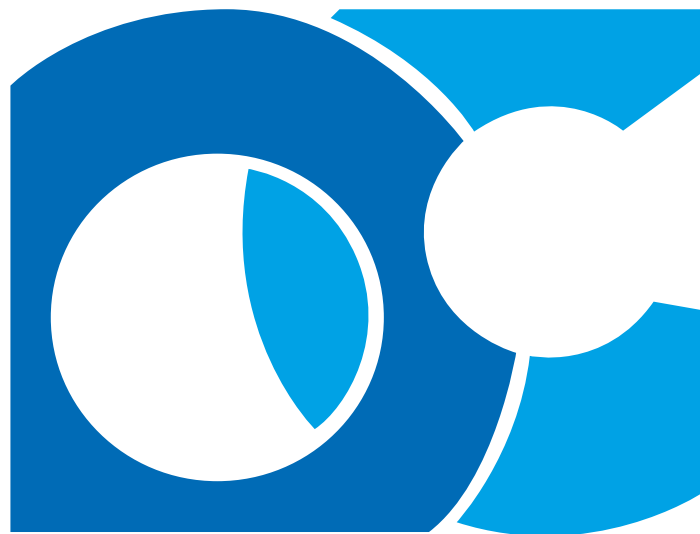


**ODESSA COLLEGE**



**more**

**201 W. University  
Odessa, Texas 79764**

**ASSOCIATE DEGREE NURSING PROGRAM  
(A.D.N.)  
STUDENT HANDBOOK**

**2008-2009**

## PREFACE

Welcome to the Odessa College Associate Degree Nursing Program! This handbook is a supplement to the college catalog and general OC student policies. OC On-line policies can be accessed at <http://www.tasb.org/policy/pol/private/068501/>. The purpose of this handbook is to provide you with information specific to the nursing program. The handbook also contains helpful resource information to facilitate your success in the Nursing Program. It is important that you keep and refer to this handbook throughout your enrollment in the nursing program.

This ODESSA COLLEGE NURSING STUDENT HANDBOOK is a publication of the Odessa College Associate Degree Nursing Department. The policies, rules, and regulations and the general information provided in this handbook are subject to change without notice.

If you have questions or problems or need any assistance, please do not hesitate to contact any of the nursing faculty, the Director of the A.D.N. Program and/or the Program Secretary. Our primary goal is your success, both during nursing school and eventually as a member of the nursing profession.

### NURSING OFFICE HOURS

Fall and Spring Semesters: Monday -Thursday 8:00 a.m.-12:00 p.m.  
& 1:00 p.m. – 5:30 p.m.;  
Friday 8:00 a.m. - 1 p.m.

Summer: Monday -Thursday 7:30 a.m. - 12:00 p.m. & 1-5:30 p.m.  
Closed Friday

Nursing Office phone: 432-335-6672  
Nursing Office fax: 432-335-6873

OC Mailing Address  
201 W. University  
Odessa, TX 79764

Office hours for faculty posted on office doors.

WEB Site Information: [www.odessa.edu/dept/nursing](http://www.odessa.edu/dept/nursing)

THE ODESSA COLLEGE NURSING PROGRAM DOES NOT DISCRIMINATE IN REGARD TO RACE, COLOR, AGE, ETHNIC/NATIONAL ORIGIN, RELIGION/CREED, GENDER/SEX, MARITAL STATUS, VETERAN STATUS, OR DISABILITY.

## **ACCREDITATION STATUS**

The Odessa College Associate Degree Nursing Program is approved by the Texas Board of Nursing for the State of Texas (BON). The BON can be reached at 333 Guadalupe, Suite 3-640, Austin, TX 78701, phone 512-305-7400. The nursing curriculum plan is approved by the Texas Higher Education Coordinating Board (THECB). The Program is accredited by The National League for Nursing Accrediting Commission, Inc. (NLNAC). NLNAC may be reached at 61 Broadway, New York, NY 10006, phone 800-669-1656 ext. 153.

## **STUDENT INPUT INTO THE EDUCATIONAL PROCESS**

You, the student, are the most important part of the nursing program. Your suggestions and ideas aid us in strengthening the program. Therefore, student input is encouraged and appreciated. Mechanisms for input may be through student government, ad hoc student representation on standing or called faculty committees, student representation on the Advisory Committee, course and program evaluations, or directly to faculty or the Program Director.

# Table of Contents

<b>Preface.....</b>	<b>2</b>
<b>Table of Contents .....</b>	<b>4</b>
<b>I. Program Foundation</b>	
Philosophy.....	7
Conceptual Framework.....	9
Program Objectives/Outcomes .....	11
SCANS: Workplace Foundational Skills.....	12
Options/Tracks for the Nursing Student .....	13
Program Admission .....	14
Curriculum Plan – Day or Evening Option.....	16
Curriculum Plan – Transition Option .....	17
Nursing Courses – Course Descriptions .....	18
<b>II. General Information</b>	
Advisement and Registration.....	25
Financial Aid.....	26
Program Expenses.....	27
Availability of Personal Contact Information.....	28
Emergency Telephone Calls .....	29
Outside Employment .....	30
Student-Instructor Communication.....	31
Absence and Tardy Policy .....	32
Professional Attire and Uniform Requirements.....	34
Insurance .....	36
Cardiopulmonary Resuscitation (CPR) Training .....	37
Guidelines for Use of Nursing Laboratory .....	38
Exam Review .....	39
Student Contract.....	40
Evaluation of Faculty and Course.....	41
A.D.N. Grievance Policy .....	42
<b>III. Conduct and Performance</b>	
American Nurses’ Association’s Code of Ethics.....	45
Student Accountability.....	47
Standards for Classroom Behavior .....	48
Standards for Student Clinical Conduct.....	49
<b>IV. Board of Nurse Examiners Policies</b>	
Licensing Criteria.....	51
Disciplinary Sanctions for Sexual Misconduct.....	54
Disciplinary Sanctions for Fraud, Theft, and Deception .....	58
Disciplinary Sanctions for Lying and Falsification .....	61

<b>V.</b>	<b>Evaluation and Grading</b>	
	Grading Policy .....	67
	Procedure for Requesting Special Accommodations.....	69
<b>VI.</b>	<b>Progression/Readmission</b>	
	Progression and Readmission... ..	71
	Medication Math Competency.....	73
	HESI Examination Policy .....	75
	Requirements for Graduation.....	77
<b>VII.</b>	<b>Clinical Policies</b>	
	Legal and Ethical Requirements .....	79
	Scope of Practice.....	81
	Clinical Evaluation Tool Example.....	82
	Clinical Failure.....	84
	Occurrence Reports.....	86
	Visiting Hospital Patients .....	87
<b>VIII.</b>	<b>Student Health and Safety</b>	
	Health Screening Requirements.....	89
	Drug Screening .....	90
	Criminal Background Checks .....	91
	Safety in the Clinical Setting .....	92
	Guidelines to Prevent Transmission of Infectious Disease.....	93
	Student Illness or Injury.....	95
	Pregnancy.....	96
<b>IX.</b>	<b>Resources/Miscellaneous</b>	
	Standard for Written Work .....	98
	A Self-Check Procedure for Student Time Management .....	101
	Learning Resource Center (LRC) .....	102
	Student Resources for Success.....	103
	Pinning Ceremony and Commencement .....	104
	Consent Form – Release of Information.....	105
	Contract – Student Handbook.....	106

# I. Program Foundation

## PHILOSOPHY

The Associate Degree Nursing Program at Odessa College functions as an integral part of the College. The role, the mission, and the purpose of Odessa College serve as the basis for the Nursing Program. It is the mission of the nursing faculty to educate and prepare beginning professionals for practice in a multicultural community within a diverse and changing health care environment, advance the practice of nursing, and provide quality health care in a competent, caring manner.

The faculty believe that the **client** is the primary focus of nursing care. Associate degree nursing defines client as individual and family. Each individual is a unique, holistic being with intrinsic worth and dignity. Clients have biological, psychological, sociological, spiritual, and cultural needs which are dynamic and deeply influenced by changes in their internal and external environment.

We believe that the **environment** encompasses internal and external conditions, circumstances, and influences that interact with and affect the client. Environment consists of physical, psychological, biological, social, spiritual, and cultural components. Environment is dynamic, including values and beliefs, technological resources, economic diversity, educational opportunities, and human characteristics. It provides the content for the development of individuals, the identification of human needs, including those related to health, and the practice of nursing within various settings.

Faculty believe that **health** refers to the level of biological, psychological, social and spiritual functioning on a wellness-illness continuum, not merely the absence of disease. Health is influenced by developmental stages, social, economic, and cultural factors, personal choices about lifestyle and values, genetic and environmental factors, and generational patterns.

Faculty believe that **nursing** is a science and art based on knowledge derived from a body of nursing science, the physical and social sciences, and the humanities. In collaboration with the client, the role of the nurse is to assist in promotion, maintenance, and restoration of health. Nursing is focused on using a systematic decision making process to identify and respond to the needs of individual clients and families along the health-illness continuum. Nursing practice utilizes cognitive, affective, and psychomotor skills in meeting the health needs of individuals. Nurses collaborate within a multidisciplinary health care team to meet the needs of individuals and families. The practice of nursing necessitates legal and ethical standards for professional excellence and encompasses lifelong learning and application of research. Nursing is a dynamic, interactive, and caring profession.

As a faculty, we believe that **caring** is an essential component of nursing, through which scientific nursing principles are used to meet the needs of the client and family with dignity and competency. Caring requires a personal, social, moral, and spiritual engagement of the nurse. Caring behaviors encompass showing concern, patience, compassion, and being a client advocate within the socio-cultural context of the client.

As nurse educators, we believe that **nursing education** is grounded in natural, social, behavioral, and humanistic sciences with an emphasis on communication, decision-making, ethical behavior, and caring for culturally diverse clients of all ages. Nursing education provides opportunities for students to acquire the knowledge, skills, therapeutic interventions, attitudes, and values of nursing, and then to transfer these abilities to client in their care. The associate degree nurse is prepared as beginning level practitioner who provides safe, effective, and ethical nursing care in a variety of health care settings. The faculty and college strive to provide an educational environment in which students are encouraged to learn and assimilate knowledge necessary for their practice. This is accomplished by combining the most effective traditional methods with latest teaching and technological innovations. Nurse educators expect students to be responsible, active learners. Graduates of the Nursing Program are prepared to practice safely, competently and adapt to a variety of health care settings.

Revised: 2/08

## CONCEPTUAL FRAMEWORK

The program design of the Associate Degree Nursing curriculum at Odessa College is based on the faculty's beliefs concerning the client, environment, health, nursing, caring, and nursing education. It is planned to emphasize the individuality of each client and address the changing needs of clients and health care. These needs are based on physiological, psychological, social and spiritual dynamics of the clients and families.

The primary concepts of the program are the role of the nurse as Provider of Care, Coordinator of Care and Member of a Profession. These concepts are based on the Differentiated Entry Level Competencies written for nursing programs to meet the approved criteria established by the Texas Board of Nursing outcomes for graduates.

In the role of the nurse as Provider of Care, the nurse is to provide competent and appropriate care to clients in a caring, culturally sensitive and holistic manner. To prepare students for this role, a strong background in anatomy and physiology, pathophysiology, pharmacology, health assessment, microbiology, and psychology is required, as well as an awareness of the emotional, financial, cultural, and spiritual concerns specific to each client. After gathering all the needed data, the nurse must assimilate this data using the decision-making skills taught in the nursing program and arrive at appropriate nursing diagnoses, goals, and interventions to meet the client's needs. After implementing the care, the nurse must evaluate the effectiveness of care and revise it as needed. Client and family education is essential in assisting the client to achieve and maintain their optimal level of wellness, as is the use of therapeutic communication techniques. To further prepare students for practice as a graduate nurse, students are progressed in their ability to care for multiple clients, as well as delegate care activities to other team members.

In the role of Coordinator of Care, the nurse is to collaborate with and encourage effective communication between clients, families and other members of the health care team. In preparation for this role, students learn about the many resources available to clients in the local area, as well as state and national organizations and services. Application of organizational and management skills enhances the quality of nursing care provided by the graduate nurse, the level of client satisfaction and, ultimately the achievement of positive client outcomes.

In the role of Member of a Profession, the nurse assumes accountability and responsibility for one's own actions, and practices within the boundaries of the Texas Nursing Practice Act, the Nurse's Code of Ethics, and established standards of practice, policies and procedures. An important responsibility for the professional nurse is that of client advocate, who often collaborates with the interdisciplinary team to identify unmet needs from a holistic perspective. The nurse is to display a professional image and conduct him/herself in a professional manner, including the provision of nursing care in a caring, non-judgmental, nondiscriminatory manner. Graduates are expected to demonstrate an attitude of openness and kindness in interpersonal relationships, focus on the needs of others, and communicate effectively with members of the health care team, clients and families. The graduate nurse is to maintain currency in practice through continuing education. Graduates are encouraged to participate in activities that promote the profession of nursing, such as participating on organizational committees, within

professional organizations, and for staying informed about issues and trends affecting the practice of professional nursing.

Revised: 6/08

## PROGRAM OBJECTIVES/OUTCOMES

Upon completion of the program, the graduate will demonstrate competency in the following roles:

### **Provider of Care:**

1. Determine the health status and health needs of clients\* based upon interpretation of health data and preventive health practices in collaboration with clients and interdisciplinary health care team members.
2. Formulate goals/outcomes and plan of care based on nursing diagnoses in collaboration with clients and interdisciplinary health care team members. (i.e. nursing process)
3. Implement plan of care within legal and ethical parameters, including scope of practice, in collaboration with the client and interdisciplinary health care team to assist client in meeting health care needs.
4. Develop and implement teaching plans for clients concerning promotion, maintenance, and restoration of health.
5. Evaluate clients = responses and outcomes to therapeutic interventions.
6. Provide for the care of multiple clients either through direct care or assignment and/or delegation of care to other members of the health care team.
7. Use critical thinking approach to analyze clinical data and current literature as a basis for decision making in nursing practice.

### **Coordinator of Care:**

8. Coordinate human and material resources for the provision of care for clients.
9. Collaborate with clients and the interdisciplinary health care team for the planning and delivery of care.
10. Refer clients to resources that facilitate continuity of care.
11. Function within the organizational framework of various health care settings.

### **Member of a Profession:**

12. Assume accountability and responsibility for the quality of nursing care provided to clients.
13. Act as an advocate to promote the provision of quality health care for clients.
14. Participate in activities that promote the development and practice of professional nursing.

Revised: 4/04

\*The Differentiated Entry Level Competencies of Graduates of Texas Nursing Programs defines 'client' for the associate degree entry level into practice as 'individual and family.' Texas Board of Nursing, September, 2002.

## **SCANS: WORK PLACE FOUNDATIONAL SKILLS**

The word SCANS comes from the U.S. Department of Labor's "Secretary's Commission on Achieving Necessary Skills." The numbers found in the Odessa College course descriptions refer to the list of 11 skill areas below. Three of the 11 skill areas refer to the foundation skills of reading, writing and mathematics. The other eight areas refer to workplace skills development within courses as part of the teaching-learning process. The OC faculty have evaluated the courses and written course descriptions keyed to SCANS. SCANS coding helps communicate to students and other members of the public the educational and work place foundation that certain courses provide.

### **(SCANS 1, 2, 3 = FOUNDATION SKILLS)**

1. Reading
2. Writing
3. Mathematics

### **(SCANS 4-11 = WORKPLACE SKILLS)**

4. RESOURCE USE AND APPROVED DEVELOPMENT (such as time, materials, money and facilities).
5. INTERPERSONAL APPROVED DEVELOPMENT (such as working as member of a team, serving clients and customers, negotiation, leadership, and working with diversity).
6. INFORMATION SKILLS (such as acquiring, evaluating, organizing, maintaining, interpreting, communicating, and using computers to process information).
7. SYSTEMS AND OTHER COMPLEX INTERRELATIONSHIPS (such as understanding organizational systems, working within social and technological groups, distinguishing and improving the systems design).
8. SELECTING, APPLYING, AND MAINTAINING A VARIETY OF TECHNOLOGIES.
9. CREATIVE THINKING, PROBLEM SOLVING, AND DECISION MAKING.
10. APPROVED DEVELOPING PERSONAL QUALITIES (such as responsibility, self-esteem, sociability, self-management, integrity and honesty).
11. LISTENING AND SPEAKING.

OC catalog

Reviewed and edited for handbook inclusion: 9/04

## **OPTIONS/TRACKS FOR THE NURSING STUDENT**

The curriculum of the Odessa College Nursing Program prepares graduates to assume beginning staff nurse positions under supervision as providers of care, coordinators of care, and members of the nursing profession. Upon successful completion of the licensing examination, NCLEX-RN, the graduate becomes a Registered Nurse.

Odessa College offers two tracks to obtain the Associate Degree in Applied Science for nursing. Each track requires the same non-nursing courses to complete the degree requirements. Students beginning a nursing career can apply for the Day Option or the Evening Option. Students take the same nursing courses in both options. The Transition track allows the licensed vocational nurse (L.V.N.) to receive credit for selected nursing courses through advanced placement. Transition is offered as Day Option only. Transition students must hold a license to practice nursing as a L.V.N. in Texas.

Generic students are those who do not hold a licensure to practice nursing as a L.V.N. Once admitted into the Nursing Program, generic students take nursing courses for two years or four 16 week semesters. Transition students take Transition to Nursing Practice (RNSG 2207) in the summer and complete the remaining nursing courses in three semesters. Generic and transition students receive clinical education in various hospitals, community, and health care agencies.

### **Day Option:**

The Day Option allows generic students the opportunity to take classes and receive clinical education during weekday daytime hours. Odessa College admits students into the Day Option track each fall and spring semester.

### **Evening Option:**

The Evening Option is designed for generic students to attend nursing classes during weekday evening hours. Clinical education typically occurs on Saturdays, though rotations in community agencies may be scheduled weekdays. Clinical responsibilities occur may occur weekday evenings. A new class for the Evening Option begins in the fall semester of even numbered years. The group of students completes the two year curriculum before another class is admitted.

### **Transition Option for the LVN:**

The transition student receives advanced placement credit for Introduction to Nursing (RNSG 1309), Nursing Skills I (RNSG 1105), Common Concepts of Adult Health (RNSG 1341) and Health Assessment (RNSG 1215). Pharmacology (RNSG 1201) and Dosage Calculations (RNSG 1108) must be taken or the candidate may opt to receive advanced placement credit by examination. Transition students begin by taking Transition to Nursing Practice (RNSG 2307) in the summer to prepare for the new role as an R.N. In the fall, the Transition student takes Complex Concepts of Adult Health (RNSG 1443) and Clinical – Transition (RNSG 2360) and other required courses. The second year of the curriculum is the same as that for the generic student.

Reviewed: 9/04; Revised 7/07

## **PROGRAM ADMISSION**

### **Nursing Student Recruitment**

Recruitment for the Nursing Program occurs in Odessa and the college's service areas. Teams from Student Services plan and participate in numerous recruitment activities every month. Events include health fairs, visiting high school and junior high campuses, hosting youth on the OC campus, and career days. Nursing faculty participates in on-campus career days and speaks to student groups visiting the campus. Faculty has an open invitation to join the recruitment teams. Another valuable resource for recruitment is the Area Health Education Center (AHEC), a federally funded organization located in Midland. AHEC has developed multiple printed resources to recruit for nursing and allied health. In addition, AHEC staff speaks to numerous groups in the Permian Basin.

The Nursing Office participates in recruitment by mailing or emailing program information to interested persons. The nursing department home page functions as a recruitment tool, as well as furnishes information on the program.

The best recruitment strategy for the Odessa College Associate Degree Program is word-of-mouth advertising from satisfied students and graduates.

### **Admission**

In order to be admitted into the associate degree nursing program, the student must:

1. Be a high school graduate or earned a GED.
2. Have a minimum cumulative GPA of 2.5. All transcripts must be on file in the nursing office.
3. When a student has course work from colleges outside of OC the overall GPAs will be averaged together.
4. Have achieved satisfactory scores on the NET pre-nursing assessment test. The composite reading score on the NET must be at least 60%. If a score of 60% is not earned, the student should see the Nursing Department for information regarding alternate testing.
5. Complete the requirements for the college's Success Initiative Plan, which usually includes passing scores on the COMPASS or THEA exam unless an exemption has been earned.
6. Be currently certified as a nurse aide. CNA training is offered through the Odessa College Continuing Education Division. Documentation must be provided to the nursing office prior to the application deadline (not applicable for the LVN).
7. Immunizations are required. A complete record must be on file in the nursing office prior to the application deadline.
8. Be currently trained in cardiopulmonary resuscitation, professional rescuer module. CPR must remain current during the two year program and documentation must be in the student's file. Provide documentation to the Nursing Office prior to the application deadline.
9. All course work for the degree must be passed with a grade of 'C' or better.

10. The courses required as prerequisites for program admission are the following:

- BIOL 2401 Anatomy and Physiology I
- BIOL 2402 Anatomy and Physiology II
- PSYC 2301 Introduction to Psychology
- HPRS 1106 Essentials of Medical Terminology
- RNSG 1108 Dosage Calculations

The number of students admitted each semester depends upon faculty availability and clinical resources. Students who have met all the admission criteria are ranked according to the earned points from the calculated GPA of the prerequisite courses and the NET composite reading score.

- For each point above 60 earned on the NET reading composite score, the applicant earns one admission point.
- For each one-tenth of a point above 2.0 on the GPA for prerequisite courses, the applicant earns one admission point.
- For those applicants who do not achieve the minimum score on the NET, the Nelson Denny reading test is used to determine reading grade level. Starting at grade level 12.9, one admission point is earned for every one-half grade level above the minimum. Example: 12.9 = 1 point, 13.0 = 2 points, 13.5 = 3 points, etc.
- Applicants are rank ordered by admission points with the top point earners being accepted into the program until the class is filled.
- In the case of a tie the overall GPA will be used as a tie breaker.

**Other Program Requirements once accepted into the program:**

- Professional liability insurance
- Clearance on the criminal background check
- Clearance on the urine drug screen
- Proof of health and accident insurance
- Professional liability insurance (paid with tuition and fees each semester)

**Transfer of Credit**

Students who have course credits from other accredited colleges or universities must provide the registrar's office and the nursing office with an official transcript. The registrar's office evaluates general education transfer credits. The Program Director and/or the Dean of Nursing and Allied Health will review course credits and decide transferability when the student requests course substitution for those courses required on the degree plan for associate degree nursing.

Students seeking to transfer from another school of nursing must have their transcripts and syllabi reviewed by the Program Director and/or Dean of Nursing and Allied Health. Transfer of nursing courses occurs only when course content is deemed equivalent with that of Odessa College. Revised: 9/04; 7/07

**COURSE OF STUDY FOR ASSOCIATE IN APPLIED SCIENCE DEGREE NURSING –**

**CURRICULUM PLAN DAY OR EVENING OPTION – GENERIC TRACK**

**Semester Hrs**

**Prerequisites**

RNSG 1108	Dosage Calculations for Nursing .....	1
BIOL 2401	Anatomy and Physiology I .....	4
BIOL 2402	Anatomy and Physiology II .....	4
HPRS 1106	Essentials of Medical Terminology .....	1
PSYC 2301	Introduction to Psychology.....	3

**Total Semester Hours .....** 13

First Year

**First Semester**

*RNSG 1201	Pharmacology .....	2
*RNSG 1215	Health Assessment .....	2
RNSG 1105	Nursing Skills I .....	1
RNSG 1309	Introduction to Nursing .....	3
RNSG 1341	Common Concepts of Adult Health.....	3
RNSG 1160	Clinical – Introduction.....	1
RNSG 1260	Clinical – Basic.....	2

**Total Semester Hours .....** 14

\*May be taken prior to program admission with BIOL 2401 as a prerequisite and BIOL 2402 as a corequisite.

**Second Semester**

RNSG 1443	Complex Concepts of Adult Health.....	4
RNSG 1361	Clinical – Complex .....	3
RNSG 2213	Mental Health Nursing .....	2
RNSG 2161	Clinical – Mental Health .....	1
BCIS 1305	Business Computer Applications.....	3
PSYC 2314	Life Span Growth & Development.....	3

**Total Semester Hours .....** 16

Second Year

**Third Semester**

RNSG 2201	Care of Children and Families .....	2
RNSG 1162	Clinical – Pediatrics.....	2
RNSG 2208	Maternal/Newborn Nursing and Women’s Health.....	2
RNSG 1161	Clinical – Obstetrics .....	2
RNSG 1144	Nursing Skills II .....	1
ENGL 1301	Composition and Rhetoric.....	3
SPCH 1321	Business & Professional Speech <b>or</b> SPCH 1315 Public Speaking .....	3
BIOL 2420	Microbiology.....	4

**Total Semester Hours .....** 17

**Fourth Semester**

RNSG 2121	Management of Client Care .....	1
RNSG 2163	Clinical – Management .....	1
RNSG 1146	Legal and Ethical Issues for Nurses.....	1
RNSG 2331	Advanced Concepts of Adult Health .....	3
RNSG 2262	Clinical – Advanced .....	2
PHED 1100	Lifestyle Assessment & Modification.....	1

Humanities/Fine Arts Requirement: At least three hours from art, Bible, mass communication (COMM1316, COMM 1318 or COMM 1319), English (except ENGL 1301, ENGL 1312 or ENGL 2311) history, foreign language (2311 or higher) , music, philosophy or photography..... 3

**Total Semester Hours .....** 12

**Total Hours .....** 72

**COURSE OF STUDY FOR ASSOCIATE IN APPLIED SCIENCE DEGREE**

## NURSING – CURRICULUM PLAN TRANSITION TRACK FOR THE LVN

### Prerequisites

#### **Semester Hrs**

RNSG	1108	Dosage Calculations for Nursing .....	1
BIOL	2401	Anatomy and Physiology I .....	4
BIOL	2402	Anatomy and Physiology II .....	4
HPRS	1106	Essentials of Medical Terminology .....	1
PSYC	2301	Introduction to Psychology.....	3
<b>Total Semester Hours</b> .....			<b>13</b>

### Summer Semester (Starting point for the LVN)

RNSG	2307	Transition to Nursing Practice.....	3
*RNSG	1201	Pharmacology .....	2
<b>Total Semester Hours</b> .....			<b>5</b>

\*May be taken prior to program admission with BIOL 2401 as a prerequisite and BIOL 2402 as a corequisite.

### Fall Semester.

RNSG	1443	Complex Concepts of Adult Health.....	4
RNSG	2360	Clinical – Transition.....	3
RNSG	2213	Mental Health Nursing .....	2
RNSG	2161	Clinical – Mental Health .....	1
PSYC	2314	Life Span Growth and Development.....	3
BIOL	2420	Microbiology.....	4
<b>Total Semester Hours</b> .....			<b>17</b>

### Spring Semester

RNSG	2201	Care of Children and Families .....	2
RNSG	1162	Clinical-Pediatrics.....	1
RNSG	2208	Maternal/Newborn Nursing and Women's Health.....	2
RNSG	1161	Clinical-Obstetrics.....	1
RNSG	1144	Nursing Skills .....	1
ENGL	1301	Composition and Rhetoric.....	3
BCIS	1305	Business Computer Applications .....	3
SPCH	1321	Business & Professional Speech OR	
SPCH	1315	Public Speaking .....	3
<b>Total Semester Hours</b> .....			<b>16</b>

### Fall Semester

RNSG	2121	Management of Client Care .....	1
RNSG	2163	Clinical-Management .....	1
RNSG	1146	Legal and Ethical Issues for Nurses .....	1
RNSG	2331	Advanced Concepts of Adult Health .....	3
RNSG	2262	Clinical-Advanced .....	2
PHED	1100	Lifestyle Assessment & Modification.....	1
Humanities/Fine Arts Requirement: At least three hours from art, Bible, mass communication (COMM1316, COMM 1318 or COMM 1319), English (except ENGL 1301, ENGL 1312 or ENGL 2311) history, foreign language (2311 or higher) , music, philosophy or photography .....			3
<b>Total Semester Hours</b> .....			<b>13</b>

**Total Hours** ..... **63**

Approved by OC Curriculum Committee 3/07

## NURSING COURSES COURSE DESCRIPTIONS

**Non-nursing courses may be taken earlier than the semester in which listed as corequisite.**

### RNSG 1105 Nursing Skills I (0-3) 1 hour

Study of the concepts and principles essential for demonstrating competence in the performance of nursing procedures. Topics include knowledge, judgment, skills, and professional values within a legal/ethical framework. Lab fee required. (SCANS 1, 2, 3, 4, 5, 8, 9, 10, 11) Prerequisite: Program admission or consent of department. Corequisites: RNSG 1201, RNSG 1215, RNSG 1309, RNSG 1341, RNSG 1160 and RNSG 1260.

### RNSG 1108 Dosage Calculations for Nursing (1-0) 1 hour

Dosage calculations include reading, interpreting and solving calculation problems encountered in the preparation of medications; and conversion of measurements within the apothecary, avoirdupois, and metric systems. (SCANS 3, 9 ) Prerequisite: None. Corequisite: None.

### RNSG 1144 Nursing Skills II (0-3) 1 hour

Study of concepts and principles necessary to perform intermediate or advanced nursing skills; and demonstrate competence in the performance of nursing procedures and clinical decision making. Topics include knowledge, judgment, skills and professional values within a legal/ethical framework. Lab fee required. (SCANS 4, 5, 6, 8, 9,10,11) Prerequisites: RNSG 1443, RNSG 1361 or RNSG 2360, RNSG 2213, and RNSG 2160, or consent of the department. Corequisites: RNSG 2201 or RNSG 2208, RNSG 2161 or RNSG 2162.

### RNSG 1146 Legal and Ethical Issues for Nurses (1-0) 1 hour

Study of laws and regulations related to the provision of safe and effective professional nursing care; attention given to the development of a framework for addressing ethical issues; and topics include confidentiality, the Nursing Practice Act, professional boundaries, ethics, and health legislation. (SCANS 5, 7, 9, 10) Prerequisite: None. Corequisite: None

### RNSG 1160 Clinical – Introduction (0-3) 1 hour

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. (SCANS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) Eight week course. Prerequisites: Program admission or consent of the department. Corequisites: RNSG 1105, RNSG 1201, RNSG 1215, and RNSG 1309.

#### RNSG 1161 Clinical – Obstetrics (0-4) 1 hour

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. (SCANS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) Eight week course. Prerequisites: Consent of the department. Corequisites: Nursing courses determined by department and degree plan. SPCH 1321 or SPCH 1315 and BIOL 2420 for the generic student. ENGL 1301, SPCH 1321 or SPCH 1315, and COSC 1301 BCIS 1305 for the transition student.

#### RNSG 1162 Clinical – Pediatrics (0-4) 1 hour

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. (SCANS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) Eight week course. Prerequisites: Consent of the department. Corequisites: Nursing courses determined by department and degree plan. SPCH 1321 or SPCH 1315 and BIOL 2420 for the generic student. ENGL 1301, SPCH 1321 or SPCH 1315, and COSC 1301 BCIS 1305 for the transition student.

#### RNSG 1201 Pharmacology (2-0) 2 hours

Introduction to the science of pharmacology with emphasis on the actions, interactions, adverse effects, and nursing implications of each drug classification. Topics include the roles and responsibilities of the nurse in safe administration of medications within a legal/ethical framework. (SCANS 1, 2, 3, 4, 6, 9) Prerequisites: BIOL 2401 or consent of department. Corequisite: BIOL 2402 or program admission with RNSG 1105, RNSG 1215, RNSG 1309, RNSG 1341, RNSG 1160 and RNSG 1260.

#### RNSG 1215 Health Assessment (1-3) 2 hours

Development of skills and techniques required for a comprehensive health assessment within a legal/ethical framework. Lab fee required. (SCANS 1, 2, 5, 6, 9, 10, 11) Prerequisites: BIOL 2401 or consent of department. Corequisite: BIOL 2402 or program admission with RNSG 1105, RNSG 1201, RNSG 1309, RNSG 1341, RNSG 1160 and RNSG 1260.

#### RNSG 1260 Clinical – Basic (0-6) 2 hours

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. (SCANS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) Eight week course. Prerequisites: RNSG 1309, RNSG 1160 or consent of the department. Corequisites: RNSG 1105, RNSG 1201, RNSG 1215, and RNSG 1341.

#### RNSG 1309 Introduction to Nursing (3-0) 3 hours

Overview of nursing and the role of the professional nurse as a provider of care, coordinator of care, and member of a profession. Topics include knowledge, judgment, skills, and professional values within a legal/ethical framework. (SCANS 1, 2, 3, 4, 5, 6, 9, 10, 11) Eight week course. Prerequisite: Program admission or consent of department. Corequisites: RNSG 1105, RNSG 1201, RNSG 1215, and RNSG 1160.

RNSG 1341 Common Concepts of Adult Health (3-0) 3 hours

Study of general principles of caring for selected adult clients and families in structured settings with common medical-surgical health needs related to each body system. Emphasis on knowledge, judgment, skills, and professional values within a legal/ethical framework. (SCANS 1, 2, 3, 4, 5, 6, 9, 10, 11) Eight week course. Prerequisites: RNSG 1309 and RNSG 1160, or consent of department. Corequisites: RNSG 1105, RNSG 1201, RNSG 1215, RNSG 1260.

RNSG 1361 Clinical – Complex (0-9) 3 hours

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. (SCANS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) Prerequisites: RNSG 1105, RNSG 1201, RNSG 1215, RNSG 1309, RNSG 1341, RNSG 1160, and RNSG 1260 or consent of the department. Corequisites: RNSG 1443, RNSG 2213, RNSG 2160, ENGL 1301, BCIS 1305, and PSYC 2314.

RNSG 1443 Complex Concepts of Adult Health (3-3) 4 hours

Integration of previous knowledge and skills related to common adult health needs into the continued development of the professional nurse as a provider of care, coordinator of care, and member of a profession in the care of adult clients/families in structured health care settings with complex medical-surgical health care needs associated with each body system. Emphasis on knowledge, judgment, skills, and professional values within a legal/ethical framework. Lab fee required. (SCANS 1, 2, 3, 4, 5, 6, 9, 10, 11). Prerequisites: RNSG 1105, RNSG 1201, RNSG 1215, RNSG 1309 or RNSG 2307, RNSG 1341, RNSG 1360, RNSG 1160, and RNSG 1260 or consent of the department. Corequisites: RNSG 1361, RNSG 2213, RNSG 2160, ENGL 1301, BCIS 1305, and PSYC 2314 for the generic student. RNSG 2162 or 2360, RNSG 2213, RNSG 2160, RNSG 2207 (fall 2007 only), PSYC 2314, and BIOL 2420 for the transition student effective fall 2008.

RNSG 2121 Management of Client Care (1-0) 1 hour

Exploration of leadership and management principles applicable to the role of the nurse as a provider of care, coordinator of care, and member of a profession. Includes application of knowledge, judgment, skills, and professional values within a legal/ethical framework. (SCANS 1, 2, 4, 5, 6, 7, 9, 10, 11) Eight week course. Prerequisites: RNSG 2201, RNSG 2208, RNSG 2260 or RNSG 1161, RNSG 2261 or RNSG 1162, or consent of department. Corequisites: RNSG 2163, PHED 1100, and the humanities/fine arts requirement.

RNSG 2161 Clinical – Mental Health (0-3) 1 hour

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. (SCANS 1, 2, 4, 5, 6, 9, 10, 11) Eight week course. Prerequisites: Consent of the department. Corequisite: RNSG 2213.

RNSG 2360 Clinical – Transition (0-9) 3 hours

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. (SCANS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) Prerequisites: RNSG 2307 and RNSG 1201 or consent of the department. Corequisites: RNSG 1443, RNSG 2213, RNSG 2160, PSYC 2314, and BIOL 2420.

RNSG 2163 Clinical – Management (0-3) 1 hour; Effective fall 2008: (0-4) 1 hour

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. (SCANS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) Eight week course. Prerequisites: RNSG 2201, RNSG 2208, RNSG 2260 or 1161, RNSG 2261 or RNSG 1162. Corequisites: RNSG 2121, PHED 1100, and the humanities/ fine arts requirement.

RNSG 2201 Care of Children and Families (1-3) 2 hours

Study of concepts related to the provision of nursing care for children and their families, emphasizing judgment and professional values within a legal/ethical framework. (SCANS 1, 2, 3, 4, 5, 6, 9, 10, 11) Eight week course. Prerequisites: Consent of the department. Corequisites: Nursing courses determined by department and degree plan. SPCH 1321 or SPCH 1315 and BIOL 2420 for the generic student. ENGL 1301, SPCH 1321 or SPCH 1315, and BCIS 1305 for the transition student.

RNSG 2208 Maternal/Newborn Nursing and Women's Health (1-3) 2 hours

Study of concepts related to the provision of nursing care for normal childbearing families and those at risk, as well as women's health issues; competency in knowledge, judgment, skills, and professional values within a legal/ethical framework, including a focus on normal and high-risk needs for the childbearing family during preconception, prenatal, intrapartum, neonatal, and postpartum periods; and consideration of selected issues of women's health. Lab fee required. . (SCANS 1, 2, 3, 4, 5, 6, 9, 10, 11) Eight week course. Prerequisites: Consent of the department. Corequisites: Nursing courses determined by department and degree plan. SPCH 1321 or SPCH 1315 and BIOL 2420 for the generic student. ENGL 1301, SPCH 1321 or SPCH 1315, and BCIS 1305 for the transition student.

RNSG 2213 Mental Health Nursing (2-0) 2 hours

Principles and concepts of mental health, psychopathology, and treatment modalities related to the nursing care of clients and their families. (SCANS 1, 2, 4, 5, 6, 9, 10, 11) Prerequisites: Consent of department. Corequisites: RNSG 2161.

RNSG 2262 Clinical – Advanced (0-8) 2 hours

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. (SCANS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) Prerequisites: RNSG 2201, RNSG 2208, RNSG 2260 or RNSG 1161, RNSG 2261 or RNSG 1162 or consent of department. Corequisites: RNSG 2331, PHED 1100, and the humanities/fine arts requirement.

RNSG 2307 Transition to Nursing Practice (2-3) 3 hours

Introduction to selected concepts related to the role of the professional nurse as a provider of care, coordinator of care, and member of a profession. Review of trends and issues impacting nursing and health care today and in the future. Topics include knowledge, judgment, skill, and professional values within a legal/ethical framework. Lab fee required. (SCANS 1, 2, 3, 4, 5, 6, 8, 9, 10, 11) Prerequisites: Admission to the program or consent of the department. Corequisite: RNSG 1201.

RNSG 2331 Advanced Concepts of Adult Health (2-3) 3 hours

Application of advanced concepts and skills for the development of the professional nurse's roles in complex nursing situations with adult clients/families with complex health needs involving multiple body systems in intermediate and critical care settings. Emphasis on knowledge, skills, and professional values within a legal/ethical framework. Lab fee required. (SCANS 1, 3, 4, 5, 6, 8, 9, 10, 11) Prerequisites: RNSG 2201, RNSG 2208, RNSG 2260 or RNSG 1161, RNSG 2261 or RNSG 1162 or consent of department. Corequisites: RNSG 2262, PHED 1100, and the humanities/fine arts requirement.

Ratio of Classroom to Clinical/ Lab Hours  
Curriculum Changes Fully Implemented Fall 2008

Course Title	Credit	Avg. Class Hrs/wk	Total Class Clock Hours	Total Lab Clock Hours	Total Contact Hours Lec/Lab	Avg. Clinical Hrs/wk	Total Clinical Contact Hours
RNSG 1108 Dosage Calculations for Nursing	1	1/16	16	-	16	-	-
RNSG 1105 Nursing Skills I	1	-	-	48/16 wk	48	-	-
RNSG 1309 Introduction to Nursing	3	6/8 wk	48	-	48	-	-
RNSG 1201 Pharmacology	2	2/16 wk	32	-	32	-	-
RNSG 1215 Health Assessment	2	1/16 wk	16	48	64	-	-
RNSG 1341 Common Concepts of Adult Health	3	6/8 wk	48	-	48	-	-
RNSG 1160 Clinical - Introduction	1	-	-	-	-	6/8 wk (1:3)	48
RNSG 1260 Clinical - Basic	2	-	-	-	-	12/8 wk (1:3)	96
RNSG 1443 Complex Concepts of Adult Health	4	3/16 wk	48	48	96	-	-
RNSG 1361 Clinical - Complex	3	-	-	-	-	9/16 wk (1:3)	144
RNSG 2213 Mental Health Nursing	2	2/16	32	-	32	-	-
RNSG 2161 Clinical - Mental Health	1	-	-	-	-	3/16 wk (1:3)	48
RNSG 2208 Maternal/Newborn Nursing and Women's Health	2	2/8 wk	16	48	64	-	-
RNSG 1161 Clinical - Obstetrics	1	-	-	-	-	8/8 wk (1:4)	64
RNSG 2201 Care of Children and Families	2	2/8 wk	16	48	64	-	-
RNSG 1162 Clinical - Pediatrics	1	-	-	-	-	8/8 wk (1:4)	64
RNSG 1144 Nursing Skills II	1	-	-	48/16	48	-	-
RNSG 2121 Management of Client Care	1	2/8 wk	16	-	16	-	-
RNSG 2163 Clinical - Management	1	-	-	-	-	8/8 wk	64
RNSG 1146 Legal and Ethical Issues for Nurses	1	1/16 wk	16	-	16	-	-
RNSG 2331 Advanced Concepts of Adult Health	3	2/16 wk	32	48	80	-	-
RNSG 2262 Clinical - Advanced	2	-	-	-	-	8/16 wk	128
TOTALS	40	-	336	336	-	-	656

Total clock hours = 1328 Total lab and clinical clock hours = 992 Total class clock hours = 336  
Classroom to clinical ratio is 992 divided by 336 =1:2.9

## II. General Information

## **ADVISEMENT AND REGISTRATION**

The Associate Degree Nursing Program is a competitive admission program of study. All nursing classes with the exception of RNSG 1108 Dosage Calculations for Nursing, RNSG 1215 Health Assessment, and RNSG 1201 Pharmacology have controlled registration. The Nursing Department controls the registration and reserves places in each class for all nursing students throughout the program. Only registered students are allowed to attend nursing classes, including clinical classes. Students desiring to audit a class will be held to the college requirement for registration and fees. Clinical courses cannot be audited.

Third and fourth semesters have special requirements for registration. Students take eight week courses and the number of students in each course must be carefully monitored. The nursing office will typically assign students to the appropriate course rotation, seeking individual preferences when possible. To avoid unnecessary hardship, students may request to be placed together when commuting from out-of-town. To the extent possible, study groups will be considered when making decisions for course placement.

It is the student's responsibility to acquire a semester schedule and register each semester using the standard OC registration process. Nursing students can register on-line or in person at the registrar's office at the designated times/dates listed in the semester schedule or classes. The staff in the *.EDU Room*, located by the counseling office, is available for assistance. Nursing Office staff is available should issues or problems occur.

Nursing faculty serve as advisors for students in the nursing program. If degree plan issues arise, contact the faculty member of the course in which you are currently registered or the Program Director.

Approved: 9/04; 7/07

## FINANCIAL AID

Odessa College is firmly committed to the philosophy of assisting students who do not have the financial resources to pay for higher education to attend college. Of equal importance is the awarding of academic scholarships to recognize students who exhibit superior scholastic abilities. The Student Financial Services Office administers four broad program areas: grants, employment, scholarships and loans. A Free Application for Federal Student Aid (FAFSA) and an institutional application are required for all need-based financial aid programs. Both the institutional application and the FAFSA are available from OC Student Financial Services or the OC Web site at [www.odessa.edu](http://www.odessa.edu). When requesting information about financial aid programs, students should ask for an application packet and the Financial Aid Bulletin. The bulletin provides detailed information about aid programs, including general eligibility requirements and satisfactory academic progress.

The scholarship application is separate from the FAFSA. Students accepted into the Nursing Program are eligible to apply for selected scholarships specifically for nursing majors. A list of scholarships, amounts of each, number awarded each year and requirements are available from OC Student Financial Services. For eligibility requirements and other information for the Odessa College Foundation, which administers *Dollars for Scholars*, contact the Office of Institutional Advancement.

Students seeking government loans are informed by the financial aid office about all rights and responsibilities concerning the loan. The office closely monitors all loan recipients while they are students at OC.

Nursing students should be advised that the state's *Rules and Regulations relating to Nurse Education, Licensure and Practice* in the section for Unprofessional Conduct ('217.12; item 26) states that failing to repay a guaranteed student loan, as provided in Section 57.491 of the Texas Education Code, qualifies as unprofessional and dishonorable behavior of the RN. The Nursing Practice Act stipulates that unprofessional conduct leads to disciplinary action, up to and including removal of the nurse's license.

If financial problems occur which potentially jeopardizes continuing in the Nursing Program, please seek guidance from a college counselor or the Program Director.

Approved: 9/04; 7/07

## **PROGRAM EXPENSES**

All costs are the responsibility of the student. The *approximate* cost of the nursing program is \$6000 for in-district students. This includes items such as tuition and fees for the nursing and non-nursing (general education) courses, certified nurse aid and CPR training, books for nursing courses, supplies, student uniforms and accessories, fees associated with testing and licensing, parking, and liability insurance. Note that books and supplies are **REQUIRED**. Many books are purchased for the first semester and are utilized during the entire program.

Health and accident insurance is required. If the student needs to purchase the health and accident insurance policy provided to college students, the cost is approximately \$330 per year.

Students are required to have current immunizations, tuberculosis skin testing, and a urine drug screen. These costs vary depending on the needs of the individual. The physical for nursing school is provided free by the Texas Tech University Family Medicine Clinic.

Students are required to have current training in CPR. Course fees vary. Students may not take an on-line CPR course. Students are required to take a CPR course that requires them to attend class and demonstrate proficiency in CPR on a manikin.

Transportation related expenses are the responsibility of the student. Multiple clinical sites in the Permian Basin are utilized. Odessa College may not be held responsible for any accident, vehicular or otherwise, that occurs associated with student assignments.

Revised: 9/04

## **AVAILABILITY OF PERSONAL CONTACT INFORMATION**

Students must assist the Nursing Office by keeping the most current address and phone number(s) on file. A routine update of pertinent student information will be made at the beginning of each fall and spring semester. Inform the Nursing Office regarding name changes. Personal contact information will be kept confidential upon the student's request.

Revised: 9/04

## EMERGENCY TELEPHONE CALLS

The telephone in the Nursing Office is not for student use except in an emergency.

Each student should give family a copy of his/her clinical and class schedule. If an emergency occurs requiring immediate notification of the student, all efforts will be made to contact the student in a timely manner. If the Day Option student is in class, family members can contact the Nursing Office. The Nursing Office is not routinely open when Evening Option students are on campus. Family can call the instructor's office and leave voice mail if no other means of contact is available. (Concern with this system of notification is that the information may not be conveyed to the student in a timely manner since the instructor is in class.)

If the student is in clinical, the most expedient method to contact the student will be for family to contact the unit or area where the student is assigned. This should occur *only* if a true emergency exists. If the instructor has a pager, have family call the instructor. If the family member calls the Nursing Office during day time hours, attempts will be made to reach the instructor and/or student in the clinical setting. The student must promptly notify the instructor in the event of personal emergency and cannot leave the area without proper notification.

Personal calls of a non-emergent nature are not allowed when the student is in the clinical area of any hospital or agency.

Revised: 9/04

## **OUTSIDE EMPLOYMENT**

Students may not serve the dual role of student and hospital/agency employee during the time the student is participating in a clinical laboratory experience. Odessa College takes no responsibility for students who are employed while enrolled in the Nursing Program. The required student liability insurance purchased with payment of tuition and fees is valid in the student role and not the role of employee. When engaged in employment activities, the student will not wear any Odessa College identification.

Revised: 9/04

## **STUDENT-INSTRUCTOR COMMUNICATION**

Instructors have faculty mail boxes in the Nursing Office. All instructors have scheduled office hours which are posted outside their office doors. Students are encouraged to contact their instructors if they wish to discuss their progress, a problem, or need other help related to their role as a student nurse. Contact the Program Director if further assistance is needed.

Policies and procedures are communicated to students by means of the Student Handbook, course syllabi and learning materials packets. The handbook is revised as needed to provide current and accurate information to students in the Nursing Program.

Changes in policies and procedures will be announced to each class by the Program Director or faculty and copies of the revised policy will be distributed as handouts or on the departmental home page at the OC Web site. Instructors and/or the Program Director will answer student questions regarding stated changes.

Revised: 9/04; 7/07

## **ABSENCE AND TARDY POLICY**

Students are expected to attend all scheduled theory, laboratory, and clinical classes. Because of the large volume of material covered each day, and because clinical laboratory experiences validate learning objectives, it is extremely important that absences and tardies be kept at a minimum. Good attendance helps ensure success in nursing school. Attendance and punctuality are also considered important professional responsibilities.

Tardiness is disruptive to the learning of others and is not acceptable for professional nurses. Repeated tardiness will be addressed by the instructor and may impact the student's standing in the program.

In the event of illness or family crisis, the instructor should be notified as soon as possible. Students should refer to the individual instructor's course packet for instructions regarding reporting of absences. Upon return to school, the student must see the instructor whose class or clinical was missed to discuss the event and make plans for make up of time lost. The instructor whose class/laboratory (on-site or external) was missed is responsible for reporting the absence in the attendance record.

**Absence from Clinical:** If the absence is clinical, the clinical instructor and/or clinical site must be notified according to the specific instructions given at the beginning of the clinical rotation. The student may expect to find these instructions in the course packet for the clinical course.

Clinical absences will be made up to meet course objectives. The type of make-up assignment will be determined at the discretion of the instructor whose clinical was missed. Initial plans for make up work must be made with the instructor within one week after the absence and is the responsibility of the student. Make up must be completed prior to final examinations or the student will receive a grade of incomplete (I) and will most likely not be allowed to progress to the next course until the incomplete is resolved. Contact the Program Director for guidance. Make up assignments will not remove the absence from the student's attendance record.

**Absence from Theory or On-Site Lab:** If the absence is in a theory class or lab, the lecturing instructor should be notified as soon as reasonably possible. If the instructor cannot be reached, a message may be left on the instructor's voice mail or in the Nursing Office. Follow the guidelines set by each instructor.

Classroom/on-site laboratory attendance policy for nursing students will follow the same guidelines as listed in the college catalog. This policy states that any student who misses as much as 20 percent of scheduled class time in any semester should review his or her standing in the class with the instructor and determine whether to continue in class or withdraw. Note that since nursing students may be enrolled in more than one nursing course in a given semester, the faculty interprets the college policy as 20 percent of scheduled class time in any nursing course in any semester. The ability to meet course objectives may be seriously jeopardized for students missing 2-3 days of classroom/laboratory instruction in any course.

If a student decides to withdraw from a class, he or she must comply with the deadlines published in the college's calendar. Withdrawal from the course will be the responsibility of the student. The student should talk to the Program Director regarding readmission to the Nursing Program.

Revised: 5/02; 9/04; 7/07

## PROFESSIONAL ATTIRE

Projecting a professional image is a responsibility of all nursing students. Appearance reflects not only on the individual but also upon the Odessa College Nursing Program. The student dress code applies to students enrolled in all program tracks. Instructors enforce the dress code and will explain any exceptions to the dress code appropriate to the clinical requirements of the specific course.

### CLINICAL

#### General appearance guidelines:

1. Hair must be worn off the collar.
2. Nails are to be clean and short with rounded edges.
3. Only clear, unchipped/uncracked nail polish may be worn. No acrylic nails may be worn.
4. Personal hygiene must be maintained. Effective deodorant must be worn. Offensive breath must be avoided. No cologne or perfume will be worn.
5. Wedding and engagement rings or one small plain ring is permitted EXCEPT in specialty areas of the hospital (see procedure for individual hospital).
6. One small, plain stud earring may be worn in each ear. No other visible body piercing or tattoos are allowed.
7. Religious medals or medallions around the neck may be worn on a long chain and concealed under the uniform dress or jacket. NO OTHER necklaces are permitted.
8. Makeup must be light and in good taste.
9. The Odessa College name pin must be worn on the left side of the uniform or lab coat. It must be visible at all times. Name pins are purchased by the student as part of course fees and ordered by the Nursing Department. The student is responsible for any name tag replacements, including picking up and paying for the name tag at the local provider. Clinical agencies may require photo identification badges, and if so, the student will follow all instructions regarding their provision and use.
10. Beards must be short and neatly trimmed.
11. Gum chewing IS NOT PERMITTED while in the clinical area.
12. Student identification (name tag; badges) should be removed outside the clinical setting. When feasible, students should not wear the school uniform in public settings.

#### Uniform Requirements:

1. The uniform consists of royal blue scrubs. The style has been selected by a committee of faculty and students, therefore, an unapproved version of the uniform *may not* be worn. A royal blue short jacket may be purchased and worn over the scrub top. A white or royal blue mock turtleneck or crew necked undergarment with short sleeves may be worn under the scrub top. The scrub top must be buttoned. The following uniform selections are available at local uniform shops or from various catalogs or online sources:  
Brand: **LANDAU**

Women's Tops:

8219 XS – 3XL

8268-BEP- 4X – 5X

8232 – BEP – for pregnant students

Women's Pants

8320-BEP – XS – 5X

Men's Top

7502-BEP

Men's Pants

8555-BEP

The unisex royal blue jacket is **CHEROKEE** brand and the number is 1346.

2. A white lab coat is required. It must be at least finger-tip length when the arm is extended to the thigh. When in full uniform, the lab coat is optional.
3. An Odessa College patch is to be worn on the left sleeve approximately 4" below the shoulder seam on *all* outer garments (scrub top, scrub jacket and lab coat). Patches may be purchased either at the Odessa College Bookstore or at local uniform shops.
4. Footwear may be white nursing shoes or white sport shoes without bold colors or large noticeable emblems. Crocs or crock-like shoes without holes except for side vents may be worn. Color choices are navy blue, black, or royal blue. Socks must be plain and solid in color and may be either royal blue or white.
5. Uniforms must be clean and pressed.
6. The instructor may send a student home if attire is inappropriate.
7. The above attire must be purchased prior to beginning clinical rotations.
8. Instructors will explain clinical attire requirements within a specific course when these differ from the above requirements. (Examples: proper attire in community agencies, specialty areas in hospitals, hospital attire when not performing patient care, etc.)

## **CLASSROOM/LAB**

Attire on campus should be appropriate for the setting. Classrooms may be cool so layering of clothing is helpful to maintain comfort.

Revised: 9/04; 4/07

## INSURANCE

Professional liability insurance is required each semester. The cost of the insurance is included in the tuition and fees of each clinical course.

Clinical agency contracts require that students have personal health and accident insurance while enrolled in nursing and other health career programs. *Any policy is satisfactory but the student will be required to verify proof of the policy every semester while enrolled in the nursing program.* If needed, a student health insurance policy is available for purchase. Ask for an information packet in the Nursing Office or Student Services.

Revised: 9/04

## **CARDIOPULMONARY RESUSCITATION (CPR) TRAINING**

Prior to the beginning of the nursing program, and then throughout the program, students are required to show proof of a valid American Heart Association or American Red Cross CPR card. Training must be for healthcare providers. CPR classes are offered throughout the year and at various locations in Odessa and surrounding communities. Online recertification courses *will not* be accepted. Provide a copy of the CPR card to the Nursing Office.

Reviewed: 6/03; 9/04; 01/07

## GUIDELINES FOR USE OF NURSING LABORATORY

1. Consideration of others is expected.
2. Supplies and materials are to be taken from the supply room by instructors ONLY.
3. Laundry is to be discarded in the laundry barrel. NEVER discard needles or trash in the laundry barrel. Use approved needle disposal units to discard needles and other sharp objects.
4. Children are not allowed to play in this area.
5. Keep off beds unless their use is part of practice in the lab. Before a student lies in the bed to serve as a patient, please take your shoes off. Straighten the bed after use.
6. Leave the lab **neat, clean, and orderly**.
7. Use proper shut down procedure before turning off computers.
8. The Skills Lab Instructor will post "Open Lab" times in a conspicuous place near the lab. Lab instructor also works with students or evaluates skill performance by appointment.
9. Nursing students must make time to view media prior to attending the scheduled skills lab if requested by the course instructor.
10. Scheduled labs are used for guided learning and check off of skills.
11. Students who are absent during a scheduled lab must arrange with the course instructor to make up that lab. Attendance is encouraged at all labs to prevent complications surrounding make-up.
12. Students who demonstrate deficiencies in the clinical setting may be sent back to the skills lab by the instructor for review and rechecks by the Nursing Skills Lab Instructor.

Revised: 9/04

## **EXAM REVIEW**

OC nursing faculty provide students the opportunity and encourage students to review exam questions after each exam. The method and procedure for exam review is determined by the individual instructor. In addition, a student must make an appointment with their instructor within one week of the exam to review the exam unless prior arrangements are made with the instructor. Faculty are under no obligation to routinely review the final exam with students. If the instructor allows a student to review the final exam, it must be within two days of taking the exam.

If exam questions are challenged, students must submit their challenge in writing. Follow the guidelines in course materials. Final exam questions may not be challenged.

Approved: 9/04

## **STUDENT CONTRACT**

Student contracts are a part of each course's materials. The student is expected to read the course materials and sign the contract. The signing of the contract indicates that the student understands course requirements and course policies such as, but not limited to, grading and attendance. Student contracts are routinely maintained by the instructor of record for one semester.

Revised: 9/04

## **EVALUATION OF FACULTY AND COURSE**

The A.D.N. Program welcomes student feedback. Evaluations are most helpful when they are honest, fair, constructive, and pertinent to the class, clinical experience, or course. Faculty seriously consider student evaluations in making modifications in the course, specific classes, and clinical assignments. Evaluations of class, laboratory, and clinical teaching effectiveness are used by individual faculty in identifying areas of strength and areas for needed improvement. The faculty values student evaluation of teaching effectiveness as a means of improving teaching skills. Students are encouraged to evaluate classroom and clinical instruction using the forms and methods provided. In addition, verbal input is welcome.

Approved: 9/04

## A.D.N. GRIEVANCE POLICY

It is recognized that most academic issues and concerns are resolved on an informal basis. When this is not possible, students may wish to employ a formal means to problem resolution. The Nursing Department's policy reflects the Student Grievance Policy which is found in the OC student handbook.

It is the aim of the nursing faculty to resolve all student problems/concerns at the faculty level if possible. Student's rights to due process will be upheld. If the dispute cannot be solved at the faculty level, the student will need to adhere to the following guidelines. Failure to follow the steps outlined below may lead to a longer resolution time.

**Step One:** The student must meet with the instructor first to discuss the grievance and possible solutions. Grievance issues must be in writing. **EXCEPTION:** If the student believes he/she has exhausted the possibility of resolution with the instructor, the student may advance to Step Two. If satisfaction does not occur between the two parties, either party may take the grievance to the next step. This referral should take no longer than 5 working days after meeting with the instructor.

**Step Two:** The student and faculty member will then meet with the Program Director. (Parties may meet separately or together). If the grievance involves the Director as the instructor, the Dean of Nursing and Allied Health will appoint a nursing faculty member to hear the case and make a ruling in place of the Director. The Director (or designee) will attempt to negotiate an agreeable solution or will make a decision based on facts presented. If this is unacceptable to either the student or the faculty member, he/she may opt to carry the grievance further up the chain of command. At this time the student and/or faculty member will be requested to fill out the *Unresolved Conflict Report Form*. The completion and filing of the *Unresolved Conflict Report Form* at the Dean of Administration, starts the formal due process.

**Step Three:** If the issue is not resolved in step two, the student or faculty member must present their case to the Dean of Nursing and Allied Health. This level of appeal must be made within 5 working days of notification of the Director's decision. The Director (or designee) is responsible to submit all documents to the Dean of Nursing and Allied Health if the complaint is heard on the Dean level. The Dean will make a ruling within 3 working days of the last interview. If not satisfied with the decision made by the Dean, the student or the faculty member has the option of taking the dispute to the Vice President for Instruction. The conflict forms are then sent to the Vice President for Instruction by the Dean. The Vice President for Instruction will meet with both the faculty member and the student to resolve the dispute.

**Step Four:** If the dispute is still unresolved, a written request by either party must be sent to the Dean of Administration within 5 days. The case is then sent to the Appeals Committee and the committee must convene within 3 working days of the request. The decision from the appeals committee must be delivered in writing to both parties within 5 working days after the committee has met.

**Step Five:** If still unresolved, either party may request the case be heard by the President of Odessa College. Documentation including the *Unresolved Conflict Report Form*, *Appeal form 102*, appeals committee report findings, and possible interview with the student and the faculty member. The decision will be in writing and delivered within 5 working days after receipt of all documentation.

**Step Six:** If satisfaction is not met by either the student or the faculty member, the Board of Trustees may hear the case. Documentation should include: *Appeal form 103*, and review of the committee meeting minutes. Interviews with the student and faculty member may or may not occur at this level. Within 5 working days after the review is completed, written notification will be addressed to the student and faculty member regarding outcome.

This is the last step in the formal process of due process.

Approved: 9/04; 7/07

### **III. Conduct and Performance**

## AMERICAN NURSE'S ASSOCIATION'S CODE OF ETHICS

The development of a code of ethics is an essential characteristic of a profession and provides one means whereby professional standards may be established, maintained, and improved. A code indicates a profession's acceptance of the responsibility and trust with which it has been invested. Each practitioner, upon entering the profession, inherits a measure of that responsibility and trust and the corresponding obligation to adhere to standards of ethical practice and conduct set by the profession.

A code of ethics for the American Nurses' Association (ANA) was originally developed and adopted by the membership in 1950. The original code has undergone revisions in the intervening years. In 1959, members of the National Student Nurses' Association (NSNA) voted at their convention to endorse the code of ethics of the American Nurses' Association as applicable also to students enrolled in nursing programs. An official representative for the NSNA participated in the discussions held by the ANA's Committee on Ethical Standards for revisions of the code in 1960, 1968, and 1976.

### Preamble

The Code for Nurses is based upon belief about the nature of individuals, nursing, health, and society. Recipients and providers of nursing services are viewed as individuals and groups who possess basic rights and responsibilities and whose values and circumstances command respect at all times. Nursing encompasses the promotion and restoration of health, the prevention of illness, and the alleviation of suffering. The statements of the code and their interpretations provide guidance for conduct and relationships in carrying out nursing responsibilities consistent with the ethical obligations of the profession and quality in nursing care.

1. The nurse provides services with respect for human dignity and the uniqueness of the client unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
2. The nurse safeguards the client's right to privacy by judiciously protecting information of a confidential nature.
3. The nurse acts to safeguard the client and the public when health care and safety are affected by the incompetent, unethical or illegal practice of any person.
4. The nurse assumes responsibility and accountability for individual nursing judgments and actions.
5. The nurse maintains competence in nursing.
6. The nurse exercises informed judgment and uses individual competence and qualifications as criteria in seeking consultation, accepting responsibilities and delegating nursing activities to others.
7. The nurse participates in activities that contribute to the ongoing development of the profession's body of knowledge.
8. The nurse participates in the profession's efforts to implement and improve standards of nursing.
9. The nurse participates in the profession's efforts to establish and maintain conditions of employment conducive to high quality nursing care.

10. The nurse participates in the profession's effort to protect the public from the misinformation and misrepresentation and to maintain the integrity of nursing.
11. The nurse collaborates with members of the health professions and other citizens in promoting community and national efforts to meet the health needs of the public.

*Reference: American Nurses' Association Code of Ethics*

Reviewed: 9/04

## **STUDENT ACCOUNTABILITY**

The Texas Nursing Practice Act requires its practitioners to be fully accountable for their clinical decisions and actions. Each nursing student is legally accountable to the level of her/his preparation and does not function under the licensure of a nurse. Accountability is the quality or state of being responsible and answerable for one's decisions, actions, and behaviors. Nurses committed to interpersonal caring hold themselves accountable for the well-being of clients entrusted to their care and are accountable to their clients, supervisors, and their colleagues. They are legally and ethically responsible for any failure to act in a safe and prudent manner. The Texas Nursing Practice Act gives nurses and student nurses the right to perform a broad range of dependent and independent functions. Enjoying this privilege means that they also assume legal and ethical responsibility for safe and effective performance at all times. Standards of practice have been developed by professional organizations which serve as guidelines in maintaining quality practice.

For the Odessa College nursing student, accountability means that she/he will be, at all times, willing to learn and practice nursing with commitment and with personal integrity. It means being attentive and responsive to the needs of individual clients and colleagues. As the student acquires nursing knowledge and skills, she/he will assume professional responsibilities and develop competencies which will shape her/his attitude of caring. This attitude of caring and of being accountable develops as the student becomes sensitive to the ethical and legal implications of nursing practice.

In nursing, we all share a common goal of providing the highest quality of care to individuals entrusted to our care. To successfully achieve this goal, the student should be dedicated to the following actions:

- Participating in learning experiences and appropriately sharing these experiences and knowledge with instructors and classmates;
- Upholding the philosophies and policies of the college, the nursing program, the clinical agencies within which the student practices, and the Board of Nurse Examiners for the State of Texas;
- Maintaining the highest ideals, morals, personal integrity, and ethics possible; and
- Making a commitment to being fully accountable, responsible, and answerable for her/his academic and clinical decisions, actions, and behaviors.

In being dedicated and committed to practicing the principles of accountability, the OC nursing student can have the personal and professional satisfaction of knowing that she/he is doing everything possible to promote trustworthiness in both conduct and actions.

Approved: 9/04

## STANDARDS FOR CLASSROOM BEHAVIOR

Students are expected to observe the following guidelines for classroom behavior:

1. Under no circumstances are children to accompany the student to class, the skills laboratory, or scheduled conferences with instructors. If this occurs, the student will be asked to leave. The student must contact the instructor regarding the absence and any required makeup.
2. Children must not be left unattended in any area of the Composite Technology Building.
3. Smoking is not permitted in the buildings at Odessa College. Outdoor smoking areas are designated.
4. Students are expected to be seated by the designated starting time for classes.
5. Cell phones and other communication devices must be turned off or put on the vibrate mode during class. Messages received during class must be returned only during breaks UNLESS an emergency exists.
6. Students must request permission from the individual instructor of each course before using a tape recorder in class.

If an instructor identifies a student who is behaving in an unacceptable manner in the classroom or laboratory environment, the instructor will:

1. Consult with the Level Coordinator, Director, Dean of Nursing and Allied Health or Vice President for Student Services as needed.
2. Meet with the student to discuss the behavior or deficiency.
3. Document the interaction and file in the permanent student record.

Areas that constitute unacceptable behavior include, but are not limited to:

1. Interfering with the learning of others.
2. Excessive tardiness.
3. Intimidation of students or faculty.
4. Inappropriate dress that is distracting to the learning process.
5. Pagers or cell phones disturbing others.
6. Dishonesty.
7. Any other behavior deemed by the instructors as unacceptable for the learning environment

Failure of the student to correct the deficiency and/or meet the stated objectives may result in failure of the course. Continuation of infractions will result in removal from the Nursing Program.

Approved: 9/04; 7/07

## **STANDARDS OF STUDENT CLINICAL CONDUCT**

Students have the right by law (Nursing Practice Act) to practice nursing as it relates to the educational process. Standards of care must be the same as that rendered by a graduate nurse. Every person has a right to expect competent care even if provided by a student as part of clinical training.

Nursing care is measured against the conduct of other reasonably prudent graduate nurses with similar knowledge and experience under the same circumstances.

The instructor will be the ultimate authority to judge student performance. It is mandatory that the instructor have unquestioned authority to take immediate corrective action in the clinical area with regard to student conduct, performance, and patient safety.

A student may be refused access to any clinical facility for infractions of the agency rules and regulations.

Students are expected to observe the following guidelines for behavior in the clinical setting:

1. Students must adhere to agency guidelines and policies. Orientation sessions are **MANDATORY** for all students.
2. Students may not bring children to the clinical agency at any time.
3. Students should be in the clinical agency only when supervised or with the permission of the instructor (e.g. pre-clinical work-up). In these instances, students must adhere strictly to the course guidelines and agency policies regarding allowable activities.
4. Students may not use cell phones in the clinical setting but may be used on break and only in approved areas.
5. Other communication devices must be put on vibrate or turned off.
6. Students are subject to all policies regarding drugs, criminal background checks, and drug screens, including random and for cause drug screens that clinical agencies may require.

Revised: 9/04

## IV. Board of Nurse Examiners Policies

## LICENCING CRITERIA

The Texas Board of Nursing (BON) has been given the authority by law to protect the public from incompetent or unsafe nurses. Part of their mandated responsibility is to screen individuals applying for their R.N. license. *Under certain circumstances it is possible to graduate from a nursing school in the State of Texas and yet not be allowed to take the Registered Nurse licensure exam, NCLEX-RN®.*

In accordance with the laws of the State of Texas, specifically the Texas Nursing Practice Act, notice is given to students who intend to apply for registration as a registered professional nurse that all applicants for licensure are required to answer the questions contained in this document. If the student/applicant must answer yes to any of the questions, or in any way question his or her eligibility to take the licensing exam upon successful graduation from nursing school, the student/applicant **must** petition the BON for a Declaratory Order. Upon receiving the Declaratory Order, the graduate nurse can take the *NCLEX-RN®* and, under most circumstances, will receive a permit to practice as a Graduate Nurse (GN). The student, even though he or she has graduated from nursing school, cannot take the *NCLEX-RN®* or receive a GN permit if a Declaratory Order is needed but not granted.

Be advised that the BON requires fingerprint identification to screen all applicants for licensure. Fingerprints are obtained shortly before the time of expected graduation. Each individual's fingerprints are analyzed by the FBI and *there must be clearance on the background check* by the BON.

*The questions below must be answered honestly.* Do not attempt to falsify information. If one of the following applies to your circumstance (you have to answer yes to any of the following questions), you must submit a Petition for Declaratory Order. Carefully review each item and answer yes or no:

1. For any criminal offense, including those pending appeal, have you:
  - a. Been convicted of a misdemeanor?
  - b. Been convicted of a felony?
  - c. Pled nolo contendere, no contest, or guilty?
  - d. Received deferred adjudication?
  - e. Been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?
  - f. Been sentenced to serve jail or prison time? Court-ordered confinement?
  - g. Been granted pre-trial diversion?
  - h. Been arrested or have any pending criminal charges?
  - i. Been cited or charged with any violation of the law?
  - j. Been subject of a court-martial; Article 15 violation; or received any form of military judgment/punishment/action?

(You may only exclude Class C misdemeanor traffic violations.)

**NOTE: Expunged and Sealed Offenses:** While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office with your application. Failure to reveal an offense, arrest, ticket, or citation that is not in fact expunged or sealed, will at a minimum, subject your license to a disciplinary fine. Nondisclosure of relevant offenses raises questions related to truthfulness and character.

**Note: Orders of Non-Disclosure:** Pursuant to Tex. Gov't Code § 552.142(b), if you have criminal matters that are the subject of an order of non-disclosure you are not required to reveal those criminal matters on this form. However, a criminal matter that is the subject of an order of non-disclosure may become a character and fitness issue. Pursuant to other sections of the Gov't Code chapter 411, the Texas Nursing Board is entitled to access criminal history record information that is the subject of an order of non-disclosure. If the Board discovers a criminal matter that is the subject of an order of non-disclosure, even if you properly did not reveal that matter, the Board may require you to provide information about any conduct that raises issues of character.

2. Are you currently the target or subject of a grand jury or governmental agency investigation?
3. Has **any** licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a professional license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?
4. Within the past five (5) years have you been addicted to and/or treated for the use of alcohol or any other drug? (If you are licensed as an LVN in the State of Texas and are currently participating in the Texas Peer Assistance Program for Nurses you may answer "NO" to questions #4 and #5.)
5. Within the past five (5) years have you been diagnosed with, treated, or hospitalized for schizophrenia and/or psychotic disorder, bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder?

The most common mistake students make is assuming that their offense was a long time ago and doesn't matter. Note that, except for items 4 & 5, there is no time restriction in the questions above.

Students who believe the above information will affect eligibility to take the licensing examination must request information regarding a Declaratory Order by going to the BON WEB site at [www.bon.state.tx.us](http://www.bon.state.tx.us) to the section on Forms. Download the documents for Declaratory

Order and follow the instructions given. *The process to obtain a Declaratory Order will be at least 3 months, possibly longer.* Therefore, if the student believes he or she will require a Declaratory Order the application process should start **immediately**.

*Though not required, students may meet with the Program Director or Dean of Nursing and Allied Health for advisement and assistance in preparing the necessary documentation to obtain a Declaratory Order. The process is strictly confidential and does not in any way jeopardize the prospective student's admission to the ADN Program if otherwise qualified and selected.*

Reviewed: 9/04; 7/07; 6/08

## **DISCIPLINARY SANCTIONS FOR SEXUAL MISCONDUCT**

The Texas Board of Nursing (Board), in keeping with its mission to protect the public health, safety, and welfare, believes it is imperative to take a strong position regarding the licensure of individuals who engage in sexual misconduct towards patients or former patients in the workplace, who have been convicted of or put on probation for sexual misconduct, or whose sexual misconduct outside the workplace may affect the ability to safely care for patients. The Board's position applies to all nurse license holders and applicants for licensure.

The Board adopts the following assumptions as the basis for its position:

1. Patients\* under the care of a nurse are vulnerable by virtue of illness or injury, and the dependent nature of the nurse - patient relationship.
2. Persons who are especially vulnerable include the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized.
3. Nurses are frequently in situations where they provide intimate care to patients or have contact with partially clothed or fully undressed patients. Nurses may also care for these patients without direct supervision.
4. Nurses are in the position to have access to privileged information and opportunity to exploit patient vulnerability.
5. There are appropriate boundaries in the nurse - patient relationship which nurses must clearly understand and be trusted not to cross.
6. Sexual misconduct towards patients or in the workplace raises serious questions regarding the individual's ability to provide safe, competent care to vulnerable patients.
7. Sexual misconduct which occurs outside of the workplace, including conviction of or probation for a crime, may raise questions as to whether that same misconduct will be repeated in the workplace and therefore affects the ability of the nurse to safely provide patient care.
8. A nurse's duty to maintain boundaries extends beyond a patient's discharge from nursing care, especially when it pertains to confidential medical records.

\* The terms "A resident" or "A client" are often substituted for the term "A patient" in health care facilities. For the purposes of this document "A patient" includes all of these terms.

### **Crimes Related to Sexual Misconduct**

The Board may rely solely on the conviction of a crime or probation for a crime, with or without an adjudication of guilt, to limit, deny, suspend, or revoke a license. Sexual misconduct is a crime of moral turpitude. Crimes of sexual misconduct which involve abuse of a minor or a vulnerable person or taking advantage of another person are extremely serious grounds for denial of an initial application for licensure or revocation of the license. The length of time between the conviction and the application for licensure is not a factor due to the high recidivism rate for sex offenders, lack of empirical evidence regarding the success of treatment and the fact that many victims do not report that a sexual offense has been committed against them. Crimes which

disqualify an individual for licensure include Rape, Sodomy, Sexual Abuse, Contributing to the Sexual Delinquency of a Minor and other crimes related to children.

There are other sexual misconduct crimes which do not involve children or taking advantage of another person. There are also crimes which involve conduct between consenting adults. These crimes are considered by the Board to be of a serious nature but not necessarily a disqualification for licensure. Conviction of these crimes will be considered on an individual basis in regards to the circumstances surrounding the crime and may require a forensic psychological evaluation with a sexual predator component - the sex MMPI. This evaluation is to be performed by an approved psychologist or psychiatrist with forensic credentials who has expertise in evaluating sexual offenders. It should be noted that if a nurse is imprisoned following a felony conviction, felony community supervision revocation, revocation of parole, or revocation of mandatory supervision for a crime involving sexual misconduct, the Board shall revoke the nurse's license, regardless of the conduct associated with or the circumstances surrounding the crime. Chapter 53 of the Texas Occupations Code and 22 Texas Administrative Code ' 213.28 governs the consequences of criminal convictions. Section 213.27 of 22 Texas Administrative Code is also applicable to criminal conduct.

### **Sexual Misconduct Toward Patients**

Sexual misconduct toward patients is never acceptable. Conduct such as rape, sex disguised as treatment (unnecessary or prolonged pelvic/breast exams or touching intimate body parts when the touch is not necessary for care) and "sneaky sex" (surreptitious touch, voyeurism, or exposing the patient's body when not necessary) are grounds for limitation, denial, or revocation of licensure. Nurses should never engage in conduct with a patient that is sexual or may reasonably be interpreted as sexual or in any verbal behavior that is seductive or sexually demeaning to a patient, or engaging in sexual exploitation of a patient or former patient. Even if a client initiates the sexual contact, a sexual relationship is still considered sexual misconduct for the nurse. It is always the responsibility of the nurse to establish appropriate boundaries with present and former clients.

Other sexual misconduct such as sexual harassment of a sexual nature, or a romantic-like relationship with a patient are unacceptable but not necessarily a disqualification from licensure. These cases will be considered on an individual basis and may be disciplined at the level of a Reprimand or Warning following a thorough investigation. Some factors to be considered are the length of time between the nurse-client relationship and the personal relationship, the nature of the therapy the client received, the nature of the knowledge the nurse has had access to and how will that affect the future relationship, whether the client or the former client will need therapy in the future, and the risk to the patient. Subsequent conduct of a similar nature indicates a pattern and may require revocation. The Board believes that employers of nurses have a responsibility to discourage this conduct and take measures to ensure that patients are not subjected to this conduct. Consensual sex between a nurse whose relationship or past relationship with the patient is that of a mental health therapist is serious and not acceptable to the Board. The nature of the therapist nurse - patient relationship places the patient or former patient in a vulnerable position

and raises the question of ability for true consensual sex on the part of the patient. This conduct is grounds for limitation, denial, or revocation of licensure.

Consensual sex between a nurse and a former patient often involves exploitation by the nurse of the former patient's vulnerability and may be evidence of violations of appropriate nursing boundaries. Some factors to be considered are the length of time between the nurse-client relationship and the personal relationship, the nature of the therapy the client received, the nature of the knowledge the nurse has had access to and how will that affect the future relationship, whether the client or the former client will need therapy in the future, and the risk to the patient.

#### Recommendations to Guide Nurses

1. Nurses should be aware of any feelings of sexual attraction to a patient and should discuss such feelings with a supervisor or trusted colleague. Under no circumstances should a nurse act on these feelings or reveal/discuss them with the patient.
2. Nurses should transfer the care of a patient to whom they are sexually attracted to another nurse. Recognizing that such feelings in themselves are neither wrong or abnormal, nurses should seek help in understanding and resolving them.
3. Nurses must be alert to signs that a patient may be interested in or encouraging a sexual relationship. All steps must be taken to ensure that the boundaries of the professional relationship are maintained. This could include transferring the care of the patient.
4. Nurses must respect a patient's dignity, independence, and privacy at all times. They should be particularly aware that examinations and treatments involving the sexual or private parts of the body can increase the patient's vulnerability and, therefore, should take steps to prevent or minimize any such trauma.
5. Nurses should provide a professional explanation of the need for each of the various components of examinations, procedures, tests, and aspects of care to be given. This can minimize any misunderstandings a patient might have regarding the nurse's intentions and the care being given.
6. Nurses' communications with patients should be clear, appropriate, and professional.
7. Nurses should never engage in communications with patients that could be interpreted as flirtatious, or which employ sexual innuendo, off-color jokes, or offensive language.
8. Nurses should not discuss their personal problem(s), or any aspects of their intimate lives with patients, and should not interfere with their client's personal relationships.
9. Nurses should avoid dual relationships where the nurse has a personal or business relationship, as well as the professional one.
10. Nurses should always be aware of feelings and behavior, observant of the behavior of other professionals, and always act in the best interest of the patient.

(Adapted from the Washington Board of Nursing, 1994, with additions)

#### **Sexual Misconduct in the Workplace - Not Toward Patients**

The Board's mission is protection of the public. The Board is not charged with protecting nurses and therefore believes that sexual misconduct in the workplace is the responsibility of the

employer. If sexual misconduct in the workplace occurs in view or hearing of a patient or may affect the patient's care or feeling of safety, the Board believes this conduct should be treated the same as similar conduct towards a patient as described above. However, should any conduct lead to a criminal charge, conviction, or deferred judicial action, the Board should be notified.

### **Petition for Reconsideration or Reinstatement of License**

An individual who has been denied licensure or whose license has been revoked has the right to petition the Board for reconsideration of the Board's decision to deny or revoke the license. The burden of proof that the individual no longer poses a risk to the health, safety, and welfare remains with the petitioner. At a minimum, the petitioner must show evidence of successfully completing treatment specific to sexual misconduct and must obtain a current evaluation which addresses risk for re-offense, and includes recommendations on limitations in practice, patient population cared for, work setting and other issues related to the problem which originally brought the individual to the Board's attention. The evaluator must be a health care professional whose credentials and expertise are approved by the Board. The recommended discipline for sexual misconduct may be revocation.

(Portions of this policy adapted from the Oregon Board of Nursing Policy, 1999, with additions, modifications, and/or deletions))

Approved and adopted by the BON on July 26, 2002, modified on April 23, 2004

Reviewed handbook inclusion: 9/04; 6/08

## **DISCIPLINARY SANCTIONS FOR FRAUD, THEFT, AND DECEPTION**

The Texas Board of Nursing (Board), in keeping with its mission to protect the public health, safety, and welfare, believes it is important to take a strong position regarding the licensure of individuals who have stolen or misappropriated property, money, or other possessions from patients, who have engaged in fraudulent behavior towards patients or who have been convicted or received a judicial order involving a crime or criminal behavior of theft or deception to an extent that such conduct may affect the ability to safely care for patients. The Board's position applies to all nurse license holders and applicants for licensure.

The Board adopts the following assumptions as the basis for its position:

1. Patients\* under the care of a nurse are vulnerable by virtue of illness or injury, and the dependent nature of the nurse - patient relationship.
2. Persons who are especially vulnerable include the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized.
3. Patients frequently bring valuables (medications, money, jewelry, items of sentimental value, checkbook, or credit cards) with them to a health care facility.
4. Nurses frequently provide care in private homes and home-like settings where all of the patient's property and valuables are accessible to the nurse.
5. Nurses frequently provide care in settings without direct supervision.
6. Theft from a patient raises serious concerns whether the nurse can be trusted to respect a patient's property/possessions in the future.
7. Theft or deception which occurs outside of the workplace, including conviction or a judicial order involving criminal behavior, may raise concerns as to whether the same misconduct will be repeated in the workplace and, therefore, place patients at risk for theft and deception.

\* The terms "A resident" or "A client" are often substituted for the term "A patient" in health care facilities. For the purposes of this document "A patient" includes all of these terms.

### **Crimes Related to Fraud, Theft, and Deception**

Fraudulent behavior is a crime of moral turpitude. The Board may rely solely on the conviction of a crime or probation for a crime, with or without an adjudication of guilt, to deny, suspend, limit, or revoke a license. Criminal conduct involving fraud, theft, and/or deception may also reflect a lack of good professional character (rule 213.27).

A conviction or a judicial order involving the criminal behaviors of fraud, theft, or deception is a concern to the Board but does not in and of itself disqualify a person from licensure. The Fraud, Theft and Deception magnitude of the behavior is not necessarily a major factor the Board will consider. Factors related to the crime which would concern the Board the most are evidence of premeditation, lack of remorse, and failure to pay restitution. The presence of these factors is evidence to the Board that the likelihood of the same behavior being repeated is great enough

that patients may be at risk for the same conduct. Acts of an impulsive nature where there is insight/remorse regarding the conduct may be mitigating factors for the Board to consider.

The criminal behavior of fraud, theft, or deception will be evaluated on an individual basis considering the foregoing factors. It should be noted that if a nurse is imprisoned following a felony conviction, felony community supervision revocation, revocation of parole, or revocation of mandatory supervision for a crime involving fraud, theft, or deception, the Board shall revoke the nurse's license, regardless of the conduct associated with or the circumstances surrounding the crime.

Chapter 53 of the Texas Occupations Code governs the consequences of criminal convictions and requires revocation of a nurse's license if there is imprisonment as stated above. Section 213.27 of 22 Texas Administrative Code is also applicable to criminal conduct.

Acts of fraud, theft, or deception will preclude a nurse from working in a home health or independent setting during the stipulation period. If circumstances do not warrant removal from that practice setting, supervision in the home health or independent setting will be required. Discipline by the Board will likely require the nurse to pay a civil penalty or fine and restitution as authorized by the Nursing Practice Act and Board rules. The Board will take under consideration any conviction or conduct that falls within the "youthful indiscretion" factors as stated in Board rules (rule 213.28), factors stated in Texas Occupations Code chapter 53 regarding criminal conviction consequences, and other factors in rules 213.27 and 213.28 (Good Professional Character and Licensure of Persons with Criminal Convictions).

### **Theft from a Patient**

Theft from a patient or engaging in fraudulent or deceitful behavior or conduct with or involving a patient is never acceptable. Theft of patient money, property, medicine, valuables, or items of sentimental value is ground for suspension or revocation of licensure. A license may be denied if the applicant engaged in theft while functioning in the role of a care giver. Other fraudulent conduct or deception towards a patient is unacceptable, but not necessarily a disqualification from licensure. These cases will be considered on an individual basis and may be disciplined at a level less than revocation or may be reprimanded or warned and limited from independent settings following a thorough investigation. Factors such as insight, remorse and premeditation will be considered as to whether a disciplinary sanction is imposed. The Board believes that employers of nurses have the responsibility to have safeguards in place to ensure that patients are not subjected to acts of fraud, theft, or deception.

### **Theft from the Workplace**

Theft is an intentional act regardless who is the victim of the theft. The Board's position on theft from an employer is not as strong as its position on theft from a patient. However, if a nurse engages in fraud, theft, or deception toward his/her employer, there is the possibility that the nurse will also engage in the same behavior towards patients. The Board will consider the factors of premeditation, remorse and restitution as well as the steps taken by the employer toward the nurse in deciding whether or not discipline should be imposed.

**Petition for Reinstatement**

A person who has been denied licensure or whose license has been revoked has the right to petition the Board for reconsideration or reinstatement after one year has elapsed. The burden of proof that the person does not pose a danger for fraud, theft, or deception toward patients remains with the petitioner or applicant.

**Recommended Sanctions**

The minimum allowed sanction for fraud, deceit, intentional, and/or willful misconduct will be removal from practice in an independent setting, including but not limited to home health and agency nurse, practice under the supervision of another registered nurse, if practicing as a RN, or under the supervision of a licensed vocational nurse or registered nurse, if practicing as a LVN, employer reports, and a punitive fine. The recommended sanction may be revocation.

Approved and adopted by the BON on July 26, 2002, modified on April 23, 2004.

Reviewed for handbook inclusion: 9/04; 6/08

## DISCIPLINARY SANCTIONS FOR LYING AND FALSIFICATION

The Texas Board of Nursing (Board), in keeping with its mission to protect the public health, safety, and welfare, believes it is imperative to take a strong position regarding the licensure of individuals who have engaged in deception in the provision of health care. This deception includes falsifying documents related to patient care, falsifying documents related to employment, and falsifying documents related to licensure.

The Board is also concerned about persons who have been convicted of a crime involving deception to the extent that such conduct may affect the ability to safely care for patients. The Board's position applies to all nurse license holders and applicants for licensure.

The Board adopts the following assumptions as the basis for its position:

1. Patients\* under the care of a nurse are vulnerable by virtue of illness or injury, and the dependent nature of the nurse - patient relationship.
2. Persons who are especially vulnerable include the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized.
3. Critical care, pediatric, and geriatric patients are particularly vulnerable given the level of vigilance demanded under the circumstances of their health condition.
4. Nurses are frequently in situations where they must report patient condition, record objective/subjective information, provide patients with information, and report errors in the nurse's own practice or conduct.
5. Honesty, accuracy and integrity are personal traits valued by the nursing profession, and considered imperative for the provision of safe and effective nursing care (rule 213.27).
6. Patients have the right to expect that the nurse will always accurately report patient conditions, signs and symptoms, and the care the nurse provided.
7. Falsification of documents regarding patient care, incomplete or inaccurate documentation of patient care, failure to provide the care documented, or other acts of deception raise serious concerns whether the nurse will continue such behavior and jeopardize the effectiveness of patient care in the future.
8. Falsification of employment applications and failing to answer specific questions that would have affected the decision to employ, certify, or otherwise utilize a nurse raises concerns about a nurse's propensity to lie and whether the nurse possesses the qualities of honesty and integrity (rules 217.12 (22), (23) and 213.27).
9. Falsification of documents or deception/lying outside of the workplace, including falsification of an application for licensure to the Board, raises concerns about the person's propensity to lie, and the likelihood that such conduct will continue in the practice of nursing.
10. A conviction or judicial order involving a crime of lying or falsification raises concern that the person may engage in similar conduct while practicing nursing and place patients at risk.

\* The terms "A resident" or "A client" are often substituted for the term "A patient" in health care

facilities. For the purposes of this document “A patient” includes all of these terms.

### **Crimes Related to Lying and Falsification**

The Board may rely solely on the conviction of a crime or probation for a crime, with or without an adjudication of guilt, to deny, suspend, or revoke a license. A crime involving dishonesty is a crime of moral turpitude. Reliance on judicial orders is designed to avoid subsequent collateral attacks by nurses when the nurse has already been convicted or has admitted to the criminal conduct.

The Board has adopted a policy on fraud, theft, and deception which, in part, addresses the issues of lying and falsification. The crime of lying or falsification is a concern to the Board if the conduct involved defrauding a vulnerable person; if the occurrence was within a short period of time prior to the application for initial licensure; if there is a demonstration of a pattern of lying or falsification; or if the act was obviously premeditated and the individual demonstrates a lack of insight or remorse related to the conduct. The presence of these factors is evidence to the Board that the same behavior is likely to be repeated towards patients and may place their well-being at risk. Crimes involving lying and falsification will be evaluated on an individual basis considering the above factors.

It should be noted that if a nurse is imprisoned following a felony conviction, felony community supervision revocation, revocation of parole, or revocation of mandatory supervision for a crime involving lying or falsification, the Board shall revoke the nurse’s license, regardless of the conduct associated with or the circumstances surrounding the crime. Chapter 53 of the Texas Occupations Code and 22 Texas Administrative Code ' 213.28 governs the consequences of criminal convictions and requires revocation of a nurse’s license if there is imprisonment as stated above. Section 213.27 of 22 Texas Administrative Code is also applicable to criminal conduct.

### **Lying on or Falsification of Licensing Documents to the Board**

Each licensure form or document, whether it is an initial application, application by endorsement, or a renewal application, contains questions which require a “yes” or a “no” answer. These forms contain several questions that might affect the ability of an individual to function safely as a nurse. In addition, the Board asks the applicant, petitioner, or licensee to provide information to determine if he/she meets the practice requirements for nursing licensure. Answers to these questions are used by the Board to determine the applicant’s fitness for initial licensure/recognition in regards to conviction history, physical or mental condition, chemical dependency, and eligibility to renew licensure or gain initial licensure/recognition by endorsement related to meeting the continuing education (CE) and practice requirements. The Board can understand that an applicant may mark a “yes” or a “no” answer in error, or misunderstand the question being asked. The Board believes, however, that supplying false information in regards to eligibility requirements for licensure is a serious matter, not only because of the lying or falsification itself, but because those false answers would allow an otherwise disqualified applicant to be licensed. Proof of falsification on initial licensure is enough to establish the Board’s right to revocation or denial of licensure. It should not be the

Board's burden to answer or overcome Respondent's claims of current character or current practice once it is established an applicant or petitioner has knowingly falsified information upon which licensure was based. If Respondent believes he/she has good professional character, they should be required to start the application process over anew under non-deceptive means without the benefit of consideration of the intervening practice as a nurse.

The Board also asks questions on its applications for licensure to verify the individual's identity and provide the Board with demographic information. Falsification of that information is considered serious by the Board, but not as critical as information that directly relates to eligibility for licensure unless the falsification of this information was intended to hide relevant background information of the applicant. Each case of falsifying an application for licensure will be considered on an individual basis. The investigative process will be used to determine whether the question was answered in error, misunderstood, or purposely answered falsely to deceive the Board. Intentional falsification may result in denial of licensure or revocation of a license. The Board may show leniency towards an applicant for initial licensure because that person may be more likely to misunderstand the questions on the application. The Board believes that an applicant for renewal of licensure should understand the questions and the importance of answering them honestly. A pattern of falsification of information on an application for licensure will not be tolerated and is grounds for revocation.

Failure to cooperate during the course of a Board investigation by supplying false documents or failing to disclose information is grounds for denial or revocation of the license. Reckless disregard for the Nursing Practice Act, the Board's rules and regulations, and/or a Board Order is also grounds for denial or revocation and will require at a minimum, the imposition of a punitive fine in addition to other stipulations.

### **Nurse Imposter**

The Board has no jurisdiction over a person who does not have a license to practice nursing in the State of Texas yet holds him or herself out to be a nurse. The Board does have jurisdiction over an individual who has a nursing license or has had one in the past and represents him or herself as licensed for a broader scope of practice, e.g., LVN to RN, RN to APN. The Board has no tolerance for any form of impersonating and will impose the maximum dollar amount of fine allowed under Board rules and may impose a disciplinary sanction. The following factors will be considered in deliberating the level of discipline from remedial education with fine through revocation: intent, potential or actual harm to patients, length of time as an imposter, and insight/remorse. The Board believes that employers of nurses should verify licensure and thereby avoid hiring a nurse imposter or allowing a nurse to practice beyond his/her scope. The Board may impose a disciplinary sanction to the nurse employer found responsible for hiring a nurse imposter.

### **Lying or Falsification within the Practice of Nursing**

The safe and effective practice of nursing as a licensed vocational nurse, registered nurse, or advanced practice nurse requires integrity, accuracy, and honesty in the provision of nursing care, including: performing nursing assessments; applying the nursing process; reporting

changes in patient condition; acknowledging errors in practice and reporting them promptly; accurate charting and reporting, whether verbal or written; implementing care as ordered; compliance with all laws and rules affecting the practice of nursing; and compliance with minimum nursing standards. Failure to be accurate and honest while providing patient care and keeping accurate records related to care, is potentially harmful to the overall care patients receive because nurses who provide subsequent care do not have a complete and accurate picture of the client's care and/or condition.

Each case of lying and falsification will be considered on an individual basis. The Board will consider the following factors: actual harm to the patient as a result of the lying or falsification; the potential for harm to clients; the past performance record of the nurse; prior complaints; accountability for the act of falsification; insight; remorse; and other mitigating or aggravating factors.

The Board will also consider whether or not the nurse was unduly influenced by a more experienced or supervising licensed nurse to falsify patient records or care, in which case that nurse's conduct will be investigated by the Board. The investigative process will be used as Lying and Falsification an opportunity to educate and reinforce acceptable standards of care. Disciplinary sanctions may range from remedial education with fine to revocation. The level of sanction may be directly proportionate to the harm caused to the patient. If a nurse falsifies, alters, fabricates, back-dates records, or any other form of lying in the home health setting, the nurse will be sanctioned with stipulations, and fined. During the stipulation period, home health and any other form of independent employment settings will be prohibited. Supervision in home health will be required where circumstances do not warrant removal from that practice setting.

### **Lying/Falsification to an Employer, Nursing Education Program, or other Nursing Training Program**

The Board believes that falsification of an application to an employer, school of nursing, or other nursing training program is generally the responsibility of the employer, school, or training program to resolve, unless the falsification involves misrepresentation of credentials, competencies or work experience. Misrepresentation of credentials to an employer will be investigated and viewed by the Board in the same way that lying or falsification within the practice is viewed. A student nurse who falsifies patient records or engages in other dishonesty in patient care gives the Board reason to suspect that he or she will continue the same dishonest acts after licensure. If the Board is made aware of acts committed as a student, an investigation will be conducted once the student makes application for licensure. The Board will consider the same factors as described above for lying and falsification within the practice of nursing.

### **Petition for Reconsideration or Reinstatement of License**

A person who has been denied licensure, or whose license has been surrendered, suspended, or revoked has the right to petition the Board for reconsideration or reinstatement. The burden of proof that the person no longer poses a danger for deception, lying or falsification regarding patient care, record keeping related to nursing practice, or other acts of deception remains with the petitioner.

(Portions of this policy adapted from the Oregon Board of Nursing Policy, 1999, with additions, deletions, and modifications)

Approved and adopted by the BON on July 26, 2002, modified on April 23, 2004. Reviewed for handbook inclusion: 9/04; 6/08

## V. Evaluation and Grading

## GRADING POLICY

### Class/Theory Grading Policy

Students will receive a numerical grade. A grade of 75% or greater is required to pass. Theory grades are assigned according to the following scale:

90-100	A
80-89	B
75-79	C
60-74.99	D
Below 60	F

Grades will be calculated at the end of the semester for each theory class according to the formula specified in the course syllabus. Instructors employ academic freedom to round grades from B to A and C to B. However, a grade of D cannot be rounded to passing. A grade of 74.99 (or lower) is a failing grade.

### Clinical Grading Policy

Clinical course grades are Pass (PA) or Fail (F). Clinical objectives and the clinical evaluation forms provide the objective measure of the student's performance. Instructor observation of care delivered to clients, input from agency staff or preceptors, written care plans, charting, assigned written work, and other requirements are included in the assessment of clinical performance. Verbal and written feedback on student performance occurs throughout clinical courses (formative evaluation). A summative or final evaluation occurs at the end of each course. Mid-point or rotational evaluations occur in selected courses as specified in course materials.

### Corequisite Course Grades

**The corequisite theory course and clinical course must be passed to earn credit in both courses.** A grade of PA (pass) cannot be awarded in a clinical course if the theory course was not passed. A passing grade for the theory class cannot be awarded if the student earned an F (fail) in the corequisite clinical course *regardless* of the actual numerical grade earned in the theory course.

### Other Grades That May Be Assessed

Grades of "I" (incomplete) may be issued when the student needs extra time to complete the theory or clinical course. A grade of "I" allows the instructor to work with a student who may be experiencing a family or personal crisis. The instructor and student enter into a contractual agreement as to course requirements that must be met and agree upon deadlines for completion. Once the contract is completed, the instructor sends a grade change request to the registrar's office. If the student does not complete the requirement by the end of the following semester, the grade of "I" automatically changes to a grade of "F."

The award of the grade of “W” (withdrawal) follows Odessa College policy. Each semester, the college publishes the “last day to withdraw.” If the date is not published for 8 week courses, consider the withdrawal date to be three-fourths into the course. If the withdrawal is early in the semester, a refund or partial refund may be granted. Students should consult with the cashier’s office regarding refund eligibility. **Students may withdraw from the same course one time only.**

The grade of “Z” (grade not determined) is used in the situation when a student fails one of the co-requisite courses and cannot receive a passing grade in the other course because of program policy. The “Z” remains on the transcript until the course is re-taken and a new grade determined.

### **Academic Alerts**

Academic alerts may be used by the instructor at any time to notify the student of failing grades. At least 72 hours prior to the published drop date, the instructor of record will calculate grades and notify students in writing of grade status if failing or at high risk to fail. Students will have their options explained to them by the instructor and/or the Program Director. Options include:

- a. Withdrawal prior to the deadline so that the student’s grade will be a “W”.  
Withdrawal from co-requisite courses will be explained.
- b. Continuation in the program with the understanding that if the student’s scores do not improve, he/she could receive a grade of “D” or “F” for the course.

Revised: 9/04; 7/07

## **PROCEDURE FOR REQUESTING SPECIAL ACCOMMODATIONS**

In accordance with federal and state laws and regulations, Odessa College strives to provide a complete range of services for students with special needs. Students with a disability should contact the Odessa College Help Center at 335-6433 for information and assistance with obtaining accommodation services. A counselor who specializes in accommodation assistance is available.

Nursing students with a disability who request reasonable accommodations must meet with the Program Director no later than the first week of classes. Reasonable accommodations will be provided as authorized by the office of the Vice President of Student Services as long as course requirements are not compromised. Nursing faculty provide no accommodations without authorization. Students are responsible for obtaining appropriate documentation, such as that from a professional health care provider. It is the student's responsibility to be a self-advocate when requesting accommodations.

Approved: 6/05

## VI. Progression/Readmission

## **PROGRESSION AND READMISSION**

Generic students should progress and graduate within four semesters. Transition students should also progress and graduate within four semesters, which includes 1 summer session. (Summer I and II are considered a semester for the purposes of the progression policy.) It is recommended that a student take no more than four semesters from the original program entry date to complete all the required courses. It is expected that students follow the degree plan. Gaps in enrollment occur for various reasons including environmental and academic issues. Individual situations vary and consideration in progression issues is made by the Program Director, Dean of Nursing and Allied Health, and/or the Student Affairs Committee.

### **Exiting the Program: Student Responsibility in Seeking Re-admission**

The student should contact the Program Director if readmission is desired. A letter requesting readmission must be submitted. Admission requirements must be met with any exceptions addressed by the Program Director and/or department's Student Affairs Committee. Readmission can occur only as space permits. Should there be more students applying for readmission than slots available, selection will be based on the date of the written request. The student will be notified when a space becomes available. The student seeking readmission may be interviewed by the Program Director or designee to ascertain probability of success if readmitted.

### **Stop-Outs**

Stop-Out is defined as a temporary leave of absence from the nursing program. This option is available to students in good standing, i.e., passing theory and clinical. These students are eligible to request a stop-out for the following reasons: birth of a child, student's own serious health condition or stressful event, or to provide care to a family member (spouse, child, or parent) with a serious health condition. Re-entry into the nursing program is dependent on space availability.

### **Re-Entering the Nursing Program**

If re-entering with a semester or more of lapsed enrollment, the student may be asked to perform skills in the laboratory to demonstrate competency of previously learned material. Further, the student may be required to take the medication math competency exam appropriate for the level of enrollment. The faculty retain the right to require remediation for theory, clinical, and/or skills to address individual student needs and to ensure patient safety. The urine drug screen and background check will be repeated if more than one semester has lapsed. A repeat of the physical examination may be required.

### **Ineligibility for Re-Admission**

Students are not eligible for readmission if they fail more than one core nursing course or fail the same course twice. (RNSG 1201, RNSG 1215, and RNSG 1108 are not considered core nursing courses.) This means that upon the second failure, the student cannot continue in the series of courses in the curriculum. The student can re-apply to the nursing program and, if selected, will re-take core courses, beginning with the first semester. This fresh start option is not available for students who have demonstrated

unsafe clinical practice or unprofessional conduct. Transition students opting to repeat will be excused from re-taking Transition to Nursing Practice but will repeat RNSG 1443 Complex Concepts of Adult Health *and* take its co-requisite clinical course.

**Progression: Special Situations**

Students follow the curriculum plan delineated in the college catalog. Nursing courses are sequential. Special progression is allowable only with the approval of the Dean of Nursing and Allied Health.

Revised: 4/02; 9/04; 6/05; 7/07

## MEDICATION MATH COMPETENCY

Calculating correct dosages, IV rates, and other medication calculations is essential to safe practice in nursing. Since math medication errors can harm or even kill a patient, the faculty has determined that each student must demonstrate proficiency in medication calculation competency prior to graduation. The ability to accurately calculate medication dosages will be measured in the following ways:

1. The pre-requisite course RNSG 1108 Dosage Calculations must be passed with a minimum grade of “C” which is a numerical grade of 75.
2. Dosages will be accurately calculated in the skills laboratory and the clinical setting.
3. Medication calculation questions are included on exams in nursing courses at the instructor’s discretion.
4. Two medication math competency exams will be completed during the program.

First semester students will apply knowledge of dosage calculations in RNSG 1105 Nursing Skills I. Appropriate competencies must be passed as a part of the course requirements.

### Competency Testing in Second Semester

Students will be given the first medication math competency midway into the second semester, at a time designated by the instructor. The exam will contain 25 calculation questions from the following categories:

- A. Conversion between and within systems
- B. Calculations of medication doses administered IM, SC, or IV given by a syringe
- C. Calculations of medication dosages administered PO in liquids, tablets, or capsules
- D. Combination problems such as calculating weight and dosage
- E. Calculation of IV flow rates/administration rates by gravity flow and by infusion pump

The second semester student must achieve a minimum passing grade of 80%. The second semester student will be allowed to participate in clinical activities while completing medication math competency requirements since this level of student is closely supervised, or as in the case of the transition student, has nursing experience. Students not passing the first exam will take a second exam after completing a minimum of two hours of documented remediation. If not successful, the student will be allowed a third attempt after completing a mandatory individualized remediation plan. The third exam can be taken no later than the day of the final exam for RNSG 1443 Complex Concepts of Adult Health. If not successful on the third attempt, the student will receive a grade of “D” in RNSG 1443 Complex Concepts of Adult Health. The generic student will receive a grade of “Z” in RNSG 1361 Clinical - Complex. Transition students will retain the earned grade in RNSG 2307 Transition to Nursing Practice and RNSG 2360 Clinical-Transition. The student will be eligible for re-admission pursuant to re-admission policies.

### **Competency Testing in Fourth Semester**

The fourth semester student must achieve a minimum passing score of 90% on the medication math competency exam. The exam will be taken during the second week of the fourth semester in RNSG 2331 Advanced Concepts of Adult Health, at a time designated by the instructor. The test will consist of 25 questions from the following categories:

- A. Conversion between and within systems
- B. Calculations of medication doses administered IM, SC, or IV given by a syringe
- C. Calculations of medication dosages administered PO in liquids, tablets, or capsules
- D. Combination problems such as calculating weight and dosage
- E. Calculation of IV flow rates/administration rates by gravity flow and by infusion pump
- F. Titration of IV medications (mcg/kg/min)

Students not passing the first exam will be allowed to take a second exam after they have completed a minimum of two hours of documented remediation. This exam must be taken no later than one week from the first exam. Because fourth semester students function in an increasingly independent role in the clinical setting, only two attempts to measure medication math competency will be allowed. Students can remain in clinical while completing testing requirements and administer medications with supervision. If the student is unsuccessful on the second exam, he/she must withdraw from RNSG 2331 Advanced Concepts of Adult Health, and its co-requisite clinical course, and RNSG 2121 Management of Client Care and its co-requisite clinical course. The student is eligible for re-admission pursuant to readmission policies.

### **General Instructions**

1. Calculators furnished by the nursing department are used for the exams. No other calculator is permitted.
2. Students will show calculations. Scratch paper will be furnished and must be submitted with the completed test.
3. If re-testing is necessary, the student is responsible for making arrangements with the instructor.
4. Testing deadlines will be enforced.

Revised: 6/03; 9/04; 6/05; 6/08

## HESI EXAMINATION POLICY

Health Education Systems, Inc. (HESI) provides a standardized test that closely approximates NCLEX-RN®. Many nursing programs across the United States utilize this examination as an end-of-program achievement test. Research on the exam demonstrates a high degree of reliability and validity. It is this test that has been selected by the nursing faculty as the capstone experience for program completion. The score obtained is an indication of probability of passing NCLEX-RN®. Based upon program data and HESI statistics, the faculty has determined that students must pass HESI with a *minimum* HESI Score of **875**.

See the syllabus for RNSG 2331 Advanced Concepts of Adult Health for specific requirements that must be met prior to taking the HESI exam. The NCLEX review course taken during the fourth semester not only helps the student prepare for NCLEX but also for HESI. Additional study materials may also be available. Check with course instructors for resources.

The student is responsible for all fees and costs associated with testing and remediation work. The first HESI fee is paid as part of the course fees for RNSG 2331. Subsequent HESI tests are paid for individually at the Cashier's Office, utilizing a form that is provided by the nursing office. The HESI fee is \$35.00 and is subject to change.

If the student scores less than 875 on the first attempt, a second opportunity to take HESI prior to graduation is provided. Exam dates will be published on the course calendar for Advanced Concepts of Adult Health.

1. The first exam will be administered after the mid-point of the fourth semester and after students have completed the mandatory NCLEX-RN® review course.
2. The second exam is taken by students who score less than 875 on the first exam. Prior to the second exam, the student is encouraged to carefully review the results of the first HESI to analyze areas of strength and weakness. As needed, the Program Director, Dean of Nursing and Allied Health or designee will be available to help the student interpret the information and develop a plan for self-study. Answering a large number of NCLEX type questions and careful attention of the review course are the best methods of preparation for the second exam.

If the student does not pass the second HESI examination, a grade of Incomplete (I) will be entered for RNSG 2331 Advanced Concepts of Adult Health. An individual Plan for Success will be established with input from the Program Director or designee. Faculty input may also be sought.

This individual Plan for Success may include any of the following:

1. Other review courses or sections
2. Case studies (on-line or other)
3. NCLEX -RN® review media
4. Computer assisted instruction
5. Answering an assigned number of NCLEX type questions from review books or

on-line

6. Developing strategies to lessen test anxiety
7. Taking another type exam to ascertain progress
8. Working with faculty or other designated person to develop test taking skills
9. Re-taking or auditing a nursing course(s)
10. Other strategies as determined by the individual student and Associate Dean

Upon successful completion of the Plan for Success, the student will take the third HESI exam. Results will be evaluated by the Program Director or designee. If satisfactory, the grade of "I" will be changed to the grade received in the course work for RNSG 2331. The date for completion of graduation requirements will be established by the Nursing Department and the Office of Registrar. The Affidavit of Graduation will be sent to the Board of Nurse Examiners by the Program Director once all graduation requirements are met and the degree is posted.

If unsatisfactory, the student will complete other requirements before the Affidavit of Graduation is sent to the Board of Nurse Examiners.

Approved: 8/03

Revised: 8/04; 9/04; 6/05; 7/06; 7/07

## REQUIREMENTS FOR GRADUATION

The nursing program's grading scale for the RNSG courses is different from that of the general college with a grade of "C" awarded for numeric grades of 75-79. To be eligible for graduation, the nursing student must have completed each of the prescribed courses in the curriculum with a minimum grade of "C." Each of the non-nursing courses required for the degree must also be passed with a minimum grade of "C." The Texas Higher Education Coordinating Board (THECB) requires a capstone experience which has been identified in the A.D.N. program as the HESI exam. The candidate for graduation must score satisfactorily on the exam\*, complete the NCLEX-RN® review course, satisfy all college financial obligations, complete a degree application in the Registrar's Office by the specified deadline, and return any borrowed school property.

\*Exception: completing the Individual Plan for success which meets graduation criteria but delays graduation *and* approval from the BON to function as a graduate nurse (GN) and to take NCLEX-RN®.

Approved: 9/04; 6/08

## VII. Clinical Policies

## LEGAL AND ETHICAL REQUIREMENTS

The nursing student is expected to abide by the following legal and ethical requirements.

1. Be prepared for clinical assignments.
2. Consider all information obtained regarding the patient's status as **strictly confidential**, and not to be discussed with anyone except instructors and peers within the learning environment, and with authorized hospital personnel. (Learning experiences in the clinical area are to be shared during pre and post conferences and other related professional sessions).
3. Students must comply with the provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996. The law protects patient confidentiality and the security of patient data. Significant fines, civil and even criminal penalties, can be levied if there is wrongful disclosure of medical data. The general rule affecting nursing is that patient authorization is required for any use or disclosure of protected information that is not directly related to treatment or payment. These rules cover all types of communication including patient charts, patient room identification systems, faxes, lab slips or specimens, nursing care plans, medication records, dietary trays, and communication boards, faxes and phones. The law provides even more stringent protection for clients in psychiatric and chemical dependency units. Selected applications of HIPAA to your role as a student nurse:
  - Clinical sites may orient students to the agency's guidelines for HIPAA implementation.
  - Patient names will NOT be posted on assignment sheets.
  - Patient information must never be left visible to the public.
  - Do not leave clinical paperwork in a place, even in one's own home, that is visible to others.
  - If using computers in the clinical setting, never leave information on the screen for unauthorized person to gain access - log off.
  - Faxes are to be placed in a secure area, face down.
  - NEVER photocopy portions of the patient's chart, medication record, or lab/diagnostic findings.
  - Even when the discussion concerning a patient is authorized, take care that it is not in a public area or where conversation could be overheard by others.
  - As a student, do not answer any questions about a patient over the phone. Do not state the patient is in the facility unless there is certainty that the patient has approved release of the information. The safest action for a student to take is to refer calls to the charge nurse or primary nurse caring for the patient.
  - Submit reports of patients to instructors using patient initials only, never the patient's full name.
  - Remove the name of the patient if any information is obtained from the patient's chart and used away from the nursing unit.
  - Consult with the instructor if the student feels that circumstances regarding the patient will hamper him/her from giving effective care or would potentially present sensitive issues regarding confidentiality (e.g., person known to the student).

4. The student must conduct himself/herself in a professional manner when caring for patients/families and interacting with staff, instructors, and peers.
5. Channel any criticism of an agency, an individual, or an instructor through the Director of the Nursing Program. In order to engender confidence and trust in our program, students should refrain from critical discussion outside the school or with other students.
6. Be honest at all times. A student who would cheat on a test ultimately is cheating patients. A student who is less than completely honest in the clinical area jeopardizes patient safety and is subject to termination from the nursing program.
7. Be responsible for one's own learning, and help promote an atmosphere which facilitates maximum learning for his/her classmates. A student will not obstruct the learning process of others by causing undue anxiety for any reason, including monopolizing instructor's time.
8. Be respectful of instructors and peers. Help maintain an atmosphere where you and others can learn and grow.
9. Be responsible for reading and familiarizing self with printed college and nursing department policies and procedures, as well as policies and procedures in clinical agencies that impact the role and function of the student nurse.
10. Failure to abide by these regulations present grounds for disciplinary actions up to and including dismissal from the nursing program.

Approved: 9/04

## SCOPE OF PRACTICE

Noncompliance in any of the areas listed below may result in dismissal from the Nursing Program.

### THE STUDENT NURSE MAY NOT:

1. Assume responsibility for patient valuables.
2. Sign/witness patient or client signature for consents for any type of procedure or sign AMA forms.
3. Implement teaching plans/discharge plans without the primary nurse/preceptor or nursing instructor present.
4. Fill out incident reports without instructor present.
5. Take verbal or telephone orders from physicians.
6. Administer blood or blood products or chemotherapy.
7. Perform post-mortem care without presence and permission of instructor and/or preceptor.
8. Scan, photograph, photocopy, or tape record content of patient documents.
9. Have unauthorized patient contact.
10. Use profanity or vulgarity while in the clinical setting.

**Further details regarding the scope of practice for a particular course will be found in clinical course materials.**

Approved: 9/04

**CLINICAL EVALUATION RNSG 1160**  
**CLINICAL- INTRODUCTION (SEMESTER ONE-FIRST 8 WEEKS)**

<b>Role of the Nurse:</b>	<b>Mid-rotation</b>	<b>Final</b>
<b>Student's Name:</b>		
<b>As Provider of Care:</b>		
1. Identify the health status and basic health needs of clients based upon selected health data. <ul style="list-style-type: none"> <li>a. Observe vital signs of client to recognize normal and abnormal readings.</li> <li>b. Report changes in the health status of assigned client.**</li> <li>c. Classify medications client receives based on beginning knowledge of pharmacology.</li> </ul>		
2. Recognize important decision making skills using clinical data to identify nursing diagnoses and appropriate interventions. <ul style="list-style-type: none"> <li>a. Explain assessment findings using psycho-social, developmental, and cultural factors and how they impact the holistic care of the adult client.</li> <li>b. Classify simple nursing diagnosis based on the nursing process.</li> <li>c. Organize appropriate nursing care and apply interventions to one client.</li> </ul>		
3. Communicate with clients and families. <ul style="list-style-type: none"> <li>a. Recognize simple teaching plans to promote and maintain health.</li> <li>b. Select effective techniques for communication with clients and families.</li> </ul>		
<b>As Coordinator of Care:</b>		
4. Identify and use time management principles, under the supervision of the instructor and staff, to plan and organize basic care.		
5. Name common community agencies and health care resources to assist clients with continuity of care.		
<b>As Member of a Profession:</b>		
6. Define accountability and responsibility for the nursing care provided to clients.**		
7. Promote the profession of nursing in a manner which reflects positively on self and nursing. <ul style="list-style-type: none"> <li>a. Recognize elements of professional behavior and appearance, including those presented in the TNPA, OCADN Student Handbook, and course materials.</li> <li>b. Function safely and competently at the beginning practice level for nursing.</li> <li>c. Recognize need and ask for assistance as necessary.</li> <li>d. Complete pre and post work in a timely manner.</li> </ul>		

**Key: \*\*Critical Elements must be met each clinical day.**

Performance criteria are graded as:

Satisfactory – S

Unsatisfactory – U

Needs Improvement – NI (Mid-rotation only)

The final grade for the clinical course is Pass (PA) or Fail (F). All criteria must be passed to receive a course grade of Pass (PA).

Mid-Rotation Evaluation:

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

Date \_\_\_\_\_

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

Date \_\_\_\_\_

Final Evaluation/Course Grade:      \_\_\_\_\_ Pass      \_\_\_\_\_ Fail

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

Date \_\_\_\_\_

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

Date \_\_\_\_\_

Comments:

## CLINICAL FAILURE

Students receive daily clinical evaluation from the instructor. Formative evaluation also occurs in some courses at the conclusion of rotations or at mid-point. Summative evaluations occur at the end of clinical courses. An evaluation conference with the clinical instructor(s) will be scheduled at the end of each course to discuss the summary evaluation of clinical performance using the clinical evaluation tool. Students are encouraged to speak with instructors at any time regarding clinical performance.

Clinical evaluation will reflect the student's ability to meet clinical objectives and to implement classroom theory. Any identified weakness will need to be strengthened by the end of the course. As the course progresses, the instructor may rate clinical objectives as **Needs Improvement (NI)**. NI ratings are not given on summative evaluations.

**Satisfactory** ratings of clinical objectives signify at least minimal accomplishment of tasks as stated or required. The student is consistent in performing nursing responsibilities. A satisfactory rating on all objectives on the summative (final) evaluation is necessary for the student to earn a pass (PA) in clinical courses.

**Unsatisfactory** ratings on clinical objectives signify unacceptable performance in one or more areas. The student displays one or more of the following:

- 1) unsafe practice by the lack of application of principles of safety and asepsis;
- 2) failure to accomplish task(s);
- 3) disregard for the client and /or family in administering care;
- 4) inability to identify or correct errors;
- 5) inability to transfer theory knowledge to clinical practice; and/or
- 6) inconsistent clinical behavior in the performance of nursing responsibilities.

The clinical evaluation tool for each clinical course denotes non-critical and critical elements. A critical element is defined as a behavior to be met during each clinical experience. Critical elements are distinguished on the evaluation form by the use of "\*\*\*".

1. Unsatisfactory rating on a *non-critical element* will be addressed in the following manner: (**u = unsatisfactory**)

**first "u"**- The infraction will be identified and a written feedback to improve performance will be given. The student may continue in the clinical course.

**second "u"**- student will meet with the clinical faculty to discuss the second infraction and be given a prescription on how to correct infraction/problem. Also during this meeting the student will be given a warning that another infraction occurs during the clinical semester, the student will fail the clinical course. The student may continue in the clinical course.

**third "u"**-student will meet with clinical faculty team to discuss the third infraction. In courses with no designated team, the faculty member will meet with the Level Coordinator or designee. The Program Director will be informed of student situation and subsequent actions. The student will receive a clinical failure

grade for the course and options, in regards to the nursing program, will be discussed with the student at this time.

2. Unsatisfactory rating involving a *critical element* will be addressed in the following manner:

**first "u"**- the student will meet with the clinical faculty and be given a written prescription for improvement. The student may continue in the clinical area.

**second "u"**- in any critical element- A meeting will be arranged by the clinical faculty team to meet with the student. In courses with no designated team, the faculty member will meet with the Level Coordinator or designee. The student will be given written documentation regarding the second critical element infraction and given a clinical failure grade for the semester. Program status will be discussed at this time.

**Clinical failures may occur before the clinical course is completed or may occur at the end of a course.** In cases of clinical failure, the student will be apprised of the failure as soon as reasonably possible. If clinical failure occurs before the end of the semester, the student has the option of continuing in the didactic course although a passing grade cannot be issued in the didactic course since the clinical course was failed. If the student questions the decision, he/she may refer to the grievance policy.

**Immediate dismissal from the Nursing Program may occur with serious violations of safe clinical practice.** The following are unsafe practice categories according to patient/client impact:

**Physical Hazard:** A physical hazard is any action performed by the student which could endanger the client's life. Examples of a physical hazard include (but not limited to) medication error, leaving the side rails down, leaving client unattended while in bath, bed in high position, removing oxygen from a client over a period of time, non-report of symptoms that could endanger client, attempting to practice beyond scope, attempting skills that have not been checked off by instructor, performing a skill without proper or approved supervision.

**Emotional Hazard:** An emotional hazard is any verbal or non-verbal behavior by the student which puts the client in danger, or is inappropriate, or unprofessional. Examples of an emotional hazard include (but not limited to) displaying emotional outbursts, cursing, obscene facial or hand gestures, yelling at faculty, staff or client, racial slurs/comments, talking about client in an inappropriate setting, making unfavorable statements regarding patients or their significant others to other students in an inappropriate setting or to the public.

Revised: 9/04; 6/05; 7/07

## **OCCURRENCE REPORTS**

Any unusual occurrence or medication report made in the clinical area will be reported in the manner given in the procedure manual of the specific hospital. A report must also be filed on campus since photocopying of agency documents is not allowed. The report must be signed by the instructor. The report will be reviewed by the Program Director or designee, the Level Coordinator, and involved instructor. The student may be interviewed by any of these individuals. Appropriate remediation shall be required.

Reviewed: 9/04; 7/07

## **VISITING HOSPITAL PATIENTS**

The student may not visit hospitalized friends or family when in the student role or while wearing the OC uniform. Students shall not visit patients who have been assigned to them before or after any clinical experience. One of the indications of high level nursing professionalism and competency is the provision for proper care and termination of the nurse/patient relationship.

Approved: 9/04

## VIII. Student Health and Safety

## HEALTH SCREENING REQUIREMENTS

Students in health career programs are required by state law, Odessa College and/or by clinical agencies to have certain immunizations or health screening. Nursing students must show proof of the following *prior to being admitted to the program*:

1. Tetanus-diphtheria (Td) current within the last 10 years. (Tdap may be substituted.) If this immunization will age past that date while in the program, a booster should be obtained upon program admission. Tdap (containing adult pertussis vaccine is acceptable.
2. Hepatitis B - this is a series of three injections over a 4-6 month time period.
3. Rubella (usually an MMR\*)
4. Mumps (usually an MMR\*)
5. Rubeola. If born on or after Jan.1, 1957, the student is required to have *two* vaccines; *one* vaccine if born prior to Jan.1, 1957. Vaccines must have been given after the first birthday. (usually an MMR; sometimes an MR\*)
6. A parent, physician or school nurse must provide written verification of chicken pox (varicella) disease. If no disease history, the vaccine is required.
7. Polio boosters are not required for college students but may be recommended when employed as a nurse. Texas law states the student is encouraged to ascertain immunity to polio. The OC record will note history of vaccination.

\*MMR = measles (rubeola) mumps and rubella; MR = measles (rubeola) and rubella

*In lieu of dates showing hepatitis B, rubella, rubeola, and mumps vaccine(s), or varicella history or vaccination, the student may demonstrate immunity through laboratory blood tests showing positive antibody titers. These lab results must be filed in the Nursing Office. Physician confirmed disease is also acceptable. Vaccine requirements may be waived with physician recommendation.*

### **Tuberculosis Skin Test**

Students are required to obtain a tuberculosis skin test *when admitted into the nursing program*. The Nursing Program will not accept a TB skin test that has been done more than 3 months prior to the start of class. If the student has a history of testing positive to the TB skin test, a chest x-ray report must be on file in the Nursing Office. The chest x-ray must be current within 1 year of program admission. Unless medically contraindicated, a TB test will be required prior to the start of the second year of the nursing program.

### **Health History and Physical Exam**

Incoming students will have a physical examination and complete a health history. The physical is provided free of charge by Texas Tech Health Sciences Center Family Medicine Clinic. The physical is scheduled by the Nursing Program. If the screening reveals disease or disability incompatible with the role and functions of the student nurse, the student will be released from the Program. Appropriate health counseling will be advised. The student may re-apply after the health issue is resolved.

## **DRUG SCREENING**

The Odessa College Associate Degree Nursing Program maintains contractual arrangements with clinical agencies used in the education of nursing students. Some of these agencies require drug testing of their employees and students. For incoming nursing students, drug screening is required as part of the admission process. For currently enrolled students, clinical agencies or the nursing faculty can require drug and alcohol screening when there is probable cause and/or reasonable suspicion to believe that the student is under the influence of alcohol and/or drugs while in the clinical setting.

Incoming and currently enrolled students with verified positive test results for alcohol, any illegal drug; or the abuse of prescribed or over-the-counter medication, or mind altering substances will be given reasonable opportunity to challenge or explain the results. Where results are confirmed and no medical justification exists, incoming students will not be enrolled in the program, and currently enrolled students will not be allowed to participate in clinical activities, thus they cannot meet the clinical objectives required for successful completion of the nursing program. Reapplication or readmission will be considered on an individual basis.

Revised: 9/04

## **CRIMINAL BACKGROUND CHECK**

After admission to the program, new students will authorize the nursing department to conduct a criminal background check. This procedure is required for students to go to the various hospitals and agencies for clinical education. If the background check is positive for certain offenses, the student may not be able to participate in clinical rotations, and therefore will not be able to complete the requirements for the nursing program and will be dismissed from the program.

Students should be advised that criminal activity during nursing school may impede the licensing process. The Texas Board of Nursing may heavily scrutinize the applicant for licensure who demonstrates poor professional behavior as a student nurse.

Revised: 9/04; 6/08

## **SAFETY IN THE CLINICAL SETTING**

Students are expected to provide appropriate care to all assigned patients during clinical learning experiences. These assignments may include clients with medical diagnoses of tuberculosis, hepatitis, AIDS, and other communicable diseases which pose potential risks to a care giver. The student is responsible for implementing standard precautions and adhering to all agency policies when providing care. The student should consult with the instructor, agency policies, and/or staff when questions of safety or infection control arise.

Revised: 9/04

## **GUIDELINES TO PREVENT TRANSMISSION OF INFECTIOUS DISEASE**

The management of issues related to infectious diseases is of primary concern to students, nursing faculty and administration. The rapid increase of blood borne diseases has caused an awareness of the need for policies and guidance. This policy is designed to balance the protection from risk for students, faculty, and clients, with the individual rights of privacy and equal opportunity. As part of the curriculum, nursing students are provided with information regarding protection from infectious diseases common in the health care environment.

Control of microorganisms which cause disease in humans is vital in the health care environment. Although the risk of infection transmission exists, that risk can be minimized by appropriate education and actions taken to avoid transmission. It is the policy of the Nursing Program that:

1. All students will receive specific information regarding the chain of infection and measures which prevent the transmission of infection before engaging in clinical experiences. Instruction in Standard Precautions and CDC recommended infection control measures will be provided and skills reinforced in the laboratory setting.
2. This information will be repeated and will increase in depth and/or application as the student encounters more complex situations.

### **Guidelines:**

1. Routine use of Standard Precautions for all patients will reduce the risk of disease transmission.
2. Patients suspected of having a condition requiring Airborne, Droplet, or Contact Precautions require the use of enhanced precautions.
3. The student will be asked to review current information regarding Standard Precautions and CDC recommended infection control measures in the clinical setting with instructor and/or agency staff guidance. Infection Control manuals and/or on-line policies and procedures are to be consulted when in the clinical setting.

### **Infection Control Precautions:**

1. Handle the blood of all clients as potentially infectious.
2. Wash hands before and after all contact with clients or specimens containing body fluids.
3. Wear gloves for potential contact with mucous membranes, non-intact skin, blood, or body fluids.
4. Wear mask if airborne transmission of microorganisms is possible.
5. Wear protective eyewear if splatter with blood and body fluids is possible. Wear gown if clothing is apt to be soiled.
6. Immediately place used syringes in nearby impermeable container. Do not recap or manipulate needle in any way.
7. Treat all linens soiled with blood and/or body secretions as potentially infectious.
8. Process all laboratory specimens as potentially infectious.
9. Follow agency policy regarding resuscitation during respiratory arrest.
10. Utilize red biohazard bags for medical waste.

11. Ask questions regarding infection control policies and their application in each agency or unit where assigned. Be informed; practice proper procedures with every client situation, and be safe.

### **OSHA Guidelines Following Percutaneous or Mucosal Exposure:**

A significant occupational exposure is defined as:

- A needle stick or cut caused by a needle or sharp that was actually or potentially contaminated with blood and/or body fluid.
- A mucous membrane exposure to blood or body fluids (i.e. splash to eyes, nares, mouth).
- A cutaneous exposure involving large amounts of body fluid or prolonged contact with body fluid — especially when the exposed skin is chapped, abraded, or afflicted with dermatitis.

The student will immediately notify the instructor of an injury or exposure (or potential exposure) to an infectious disease while in the clinical setting.

### **Procedure following exposure:**

1. Wound care/first aid
  - a. All wounds shall be vigorously cleansed with soap and water immediately.
  - b. Mucous membranes shall be flushed with water or normal saline. Use eye wash stations when needed.
  - c. Other wound care shall be rendered as indicated.
2. Notification of responsible parties
  - a. The student will report to the clinical instructor any incident that constitutes an exposure.
  - b. The clinical instructor will complete a report and submit to the Associate Dean.
  - c. Clinical instructor and/or student will notify the Infection Control Officer or designee of the clinical agency involved. Specific recommendations will be made according to the type of exposure and infectious disease involved. Expense incurred in exposure follow-up is the responsibility of the student.

Approved: 9/04

## STUDENT ILLNESS OR INJURY

When a student receives an injury or becomes acutely ill at the clinical site, the instructor shall be notified. The nursing faculty will not assume responsibility for students in the clinical area who are excessively fatigued, emotionally unstable or labile, physically ill, or who exhibit behaviors indicative of drugs or alcohol use. The student will be dismissed from the clinical experience if any of these problems occur, and in the professional judgment of the instructor, the student is potentially unsafe to render nursing care.

### **Instructor Responsibility:**

1. A determination shall be made if the student is in need of:
  - a. Emergency Room — used for treating injuries/illness requiring immediate assessment and treatment, i.e., trauma.
  - b. Employee Health Service (if available) — this service may or may not be available to students. Service may be used to provide assistance when a student has received an occupational related exposure to an infectious agent.
  - c. Private physician — health problems that are not emergent in nature and do not involve possible liability on the part of the agency, or for health clearance to return to class.
  - d. No referral.
  - e. Referral following agency protocol if drugs/alcohol suspected.
2. Notify the clinical team leader (course coordinator), Program Director, or the Dean of Nursing and Allied Health of the incident.
3. File a report in the Nursing Office as soon as practical but within 72 hours of the event.

### **Student Responsibility:**

When a student is seen in the Emergency Room for care, he/she will notify his/her own insurance carrier. The student and his/her health insurance company will be billed for services rendered.

### **Returning to Class and/or Clinical following Illness or Injury\*:**

Students returning to class or clinical following an illness or injury may be required to obtain a release from the health care provider. If activity restrictions are prescribed, the health care provider's documentation must be explicit. Some restrictions may prevent the student from continuing in the clinical course. A course withdrawal or grade of incomplete may be necessary, depending on the nature and timing of the problem. It is the responsibility of the student to contact the instructor before the next class/clinical to see if a doctor's release is necessary. Failure to obtain the requested release will prohibit the student from entering the clinical or classroom setting until the doctor's release is obtained.

\*Illness denotes an unhealthy condition in which physical, emotional, or intellectual function is diminished or impaired. Injury results from either internal or environmental factors. Injury may be biological, chemical, physiological or psychological in nature.

Revised: 9/04

## **PREGNANCY**

The health and well being of the pregnant student and her unborn child are paramount. Women who are pregnant, or who plan to become pregnant, should discuss their nursing school status with their health care provider. The Nursing Program requires that the health care provider provide written approval for the student:

- 1) To remain in the nursing program when pregnancy is determined;
- 2) Again before the student can return to school following delivery; and
- 3) When there is any significant change in the health status of the mother or child.

Revised: 9/04

## IX. Resources/Miscellaneous

## STANDARDS FOR WRITTEN WORK

1. Assignments must be legibly written on white paper with black ink or word processed. Utilize appropriate forms when designated for the assignment.
2. For purposes of orderliness, folders with pockets are required. Papers should not be folded unless specific directions are given to do so. The student's name should appear on the outside of the folder.
3. Only one side of the paper should be used.
4. Written work will have a cover sheet. (Exception may be clinical papers; check with the instructor for preferences.) Refer to example of cover sheet.
5. All written work will contain appropriate grammar, punctuation and spelling.
6. Pages will be numbered. Typed pages will be double spaced with one-inch margins.
7. Format provided by your instructor will be followed when writing major assignments.
8. All written assignments, no matter how small or large, must be the student's own work. If another person's work is submitted in its entirety or in part, the student is in violation of plagiarism rules. Plagiarism is defined by the *World Book Dictionary* as the thoughts, writings, inventions, or expressions of another used as one's own. To copy directly from a written source, even another student's paper, without giving credit for the information is plagiarism. Plagiarism will result in academic penalties determined by the instructor.

### EXAMPLE OF REFERENCE SHEET

#### REFERENCES

Baker, C. (1991). Our stories, ourselves: Reflecting on practice. *American Journal of Nursing*, 91(10), 66-69.

Kearney, M.H., & Cronenwett, L. (1991). Breastfeeding and employment. *Journal of Obstetric, Gynecologic, and Neonatal Nursing*, 20(6), 471-480.

Kozier, B., Erb, G. & Sims, L.K. (1991). *Fundamentals of nursing* (4<sup>th</sup> ed.). Redwood, CA: Addison-Wesley Nursing.

Smeltzer, S.C., Bare, B.G., (1995). *Brunner and Suddarth's textbook of medical-surgical nursing*. (8<sup>th</sup> ed.). Philadelphia: Lippincott.

Taylor, C., Lillis, C., & LeMone, P. (1993). *Fundamentals of nursing: The art and science of nursing care*. (2<sup>nd</sup> ed.). Philadelphia: J.B. Lippincott.

Williams, S.R. (1993). *Nutrition and diet therapy* (7<sup>th</sup> ed.). St. Louis: C.V. Mosby.

#### Citing A Web Site

To direct readers to an entire Web site (but not a specific document on the site), it's sufficient to give the address of the site in the text. For example, Kidspsych is a wonderful interactive Web site for children (<http://www.kidspsych.org>). No reference entry is needed.

## Creating References for specific Documents on a Web Site

Web documents share many of the same elements found in a print document (e.g., authors, titles, dates). Therefore, the citation for a Web document often follows a format similar to that for print, with some information omitted and some added. Here is an example:

An action alert posted by our Public Policy Office:

American Psychological Association.(1955,Sept 14.).APA public policy action alert:  
Legislation would affect grant recipients [Announcement]. Washington, DC: Author.  
Retrieved January 25, 1996, from the World Wide Web:  
[Http://www.apa.org/ppo/istook.html](http://www.apa.org/ppo/istook.html)

Revised: 9/04

EXAMPLE OF COVER SHEET

ODESSA COLLEGE ASSOCIATE DEGREE NURSING PROGRAM

TITLE

STUDENT'S NAME

(title page should include the instructor's name, date, course number and any information specifically requested by the instructor)

## **A SELF-CHECK PROCEDURE FOR STUDENT TIME MANAGEMENT**

### **Step One:**

List the number of credit hours you will be taking this semester.

### **Step Two:**

Now, multiply that figure times three (3). This total equals 1 hour in class plus 2 hours study outside of class for each credit hour you are taking.

For instance, if you are taking 12 credit hours, that means you will spend 12 clock hours per week inside the classroom or lab. That alone will almost surely not give you passing grades. So you should count on spending, on the average, 2 more hours outside of class for each of those 12 hours inside class. So, 1 hour in class plus 2 hours outside of class equals 3 clock hours for every 1 credit hour. To get this figure, you would use the formula of  $12 \times 3 = 36$  for 12 credit hours.

### **Step Three:**

Show the average number of job hours you work each week.

### **Step Four:**

Now add the figures from Step Two and Step Three. This number is how many hours per week you should realistically expect to work, given these circumstances.

### **Step Five:**

Next, match your total to the following categories:

Category A (40 HOURS TOTAL OR LESS) = OPTIMUM TIME MANAGEMENT  
Congratulations—you have obligated yourself to a normal 40-hour week or less.

Category B (41-50 TOTAL HOURS) = DIFFICULT TIME MANAGEMENT  
You might be able to handle this load if you organize your time well.

Category C (51-60 TOTAL HOURS) = RISKY TIME MANGEMENT  
You should be aware that most people cannot handle this load successfully.

Category D (MORE THAN 60 TOTAL HRS) =DANGEROUS TIME MANAGEMENT  
You almost certainly cannot carry this load successfully.

### **Step Six:**

If your load is in Category C or D, you should seriously consider either working fewer job hours or taking fewer credit hours. Failing grades are of no help to your goal of becoming a nurse.

Reviewed: 6/05

## **LEARNING RESOURCE CENTER (LRC)**

The Learning Resource Center (LRC) at Odessa College is open Monday through Thursday from 7:30 AM to 9:30 PM and Friday 7:30 AM to 1:00 PM during fall and spring semesters. Summer hours are 7:30 AM to 9:00 PM Monday through Thursday. The LRC is located in the center of the Odessa College campus. LRC staff is helpful and will gladly provide tours or assistance as needed.

Students must have a current student identification card to check-out LRC materials. Reserve materials are located at the circulation desk. The ID card must be left at the desk when viewing reserve materials. Books may be checked out for two weeks. Reference books, shelved along the perimeter walls of the first floor may not be checked out. Current periodicals are located on the first floor. Back issues are located on the second floor. Periodicals do not check out.

All borrowed materials must be returned at the close of the semester. The Registrar is notified of delinquencies and transcripts are held until items are returned. Outstanding delinquencies prohibit the student from enrolling.

WebCat is the LRC's searchable on-line catalog. The catalog is accessible via the Internet. WebCat dedicated computers are located on the first floor of the LRC.

netLibrary is a special Web site that houses Odessa College's entire online collection of nearly 38,000 electronic books, known as eBooks. eBooks can be checked out by creating a netLibrary account.

Photocopying may be done at two LRC copiers. The cost is 10 cents per page, payable at the copiers. The LRC front desk will not provide change for more than \$5.00.

There are several online indexes and databases available. Go to the OC Web site ([www.odessa.edu](http://www.odessa.edu)) and select Learning Resource Center. Click Online Research. Remote access is available via any computer with Internet access. Printed indexes are also available with most of these located on the northeast corner of the first floor.

Students may obtain books from the University of Texas of the Permian Basin, Texas Tech Health Sciences Center of the Permian Basin, and Midland College. Check with the LRC staff regarding current policies.

Reviewed: 6/05

## **STUDENT RESOURCES FOR SUCCESS**

It is the goal of the Nursing Program for every student to be successful. There are numerous resources to help students improve skills and knowledge, as well as decrease stress, improve retention, and enhance learning.

Early intervention for academic problems is important for success. Nursing faculty encourage students to visit during office hours or by appointment. Instructors can assist students to target solutions for identified problems, such as developing test taking skills, prioritization strategies, and study skills specific to nursing content. Instructors may refer students to other sources for assistance.

Odessa College's counseling department can assist students with academic issues as well as offer short-term crisis counseling. The counselors can make referrals as necessary.

The Student Learning Center (SLC) is a valuable resource. The SLC is located on the first floor of the Learning Resource Center. The Center includes the Tutoring Center (LRC 301); Basic Skills Lab (LRC 302); and an open computer lab (LRC 303). The hours of operation correspond to that of the LRC. The following services are offered:

### **Tutoring**

Tutoring assistance is available for a variety of subjects including math, science, writing, speech, and developmental work. Nursing students can become tutors for other nursing students. Tutoring is free of charge but tutors do get paid. Nursing students interested in becoming tutors should first see the Program Director. Arrangements for tutoring are best made by appointment by calling the SLC at 432-335-6878. Walk-ins are welcome and are served as quickly as possible. On-line tutoring is available and interested students should contact the SLC Director for specific information.

### **Computer Lab**

Computer lab assistants can provide assistance with application of a variety of software programs. They can assist OC students to open email accounts. The open access lab is available to any OC student. In periods of heavy use, the lab prioritizes students who are working on course assignments. The student's work must be saved on a self-provided floppy disk or zip disk.

### **Other Assistance**

The SLC can assist students with a variety of educational issues including: test anxiety, math anxiety, stress management, time management, note taking skills, and critical skill development. The SLC Director provides numerous workshops throughout the year as well as works with individual students. The workshop schedule can be viewed by accessing the SLC department from the Odessa College Web site.

Approved: 6/05

## PINNING AND COMMENCEMENT

Completion of the Nursing Program is a time for celebration. A traditional pinning ceremony is held for each graduating class. The Odessa College Associate Degree Nursing Pin is placed on each graduate in a candle light ceremony. Friends and family should be invited to join in the occasion. Time and place are announced well in advance. The ceremony is usually held the week of graduation.

Students pay for the pin at the time fees and tuition are remitted for the last semester. If for any reason the student does not graduate, a refund can be processed for the pin. The Nursing Office takes responsibility for picking up the pins from the book store.

Student awards are presented at pinning:

1. Nightingale Award – peer award to the student who represents nursing at its finest. Fourth semester students elect the recipient.
2. Academic Excellence Award – presented to the student with the highest GPA in core nursing courses.
3. Clinical Excellence Award – presented to the student voted by faculty for outstanding clinical performance.

Students who do not complete RNSG 2331 Advanced Concepts of Adult Health and its corequisite clinical course *are not* eligible to participate in the pinning ceremony at the conclusion of the semester where the student should have completed the courses. When the courses are repeated and satisfactorily completed, the student may participate in the pinning ceremony event at that semester's conclusion. Students who have passed RNSG 2331 and clinical but have not achieved success on HESI *may* participate in the pinning ceremony. Consult with the Program Director if questions arise regarding eligibility to participate in the pinning ceremony.

Odessa College has two commencement ceremonies a year: May and December. Nursing graduates must follow college guidelines regarding participation. Questions about eligibility to participate in commencement should be addressed to the Office of the Registrar. The application for graduation must be completed by the deadline published in the catalog. The Nursing Department will assist graduates to complete the form and provide the required degree plan.

Approved: 6/05; 7/07

**Odessa College**  
**Health and Safety Requirements for Nursing and Allied Health Students**  
**Policy and Release of Information**

Student admitted to Odessa College nursing and allied health programs must submit to a criminal background check during or shortly before the first semester of the program's curriculum. The student understands that the background check application will be submitted to the investigation agency selected by the College. The results of the investigation will be reviewed by the department chair/program director or dean. The College President, Vice President for Instruction, Vice President for Student Services, and the College's legal counsel may also have access to the background check results in certain situations, such as but not limited to, a student's removal from the nursing or allied health program due to the background check. Results of criminal background checks will be maintained in a locked space with immediate access only by the department chair/program director or dean.

The student understands that the nursing or allied health program must provide the results of the criminal background check to participating clinical agencies (hospitals, clinics, etc.), and that the student must be approved by those agencies before he/she is allowed to do clinical practice in the agency. Sufficient clinical practice is a requirement of the regulatory agencies governing health careers programs and students must have sufficient clinical practice to satisfy course and program objectives. Not being allowed to enter a clinical site makes it impossible for students to satisfy course and program objectives and therefore the student would be required to withdraw from the nursing or allied health program.

The student further understands that clinical agencies require proof of compliance with health and safety requirements including the individual's immunization record, which may include results of laboratory testing confirming immunity to certain diseases, results of urine drug screening, and results of testing for tuberculosis (skin test or recent chest x-ray). The nursing or allied health program director/department chair or dean or their designee will provide this information to the clinical agencies which request that such information be provided.

By signing and dating below, the student acknowledges that he/she has read and understands this policy and gives the nursing or allied health program permission to release information related to health and safety. Further, permission is granted to conduct the criminal background check.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**ODESSA COLLEGE  
ASSOCIATE DEGREE NURSING PROGRAM  
STUDENT HANDBOOK CONTRACT**

\_\_\_\_\_ (print name) I have read and will abide by the policies, rules, and guidelines stated in the Student Handbook for the Odessa College Associate Degree Nursing Program. I understand that the nursing student handbook is supplemental to the policies of Odessa College, and that I must also adhere to OC policies, procedures, and guidelines.

\_\_\_\_\_