursing technical and adaptive skills, while working towards excellence in becoming a safe practitioner. Therefore, students spend time in the skills labs each quarter, learning new psychomotor skills, reviewing previously learned skills, refining critical thinking and reasoning, and/or preparing for clinical and future practice.

Each quarter of skills lab is unique and building on the previous experience. Please refer to your course syllabus and/or course Canvas shell for specific objectives.

Lab Guidelines

To provide guidance to all that use the nursing skills, the following guidelines have been established to ensure that all users will be able to enter and engage in teaching and learning without delay. Our labs are designed to represent realistic clinical environments and therefore all areas should be left ready to use by the next group of learners. Because our labs are an extension of the clinical and academic programs, the same requirements for maintaining professional behaviors in clinical and/or academic settings apply.

- **General Guidelines**
 - Student uniform should be worn during all times in lab (*see Profession Appearance Regulations below*).
 - No food, beverages, or gum allowed in, or around the labs.
 - Water bottles with closable lids are acceptable in the lab spaces.
 - Cell phones and personal devices must be silenced during labs. (*No texting and/or usage unless directed to do so by facilitator/faculty member.*)
 - All personal items (coats, jackets, school bags, purses, etc.) should be stored in the student space of the lab.
 - Children are not allowed in labs for safety reasons, unless part of a supervised, planned curricular activity.

- **Practice**
 - Bring all necessary supplies and/or equipment to complete skills.
 - Prior to your lab class, review skills as assigned through ATI and/or Pearson Vue Concept Skills book as assigned by faculty.
 - Complete assigned ATI skills modules as assigned (*see Canvas shell*).
 - Bring and refer to often, the Skills Lab Checklist Booklet (*provided in the first week of lab*).
 - Practice skills during scheduled lab times, open lab times and as homework, when applicable.

SPSCC Nursing

- Integrate peer review critique and feedback into your practice as appropriate.
- **Evaluation**
 - Professional clinical conduct is expected.
 - A department approved lab evaluation tools will be used for each lab course.
 - Lab courses are graded separately from concurrent didactic courses and are assigned grades of “S” for satisfactory or “U” for unsatisfactory.
 - Score of 77% or greater = Satisfactory
 - Score of 76.99% or lower – Unsatisfactory
 - See course syllabi for the weighted grade breakdown.
 - Timely feedback will be provided for all assignments, lab, clinical, and simulation performance.
 - Students will be notified of deficiencies as applicable.
 - Students must submit all assignments to receive final grade.
 - Bring all necessary supplies and/or equipment to complete skills.
 - Bring your Skills Lab Checklist Booklet (*provided in the first week of lab*).

Open Lab Guidelines

Open lab times may be offered as an opportunity for students to practice and reinforce skills before an evaluation, clinical simulation, and/or experiential learning experience. All previously stated lab guidelines apply during open lab in addition to the following:

- Nursing staff/faculty *must* be present during open lab times for guidance and safety measures.
- Open labs will be scheduled on certain given days and times each quarter.
 - See course Canvas shell for posted times of availability.

Latex Warning

SPSCC labs make every effort to remove supplies containing latex and equipment with latex accessories. All lab users should be aware that there is a possibility that they could encounter a latex product and should prepare accordingly. Students should notify the staff/faculty that they have a latex allergy or sensitivity. If an exposure requires a visit to the healthcare provider, then the exposure should be documented on the [Incident form](#).

Attendance

Laboratory hours are often impossible to make-up and students must not expect make-up time to be available. When an absence results in the inability of the student to develop and demonstrate course outcomes and/or meet the required hours of the course necessary for credit, the student will not receive a passing grade and be ineligible to progress in the program.

Prompt attendance is encouraged as a courtesy to the learning experience of your own, your cohort, and your faculty. Further instructions are stated in each course syllabi. Failure to meet the program’s expectations for attendance will result in removal from the program.

SPSCC Nursing

- Attendance at all lab sessions is required.
 - Students must notify the faculty a minimum of one hour prior to the start of lab if they are going to be late or are unable to attend.
 - A faculty may grant an exception for extenuating circumstances.
 - Lab faculty will keep track of all lab attendance each quarter.
 - A second absence, per quarter, will result in a Student Success Plan.
 - If a student is unable to meet the goals of the Student Success Plan it may result in removal from the program.
 - Extreme extenuating circumstances may be reviewed by the faculty member and/or the Dean

Professional Appearance Regulations

The lab setting replicates the clinical setting and in order to best simulate your role as a nurse, students should wear their clinical uniform and abide by the professional appearance guidelines below (*including on open lab days*):

- The standard program required clinical uniform (*found in the SPSCC bookstore or at Scrubs 365 in Olympia*) consists of the following:
 - Charcoal gray uniform pants or skirt.
 - A charcoal gray scrub top with the nursing program's emblem.
 - A gray, black, or white undershirt with short or long-sleeves is optional.
 - Refrain from wearing hoodies/casual jackets over scrubs in the clinical area.
 - Charcoal gray scrub jacket may be worn.
 - Scrub caps and/or head coverings may be worn (*colors to align with program; charcoal gray, black, and white*).
 - Cleanable non-porous material, solid closed-toe, closed-heel, shoes with non-skid soles.
 - An SPSCC photo ID name tag worn on the left side of the uniform
 - A watch with ability to measure seconds and should have a metal and/or plastic band that is easily cleanable
 - A stethoscope with a bell and diaphragm
 - Other recommended equipment:
 - Pen light, bandage scissors, quality black pens and hemostats (*optional*)
- Personal appearance regulations:
 - Cleanliness is mandatory.
 - Discernible body odors and soiled clothing are prohibited.
 - Fingernails must be short, clean, and without nail polish/gels while practicing in the lab/clinical setting.
 - No artificial nails will be allowed in clinical settings.
 - Makeup, if worn, should be appropriate for the setting.
 - Hair must be worn in a neat, controlled style and held away from the client environment.
 - Long hair (*below the shoulders*) must be tied back in a way that hair will

SPSCC Nursing

not be impeding the immediate care environment.

- Facial hair must be clean and neatly trimmed.
- No heavy odors such as smoke, lotion, perfumes, body wash, shampoo, aftershave or hairspray are allowed.
- For yours and client's safety:
 - Dangling, hoop earrings, bracelets and rings with protrusions are prohibited.
 - Openly gauged earring are prohibited, but may be secured with gauge plugs.
 - Visible body jewelry (*nose, brow, tongue rings etc.*) must be modest while in the client care environment.
- Tattoos may need to be covered.
 - If you have questions, reach out to your faculty member.
- Any skin lesions, especially herpetic lesions such as fever blisters, need to be reported to the faculty member before lab.
 - A student may be infectious and may be denied access to the lab environment.

Skills Training Resources

A variety of training resources, including supplies, equipment, and task trainers, are available. These resources are designed to meet the requirements of the skills lab checklist and/or learning outcomes listed with the courses. Resources are put out by the instructional technician when needed for lab activities and open lab sessions. It is expected that faculty and/or students will return items to their proper locations neatly and with care; informing the instructional technician/lab coordinator of any restocking needs and/or issues with the resources.

Supplies/Equipment

Skills lab supplies and equipment are confined to the lab unless otherwise stated.

Supplies and equipment will be checked in and out with the same nursing staff/faculty member.

Any sign of unsafe, damaged or malfunctioning equipment should **not be used** and should be reported to nursing staff/faculty immediately. Misuse of any supplies/equipment by any student may result in dismissal of that student from lab.

- **Supplies**

- ***Personal supplies and equipment such as stethoscope, penlight, skills checklist booklet, and drug guides are the responsibility of the student and should be brought to each scheduled skills lab.***
- Supplies, medications and equipment in the nursing labs are for educational purposes only. They are never to be used on humans, unless specifically indicated as part of faculty-led instruction.
 - Dedicated supplies and equipment for live subject use are identified in advance and will be supplied by Lab Coordinator.
- Many supplies are reusable and should be restocked when not being used.

SPSCC Nursing

- Needles/sharps are to never be reused under any circumstance and should be disposed of in sharps containers.
- Some supplies are past expiration dates and are intended for practice only.
- Supplies/equipment must not be taken out of labs unless requested by nursing staff/faculty.
 - Unauthorized removal of supplies/equipment deprives other students and may result in expulsion from the program and/or legal action by the college.
- All lab users are responsible for ensuring that the lab areas are left clean and in good condition for the next group.

- **Beds**
 - Use beds for practice and evaluation purposes only.
 - All beds should be left in a low position with bed rails down after each use.
 - Linens should be properly placed back on the bed and/or manikin as if caring for a client.
 - Clean linens should be refolded and placed back in the linen cabinet.
 - Soiled linen should be placed in the soiled linen cart for laundering.

- **Manikins**
 - Use gloves as you would with a client in the clinical setting.
 - Medium and Hi-fidelity manikins are not to be moved from their designated beds without arrangement with lab staff/faculty.
 - No Betadine or ink is to be used on the manikins. (*Students may use ball point pen to label items that may be on or near manikins, such as dressings, patches, and IV labels*).
 - Only use staff/faculty approved supplies on manikins.

Standard Precautions: Exposure to Bodily Fluids

SPSCC and the Nursing Department are committed to following standard procedures and providing a safe and healthy environment for faculty, staff and students. All blood and body fluids are potential sources of infection and are treated as if known to be infectious. To promote safe guarding against exposure, the following will be honored:

- Eating, drinking, applying cosmetics (including lip balm) and handling contact lenses are prohibited in the work area where there is a likelihood of occupational exposure.
- All biohazards and/or sharps should be placed in red biohazard bins, bags, and/or sharps containers.
 - Biohazards and/or sharps should never be left in beds, on tables, or in trash.
 - Contaminated sharps will not be bent, recapped or removed.
 - Contaminated sharps must be placed in an appropriate container as soon as possible.
- Lab staff will provide red biohazard bins, bags, and sharps containers.

SPSCC Nursing

- Staff will coordinate proper disposal of biohazard bins and waste in accordance with their division's Stericycle procedures after each quarter, or as needed.
- Supplies for human use *must* be clearly marked and kept separately from lab supplies and will be disposed of after each activity.
 - Refer to program's 'Invasive Procedure Consent' in [Appendix A](#).
- When exposure is possible, personal protective equipment (PPE) should be used. PPE includes:
 - Hand Washing: Should be done upon entering and exiting a room and immediately after removal of gloves and/or PPE, as well as the standard times (before after eating, using restroom etc.)
 - Gloves: To be worn when it can be reasonably anticipated that the individual may have contact with blood, other potentially infectious materials, mucous membranes, or non-intact skin; when touching contaminated items/surfaces and when performing vascular access procedures.
 - Masks/Eye Protection/Face Shields: Should be worn whenever splatter, spray, splatter or droplets of blood or other potentially infectious materials may happen and eye, nose or mouth contamination can be reasonably anticipated.
 - Gowns: Should be worn when there is potential risk of exposure of chemical, biological and/or physical hazards.
- Laundry with potential exposure to biohazards will be handled with gloves and wrapped in separate bags. The nursing department will follow the protocol for biohazards.

Skills Demonstrations

Our goal is for students to provide safe care. There are specific skills and skill performance standards/criteria to learn before performing safely in the clinical area. Students will follow the criteria as listed below:

- Read all material assigned.
- Listen to lectures and watch assigned video(s).
- Practice in skills lab as instructed.
- Students must correctly demonstrate a skill to faculty using critical elements before it can be done in the clinical setting.
 - If a student doesn't demonstrate a skill correctly, the student can repeat the skill by appointment with lab faculty.
 - Students cannot perform the skill in the clinical setting until this step is completed and until the following quarter.

Invasive Procedures

As you learn many new skills during the program, some are invasive to the clients you will be caring for. In order to give you a real-life experience in a more relaxed controlled environment before clinicals, the faculty at SPSCC wish to give you the opportunity to practice select invasive skills on each other.

SPSCC Nursing

Participation in these practice skills has advantages:

- Practice on a live human subject best mimics practice on a client in clinical environments.
- Acquisition of empathy for future clients undergoing these procedures.
- Variety of different types of subjects (i.e. rolling veins, skin colors, tough skin, etc.).

Participation in these practice skills has inherent risks:

- Anxiety.
- Intentional stressors.
- Possible exposure to infection carried by body fluids.
- Personal injury.

Your Rights and Responsibilities

You have the right to withhold your consent for participation or withdraw consent after it is given at any time without penalty to your learning. *If consent is withheld or withdrawn, you must participate in an alternative learning experience as determined by the faculty.* Specific skill outcomes must be satisfactorily achieved, regardless of real subject practice. If you have any questions, please see your lab faculty and/or Dean of Nursing.

Before practicing on a live human subject in lab you must:

- Read the risks and discomforts associated with each invasive procedure.
- Sign the Invasive Procedures Consent Form, found [here](#). *(All students must sign to either give or withdraw consent.)*
- Return consent form to the skills lab instructor, to be placed in the student's academic file.
- Complete any quizzes, learning activities, and/or practice activities on nonhuman subjects prior to practice with a human subject as directed by faculty.

Finger-sticks

Finger-sticks may involve receiving numerous finger sticks performed by fellow students during the laboratory course for this program for the purpose of obtaining capillary blood specimens.

Benefits:

- Participation in a learning experience necessary to become a nurse after adequate didactic modalities of learning and use of mannequins to refine skill.
- Acquisition of empathy for future clients undergoing this procedure.

Possible Risks and Discomforts:

- Introduction of infection into body tissues.
- Pain resulting from the procedure itself.
- Bleeding that could result in ecchymosis.

SPSCC Nursing

Injections

Injections may involve being the recipient of injections administered by a fellow student; one intradermal, one subcutaneous, and one intramuscular. Each will contain sterile saline and be given under the direct supervision of nursing faculty.

Benefits:

- Participation in a learning experience necessary to become a nurse after adequate didactic modalities of learning and use of mannequins to refine skill.
- Acquisition of empathy for future clients undergoing this procedure.

Possible Risks and Discomforts:

- Anxiety.
- Damage to a nerve, muscle or other soft tissues.
- Introduction of infection into body tissues.
- Pain resulting from the procedure itself.

Venipunctures

Venipunctures may involve being the recipient of one or more venipunctures (*IV starts/blood draws*) performed by a fellow student under the direct supervision of the nursing faculty.

Benefits:

- Participation in a learning experience necessary to become a nurse after adequate didactic modalities of learning and use of mannequins to refine skill.
- Acquisition of empathy for future clients undergoing this procedure.

Possible Risks and Discomforts:

- Anxiety.
- Damage to nerve, muscle or other soft tissues
- Introduction of infection into body tissues or vessels.
- Pain resulting from the procedure itself.
- Bleeding that could result in ecchymosis or a hematoma.

Incident Injury

Students are to report any incidents and/or injuries to the faculty/staff/dean immediately. Students should follow the SPSCC's incident reporting policy, found at <https://spscc.edu/advising-support/campus-reporting> and then complete the incident form and file with the Nursing Dean.

SKILLS LAB APPENDICES

SPSCC Nursing

Appendix A

Invasive Procedures Consent Form

Invasive Procedures Consent Form

As a student in the Nursing Program at South Puget Sound Community College, I am aware of the possible risks and discomforts, benefits, and appropriate alternatives to my voluntary participation in the nursing courses. I agree to abide by the safety rules and regulations promulgated by South Puget Sound Community College and the faculty of each course as they relate to my participation in the courses. I have made the nursing program administration and the appropriate faculty(s) aware of any pre-existing condition (such as seizure disorder, bleeding disorder, etc.) that I have that might put myself or others at risk through my participation.

I further state that I am of legal age and legally competent to sign this agreement or that I will obtain signature from my legal guardian.

I have read and understand the terms of the agreement and I sign the agreement as my own free act. I understand that invasive skills may only be practiced under direct supervision of faculty physically present in the lab.

INITIAL CONSENT

I give my consent to participate in the following invasive procedures. I further understand that I have the right to withdraw consent after it has been given for any reason. I understand that withdrawing consent will not adversely affect my course grade. ***(Please initial all procedures you given consent for.)***

Finger-stick _____ Subcutaneous Injection _____

Intramuscular Injection _____ Intradermal Injection _____

IV Start _____ Blood Specimen Collection _____

Signature _____

Date _____

WITHHOLDING OF INITIAL CONSENT

At this time, I ***do not*** give my consent to participate in ***any*** invasive procedures during lab. I understand that withholding consent will ***not*** adversely affect my course grade, but I will be required to demonstrate competence in an alternative format.

Signature _____

Date _____

SPSCC Nursing

WITHDRAWAL OF PREVIOUS CONSENT

I wish to **partially or completely** withdraw my consent for participation in invasive procedures. I understand that withdrawing consent will *not* adversely affect my course grade, but I will be required to demonstrate competence in an alternative format. I wish to **maintain** my participation in only the procedures initialed below.

Finger-stick _____ Subcutaneous Injection _____

Intramuscular Injection _____ Intradermal Injection _____

IV Start _____ Blood Specimen Collection _____

Signature _____ **Date** _____

Clinical Section

SPSCC Nursing

CLINICAL

Nursing clinicals are provided in agencies located primarily in Thurston, Lewis, Mason and Pierce counties. Students should expect to travel to any of these locations throughout the two-year clinical experience. Other local facilities provide specific clinical experiences such as schools, daycares, clinics, private homes, mental health and chemical dependency units. All student learning activities are planned, supervised, and evaluated by SPSCC nursing faculty and are chosen to provide experience with clients of all age groups in varying degrees of wellness.

The practice of nursing requires the following functional abilities with or without reasonable accommodations, therefore nursing students must meet the following technical standards to progress through the program:

- Ability to grasp scientific concepts, set up and answer basic math & algebra problems
- Critical thinking sufficient for clinical judgment.
- Verbal and written communication sufficient to effectively interact with clients, peers, and others, both respectfully and with cultural humility.
- Ability to move from room to room, maneuver in small spaces, remain on feet for extended periods of time, and lift, up to 35 pounds.
- Gross and fine motor skills sufficient to provide safe and effective nursing care.
- Hearing sufficient to monitor and assess clients, e.g., hear heart and breath sounds and use a telephone.
- Visual acuity and color discrimination sufficient to read fine print, to observe and assess clients, e.g., identify skin tones such as pale, ashen, gray, or bluish.
- Tactile ability sufficient for physical assessment, e.g., palpate peripheral pulses.
- Computer literacy.
- Be able to meet the guidelines established by healthcare organization during the clinical experiences.
- Legally be able to obtain a license to practice nursing the State of Washington.

Immunizations

Once admitted to the Nursing Program, proof of immunizations or immunity to certain diseases must be provided. Two of the three doses of Hepatitis B must have been received before the start of the nursing program, with the third dose and titer received on time. *Information regarding healthcare requirements will be provided with offers of admissions and annually from the nursing program.* Immunization requirements may change based upon clinical site requirements as described in the clinical passport. Students are responsible for the expenses incurred and must be kept current throughout the program. Additional requirements for non-CPNW sites will be communicated to students as needed.

SPSCC Nursing

Agency Requirements

Clinical Passport

Clinical Placements Northwest (CPNW) is a clinical placement consortium that sets onboarding, immunization, and background check standards to support safe clinical and preceptorship opportunities. The clinical passport is utilized to share required information to the clinical sites in an organized manner. These must be turned into the facilities *at least* six (6) weeks prior to the start of clinical every quarter.

Students should collect required documents and then upload all documents to SentryMD. This allows the Clinical Coordinator and/or Lab Coordinator to review, follow up, and confirm that all passport pieces are up to date in real time.

You will be unable to attend clinical until the clinical passport is completed.

- Notifications of items missing will come from a variety of places, including SentryMD and the Clinical Coordinator and/or Lab Coordinator.
 - Please do not delete these without following up, as it may delay your clinical start time, potentially keeping you from progressing in the program.
 - We will do all that we can to help you remediate what is missing.

The following are pieces of the clinical passport:

- Malpractice and General Liability Insurance:
 - Clinical agencies require students to carry malpractice insurance. The college purchases this insurance on your behalf from fees collected at the time of registration.
- Criminal History Background Checks:
 - A criminal history clearance is required by state law [RCW 43.43.830](#) to participate in client care at clinical facilities. A national background checks is required upon admission/readmission to the program. In addition, annually a Washington State Patrol background check, called the WA Access to Criminal History (WATCH) must be performed. Background checks must be clear in order to continue enrollment in the nursing program.
 - Examples of crimes for which an individual will be denied clearance:
 - Crimes against another person such as murder, manslaughter, assault, rape, sexual abuse, child abandonment or neglect.
 - Conviction for a crime against property such as first-degree offenses including burglary, arson, criminal mischief, robbery, or forgery.
 - An extensive list can be found in [WAC 388-113-0020](#).
 - Background checks are required by NCQAC and clinical sites to protect clients and the general public.
 - The background checks, dissemination of self-disclosure information, background check results, and conviction records, whether in or outside the State of Washington as deemed necessary by the Nursing Program may be

SPSCC Nursing

provided to the clinical sites at their request.

- The Nursing Program will provide every clinical facility verification of background checks performed.
 - In addition, please be aware that clinical sites reserve the right to refuse placement of any student, resulting in that student not being able to pass the course, creating grounds for dismissal from the program.
 - To receive a clinical placement in sites, the student must comply with the requirement and all findings must be satisfactory according to the guidelines found in the [RCW 43.43.830](#).
- Health:
 - Students are expected to meet the health standards and requirements of the clinical agencies to which they are assigned.
 - Students are required to obtain health insurance to protect themselves if illness or accident occurs.
 - Clinical agencies have no provisions for free or reduced cost health care for students.
 - Students are expected to comply with the immunization and disease screening requirements of the nursing program.
 - A copy of the requirements including due dates will be provided upon admissions and made available in each cohort's Canvas course.
 - In the event that the immunization and disease screening requirements change, current and/or re-admitted students must comply with those requirements.
 - It is the student's responsibility to make sure all health and immunizations required by the nursing program are up to date by the first day of the quarter in which the immunization expires.
 - Directions and guidelines for how to upload records to SentryMD will be found on the cohort Canvas page.
 - Drug Screening:
 - A student may be required to submit to drug screening by a clinical placement agency prior to the first clinical experience in that agency.
 - The nursing program will communicate to students the requirements of each facility.
 - A student who refuses to be tested will not have a clinical placement, which may negatively affect progression in the program.
 - Expenses for testing, including the screening fee, will be the responsibility of the student.
 - If test results are deemed unsatisfactory for placement in a clinical facility, the student will not be allowed to attend clinicals at that site.
 - The nursing program is under no obligation to find alternative clinical placements for a student who is denied access to a clinical site based on a positive drug screening or refusal to test, but will make attempt to do so.

SPSCC Nursing

Other Agency Requirements:

Other agency requirements must be met to attend clinical and include, but are not limited to the following:

- Students must comply with all agency requirements including orientation, HIPAA, and other mandated trainings including, but not limited to CPNW eLearning annual modules.
- AHA BLS CPR training and certification is required. Other CPR trainings will not substitute this requirement.
 - The certification must show a hands-on demonstration in person was performed with a program instructor.
 - This certification must be current throughout the program.
- Washington state healthcare licensure and/or certifications should be provided even though you're currently enrolled in a nursing program.
- Failure to comply with these requirements will result in students being denied access to clinical.

Attendance

Clinical and preceptorship hours are often impossible to make-up and students must not expect make-up time to be available. [WAC 246-840-531](#) states that RN students must have a minimum of 500 clinical hours, including simulation up to 50%, dependent on clinical placement availability. Clinical hours include all scheduled clinical days, alternative clinical learning activities (*active observation*), and simulation (*please see the simulation handbook for further details*). When an absence results in the inability of the student to develop and demonstrate clinical outcomes and/or meet the required hours of the course necessary for credit, the student will not receive a passing grade and be ineligible to progress in the program.

Prompt attendance is encouraged as a courtesy to the learning experience of your own, your cohort, and your faculty. Attending clinical is a privilege. In the event a student reports for a clinical unprepared, or is not performing safely, the student will not be allowed to give client care and will be given a zero for that day. Further instructions are stated in each course syllabi. Failure to meet the program's expectations for attendance will result in removal from the program.

***For client and student safety, students are not permitted to work the shift immediately prior to a clinical rotation.*

Attendance at all clinicals is required.

- Students must notify the faculty a minimum of one hour prior to the start of clinical if they are going to be late or are unable to attend.
 - Students who are more than **twenty minutes** late for a clinical assignment will not be cleared for entry to the clinical site.
 - A faculty may grant an exception for extenuating circumstances.
- Students must remain at the clinical site for the duration of the assigned clinical time unless excused by the clinical faculty.
- Faculty must notify the division office regarding clinical and simulation absences,

SPSCC Nursing

by the end of the day.

- The division office will note absences in the clinical tracking tool.
- Attendance for clinical is required to meet [WAC 246-840-531](#) and EPSLOs.
 - When a student misses a clinical rotation, a Student Success Plan will be initiated by the clinical faculty member.
 - A second clinical missed will require a follow up of the Student Success Plan with the clinical faculty member.
 - A third clinical missed will be documented by the Clinical Coordinator as a Professional Guidelines violation, and will follow the Professional Guidelines policy to be reviewed by the professional conduct committee, and may be grounds for dismissal due to lack of professionalism.
 - Any additional absences will require a meeting with the dean and documented as a Professional Guidelines violation, and will follow the Professional Guidelines policy to be reviewed by the professional conduct committee, and may be grounds for dismissal due to lack of professionalism.
 - Extreme extenuating circumstances may be reviewed by the Clinical Coordinator and/or the Dean

Incident Weather

Knowing that clinical days sometimes require nursing students to be on the road prior to 0530, clinical faculty will notify as early as possible when the decision is made to cancel. All missed clinical hours will be accounted for.

Professional Appearance Regulations

A student may receive a failing grade in the course and be dismissed from the program, if there is an inability to place the student in a clinical setting due to noncompliance with the professional appearance policy. Uniform guidelines and strict personal appearance exist for all clinical settings.

- The standard program required clinical uniform (*found in the SPSCC bookstore or at Scrubs 365 in Olympia*) consists of the following:
 - Charcoal gray uniform pants or skirt.
 - A charcoal gray scrub top with the nursing program's emblem.
 - A gray, black, or white undershirt with short or long-sleeves is optional.
 - Refrain from wearing hoodies/casual jackets over scrubs in the clinical area.
 - Charcoal gray scrub jacket may be worn.
 - Scrub caps and/or head coverings may be worn (*colors to align with program; charcoal gray, black, and white*).
 - Cleanable non-porous material, solid closed-toe, closed-heel, shoes with non-skid soles.
 - An SPSCC photo ID name tag worn on the left side of the uniform

SPSCC Nursing

- A watch with ability to measure seconds and should have a metal and/or plastic band that is easily cleanable
- A stethoscope with a bell and diaphragm
- Other recommended equipment:
 - Pen light, bandage scissors, quality black pens and hemostats (*optional*)
- Personal appearance regulations:
 - Cleanliness is mandatory.
 - Discernible body odors and soiled clothing are prohibited.
 - Fingernails must be short, clean, and without nail polish/gels while on duty.
 - No artificial nails will be allowed in clinical settings.
 - Makeup, if worn, should be appropriate for the setting.
 - Hair must be worn in a neat, controlled style and held away from the client environment.
 - Long hair (*below the shoulders*) must be tied back in a way that hair will not be impeding the immediate care environment.
 - Facial hair must be clean and neatly trimmed.
 - No heavy odors such as smoke, lotion, perfumes, body wash, shampoo, aftershave or hairspray are allowed.
 - For yours and client's safety:
 - Dangling, hoop earrings, bracelets and rings with protrusions are prohibited.
 - Openly gauged earring are prohibited, but may be secured with gauge plugs.
 - Visible body jewelry (*nose, brow, tongue rings etc.*) must be modest while in the client care environment.
 - Tattoos may need to be covered.
 - If you have questions, reach out to your faculty member.
 - Any skin lesions, especially herpetic lesions such as fever blisters, need to be reported to the faculty member before clinical.
 - A student may be infectious and may be denied access to a clinical site.

***Specific clinical sites may modify the uniform and/or photo ID requirements, and students must comply with the requirements of the agency where they are working.*

Nursing Clinical Assignments

Due to agency space limitations, nursing faculty reserve the right to assign students to clinical agencies. Students may be required to travel to agencies outside of their home community in any given quarter. Other clinical reminders include:

- Travel expenses are the responsibility of the student.
- Students may not bring children to clinical.
- Personal visitors are not allowed at any time during clinicals.
- Students do not take verbal or telephone orders from providers.
- All students are expected to perform their clinical activities efficiently and safely without

SPSCC Nursing

the influence of drugs or alcohol.

- Other general clinical guidelines will be shared each quarter.

Each clinical rotation has specific learning assignments. Each assignment provided to students creates a learning opportunity to help the student successfully reach a course and/or end of program student learning outcome. **All** assignments **must** be completed for feedback to pass the course. Timely feedback will be provided to students to help create a pathway to success.

Skills Performances

Our goal is for students to provide safe care. There are specific skills and skill performance standards/criteria to learn before performing safely in the clinical area. Students will follow the criteria as listed below:

- Read all material assigned.
- Listen to lectures and watch assigned video(s).
- Practice in skills lab as instructed.
- Students must correctly demonstrate a skill to faculty using critical elements before it can be done in the clinical setting.
 - If a student doesn't demonstrate a skill correctly, the student can repeat the skill by appointment with lab faculty.
 - Students cannot perform the skill in the clinical setting until this step is completed and until the following quarter.
- IV push meds and central line meds cannot be given unless faculty member and/or licensed personnel is with the student.
 - In some facilities, IV push meds cannot be given by students.
- **Blood and blood products will not be administered by students, NO EXCEPTIONS.**
- See 'Badge Buddy' list for the appropriate skills in each quarter.

Confidentiality

Confidentiality is an essential component of nursing practice. SPSCC nursing students follow HIPPA regulations. Violation of confidentiality will result in disciplinary action or dismissal from the program.

Ethical and Legal Responsibilities of Students

Nursing students are privileged to give personal care to individuals in a variety of situations. They have access to a wide range of information about each client, and this information must be used only for care and educational purposes open. Healthcare providers work under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). This federal law requires that client health information is to be protected and not disclosed with the client's consent and knowledge. More information regarding HIPAA can be found [here](#). The below are guidelines are expected of SPSCC nursing students and faculty.

SPSCC Nursing

The following guidelines apply in all areas of nursing practice:

- Any mention or use of confidential information in public places or with personal family is a violation of the client's right of privacy.
- Only the client's initials, never the name, are to be used on assessment data sheets, concept maps, care plans, and other homework.
 - Students may not make photocopies of client information and remove it from the facility-this is a HIPAA violation.
- Taking pictures using your personal camera phone is not allowed in the clinical setting. This is a HIPAA violation.
- Students will report to the instructor any safety incidents or sentinel events (e.g. medication errors, client fall, etc.) immediately upon discovery of the incident and will follow agency policy to report and document the incident.
- Students are expected to perform their clinical activities efficiently and safely without the influence of drugs or alcohol.

Student nurses will be required to keep all information (verbal, written or electronic) of a medical, personal, or business nature concerning clients, faculty, other students, medical staff and employees of clinical facilities in strict confidence. Under no circumstances will such information be shared with any unauthorized persons, either inside or outside the college or clinical facilities. Students are required to sign confidentiality agreements with the nursing department and all clinical agencies where they are placed.

Procedure:

- Student must read and sign confidentiality agreement found in the SentryMD paperwork.
- Violation of this agreement may result in disciplinary action, up to and including suspension and/or removal from the program.
- Violations of a HIPAA may result in civil and/or criminal prosecution by the clinical facility and/or state/federal regulatory bodies.
 - More information about HIPAA can be found [here](#).

Patient privacy and confidentiality is protected under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Advances in technology, including computerized medical databases, the Internet, and telehealth, have facilitated the potential for unintentional breaches of private/confidential health information. Protection of privacy/confidentiality is essential to the trusting relationship between health care providers and patients. Quality patient care requires the communication of relevant information between health professionals and/or health systems. Nurses and other health professionals who regularly work with patients and their confidential medical records should contribute to the development of standards, policies, and laws that protect patient privacy and the confidentiality of health records/information. (ANA website July 28, 2020)

SPSCC Nursing

The concept of the right of individuals to privacy is taught throughout the nursing curriculum. Privacy rights are protected by maintaining confidentiality on a routine basis, the faculty addresses the legal, moral and professional consequences of breaches of confidentiality. The profession of nursing respects the autonomy of every individual and demands the maintenance of confidentiality at all times.

Healthcare professionals (*including nursing students*) should not discuss or post any type of information about faculty, peers, clients, client's family members or any clinical facility and health care team members, at any time, on any electronic venue or social network. This could lead to a HIPAA violation.

Social and Electronic Media

Definition of social media as used in this policy: "social networking" or "social media use" means communicating with others over the Internet. Internet posting is any information transmitted electronically, such as text, files, pictures, video, audio, artwork, etc. This includes, but not limited to Facebook, Instagram, TikTok, Marco Polo, Twitter, LinkedIn, SnapChat, YouTube, and/or blogs and can also include media sites that are offered by television networks, newspapers and magazines. Transmission may be between individuals or businesses, or to websites, by browser, cell phone, email or any other electronic device or tool.

Social and electronic media have tremendous potential for strengthening personal relationships and providing valuable information to health care consumers, as well as affording students enrolled in the nursing program at South Puget Sound Community College a valuable opportunity to interface with colleagues from around the world. "Students need to be aware of the potential consequences of disclosing patient-related information via social media, and mindful of affiliated agency policies, relevant state and federal laws, and professional standards regarding patient privacy and confidentiality and its application to social and electronic media. By being careful and conscientious, students enjoy the personal and professional benefits of social and electronic media without violating patient privacy and confidentiality." (NCSBN, 2018.)

Facility resources including, but not limited to computers, print/copy machines and food are ONLY for activities directly related to client care. These resource areas are not to be used for student's personal needs.

Computers at the clinical facility cannot be used to access personal web pages, social networking sites, or online communication networks such as those mentioned above or other sites used for social/personal communication.

If electronic devices are allowed in the clinical area, remember that electronic mobile devices, just as other medical equipment, may act as a reservoir for microorganisms and contribute to cross contamination. Employ infection control protocol as needed.

SPSCC Nursing

Appropriate, responsible, and accountable behaviors concerning the use of social media and electronic devices during class and clinical is expected. Misuse of electronic devices may result in course sanctions and/or program failure.

Ultimately, you have sole responsibility for what you post. Be smart! Protect your and others' privacy, yourself, SPSCC, and all forms of confidential information.

Procedure:

Excerpted from NCBN [website](#) regarding Professional Boundaries:

- Students are strictly prohibited from transmitting by way of an electronic media any patient-related image.
- Students must not share, post or otherwise disseminate any information or images about a client or information gained in the nurse /client relationship with anyone unless there is a client-care related need to disclose.
- Students must not identify clients by name, or post or publish any information that may lead to the identification of a client.
- Students must not make disparaging remarks about clients, fellow students, faculty or staff at affiliated agencies, even if the identity is concealed.
- Students are not to participate in acts of cyber-bullying. Cyber-bullying is when someone purposely embarrasses, harasses or torments another person using digital media.
- Students must not take photos or videos of clients or their health information record on any electronic or personal devices, including cell phones.
- Students will not interact with clients using social media.
- Students must maintain professional boundaries in use of electronic media. Online contact with clients or former clients blurs the distinction between a professional and personal relationship.
- Students must promptly report any identified breach of confidentiality or privacy to the faculty.
- Students must be aware of and comply with the affiliated agency policies regarding use of agency owned computers, cameras and other electronic devices, and use of personal devices in the clinical setting.
- Students must not post content or otherwise speak **on the behalf** of SPSCC Nursing Program.
- Students will not use the SPSCC logo or images on any personal online site.
- Students will not use the SPSCC Nursing Program name to promote or endorse any product, cause or political party or candidate.
- Students will not misrepresent SPSCC Nursing Program in language, image or behavior.

Additional Excerpts from NCSBN:

- Merely removing someone's name (or face, in the instance of images) from a communication does not necessarily protect that person's identity.
- It is a mistaken belief that content deleted from a site is no longer accessible.
 - The moment something is posted it lives on a server that can always be discoverable in a court of law.

SPSCC Nursing

Potential Consequences:

Any violation of this policy will constitute a professional guidelines violation, which may result in suspension or removal from the nursing program.

Just Culture

In 2010, the American Nurses Association (ANA) came out with the following 'Just Culture' position statement: "Then ANA supports the Just Culture concept and its use in healthcare to improve patient safety. The ANA supports the collaboration of state boards of nursing, professional nursing associations, hospital associations, patient safety centers, and individual healthcare organizations in developing regional and state-wide Just Culture initiatives.

The principle behind 'Just Culture' environment is that discipline needs to be tied to the behavior of individuals and the potential risks their behavior presents, more than the actual outcome of their actions. Hospitals and/or schools utilize a Just Culture approach if/when a clinical practice event occurs, so that it is reviewed and analyzed from a holistic view. This is in effort to ascertain any mitigating or aggravating factors that contributed to the event and then determine the improvement plan and/or disciplinary action. A 'Just Culture' Method/Process ([Appendix A](#)) should:

- Foster a learning environment that encourages reporting of all mistakes, errors, adverse events, and system weaknesses, including self-reports;
- Place focus on evaluating the behavior, not the outcome;
- Require leadership, commitment, and modeling;
- Distinguish between normal error, unintentional risk-taking behavior, and intentional risk-taking behaviors; as well as reckless behaviors;
- Lend itself to continuous improvement of work processes and systems to ensure that the highest level of client and staff safety occurs;
- Encourage the use of non-disciplinary actions whenever appropriate (includes coaching, counseling, training, and education);
- Hold individuals accountable for their own performance in accordance with their responsibilities, but does not expect individuals to assume accountability for system flaws over which they had no control;
- Encourages discussion and reporting of errors and near misses without fear of retribution. It instead focuses on the behavioral choices of the individual, not merely on the fact that an error occurred or that a bad outcome resulted from an error.

Individuals, including nursing students, will inevitably make mistakes and most errors take place within complex systems. When errors occur, the immediate solution often is blames an individual for the error, however, blaming individuals creates a culture of fear, discouraging open reporting and discussion of errors, doing little to prevent future errors or improving the safety of the health care system.

Nursing programs embracing 'Just Culture', utilizing the Root Cause Analysis Survey ([Appendix B](#))

SPSCC Nursing

and the Student Practice Event Evaluation Tool (SPEET) ([Appendix M](#)), that was developed by the NC BON* for evaluating practice events and determining if the actions of the individual student warrant action (consoling, coaching, counseling, remediation, or disciplinary action). The tool will be used with consistency and fairness, while providing the opportunity to learn from mistakes and enhance client safety. [WAC 246-840-513](#) requires that any even resulting in patient harm, unreasonable risk of patient harm, or diversion of legend drugs or controlled substances be reported to the Washington State NCQAC within two business days.

**Permission to use the tool was obtained by the Washington State NCQAC, Spring 2015 (CNEWS).*

Incident Reporting and Tracking

In accordance to WAC 246-840-519 nursing programs are required to have written policies/procedures on incident reports and tracing of reports that are specific to nursing students. These are as follows:

Clinical Accidents and Errors

[WAC 246-840-513](#) requires that any event resulting in client harm, unreasonable risk of client harm, or diversion of legend drugs or controlled substances be reported to the NCQAC within two business days AND that all events are logged and tracked by the program. The following guidelines should be utilized when an event occurs.

- The student should immediately report the event to their clinical faculty member, as well as the nurse in charge of the client, if they are not already aware.
 - This is the student's legal and ethical responsibility.
- The clinical faculty member will immediately meet with the student at the facility to briefly discuss what occurred and to determine what, if any immediate action need to be taken (*such as notifying the charge nurse or completing and incident report*).
- The clinical faculty will notify the Clinical Coordinator.
- The student and clinical faculty member will set up an appointment to meet for an in-depth discussion of what occurred (*this should be scheduled within a 24-hour window*).
- The clinical faculty member will complete the Student Practice Event Evaluation Tool (SPEET) ([Appendix B](#)).
- The student and clinical faculty member will together complete a Root Cause Analysis Survey ([Appendix C](#)) as well as review the Student Practice Event Evaluation Tool (SPEET).
 - These forms will be utilized as a tool to determine the root cause of the even and to determine the appropriate student corrective action.
- When finalized, the clinical faculty member will give a copy of both forms to the student, the Clinical Coordinator, and the Dean.
 - A copy will be placed in the student's academic file.
- As described in [WAC 246-840-513](#), if the event resulted in client harm, unreasonable risk of client harm, or diversion of legend drugs or controlled substances, the Dean will report the even to the NCQAC using the appropriate reporting forms.
- If the student has an active license, the NCQAC take action against the active license.

SPSCC Nursing

- The nursing program will track all events each quarter on a spreadsheet that captures all the information required by law and will be reviewed each quarter by the Nursing Team.

Student Accidents

If a student is involved in any type of accident (*including needle sticks/injuries*) while on campus and/or during a clinical course the following should occur:

- The student should report the accident to the appropriate faculty member, if unwitnessed.
- That faculty member who witnesses and/or responds to the incident should complete the Accident/Incident Report ([Appendix D](#)) with the student, capturing descriptive information of what occurred and what actions were taken.
 - In case of needle stick, students must adhere to the clinical site exposure plan and/or recommendations of the faculty member (*if occurs on campus*), which stipulates treatment required.
 - The student is responsible for all costs.
- The form is given to the Dean of Allied Health and Nursing who reviews and takes any actions required to prevent future accidents or address additional issues to the event.

Students may report any behavior of students/staff/faculty on campus that they consider dangerous, inappropriate, threatening, or disruptive. This is done by accessing myspsc, and clicking on the 'Campus Conduct Reporting' under the Support section, or by following this [link](#). When negative patterns of behavior are identified early and the necessary steps are taken, deadly consequences can possibly be prevented.

Automated Drug Distribution Devices (ADDD)

Most healthcare facilities utilize drug dispensing devices, such as a Pyxis. Per [WAC 246-945-450](#) nursing students may be given access but must have adequate training. Facilities and organizations, including educational institutions, must assure safe medication administration by students utilizing the ADDDs.

- All students will receive orientation to the use of ADDDs, in the lab setting, as part of their medication administration training and validation.
- All students will receive orientation to the use of ADDDs, in the clinical setting as part of their clinical orientation.
 - The clinical faculty member is responsible for ensuring that the orientation has been completed, prior to access by the student.
- Students will be given personal access codes to the ADDDs or must work with their faculty, preceptor, and/or staff RN, to access these devices according to the agency policy.
- Any errors related to the use of ADDDs will be reported using the 'Just Culture' rubric and program report forms, which will be provided by the faculty member.

SPSCC Nursing

Safe Medication Administration by Nursing Students

The proper dispensing and administration of medication performed by nursing students is vital to the delivery of safe and effective client care. The details of these processes are outlined in in [Appendix E](#), but this is a quick review:

- Students will receive orientation and practice experience related to the use of Automated Drug Dispensing Devices (ADDD).
- Students will follow the policy and procedures of the healthcare facility regarding the use of ADDDs and will always be under the supervision of a licensed nurse when accessing and administering medications.
- Each dose of medication will be administered per the “Six Rights” of Medication Administration (Right Patient, Drug, Dose, Time, Route, and Documentation) and after an assessment of client allergies.
- Students may administer controlled substance medication but must follow the restrictions outlined in the Safe Medication Administration by Nursing Students process.
- Blood products requiring a witness for infusion/administration **cannot** be done by nursing students, however, students can collect the blood products from the blood bank, prime the tubing with saline, and participate in blood administration monitoring policies (i.e. taking vital signs).
- The functions not permitted to be performed by nursing students under any circumstances is outlined in the process and must be understood and adhered to.
 - Administration of all insulin formulations, including both SQ and IV insulin doses and all insulin IV infusion, is calculated and drawn up with direct RN supervision.
 - The administration of high-risk medications (any medications that require additional training), in emergency or critical care units, is **NOT** allowed in quarter 1 through 5 by the nursing student.
 - The precepting student (quarter 6) is allowed to administer high-risk medications **ONLY** if the supervising nurse or clinical faculty member obtains the high-risk medication for the nursing student and the nursing student administers the medication only under the direct supervision of the supervising nurse/clinical faculty member.
- All medication errors and medication diversions will be reported using the ‘Just Culture’ rubric and program report forms, which will be provided by the faculty member.
 - The forms will be submitted to the Dean for tracking and a copy of the completed forms will also be placed in the student’s academic file.

Preceptorship

The preceptorship experience occurs during the last quarter of the program. The student will work the schedule that their assigned preceptor works which could be 8, 10, or even 12-hour shifts, equating to a 32+ hour work week. It is impossible for the student to work full-time, and carry out their school assignment during their preceptor experience, while remaining safe! Additional child care provision may be needed.

- Students must plan ahead to cover their personal obligations during 6th quarter.

SPSCC Nursing

- Students will not be allowed to have a schedule that requires overlapping shifts from student assignment to work assignment.
 - *For client and student safety, students are not permitted to work the shift immediately prior to a scheduled preceptorship shift.*

The preceptorship experience is intended to assist the student preparing to graduate in rounding out their education. Upon completion of the experience, the student is expected to have met all the End of Program Student Learning Outcomes.

- Preceptorship assignments are made by the Clinical Coordinator with feedback from the student, student's preceptor and faculty member.
 - Final assessment of passing preceptorship is made by the faculty member.
- Students should not seek, solicit, explore, or network for a clinical and/or preceptorship experience.
 - Any student who engages in this activity is at risk of failing the quarter and potentially being dismissed from the program.

Suspected Substance Abuse in the Student Nurse

The purpose of this policy is to protect the welfare of clients, students, instructors, South Puget Sound Community College, and affiliating agencies. The Washington State Nursing Care Quality Assurance Commission (NCQAC) has the authority to grant or deny licensure based on conditions established in the Disciplinary Code. [RCW 18.130.180](#) has defined chemical dependency as unprofessional conduct. At SPSCC all nursing students are expected to perform their clinical activities efficiently and safely without the influence of drugs or alcohol.

Students must notify the course faculty member if they are taking any medication which may impact the student's ability to provide safe, competent care (*essential functional abilities*).

- This includes any medications that may cause sedation, slowed reflexes, or other alterations in physical and mental abilities.

Students are required by NCQAC's Washington Health Professional Services (WHPS) to self-report to the educational program allowing for assistance from WHPS.

Procedure:

If the student is reasonably suspected of being under the influence of drugs or alcohol while at a clinical site:

- The Dean will be notified by the faculty member and the student will submit immediately to drug/alcohol testing at the site designated by the program.
 - The expense of the testing will be the responsibility of the student.
 - The student will be sent home for the remainder of that day.
 - Students are legally responsible for their own acts therefore;
 - Any student demonstrating unsafe behavior will not be allowed to continue in clinical practice if there is a positive test result as per the rules of SPSCCs clinical affiliates.

SPSCC Nursing

- If the test results are negative, the student may return to clinical practice (*on their next scheduled rotation*), subject to affiliate approval, if behavior is safe and appropriate.
- If the student refuses Substance Abuse Assessment, they will be dismissed from the clinical course on the grounds of implied admission to substance use/misuse and therefore will be unable to progress in the program.
- Faculty will document characteristics utilizing the Professional Guidelines form. Impaired characteristics typical of chemical dependency include:
 - Behavioral characteristics - absenteeism; tardiness; frequently leaves clinical/practicum unit; behavioral changes: e.g., mood swings and irritability; excuses or apologies for failure to meet deadlines, isolation/withdrawal from the group; decreased classroom and clinical/practicum productivity; fluctuating clinical/practicum or academic performance; pervasive alcohol odor; inappropriate physical appearance, missed assignments, confusion.
 - Physiologic characteristics - flushed face; red eyes; abnormal pupillary constriction or dilation; unsteady gait; slurred speech; blackouts; declining health, odor of alcohol on breath, bloodshot eyes, fine motor tremors.
 - Other characteristics – Clinical/practicum accidents, drug test tampering, information falsifying, suspected theft of drugs

The following actions/conditions are prohibited:

- Unsafe or potentially unsafe clinical performance/behavior not meeting program standards due to use of drugs and/or alcohol.
- Reporting for a clinical session with the odor of alcohol or illegal chemicals on the breath.
- Possessing any illegal narcotic, hallucinogen, stimulant, sedative or similar drug while on clinical time.
- Using any intoxicating liquor or illegal substances while on clinical time, on the premises or away from the premises when required to return to the clinical facility.
- Removing any drug from the clinical facility or client supply for any reason other than administration to the client.
- Falsifying specimen collection for required drug screen in clinical.

Any student dismissed from the program for substance use/misuse may petition for readmission with evidence of having successfully completed an approved treatment program (i.e. WHPS). The standard readmission policies and procedures will apply.

SPSCC Nursing

CLINICAL SIMULATION

Clinical simulation (CSim) is used throughout the student's time in the program. The simulation lab is an integral part of the innovative nursing program at SPSCC. CSim mimics the clinical environment and gives the student the ability to learn and practice safely without causing harm to clients. Students have opportunities to overcome fears and insecurities while working with a variety of task trainers, simulators and current practice clinical equipment. The goal for SPSCC nursing CSims is to provide the environment for students to become competent with nursing technical and adaptive skills, while working towards excellence in becoming a safe practitioner. Therefore, students spend time in the simulation suite each quarter, learning new psychomotor skills, reviewing previously learned skills, refining critical thinking and reasoning, and/or preparing for clinical.

***See simulation handbook for guidelines for more details regarding clinical simulation.*

SPSCC Nursing

CLINICAL APPENDICES

SPSCC Nursing

Appendix A

Just Culture Process for Responding to Student Clinical Events

Nursing is moving from a culture of blame and shame to a culture of quality improvement and client safety. This is a national effort that focuses not only on client protection but also upon learning from mistakes. The SPSCC Nursing Program adopted the “Just Culture” process from the North Carolina Board of Nursing. The principle behind ‘Just Culture’ environment is that discipline needs to be tied to the behavior of individuals and the potential risks their behavior presents, more than the actual outcome of their actions. Hospitals and/or schools utilize a Just Culture approach if/when a clinical practice event occurs, so that it is reviewed and analyzed from a holistic view. This is in effort to ascertain any mitigating or aggravating factors that contributed to the event and then determine the improvement plan and/or disciplinary action

Nursing students complete clinical rotations as part of their nursing program requirements. These are done in hospitals or other health care facilities under the supervision of SPSCC nursing faculty and/or healthcare facility nursing staff. The program utilizes full-time and adjunct faculty to teach clinical courses. Students observe the work of RNs and also work directly with clients, under close supervision, practicing a variety of entry-level nursing skills. The students are held to strict safety standards and are subject to evaluation/use of the Just Culture tools in any occurrences of a clinical practice event.

If a student is involved in a clinical event that the program has reason to believe resulted in patient harm, an unreasonable risk of patient harm, or is involved in the diversion of drugs or controlled substances, the nursing program is mandated by Washington State law to report these events to the nursing commission within two business days. An important part of this reporting should show evidence of an in-depth assessment of the incident using root cause analysis. This analysis is important to both the student and the clinical faculty overseeing the student’s work as they work together to determine what factors contributed to the error and how it can be prevented in the future.

The purpose of these guidelines is to provide a well-defined process used by faculty in response to student/faculty clinical events that evaluates students’/faculty actions and behavior with consistency and fairness using Just Culture principles, while also meeting the nursing commission’s reporting requirements of thorough root cause analysis. This will be done by:

- Clearly defining the roles and responsibilities of faculty, students, team leaders, the lead faculty, and the Associate Dean of Nursing when a clinical event occurs.
- Providing faculty with the knowledge and skills needed to evaluate clinical events that meets the nursing commission reporting requirements of root cause analysis.
- Providing training that ensures the completion of the Student Practice Event Evaluation Tool (SPEET) is completed with interrater reliability.

SPSCC Nursing

Some important definitions to know:

- **Clinical Event:** An event in a clinical setting by a student or faculty member that resulted in patient harm, an unreasonable risk of patient harm, or is involved in the diversion of drugs or controlled substances.
- **Just Culture:** A system developed by the North Carolina Board of Nursing (NCBON) used to evaluate and respond to clinical events. It seeks to develop a safe environment encouraging discussion and reporting of errors and near misses without fear of retribution.
- **Human Error:** Nurse inadvertently, unintentionally did something other than intended or other than what should have been done; a slip; a lapse; or an honest mistake. Isolated event, not a pattern of behavior.
 - Examples: Single medication event/error (wrong dose, wrong route, wrong patient, or wrong time); Failure to implement a treatment order to oversight.
- **At Risk Behavior (Board of Nursing Practice Consultant to be contacted for consultation):** Behavioral choice that increases risk where risk may not be recognized or is mistakenly believed to be justified; nurse does not appreciate risk; unintentional risk taking; and nurse's performance or conduct does not pose a continuing practice risk to clients or others.
 - Examples: Exceeding scope of practice; pre-documentation; minor deviations from established procedure; nurse knowingly deviates from a standard due to a lack of understanding of risk to client, organization, self, or others
- **Reckless Behavior (Mandatory report to Board or Nursing required):** Nurse consciously disregards a substantial and unjustifiable risk; nurse's action or inaction is intentional and purposeful; or nurse puts own self/personal interest above that of client, organization or others
 - Examples: Nurse abandons patients by leaving workplace before reporting to another appropriately licensed nurse. Nurse leaves workplace before completing all assigned patient/client care (including documentation) for a non-urgent reason; nurse does not intervene to protect a patient because nurse is not assigned to patient; nurse makes serious medication error, when realized tells no one, and when questioned denies any knowledge of reason for change in client condition; nurse falsifies documentation to conceal an error.
- **Near Miss:** Any event or situation that could have had adverse consequences but did not and was indistinguishable from a full-fledged adverse event in all but outcome ("close call"). In a near miss, a patient is exposed to a hazardous situation, but does not experience harm through either luck or early detection.
- **Root Cause Analysis:** A systematic process for identifying "root causes" of problems or events and an approach for responding to them.
- **Student Practice Event Evaluation Form (SPEET):** A form developed by the North Carolina Board of Nursing (NCBON) used to categorize and score student behavior or actions that caused or could have caused harm to a patient. The score provides specific actions to take with the student that are appropriate to the seriousness of the error and may include consoling, remediation, counseling, coaching, or disciplinary action.

SPSCC Nursing

This process applies to SPSCC nursing program faculty, Clinical/Simulation Coordinator, Dean of Allied Health and Nursing, and any student involved in a clinical event.

PROCEDURE:

1. All SPSCC clinical faculty must complete the following 'Institute for Healthcare Improvement' training and provide the program administrative assistant with a completion certificate no later than the end of the second week of clinical.
<http://www.ihl.org/education/IHIOpenSchool/Courses/Pages/default.aspx>
 - a. PS 105: Responding to Adverse Events
 - b. PS 201: Root Cause and Systems Analysis
 - c. PS 203: Pursuing Professional Accountability and a Just Culture
2. When a clinical event occurs, the following procedure must be completed within **24-48 hours** so the Dean can meet the WAC reporting requirements. Note: If the event did not result in patient harm, an unreasonable risk of patient harm, or did not involve the diversion of drugs or controlled substances, it is not necessary for the Dean to report it to the NCQAC. However, all steps below should be completed with the exception of Step 10.
3. The student shall immediately notify their clinical faculty member and the health care nurse under whom they are working of the event.
4. The faculty member shall meet with the student, learn basic details of the event, and determine if they are emotionally able to continue the rest of their shift or should be sent home.
 - a. Note: if the event involved any of the following the student **should** be sent home:
 - i. a medication error (even if no harm was caused);
 - ii. event caused patient harm;
 - iii. involved drug diversion or substance abuse. (If impaired they may not drive themselves home.)
5. Before the student leaves the healthcare facility, the faculty will set up an appointment with the student for the next day to discuss the details of the event. The student will be told they will receive an email from the faculty member with two forms to complete and bring to the meeting: "Root Cause Analysis and Corrective Action Plan" (RCA) and the "Student Practice Event Evaluation Tool" (SPEET).
 - a. Note: If the student absolutely cannot meet the next day, an appointment for the following day must be made.
 - i. The faculty member shall also complete these forms in preparation for meeting with the student.
 - ii. If the faculty member did not receive enough information about the event on the day it occurred, the faculty member can complete it when meeting with the student or may return to the clinical site as needed to ensure accurate information regarding the clinical event has been obtained.
6. The faculty member shall immediately notify the Clinical/Simulation Coordinator, providing basic details of what occurred. This can be done by phone, text, or whatever method will give the faculty member a quick acknowledgement that the message has been received.

SPSCC Nursing

7. The Clinical/Simulation Coordinator shall immediately notify the Dean of Allied Health and Nursing of the event by whatever methods will give the Clinical/Simulation Coordinator a quick acknowledgement that the message has been received.
8. During the follow-up meeting with the student, the faculty member and student will verbally review the event in detail. Using the “Root Cause Analysis and Corrective Action Plan” and SPEET forms completed by both student and faculty, they will review and discuss all questions. When the root cause(s) have been clearly identified, the action plan for the student can be discussed and documented on the RCA form
 - a. Note: The faculty member is responsible for submitting the finalized forms as outlined in **#9 below**.
9. The faculty member will send a copy of the finalized RCA and SPEET forms to the student, the Clinical/Simulation Coordinator, and the Dean of Allied Health and Nursing within **48 business hours** of the event. A copy must also be placed in the student’s electronic file immediately after it has been completed.
10. The Dean shall notify the NCQAC no later than 48 hours (not including holidays and weekends) of when the event occurred using the Adverse Events Reporting Program website at <https://fortress.wa.gov/doh/opinio/s?s=AdverseEventReporting>.

References include:

- [WAC 246-840-513](#) - Reporting and recordkeeping requirements for nursing education programs.
- [RCW 70.56.010](#) – Adverse Health Events and Incident Reporting System
- Just Culture Program and Forms: <https://www.ncbon.com/education-resources-for-program-directors-just-culture-information>.

Appendix B

SPEET Form

NCBON Just Culture STUDENT PRACTICE EVENT EVALUATION TOOL (SPEET)

Event(s):		Event Number:						
Criteria	Human Error	At Risk Behavior			Reckless Behavior		Score	
	0	1	2	3	4	5		
G	General Nursing Practice	No prior counseling for practice related issues	Prior counseling for single non-related practice issue	Prior counseling for single "related" issue	Prior counseling for "same" issue	Prior counseling for multiple related or nonrelated practice issues	Prior counseling for <u>same</u> or <u>related</u> issue with no or little evidence of improvement.	
U	Understanding expected based on program level, course objectives/ outcomes	Has knowledge, skill and ability - <i>Incident was accidental, inadvertent, or an oversight</i>	Task driven/rote learning. OR <u>Wrong action for this circumstance.</u>	Failed to demonstrate appropriate understanding of options/resources. OR Aware of safety issues but in this instance <u>cut corners.</u>	Understands rationale but failed to recognize situations in terms of overall picture or to prioritize actions. OR In this instance, failed to obtain sufficient info or consult before acting.	Able to recognize potential problems. In this instance " <u>negligent</u> " OR <u>failed to act according to standards.</u> Risk to client outweighed benefits.	Knows or should have known correct action, role and limitations. In this instance action was " <u>gross negligence/ unsafe act</u> " and demonstrated no regard for patient safety.	
I	Internal Program or Agency Policies/ standards/ inter-disciplinary orders	Unintentional breach OR No policy/standard/ order available.	Policy not enforced. OR <u>Cultural norm</u> or common deviation of staff. OR Policy/order misinterpreted	Student cut corners or <i>deviated</i> in this instance from policy/standard/order as <u>time saver.</u> - No evidence or suggestion of a pattern of behavior.	Aware of policy/ standard/ order but ignored or disregarded to achieve <i>perceived expectations</i> of faculty, staff, patient or others. May indicate pattern or single event.	Disregarded policy/standard/order for <u>own personal gain.</u>	<u>Maliciously</u> disregarded policy/standard/order	
D	Decision/ choice	Accidental/ mistake/ Inadvertent error	<u>Advantages</u> to patient <u>outweighed risk</u>	<u>Emergent situation</u> - quick response required.	<u>Non-emergent situation.</u> Chose to act/not to act without weighing options or utilizing resources. Used poor judgement	Clearly a prudent student would not have done. <u>Unacceptable risk to patient/agency/public</u> Disregard for patient safety.	Conscious choice. Put own interest above that of patient/agency/public. <u>Egregious choice.</u> <u>Neglected red flags</u>	
E	Ethics/ credibility/ accountability	Identified own error and <u>self reported.</u> Identifies opportunities for improvement and develops action plan for ensuring incident will not be repeated.	Admitted to error and <u>accepts responsibility.</u> Identifies opportunities for improvement and develops action plan for ensuring incident will not be repeated.	Acknowledged role in error but <u>attributes to circumstances</u> and/or blames others to justify action/inaction. Cooperative during investigation. Demonstrates desire to improve practice.	Denies responsibility until confronted with evidence. Reluctantly accepts responsibility. <u>Made excuses or made light of occurrence.</u> Marginally cooperative during investigation.	Denied responsibility despite evidence. Indifferent to situation. <u>Uncooperative and/or dishonest</u> during investigation.	Took active steps to <u>conceal</u> error or <u>failed to disclose known error.</u>	

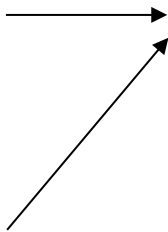
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Criteria Score _____

NCBON Just Culture STUDENT PRACTICE EVENT EVALUATION TOOL (SPEET)

Mitigating Factors – check all identified		Aggravating Factors – check all identified	
Communication breakdown (multiple handoffs, change of shift, language barriers)			
Unavailable resources (inadequate supplies/equipment)		Especially heinous, cruel, and / or violent act	
Interruptions / chaotic environment / emergencies – frequent interruptions / distractions		Knowingly created risk for more than one client	
Inadequate supervision by faculty or preceptor		Threatening / bullying behaviors	
Inappropriate assignment by faculty or preceptor		Prior formal student disciplinary record for practice issue(s)	
Policies / procedures unclear			
Client factors (combative/agitated, cognitively impaired, threatening)			
Non-supportive environment – interdepartmental/staff/student conflicts		Other (identify)	
Lack of response by other departments / providers			
Other (identify)			
Total # mitigating factors identified		Total # aggravating factors identified	

Criteria Score (from front page)	
Mitigating factors (<u>subtract</u> 1 point for 1 – 3 factors; 2 points for 4 – 6 Factors; and 3 points for 7 or more factors)	
Aggravating factors (<u>add</u> 1 point for each identified factor)	
Total Overall Score	



Human Error	At-Risk Behavior	Reckless Behavior
# criteria in green= _____ IF 3 or more criteria in Green OR total score <8 – Address event by consoling student and/or developing remedial improvement plan with student	# criteria in yellow= _____ IF 3 or more criteria in yellow OR total score 8 -19 – Address event by coaching student, possibly counseling, and/or developing remedial improvement plan with student	# criteria in red = _____ IF 3 or more criteria in red OR total score 20 or greater - Consider disciplinary action and/or remedial action in addressing event with student

Evaluator: _____

School Name: _____

Date of Event: _____

NCBON Education Consultant _____

Action Taken: _____

NOTE: This SPEET is NOT used if event involves misconduct such as: academic cheating, confidentiality, fraud, theft, drug abuse, diversion, boundary issues, sexual misconduct, mental/physical impairment.

Instead, these are managed through established mechanisms outside of this clinical framework.

Human Error = Inadvertently doing other than what should have been done; a slip lapse, mistake.

At-Risk Behavior = Behavioral choice that increases risk where risk is not recognized or is mistakenly believed to be justified.

Reckless Behavior = Behavioral choice to consciously disregard a substantial and unjustifiable risk.

Consoling = Comforting, calming; supporting student while examining event.

Coaching = Supportive discussion with the student on the need to engage in safe behavioral choices.

Remedial Action = Actions taken to aid student including education, training assignment to program level-appropriate tasks.

Counseling = A first step disciplinary action; putting the student on notice that performance is unacceptable

Disciplinary Action = Punitive deterrent to cause student to refrain from undesired behavioral choices.

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SPSCC Nursing

Appendix C Root Cause Analysis

The root cause analysis is a form designed to assist you, the student, along with your clinical faculty member, to reflect on an event that may have resulted in client harm or near harm to help determine if any processes need to be reviewed, revised, and/or changed. This form will be sent to you by your clinical faculty member to complete prior to meeting with your faculty member regarding an event. Please refer to [Appendix K](#) for the appropriate steps.

Faculty can download the form [here](#) to send to the student via email.

Appendix D Accident/Incident Report Form

Instructions: Employees, Students and Visitors of South Puget Sound Community College must use this form to report all injuries, work related exposures*, property damage, or “near miss” events (which could have caused an injury or exposure) – no matter how minor. This helps us to identify and correct hazards before they cause serious injuries.

This form should be completed by the employee, student or visitor as soon as possible and given to a supervisor or the Security Office for further action.

I am reporting an: <input type="checkbox"/> Injury <input type="checkbox"/> Work Related Exposure <input type="checkbox"/> Property Damage <input type="checkbox"/> Near Miss	
Name:	Are you a: <input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Employee
Employee Job title	Name of Supervisor:
Have you told your supervisor or Security about this incident? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of incident:	Time of incident:
Name of witnesses (if any):	
Where, exactly, did it happen?	
What were you doing at the time?	
Describe step by step what led up to the injury/exposure/property damage/near miss: (continue on the back if necessary)	
What could have been done to prevent this injury/ exposure/property damage/near miss?	
What parts of the body were injured? If a near miss, how could you have been hurt?	
Did you see a doctor about this injury/exposure? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, name of doctor:	Doctor's phone number:
Date of doctor visit:	Time of doctor visit:
Has this part of your body been injured before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, when did it occur?	
If this occurred at work, list name of employer:	
Your Signature & Date:	Campus Security Signature & Date:
Supervisor Signature and Date:	Human Resources Signature & Date:

* Work Related Exposure is defined as an event, activity or contact with something that occurs in the work environment that either causes or contributes to the resulting injury or illness. Rev.7.22.19

SPSCC Nursing

Appendix E

Medication Administration by Nursing Students

This guidance reflects the requirements of [WAC 246-840-519 \(vii\)](#) and WSNCQAC rule [RCW 18.79.240](#). The proper dispensing and administration of medication performed by nursing students is vital to the delivery of safe and effective patient care. As such, the following procedures will be followed to ensure the safe administration of medications using Automated Drug Distribution Devices (ADDD).

Orientation and Practice Experience

Students within the nursing program will be provided with both orientation and simulated experiences related to the safe medication administration and use of ADDDs. Students will be required to participate in an ADDD tutorial with subsequent competency assessment. Documentation of successfully passing the competency assessment will be provided to clinical faculty members prior to use of any ADDD system. Nursing students will also be required to participate and demonstrate clinical competency in simulated clinical scenario using an ADDD system.

Student orientation to the safe distribution and use of ADDDs includes, but is not limited to, the following simulated learning experiences:

- Accurately read and interpret medication orders
- Correctly login into ADDD
- Identify correct client using processes specific to the facility
- Accurately select medication to be given
- Secure ADDD when complete
- Follow Rights of Medication Administration
- Accurate dosage calculation
- Correct documentation of medication administration
- Perform inventory control measure (wasting of medications) specific the facility

Student competency will be evaluated and satisfactorily completed prior the administration of medications within the clinical environment. Students administering medications within the clinical environment will always be under the supervision of a licensed nurse.

Evaluation of Medication Administration Within the Healthcare Facility

During their clinical time, students will be provided with ADDD access in accordance with each healthcare facility's policies and procedures. Students will always be under the supervision of a licensed nurse while accessing and administering medications.

Once a quarter, students will be given a dosage calculation exam that determines knowledge of safe medication dosage. Each student must have a passing score of 95% or higher in order to progress to the next level of the program and participate in clinicals. Students who do not achieve a score of 95% will be given remedial training and allowed one retake of the exam.

SPSCC Nursing

Throughout each level, nursing students will be evaluated on pharmacology knowledge and safe medication administration in the form of exams and/or skill competency simulations.

[Nursing Students: Access and Administration of Medications*](#)

Students administer medications under the supervision of the clinical faculty or the supervising nurse and have access to ADDDs per institutional policy.

1. Communication and Order Transmission
 - a. Nursing students **DO NOT** take verbal or telephone orders from providers
 - b. Nursing students **DO NOT** transcribe provider orders
 - c. Nursing students **DO NOT** communicate medication orders to the pharmacy
2. Each dose of medication will be administered per the “Six Rights” of Medication Administration (Right Patient, Drug, Dose, Time, Route, and Documentation) and after an assessment of client allergies.
3. Nursing student medication administration, including documentation, will be performed utilizing agency specific policies, procedures, and protocols.
4. A clinical faculty member or supervising nurse must confer with the student before a student administers medication.
5. A nursing student may administer controlled substance medication with the following **RESTRICTIONS:**
 - a. All controlled substances require a RN or LPN signature. The documentation system for a clinical site requires a co-signature option for students to administer controlled medications. If a co-sign option is not available, controlled substances will not be administered by a student.
 - b. Analgesic administered via a Patient Controlled Analgesia (PCA) infusion pump requires direct RN supervision, including but not limited to the following actions:
 - i. Initial set up and dose programming
 - ii. Administer loading and/or bolus doses of analgesic medication
 - iii. Change medication cartridges or tubing
 - iv. Adjust delivery dosages/settings
6. Nursing students may administer Pitocin/oxytocin with the following **RESTRICTIONS:**
 - a. All Pitocin/oxytocin administration to a laboring or postpartum patient, including rate adjustment, requires the direct supervision of the patient’s RN.
7. Blood product administration by nursing students includes the following **RESTRICTIONS:**
 - a. Blood products/medication requiring a witness for infusion/administration **CANNOT** be administered by the student. This includes blood typing.
 - i. However, students can collect the blood products from the blood bank, prime the tubing with saline, and participate in blood administration monitoring policies (i.e. taking vital signs).
 - b. Medications that do not legally require a witness **CAN** be administered by the student under the supervision of the clinical faculty member or supervising nurse.
 - i. Documentation must be co-signed by an RN. (Examples: Not limited to but include: Rhogram, albumin, Factor 8, Vitamin K, Hespan)
8. There are some medications and monitoring skills that nursing students are **NOT**

SPSCC Nursing

permitted to perform **under any circumstances**. These include the following:

- a. Confirm, release, or acknowledge medication orders in the electronic medication administration record
 - b. Administer medications that are not confirmed or acknowledged in the electronic medication administration record
 - c. Administer chemotherapy via any route
 - d. Administer conscious sedation or assume monitoring responsibility for patients undergoing procedural sedation
 - e. Administer or adjust medications that require advanced training (e.g. medications that are restricted to critical care areas)
 - f. Administer medications via an epidural or spinal catheter
 - g. Discontinue a PCEA (Patient Controlled Epidural Analgesia) infusion
 - h. Cosign/witness controlled medication shift count or dose wastage
 - i. when it is necessary to destroy a small amount of controlled substances following the administration of a dose by a nurse, the destruction shall be witnessed by a second licensed nurse who shall countersign the record of destruction
 - i. Provide any licensed nurse-required peer check per facility policy
9. Administration of anticoagulants are calculated and administered with an RN check and co-signature as per facility policy
- a. These include, but are not limited to:
 - i. All heparin, warfarin, t-PA, low molecular weight heparin, bivalirudin, dabigatran, and other anticoagulants
10. Administration of all insulin formulations, including both SQ and IV insulin doses and all insulin IV infusion, is calculated and drawn up with direct RN supervision.
- a. Insulin administration requires co-signature as per facility policy
11. The administration of high-risk medications (any medications that require additional training), in emergency or critical care units, is **NOT** allowed in quarters 1 through 5 by the nursing student. The precepting student (quarter 6) is allowed to administer high-risk medications **ONLY** if the supervising nurse or clinical faculty member obtains the high-risk medication for the nursing student and the nursing student administers the medication only under the direct supervision of the supervising nurse/clinical faculty member.
- a. Sodium Chloride at concentrations greater than 0.9% (Normal Saline)
 - b. Emergency and/or Critical Medications include, but not limited to the following:
 - i. Adenosine
 - ii. Amiodarone
 - iii. Atropine
 - iv. Dopamine
 - v. Epinephrine
 - vi. Lidocaine
 - vii. Magnesium Sulfate
 - viii. Procainamide

SPSCC Nursing

- ix. Sotalol
- x. Vasopressin

Documentation of Medication Errors

As mandated by the NCQAC, documentation of student medication errors and diversion of medications will be completed and reported to the NCQAC as required. All medication errors and medication diversions will be documented using the Root Cause Analysis for and the NCBON “Just Culture” Student Practice Event Evaluation Tool (SPEET) form. The forms will be submitted to the Dean for tracking and a copy of this completed form will also be placed in the student’s academic file (see ‘Just Culture’ for more details).

**Contracted clinical facility restrictions or limitations, which are more restrictive than these guidelines, will supersede any aspect of this policy.*

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Verification Statement Form
Nursing Student Handbook

Directions: All students enrolled in the Nursing Program must read this handbook and sign and submit the following statement at the beginning of each academic year (or when admitted, if admitted other than at the beginning of the academic year).

I have read, comprehend, and will comply with the Standards of Professional Behaviors and Policies and Procedures in the South Puget Sound Community College Nursing Program Student Handbook 2022-2023.

Student Name (Please Print): _____

Student Signature: _____

Date: _____