



CENTRAL OREGON COMMUNITY COLLEGE

2014 - 2015 Nursing Program

Nursing Program
Student Handbook

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CENTRAL OREGON COMMUNITY COLLEGE NURSING PROGRAM
Nursing Program Student Handbook

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CENTRAL OREGON COMMUNITY COLLEGE

College Mission

Central Oregon Community College promotes student success and community enrichment by providing quality, accessible, lifelong educational opportunities.

College Vision Statement

To achieve student success and community enrichment, COCC fosters student completion of academic goals, prepares students for employment, assists regional employers and promotes equitable achievement for the diverse students and communities.

Core Theme

Career and Technical Education

One- and two-year professional training programs for those who seek certificates or degrees that lead to employment in business, industry, the trades or government service as technicians or skilled workers.

Intended Student Learning Outcomes:

1. Perform as a team member exemplifying professional practices and behavior.
2. Apply critical thinking and problem-solving skills that reflect best practice.
3. Communicate effectively and appropriately within a professional setting in both written and oral form.
4. Demonstrate knowledge and apply skills essential to the discipline.
5. Practice safety within the professional setting.
6. Research, interpret, and apply data/information in the professional setting.

NURSING PROGRAM PURPOSE, VISION, AND PHILOSOPHY

Nursing Program Purpose

To provide an accredited nursing education program that prepares students to receive the Associate in Applied Science Degree in Nursing, and qualifying them to apply for the licensing exam for registered nurses. Central Oregon Community College Nursing Program graduates are prepared to give individualized, holistic patient care in beginning-level nursing staff positions in the role as provider of care, as manager of care, as communicator, as teacher, and as member within the discipline of nursing.

Nursing Faculty Vision

The Nursing Department provides current curriculum resulting in nurses who are highly motivated, diversely skilled with the ability to think critically. This results in employees who are team players, flexible, and effective communicators. The Nursing Faculty are recognized as highly committed to the Art and Science of Nursing. The Nursing Faculty support students in achieving success by providing a respectful and accountable learning environment.

Nursing Department Philosophy

Core Beliefs about Nursing

- ◆ Nursing is caring for and about people in a respectful manner that incorporates professionalism, compassion, and empathy.
- ◆ The goals of Nursing are to:
 - facilitate wellness.
 - minimize further deterioration in illness.
 - restore the individual's ability to function maximally.
 - provide comfort and dignity to the terminally ill.
- ◆ Each individual is an integrated whole consisting of physiological, intellectual, spiritual, emotional, cultural and social dimensions. All components of the person are mutually interactive with the environment.
- ◆ Each level of nursing is important and valued (Certified Nursing Assistants, Licensed Practical Nurses, Registered Nurses, and Advanced Practice Nurses). The scopes of nursing practice are defined by the Boards of Nursing and guide the education and the evolving roles of nurses.
- ◆ The role of the nurse is to assess, diagnose, plan, implement, and evaluate in accordance with educational preparation.
- ◆ A wide variety of theoretical frameworks provide a basis for identifying and prioritizing patient care in the application of the Nursing Process. Key concepts include holism, functional health patterns, and hierarchy of needs.

Core Beliefs about Nursing Education

The Nursing Faculty model professionalism. As team members we exhibit mutual trust and respect, recognizing the strengths each person brings to the process. We have an environment which supports open communication and which encourages sharing diverse opinions. Team members are flexible and adapt to changes in health care as they effect nursing education.

The Nursing Faculty believes in Associate Degree Nursing education and believes the ADN nurse as an appropriate entry level into RN practice. An associate degree education prepares students as knowledgeable, skilled, and critical thinking nurses with a strong foundation in leading and managing patient care at the bedside.

The Nursing Faculty believes in a seamless continuum of Nursing Education with multiple exit and entry points, from certified nursing assistant to a doctorate in nursing. To this end, this Faculty supports Nursing Education endeavors that shares in this belief and will strive to form partnerships with those who value Associate Degree Nursing and the development of an educational system that enhances the continuation of Nursing Education.

Core Beliefs about Teaching and Learning

Learning is a dynamic process that involves a change in knowledge, skills, attitudes, values, and beliefs. The learning process requires readiness, motivation, self-direction, and active participation by the student.

Students can expect the following from all Nursing Faculty members:

In the Nursing Program:

- Implement the planned curriculum.

In Lecture:

- Maintain current knowledge of content area.
- Provide materials to guide learning.

In Group Learning Activities:

- Direct student discussion to aid in meeting learning outcomes.
- Act as a resource person.
- Evaluate student performance and preparation for the discussion.

In the Learning Resource Center:

- Act as a resource person to facilitate student learning of clinical skills.
- Provide necessary equipment for use in the lab to meet learning outcomes.
- Provide opportunities for supervised practice.
- Evaluate student performance.

In the Clinical Practicum:

- Facilitate learning experiences appropriate to clinical learning outcomes.
- Assess student's preparedness for clinical assignments.
- Guide and/or assist students in providing nursing care.
- Provide opportunities for conferences.
- Evaluate student performance.

In Individual Conferences:

- Act as a resource for addressing problems, questions, and concerns.
- Provide academic advising.

The Nursing Faculty members expect the following from all students:

In Lecture:

- Complete pre-class assignments and review materials and readings before coming to class.
- Review anatomy and physiological principles from previous course work necessary for the understanding of the class content.
- Arrive on time to class.
- Attend lecture classes.
 - The Nursing Program is a fast-paced program of study and student success is promoted by full participation.
- Participate in class activities.
- Complete after-class reviews and study questions.

For Exams:

- Utilize class outcomes, objectives, study questions and/or learning activities to guide studies.
- Sit for exams at scheduled times unless prior arrangements are made.
- Practice the highest standards of academic honesty.
- Follow program policy for appealing test questions.

For Group Learning Activities:

- Prepare for discussion by reviewing class materials in advance.
- Participate in group discussions offered as a part of the learning experience.
- Demonstrate respect for the views of group discussion participants.
- Arrive on time to scheduled group discussions.

In the Learning Resource Center:

- Prepare in advance for all LRC activities.
- Arrive on time to all scheduled LRC activities.
- Notify the LRC faculty well in advance if absence is unavoidable.
- Engage in adequate practice for skill competency.
- Perform all critical elements of a skill.
- Approach learning and evaluation activities openly with a willingness to receive feedback.
- Practice skills in the clinical setting only after achieving competency in the practicum lab.

In the Clinical Practicum:

- Arrive on time to the clinical setting.
- Follow all healthcare facility policies regarding parking and dress code.
- Prepare for clinical assignment according to the guidelines established for each Nursing course.
- Inform nurse and clinical instructor of progress of patient care, and report concerns in a timely fashion.
- Report off duty to patient care team on leaving the Nursing unit for any reason.

Technical:

- Student success is enhanced by reliable access to a computer and internet.
 - See <http://blackboard.cocc.edu/CompRecommend/default.aspx>
 - Students are highly recommended to have completed CIS 120 or pass the IC3 exams prior to admission to the Nursing Program, or to complete these requirements as soon as possible while in the program.

Program Feedback from Students

Each nursing class will be provided the opportunity to give feedback to the nursing faculty. Students will be asked for input and may be asked to gather student responses for program decision making.

Nursing Program Outcomes

Practical Nurse Program Outcomes:

- **As Provider of Care:** Provide patient-centered care based on established standards and contribute to and participate in nursing care delivery.
- **As Manager of Care:** Set priorities, organize and deliver nursing care to groups of patients.
- **As Communicator:** Communicate effectively, therapeutically, and professionally with a diverse group of individuals.
- **As Teacher:** Reinforce teaching plans or teach from established standards.
- **As Member within the Discipline of Nursing:** Provide holistic nursing care based on ethical/legal principles of healthcare within the scope of practice of the practical nurse.

Practical Nurse Competencies:

Note: These educational competencies came from the Council of Associate Degree Nursing Competencies Task Force report entitled "Educational Competencies for Graduates of Associate Degree Nursing Programs". The limited competencies for the PN graduate were identified by the COCC Nursing Faculty based on LPN Scope of Practice as defined by the Oregon State Board of Nursing.

As Provider of Care: Assessment

For the PN, assessment is the collection of data that would contribute to appraisal of the patient's health status. Comprehensive assessment provides a holistic view of the patient, which includes dimensions of physical, developmental, emotional, psychosocial, cultural, spiritual, and functional status. Assessment involves the orderly collection of information from multiple sources to establish a foundation for provision of nursing care, and includes identification of available resources to meet patient needs.

The PN graduate will observe and report the:

- interaction of patterns of the individual patient or significant support person(s).
- impact of developmental, emotional, cultural, religious, and spiritual influences on the patient's health status.
- patient's health status including physical, cognitive, psychosocial, and functional data.
- patient's response to actual or potential health problems.
- patient's response to interventions.
- patient for changes in health status and identified needs.
- patient's ability to access available resources.
- environmental factors that may impact the patient's health status.

As Provider of Care: Clinical Decision Making

PNs contribute to the clinical decision making process, which, when effective, results in finding solutions, individualizing care, and assuring the delivery of accurate, safe care that moves the patient and support person(s) toward positive outcomes. Evidence based practice and the use of critical thinking provide the foundation for appropriate clinical decision making.

The PN graduate will:

- make clinical judgments to ensure accurate and safe care.
- evaluate the effectiveness of caring interventions.
- modify patient care as indicated by the response to interventions.
- participate in problem identification and data collection for research, quality control, or improvement processes to meet patient outcomes.
- utilize information resources, collected electronically or through the literature, to guide safe practice.

As Provider of Care: Caring Interventions

Caring interventions are those nursing behaviors and actions that assist patients in meeting their needs. These interventions are based on a knowledge and understanding of the natural sciences, behavioral sciences, nursing theory, nursing research, and past nursing experiences. Caring is the “being with” and “doing for” that assist patients to achieve the desired results. Caring behaviors are nurturing, protective, compassionate, and person-centered. Caring creates an environment of hope and trust, where patient choices related to cultural values, beliefs, and lifestyle are respected.

The PN graduate will:

- protect and promote the patient's dignity.
- identify and honor the emotional, cultural, religious, and spiritual influences on the patient's health.
- demonstrate caring behavior towards the patient, significant support person(s), peers, and other members of the healthcare team.
- provide accurate and safe nursing care in diverse settings.
- implement the prescribed care regimen within the legal, ethical, and regulatory framework of nursing practice.
- perform nursing skills competently.
- provide a safe physical and psychosocial environment for the patient.
- assist the patient and significant support person(s) to cope with and adapt to stressful events and changes in health status.
- assist the patient to achieve optimum comfort and functioning.

As Manager of Care

Managing care is the efficient, effective use of human, physical, financial, and technological resources to meet patient needs and support organizational outcomes.

The PN graduate will:

- prioritize patient care.
- Assist in the implementation of an individualized plan of care for patients and significant support person(s).
- Facilitate the continuity of care within and across healthcare settings.

As Manager of Care: Collaboration

Collaboration is the shared planning, decision-making, problem solving, goal setting, and assumption of responsibilities by those who work together cooperatively, with open professional communication.

The PN graduate will:

- work cooperatively with others to achieve patient and organizational outcomes.

As Communicator

Communication in nursing is an interactive process through which there is an exchange of information that may occur verbally, non-verbally, in writing, or through information technology. Therapeutic communication is an interactive verbal and non-verbal process between the nurse and patient that assists the patient to cope with change, develop more satisfying interpersonal relationships, and integrate new knowledge and skills.

The LPN graduate will:

- utilize therapeutic communication skills when interacting with patients and significant support person(s).
- communicate relevant, accurate, and complete information in a concise and clear manner including written and verbal information.
- protect confidential information.
- utilize information technology for patient care.
- utilize appropriate channels of communication to achieve positive patient outcomes.

As Teacher

Teaching and learning processes are used to promote and maintain health and reduce risks, and are implemented in collaboration with the patient, significant support person(s), and other members of the healthcare team.

The PN graduate will:

- contribute to an individualized teaching plan based on assessed needs.
- provide educational materials to the patient and significant support person(s) as needed.
- reinforce teaching to the patient and significant support person(s).
- document response(s) of the patient and significant support person(s) towards achievement of identified learning outcomes.

As Member within the Discipline of Nursing

Professional behaviors within nursing practice are characterized by a commitment to the profession of nursing. These behaviors include accountability for one's own actions, practicing according to the standard of care, valuing the profession of nursing, caring and concern for others, and participating in ongoing professional development.

The LPN graduate will:

- practice within the ethical, legal, and regulatory frameworks of nursing and standards of practical nursing professional nursing practice.
- report unsafe practices of healthcare providers using appropriate channels of communication.
- demonstrate accountability for nursing care given by self.
- use standards of nursing practice to perform patient care and monitor patient responses.
- advocate for patient rights.
- maintain organizational and patient confidentiality.
- practice within the parameters of individual knowledge and experience.
- participate in lifelong learning and understand the purpose of professional organizations.
- recognize self-learning needs.

- Delineate and maintain appropriate professional boundaries in the nurse-patient relationship.

Associate Degree Nurse Program Outcomes:

- **As Provider of Care:** Apply the nursing process to provide and direct holistic, individualized patient care in acute, critical, ambulatory, community-based, and long term care settings.
- **As Manager of Care:** Coordinate and manage the delivery of care to meet the health care needs for a group of patients.
- **As Communicator:** Uses therapeutic and professional communication skills to achieve patient outcomes in collaboration with healthcare providers from across the continuum of practice settings.
- **As Teacher:** Develop and implement individualized teaching plans for patients, families, caregivers, and members of the health care team.
- **As Member within the Discipline of Nursing:** Internalize and model professional behaviors and values of the registered nurse.

RN COMPETENCIES:

Note: These educational competencies came from the Council of Associate Degree Nursing Competencies Task Force report entitled "Educational Competencies for Graduates of Associate Degree Nursing Programs". Competencies for the RN graduate are in alignment with the Oregon Nurse Practice Act and the RN Scope of Practice as defined by the Oregon State Board of Nursing.

As Provider of Care: Assessment

Assessment is the collection, analysis, and synthesis of relevant data for the purpose of appraising of the patient's health status. Comprehensive assessment provides a holistic view of the patient, which includes dimensions of physical, developmental, emotional, psychosocial, cultural, spiritual, and functional status. Assessment involves the orderly collection of information from multiple sources to establish a foundation for provision of nursing care, and includes identification of available resources to meet patient needs. Initial assessment provides a baseline for future comparisons that can be made in order to individualize patient care. Ongoing assessment and reassessment are required to meet the patient's changing needs.

The RN graduate will assess the:

- interaction of patterns of the individual patient or significant support person(s).
- impact of developmental, emotional, cultural, religious, and spiritual influences on the patient's health status.
- patient's health status by completing a health history and performing a physical, cognitive, psychosocial, and functional assessment.
- patient and significant support person(s) for learning strengths, capabilities, barriers, and educational needs.
- patient's response to actual or potential health problems.
- patient's response to interventions.
- patient for changes in health status and identified needs.
- patient's ability to access available community resources.
- environmental factors that may impact the patient's health status.
- strengths, resources, and needs of patients within the context of their community.

As Provider of Care: Clinical Decision Making

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

The RN graduate will:

- make clinical judgments and management decisions to ensure accurate and safe care.
- analyze and utilize assessment and reassessment data to plan care.
- evaluate the effectiveness of care provided in meeting patient outcomes.
- modify patient care as indicated by the evaluation of outcomes.
- participate in problem identification and data collection for research, quality improvement, or risk management processes to meet patient outcomes.
- use evidence-based information, collected electronically or through the literature, to support clinical decision-making.

As Provider of Care: Caring Interventions

Caring interventions are those nursing behaviors and actions that assist patients in meeting their needs. These interventions are based on a knowledge and understanding of the natural sciences, behavioral sciences, nursing theory, nursing research, and past nursing experiences. Caring is the “being with” and “doing for” that assist patients to achieve the desired results. Caring behaviors are nurturing, protective, compassionate, and person-centered. Caring creates an environment of hope and trust, where patient choices related to cultural values, beliefs, and lifestyle are respected.

The RN graduate will:

- protect and promote the patient’s dignity.
- identify and honor the emotional, cultural, religious, and spiritual influences on the patient’s health.
- demonstrate caring behavior towards the patient, significant support person(s), peers, and other members of the healthcare team.
- provide accurate and safe nursing care in diverse settings.
- implement the prescribed care regimen within the legal, ethical, and regulatory framework of nursing practice.
- perform nursing skills competently.
- provide a safe physical, psychological and socio-cultural environment for the patient.
- assist the patient and significant support person(s) to cope with and adapt to stressful events and changes in health status.
- assist the patient to achieve optimum comfort and functioning.
- prepare the patient and significant support person(s) for intervention, treatment modalities, and self-care.
- support the patient and significant support person(s) when making healthcare and end-of-life decisions.
- adapt care in consideration of the patient’s values, customs, culture, and/or habits.

As Communicator

Communication in nursing is an interactive process through which there is an exchange of information that may occur verbally, non-verbally, in writing, or through information technology. Those who may be included in this process are the nurse, patient, significant support person(s), other members of the healthcare team, and community agencies. Therapeutic communication is an interactive verbal and non-verbal process between the nurse and patient that assists the patient to cope with change, develop more satisfying interpersonal relationships, and integrate new knowledge and skills.

The RN graduate will:

- communicate relevant, accurate, and complete information in a concise and clear manner.
- report and document assessments, interventions, and progress toward patient outcomes.
- protect confidential information.
- utilize information technology to support and communicate the planning and provision of patient care.
- utilize appropriate channels of communication to achieve positive patient outcomes.
- utilize therapeutic communication skills when interacting with patients and significant support person(s).

As Teacher

Teaching and learning processes are used to promote and maintain health and reduce risks, and are implemented in collaboration with the patient, significant support person(s), and other members of the healthcare team. Teaching encompasses the provision of health education to promote and facilitate informed decision-making, achieve positive outcomes, and support self-care activities.

The RN graduate will:

- develop an individualized teaching plan based on assessed needs.
- provide the patient and significant support person(s) with the information to make choices regarding health.
- teach the patient and significant support person(s) the information and skills needed to achieve desired learning outcomes.
- evaluate the progress of the patient and significant support person(s) towards achievement of identified learning outcomes.
- modify the teaching plan based on evaluation of progress toward meeting identified learning outcomes.
- provide assistive personnel with relevant instruction to support achievement of patient outcomes.

As Manager of Care

Managing care is the efficient, effective use of human, physical, financial, and technological resources to meet patient needs and support organizational outcomes.

The RN graduate will:

- prioritize patient care.
- coordinate the implementation of an individualized plan of care for patients and significant support person(s).
- facilitate the continuity of care within and across healthcare settings.
- delegate aspects of patient care to qualified assistive personnel.
- supervise and evaluate the activities of assistive personnel.
- adapt the provision of patient care to changing healthcare settings and management systems.
- assist the patient and significant support person(s) to access available resources and services.
- implement nursing strategies to provide cost efficient care.

- demonstrate competence with current technologies.

As Manager of Care: Collaboration

Collaboration is the shared planning, decision-making, problem solving, goal setting, and assumption of responsibilities by those who work together cooperatively, with open professional communication. The nurse participates in the team approach to holistic, patient-centered care across healthcare settings. The nurse functions as advocate, liaison, coordinator, and colleague as participants work together to meet patient needs and move the patient toward positive outcomes. Collaboration requires consideration of patient needs, priorities and preferences, available resources and services, shared accountability, and mutual respect.

The RN graduate will:

- coordinate the decision making process with the patient, significant support person(s), and other members of the healthcare team.
- work cooperatively with others to achieve patient and organizational outcomes.
- collaborate with the patient, significant support person(s), and other members of the healthcare team to evaluate progress toward achievement of outcomes.
- interact creatively and openly with others to solve problems to achieve patient goals and outcomes.
- collaborate to bring about fair solutions that balance differing needs, values, and motivations for the purpose of achieving positive patient outcomes.

As Member within the Discipline of Nursing

Professional behaviors within nursing practice are characterized by a commitment to the profession of nursing. These behaviors include accountability for one's own actions, practicing according to the standard of care, valuing the profession of nursing, caring and concern for others, and participating in ongoing professional development.

The RN graduate will:

- practice within the ethical, legal, and regulatory frameworks of nursing and standards of professional nursing practice.
- report unsafe practices of healthcare providers using appropriate channels of communication.
- demonstrate accountability for nursing care given by self and/or delegated to others.
- use standards of nursing practice to perform and evaluate patient care.
- advocate for patient rights.
- maintain organizational and patient confidentiality.
- practice within the parameters of individual knowledge and experience.
- describe political processes as they affect agency specific healthcare.
- participate as a member of professional organizations.
- serve as a positive role model within healthcare settings and the community at large.
- recognize the impact of economic, political, social, and demographic forces on the delivery of healthcare.
- participate in lifelong learning.
- develop and implement a plan to meet self-learning needs.
- delineate and maintain appropriate professional boundaries in the nurse-patient relationship.

Associate of Applied Science Degree in Nursing (RN) Degree/Course Requirements

PRE-NURSING

	Cr	Fall	Cr	Winter	Cr	Spring
Prerequisites	4	BI 231	4	BI 232	4	BI 233
	4	MTH 95	4	WR 121	4	BI 234
	<i>Subtotal</i>				*	NUR 095 <i>or</i> CNA
	8		8		8	
Support Courses	5	CH 104, or 221	4	PSY 215 or 215N	4	FN 225
	0-4	CIS 120 <i>-or comp</i>			4	WR 122, or 227
	<i>Subtotal</i>	5-9	4		8	
Total Credits	13-17		12		16	

Prerequisite Course Credits: 24

Must be completed prior to application to the nursing program.

** Admission requirement*

Support Course Credits: 17-21

Strongly recommended to complete prior to application to the nursing program.

Total Pre-Nursing Credits: 41-45

FIRST YEAR NURSING

	Cr	Fall	Cr	Winter	Cr	Spring
First Year Nursing	11	NUR 106	10	NUR 107	11	NUR 108
Total Nursing Credits	11		10		11	

Total First Year Credits: 32

SECOND YEAR NURSING

	Cr	Fall	Cr	Winter	Cr	Spring
Second Year Nursing	11	NUR 206	10	NUR 207	9	NUR 208
Total Nursing Credits	11		10		9	

Total Second Year Credits: 30

Total Nursing Course Credits: 62

Total ADN Program Credits: 103-107

Practical Nurse Program (PN) One-Year Certificate Program Degree/Course Requirements

PRE-NURSING

	Cr	Fall	Cr	Winter	Cr	Spring
Prerequisites	4	BI 231`	4	BI 232	4	BI 233
	4	MTH 95	4	WR 121	4	BI 234
					*	NUR 095 <i>or</i> CNA
<i>Subtotal</i>	<i>8</i>		<i>8</i>		<i>8</i>	
Support Courses	0-4	CIS 120 or comp	4	PSY 215 or 215N		
<i>Subtotal</i>	<i>0-4</i>		<i>4</i>			
Total Credits	8-12		12		8	

Prerequisite Course Credits: 24

Must be completed prior to application to the nursing program.

** Admission requirement*

Support Course Credits: 4-8

Strongly recommended to complete prior to application to the nursing program.

Total Pre-Nursing Credits: 28-32

FIRST YEAR NURSING- PN

	Cr	Fall	Cr	Winter	Cr	Spring
Nursing Program	11	NUR 106`	10	NUR 107	11	NUR 108
Total Credits	11		10		11	

Total Nursing Course Credits: 32

Total PN Program Credits: 60-64

Nursing Program Policies Relating to Communication, Professional Behavior, and Attendance

TITLE: Communication with the Nursing Program

PURPOSE: The Nursing Program can be dynamic, and changes are primarily communicated to students electronically. Students are expected to daily check the Blackboard site and COCC email for announcements from Nursing Faculty.

- POLICY:**
- ◆ It is the responsibility of the student to regularly monitor for program or nursing course announcements.
 - ◆ Students may make verbal requests to nursing faculty regarding individual needs, but are required to follow-up in writing (email) with the faculty member.
 - ◆ Students are required to update the Banner system with any changes in contact information (phone numbers, address); and report these changes to the Department Administrative Assistant and Nursing Clinical Instructor.
 - ◆ Students are required to forward their COCC email to an alternative email address if it is the desire of the student to use this email as his/her primary address.
 - ◆ Students failing to maintain current contact information will bear the consequences of failed communications.

TITLE: Problem-Solving with the Nursing Program

PURPOSE: The Nursing Program is collaborative taught by a group of full and part time faculty organized into three teams. Some Faculty teach across teams. Following proper patterns of communication are necessary for maintaining clear, open, and trusted communication among Faculty and Students. Therefore, students are required to follow the procedure for problem solving.

PROCEDURE Problem-Solving Process Using Appropriate Lines of Communication

- Questions and concerns about a specific lecture or classroom presentation should be pursued with the instructor who conducted the class.
- Questions and concerns related to clinical experiences should be addressed with the assigned clinical instructor.
- General questions, concerns, and comments about the Nursing Program can be

discussed with any Nursing Faculty member, Program Director or Department Chair. Opportunities for students as a group to express satisfaction, dissatisfaction, and/or concerns about the Nursing Program and courses are provided throughout the academic year using written evaluations and student representatives.

- Students having problems with an individual student should try first to resolve the issue directly. Students may approach Faculty, the Program Director or the Department Chair for guidance in how to resolve issues.
- Students that feel that they are being harassed in any manner should contact a College Faculty or Staff member for assistance.
- Students having problems with an individual instructor should try first to resolve the issue with the instructor directly. Students approaching other Faculty, the Program Director or the Department Chair for help will initially be referred back to the individual instructor.
- Students will not discuss a problem regarding an individual Faculty or Staff member with another Faculty or Staff member. Faculty/staff do not discuss others and will refer the student back to the individual instructor, or to the Department Chair for further guidance.
- Students having unresolved problems with an individual instructor or student after taking the above steps may seek guidance from the Nursing Department Chair. If the problem remains unresolved, the student may meet with the Instructional Dean of the Nursing Program for further guidance.

TITLE: Classroom Behavior

POLICY: Disruptive, unsafe, or abusive conduct that deprives other students of the right to learn or that interferes with the instructional program in the classroom will not be tolerated. Faculty will be fair, firm, and consistent in enforcing the rules.

PROCEDURE: The Student will:

1. Attend class regularly.
2. Arrive on time and stay throughout class.
3. Arrange for early departure from class with the instructor at the beginning of class. *Please sit near the door to decrease disruption of others.*
4. Place electronic devices on **silent** mode and out of site. Students are prohibited from making/taking calls, texting, or otherwise communicating

using electronic devices during learning activities in the classroom, lab, or clinical settings. Special circumstances for receiving incoming communications must be approved by a Team Coordinator.

5. Avoid eating meals during class, please use break times.
6. Avoid sleeping during class. *You will be woken up and asked to leave.*
7. Maintain relationships with nursing faculty and students that are mutually respectful during classroom learning conversations, and students will comply with directions promptly and courteously.
8. Notify faculty in the learning environment immediately of disruptive student behaviors.
9. Participate in the development of additional classroom expectations generated by students during Fall course orientation sessions.

TITLE: Expectation for Using Wireless Technologies in the Classroom

POLICY: Students are encouraged to bring laptops or other technology tools that are used to take notes or manage class materials, but use them respectfully.

PROCEDURE: The Student will respect the instructor and peers by:

1. Engaging in the planned learning activities while using laptop computers or other technology tools in the classroom.
2. Refraining from accessing the internet, checking emails, and chatting online during class.
3. Refraining from doing 'instant searches' to challenge the instructor's presentation during class time.

TITLE: Professional Behaviors in Use of Electronic and Social Media

POLICY: All students are encouraged to set their blog or social networking profiles to "private". A student who communicates via a social networking site in an unprofessional manner with respect to Central Oregon Community College, the Nursing Program, our clinical affiliates, patients, faculty, staff, or students will be progressed by the appropriate Nursing Faculty Team, the Nursing Program Director, the Department Chair, and other College representatives as appropriate. Examples of unprofessional behavior include: posting negative, incorrect, or damaging material (through images, pictures, or statements),

communicating disrespectfully, breaching confidentiality, or discussing inappropriate or illegal activities as defined by the Nursing Program Handbooks and the Oregon State Board of Nursing.

Social Media sites established by students for a COCC Nursing class cohort are required to be supervised by the Nursing Program Administrative Assistant. Potential FERPA and HIPAA issues will be monitored for and corrective action taken.

TITLE: Course Requirements and Mandatory Attendance

POLICY: Nursing courses include attendance at Theory, Learning Resource Center (LRC) sessions, and off-campus clinical experiences. Courses require the completion of assigned readings, computer assignments, group assignments, and written work. Students are responsible for completing the course requirements outlined in the Course Syllabus. Attendance is mandatory for course related activities including: orientation sessions, clinical, alternative clinical experiences, LRC Instruction, LRC Open Supervised Practice Sessions, LRC Coaching Sessions, LRC Check-offs, LRC Comprehensive assessments, and Clinical SIMULATION labs.

Students are expected to meet the scheduled times for classes, exams, and practicum learning activities. Students are expected to adjust personal schedules, including work and childcare, in order to meet course requirements. Students are expected to have reliable transportation for attendance at clinical assignments around the college district. Students should be prepared to be scheduled for off campus learning experiences on day, evening and night shift, and at all clinical locations in Bend, Redmond, Prineville, Madras, and La Pine.

We believe Lecture, Clinical and LRC practicum learning experiences are essential for student success. However, we also understand that in the case of illness it is best that the student remain home. Temporary health problems, including injuries, which produce practicum absences, may interfere with a student's successful completion of course outcomes. If a student is making satisfactory progress towards meeting course outcomes, an absence(s) may not interfere with the successful completion of the course. Students who miss mandatory practicum experiences, including clinical, community-based or other off-campus experiences, and LRC skills lab activities, will have to bear the consequences of missing out on opportunities to demonstrate their satisfactory performance for the outcomes of the course. **One consequence may be failing the course.**

TITLE: Absences from Clinical and Learning Resource Center Activities

POLICY: **Clinical and LRC Attendance:** Students are required to attend all scheduled practicum learning activities. This may include clinical shifts on day, evening or night shifts; and learning experiences located throughout the college's service district. Students are expected to arrange for transportation to all assigned practicum learning activities. Students may be provided the opportunity to state preferences for location, day of the week, and shift of practicum learning activities. These preferences will be taken into consideration by Nursing Faculty when scheduling practicum rotations, but cannot be guaranteed. Factors such as available clinical placements, student learning needs, and scheduling limitations must be considered as well. It is the policy of the Nursing Faculty that no student will be assigned to the same clinical instructor for more than two terms. As students are placed in acute care clinical settings in Redmond, Madras, or Prineville, it is the policy of the faculty that these students must have a minimum of one term first and second year at the primary clinical site at St Charles Medical Center-Bend. If a remote clinical site fails to provide appropriate learning experiences due to for example a falling patient census, students may be reassigned to a new site during the course of the term.

**CDC
GUIDELINES
FOR WORK
RESTRICTION
FOR HEALTH
CARE
WORKERS:**

Influenza:
Stay away from Lecture, LRC and Clinical for at least 24 hours after you no longer have a fever, or signs of a fever, without the use of fever-reducing medicines. Stay away from others during this time period even if you are taking antiviral drugs.

Upper respiratory infection:
Remain at home if febrile, and if frequent sneezing and copious nasal discharge.

Measles (if non-immune):
Remain at home until 7 days after rash appears. *Exposure:* remain at home the 5th day after the first exposure through the 21st day after the last exposure.

Mumps(if non-immune):
Remain at home until 9 days after onset of parotitis. *Exposure:* remain at home the 12th day of the 1st exposure through the 26th day after the last exposure.

Pertussis:
Remain at home with the beginning of the catarrhal stage through the 3rd week after onset of paroxysms, or until 5 days after start of effective antimicrobial therapy.

Exposure: remain at home until 5 days after start of antimicrobial therapy.

Rubella (if non-immune):

Remain at home until 5 days after the rash appears. *Exposure:* remain at home the 7th day after the 1st exposure through the 21st day after last exposure.

Varicella (chickenpox) (if non-immune) **and Herpes Zoster (shingles):**

Remain at home until all lesions dry and crust. *Exposure:* remain at home the 10th day after the 1st exposure through the 21st day after the last exposure.

PROCEDURE: Clinical Absences:

Attendance at scheduled clinical learning activities is mandatory. Because opportunities to demonstrate a satisfactory level of competence of clinical outcomes are limited to the scheduled clinical days, students are expected to exert a maximum effort to avoid absences and to demonstrate competence with every opportunity that presents in the clinical setting. **Nursing faculty must be able to directly observe students in the clinical settings to determine consistent performance in meeting course outcomes.**

There are **no allowances built into the course for making up absences from clinical**. Evaluation is based solely on the student's ability to meet the course outcomes within the scheduled clinical sessions. With every absence, the instructor will initiate a first level remediation plan to identify intervention strategies. The plan will become a permanent part of the student's Nursing Program educational file. Additional absences may result in a probationary plan and require a meeting with the Clinical Instructor and Nursing Program Director and Department Chair. Furthermore, Faculty have no obligation to provide extra clinical days to accommodate students whose excused or unexcused absences result in too few opportunities to demonstrate satisfactory performance of course outcomes.

LRC Absences:

Attendance at scheduled LRC learning and testing activities are mandatory. Make-up time is **very** limited, and students demonstrating a trend of absences may not be able to continue in the program due to their inability to meet the course outcomes. Students will be provided an opportunity to trade assigned times as outlined in the LRC Student Manual within limits.

If an absence/lateness is unavoidable, students are expected to follow procedures for reporting absence/lateness for practicum experiences:

Students must call (no texting) the nursing instructor 15 minutes prior to the beginning of the shift. Student will also call Alternative Clinical Sites (ACEs) if late or absent.

Notify the instructor upon arrival, if late. It is expected that students will have reliable transportation, alarm clocks, work schedules and child care arrangements. Repeat tardiness will result in student progression and reflect poorly on the clinical evaluation tool. This behavior may result in failure.

TITLE: Absences from Group Projects/Presentations

POLICY:

Students are expected to attend all scheduled meetings for group-work related projects (faculty or student scheduled). Students that are absent or fail to contribute to the work of the group will be progressed for continuation in the program by the Nursing Faculty. Students who demonstrate a trend of absences from group-work meetings may receive a different grade from the other group members. If a student must be absent from a group presentation, the student must notify a group member and the appropriate nursing faculty by email prior to the scheduled time, and speak to a group member and the faculty member by phone or in person as soon as possible, preferably prior to the scheduled activity. If the student is incapacitated and unable to make email or personal contact with a group member and nursing faculty member, the student is expected to have a designee make email and/or phone contact with the assigned Faculty member or the Nursing Program Director. Students who are absent from a group presentation may receive '0' points or a no pass for the assignment. This may result in the student failing the course. Make-up presentations may be possible but are not guaranteed. Any student failing to properly notify the nursing faculty will automatically be ineligible for a make-up

opportunity.

TITLE: Temporary Limits on Physical Capacity

POLICY:

Students should provide immediate documentation to their instructor from a healthcare professional of any temporary limits on physical capacity. This documentation should specify how the physical limits affect the ability to carry out nursing care activities and should estimate how long the temporary health problem will be present. (See Nursing Program Technical Standards for examples of essential nursing activities.) When making patient assignments and scheduling Skills Lab Check-offs, instructors will consider, to the extent possible, any documented temporary physical limitations students may have. However, such consideration cannot be offered indefinitely and students must satisfactorily achieve the course outcomes within the scheduled practicum sessions. Students may need to consider withdrawing from the Program until the problem is resolved. Under no circumstances should a student undertake to give care to a patient whose needs for care exceed her/his physical capacity to meet those needs. It is expected that students with temporary health problems will exercise prudent judgment in not subjecting patients or themselves to risks of harm. Nursing Faculty reserve the right to require documentation from a healthcare professional confirming a student's ability to meet the Technical Standards of the Nursing Program.

Nursing Program Policies Relating To Assessment

TITLE: Grading

POLICY: The course grade is determined by the student's performance in the theory, assignment, clinical, and Learning Resource Center components of the course. In order to successfully pass the course, ALL the above components must be completed with a passing grade. If the student fails to complete all course components with a passing grade, the course will be retaken in its entirety upon readmission into the nursing program.

Nursing Course Grades are computed as follows:

92.55 - 100% = A

89.55 - 92.54% = A-

86.55 - 89.54% = B+

81.55 - 86.54% = B

79.55 - 81.54% = B-

76.55 - 79.54% = C+

≤76.54% = D

PROCEDURE:

Theory Grade

The **theory grade** is based on midterm examinations and the final exam in each course. The weighting of midterm exams and the final exam will be indicated in each course syllabus. The student must achieve a **theory score** of $\geq 76.55\%$ to pass the Nursing Course.

Standardized Test Grade:

Students will sit external standardized tests during the nursing program. These tests are used to evaluate student performance, the nursing curriculum, and to prepare students to sit for the national licensing exams. The COCC Nursing Program does not support the use of external standardized tests as a gatekeeper for progression or graduation. Students do not have to pass these tests to pass the course or to graduate. Standardized tests will be calculated in as a percentage of the overall grade (see grade

sheet for percentage). When standardized tests are utilized in the curriculum, the test will count for no more than 30% of the total theory grade.

Assignment Grade

Assigned written work and projects are calculated into the course grade **only** after a $\geq 76.55\%$ has been achieved on the overall theory score. The weighting of the combined theory score and assignment score will be indicated in each course syllabus. The student must achieve a **combined score** of $\geq 76.55\%$ to pass the nursing course. It is possible to achieve a passing overall theory score and fail the course if the combined score is $\leq 76.54\%$.

Please note that receiving a passing grade on a single assignment within a course may be required to pass and will be indicated in the course syllabus. A failed required assignment will result in a failing grade (D) for the entire nursing (NUR) course.

Learning Resource Center Grade

The **skills lab practicum grade** is pass/no pass and is determined by the student's achievement of the outcomes found on the skills lab evaluation tools. Students must satisfactorily meet all critical outcomes to receive a passing grade in skills lab, and must achieve a passing grade in skills lab to pass the nursing course. It is possible to achieve a passing overall theory score, and a passing combined score, and fail the course due to a no pass skills lab grade. A no pass grade in skills lab will result in a failing grade of 76.54% (D) in the entire nursing course.

Clinical Grade

The **clinical practicum grade** is pass/no pass and is determined by the student's achievement of the clinical outcomes found on the clinical evaluation tool. The student must satisfactorily meet 100% of the clinical outcomes to receive a pass grade in clinical, and must achieve a passing grade in clinical to pass the nursing course. It is possible to achieve a passing overall theory score, and a passing combined score, and fail the course due to a no pass clinical grade. A no pass grade in clinical will result in a failing grade of 76.54% (D) for the entire nursing course.

TITLE: Test Taking

POLICY: All students are expected to practice the highest standards of academic honesty. Academic dishonesty will not be tolerated and will result in the progression of the student for continuation in the Nursing Program. (*See Nursing Program Student Progression*)

- PROCEDURE**
- Instructions for multiple choice exams:
 - Enter name and date on test paper and fill in all required identifying information on the answer sheet.
 - Select the one best or correct answer for each question.
 - Record the answer on the answer form.
 - Fill in circles completely and erase any stray marks or changed answers completely.
 - Fill in your name, student identification number, date, and exam number on the answer sheet. Incomplete answer forms may result in zero grade, or the inability to complete corrections at a later date.
 - The final answer and grade for multiple choice exams will be determined by the answer form. Students should check answer selections carefully before turning in an exam. Transcription errors will not be corrected, nor points given, unless large blocks of answers are involved.
 - Students may have 2-3 pencils and a highlighter pen at the desk. All other personal items are to be placed against the wall when entering the classroom on test days (book bags, purses, cell phones, backpacks, etc). You must wait until the end of the scheduled testing time and review to retrieve your belongings.
 - Students may use a simple calculator during test: add, subtract, multiple, and divide. No programmable calculators with memory functions will be allowed.
 - No apparel or device is permitted that obscures student's eyes from observation by the test proctor(s); e.g. brimmed hats, sunglasses.
 - Students may **quietly** leave the room after turning in the exam, and may not re-enter until all students have finished the exam.
 - Gathering in the hallway outside the classroom doors is not allowed. Please move away from this area.

TITLE: Missed Exams

POLICY: All students are expected to be present and on time for course exams.

- PROCEDURE**
- Out of consideration for classmates, students should make every effort to present for each exam and to arrive on time.
 - Students may request to take an examination early or late for emergent or mitigating situations that will be reviewed by the Nursing Faculty for approval. Situations such as family emergencies or funerals of immediate family members can be approved. Personal business or events are not considered mitigating situations and may not be approved.
 - On the day of the exam, students are required to notify the Nursing Instructor if unable to take a scheduled exam, or arrive on time, by leaving a message on COCC voice mail or email **before** the exam's scheduled starting time.
 - Students must first talk with the Nursing Instructor before a missed exam will be placed at the testing center. Missed exams must be made up **immediately**, and may require an additional trip to campus on other than a regularly scheduled day. Students requiring additional study time due to illness must get permission from the test coordinator or his/her designee in order to delay make-up testing time.
 - Students are encouraged to discuss the potential of missing an exam with the team coordinator(s) or the designated faculty proctoring the exam, and are strongly advised to **NOT take an exam while sick**.
 - Students missing an exam will not seek information from other students that have completed the scheduled exam. Any student seeking information will be considered in violation of academic honesty.
 - A student who arrives late or misses exams, or fails to notify the nursing instructor will be placed on a progression record. Emergent or mitigating situations will be reviewed by the Nursing Faculty (e.g. unplanned situations such as car trouble, or emergencies). Students can be penalized 10% a school day on each missed exam, or exams for which the student is late. Lateness is considered arriving past the scheduled start time. Points can be deducted from an exam even with proper advanced notification of the Nursing Faculty.

TITLE: Test Review

POLICY: The purpose of the test review is to provide students with an educational opportunity to study course content through exam reviews. Exams are not available for review in subsequent terms. The review only pertains to course mid-term exams and **does not** include a review of the final exam since this exam is a comprehensive test for the course and would not serve a remediation function.

PROCEDURE

- Students will be provided the opportunity to review their midterm exams following each test as a part of the group review. **Individual reviews are only provided for students failing an exam.**
- Each student will receive his/her paper copy of the exam, therefore it is important that students write answers on both the answer form and the paper copy of the test. Students will not be allowed to alter answers on the paper copy during the group review. Group answers should be written in the margin. The final answer and grade for multiple choice exams will be determined by the answer form.
- Students are expected to practice academic honesty throughout the process.
- No note taking or photos are allowed during the review of an exam.
- All participants are expected to behave in a respectful manner throughout the process.
- No verbal challenges for accepting alternative answers will be considered during the review session. Students may challenge a test question by following the *Appeal Process for Test Question* policy. Answer forms are considered the source of the student's test score and authenticity must be protected and therefore may not be available for review at these sessions.

TITLE: Appeal Process for Test Questions

POLICY: The purpose of this policy is to provide students with a communication process for appealing test questions. Faculty review questions with their Team for clarity and appropriateness before an exam is administered, and student results are analyzed following an exam for problematic questions. Faculty recognize that situations do exist when a question may be judged flawed, and make every attempt to assure fairness in testing. Faculty do not approve of, nor utilize, "trick" questions. Appeals for final exams are not accepted.

Decision-Making: The Faculty author of the test question has the primary say as to whether an alternative answer will be accepted for an individual student. Students approaching other Faculty, Nursing Program Director or the Department Chair will be referred back to the exam question author. If the validity of the question is of concern, the Faculty author may elect to offer all students the alternative answer(s). Faculty will notify the class if a decision is made to accept an answer for all students.

- PROCEDURE**
- Exam question appeals are an optional activity during test question review sessions.
 - Exam question appeals will be generated in your exam review small group. Each group will be allowed to appeal one question per test. Students will be required to practice professional behaviors when negotiating and problem-solving within their group to reach a consensus.
 - Demonstration of verbal or physical disruption of the group decision-making process will not be tolerated and may result in the revocation of the group's appeal opportunity.
 - A group that wishes to appeal an exam question will do so in writing utilizing the Exam Appeal form. This form is to be completed as a part of the exam review process and is to be turned in to the exam administrator at the end of the review. The exam administrator will distribute appeals to the faculty author(s).
 - Students are expected to write a clear and concise rationale for why the group believes their answer should be accepted as the best choice. Supporting data from the theory class must be referenced. Readings and other learning assignments are supportive to the course materials and students should be aware that content delivered during the theory class holds precedent over variations in content

occurring in assigned readings or other assigned resources. This is due to the differences in information presented across resources, such as with lab values.

- Tone, and/or word usage that are aggressive or disrespectful will result in the invalidation of the appeal, and possible student progression review by the Team, Nursing Program Director and Department Chair.
- Students will abstain from discussing the exam with the test administrator during the exam review time.
- Students may make an appointment with faculty author of the test question for learning purposes.

CENTRAL OREGON COMMUNITY COLLEGE NURSING PROGRAM

Test Question Appeal Form

Student Names:

Exam #: _____

Question #: _____

Faculty Author: _____

Correct Answer (*circle*): **A** **B** **C** **D**

Your answer choice (*circle*): **A** **B** **C** **D**

Please provide a reference to the theory class content presented that supports why your group believes your choice is the best answer:

TITLE: Submission and Grading of Written Work

POLICY: Students are expected to submit all written work (such as papers, reports, care plans) on time in a neatly typed/word processed and organized manner. In addition, correct spelling and punctuation are expected. At the discretion of the Nursing Faculty Team, unacceptable work will either be returned for corrections or not accepted and the assignment repeated. Late work may have 10% a school day deducted, or may not be accepted at the discretion of the Nursing Faculty Team, Nursing Program Director and Department Chair.

Nursing Program Policies Relating to Practicum

TITLE: Evaluation of Clinical Performance

POLICY: The clinical experience is an integral part of nursing education. Each clinical component of a nursing course will have a Clinical Assessment Tool (CAT), which must be completed with a "pass" grade. The purposes of the CAT are to identify student strengths and areas for improvement in clinical performance for optimal student learning, and to determine satisfactory clinical performance. At the beginning of each course the CAT will be distributed in the course syllabus. This allows each student to identify what is expected in clinical performance for each course.

Evaluation of student clinical performance is based on data collected by Nursing Faculty observation. Feedback from staff working with students is another source of data Nursing Faculty may use in student clinical evaluations. Evaluation focuses on the ability of the student to meet the outcomes of the clinical course. Faculty must have adequate opportunities to observe student performance in the clinical setting through regular attendance and regular observation. Clinical tools identify specific behaviors that indicate competency in a particular component of the nursing roles.

Clinical outcomes for nursing courses are leveled across the curriculum and are cumulative. It is expected that specific clinical outcomes met satisfactorily in one clinical course will continue to be met satisfactorily in succeeding clinical rotations. Therefore, though clinical outcomes for preceding courses are not always repeated on each CAT, they are implied and are included in Faculty evaluations of student performance.

Critical Elements are simple, discrete, observable behaviors that are mandatory for the specified areas of performance. They are finite units of measurement that are, with few exceptions, the collective basis on which students are passed or failed. Critical Elements are the specific indicators that the student is competent to meet the standards of performance established and expected by the Faculty.

When a Critical Element is violated or omitted, patients are actually or potentially endangered, and care being delivered is less than satisfactory. Critical Elements are introduced at the beginning of the program and added as the student progresses in the program and skill levels increase.

Student performance that indicates unsafe practice is outlined in the *Nursing Program Entrance Policies and Technical Standards Handbook* and in the *Nursing Program Progression Policies Handbook*. Students failing to meet clinical outcomes or the demonstration of unsafe behavior or performance will be progressed by the Nursing Faculty, Nursing Program Director and the Department Chair, Instructional Dean and Vice President of Instruction when indicated, and will be judged individually regarding student's continuation in the program.

TITLE: Guidelines for Calling the Clinical Instructor

POLICY: Clinical skills are introduced into the curriculum across the Program. Students are responsible for following the *Guidelines for Calling the Clinical Instructor* that are distributed in each Nursing Course Syllabus. These guidelines are leveled across the Program and define when skills must be done in the presence of the Nursing Clinical Instructor. Students **must** call the instructor before attempting any skill that has never been done on a patient, any questionable skills, or any skill that the student may feel uncomfortable with. Students are not allowed to perform procedures which have not been demonstrated, practiced, and checked off in the LRC. Failure to do so constitutes unsafe practice.

Skills fall under three categories, those that can be observed and checked off by the student's clinical instructor; those that must always be done in the presence of the clinical instructor; and those that require a second check by the patient's RN or the clinical instructor. Students are advised to carry these guidelines in the clinical setting at all times. Statements such as not remembering or not knowing are unacceptable. If a student fails to follow the *Guidelines for Calling the Clinical Instructor*, his/her progression in the Nursing Program will be reviewed by the appropriate Team, and the Nursing Program Director and Department Chair if indicated.

TITLE: Medication Safety and Documentation Procedure for Removing Drugs from an Automated Dispensing Cabinet (ADC)

POLICY: During the first year of the nursing program, all medications will be removed from the ADC by the clinical instructor. Medications will only be removed that are to be given within the following two hours. Second year nursing students will have password access to the ADC units and will retrieve all medications with the exception of Schedule II-V medications that must be removed by the clinical instructor/RN assigned to the patient. The six rights and three checks of medication safety will be applied.

PROCEDURE All first year students need to learn how to remove medications from the ADC (Pyxis) during spring term to prepare them for independent ADC access during NUR 206.

- Clinical instructor will login and step aside.
- Students will touch "remove meds" on the computer screen.
- Students may only remove medications for one patient at a time.
- Next: "select patient" (by last name or room number, see tabs at bottom of screen)
- Compare meds from EMR Care Organizer screen to ADC medications (1st check)
- Touch screen to select desired medication
- When all medications have been selected, touch "remove meds" in left lower corner.
- Drawers will open one at a time. Remove scheduled number of pills.
- Place the patient's medications in plastic baggie or medication cup. If medications are removed prior to the administration time, lock in nurse server drawer.
- Perform the second check while preparing the medications.
- Perform the third check at the bedside prior to administering.
 - *Note:* There is also a function called "remove by time" that the clinical instructor may teach students to use to help with standard med pass times.

SIMULATION ADC

To access the ADC in the LRC:

- The sign in will be the student's last 4 digits of the COCC ID (82) number
- The initial password is "password" and then the student will be prompted to create a new one.
- Student passwords will be the number '1' and the first, middle and last initial (e.g. 1MDDSN)

TITLE: Confidentiality of Patient Records

POLICY: Making copies of a patient's medical record is **not allowed**. This is a violation of HIPAA regulations. Any student found with printed material from a patient's record for use on college assignments will be progressed by the Nursing Faculty Team.

Students are **not allowed** to access his or her personal health records, or those of family members when in the clinical facility. This action will result in the student's progression in the Nursing course being reviewed by the Team, Nursing Program Director, Department Chair and appropriate College/School administrator. It may also result in the clinical facility barring the student from attending clinical.

Absolutely no reference to a patient (e.g. written, photographs), even if de-identified, should ever be shared electronically via any social networking site or via email. Clinical facility or staff information must never be shared via social networking sites or email. Students must never take pictures of patients whether or not a patient gives permission, or take pictures within the clinical facility. Any pictures needed for educational purposes will only be taken by the clinical facility staff or COCC nursing faculty.

Students are required to complete the annual HIPAA training. The training must be completed prior to the first day of clinical. Students must submit a copy of the transcript of completion of HIPAA, OSHA, and Facility required training (CBLs) to the Nursing Program Administrative Assistant or designated faculty to be kept in the student's record.

TITLE: Blood or Body Fluid Exposure or Injury in the Practicum Setting

POLICY: Students who have received an injury while in the practicum setting must fill out the Central Oregon Community College Incident/Accident Report. This form will be obtained from Risk Management no later than 24 hours after the injury or exposure, or if the injury occurs just prior to a weekend or holiday, at the opening of the next business day. Please contact Risk Management at: 541-383-7208, or go to Newberry Hall, Room 117. Risk Management can assist the injured student to fill out the Report of Job Injury or Illness; Form 801 and the Form 801 Cover Sheet.

PROCEDURE

- A student's risk of injury in the practicum setting is minimal; however, accidents do happen. Students will be exposed to sharp objects and body fluids, will be handling

equipment with moveable parts and may be lifting heavy objects.

- Students must at all times adhere to all safety procedures when in the practicum environment.
- A student receiving a blood or body fluid exposure or another injury should immediately notify the Nursing Instructor and seek medical attention as soon as it is known that an exposure or injury has occurred. In the event of a contaminated needle stick or exposure to blood or body fluid, prior to seeking medical care, the student should thoroughly scrub the exposed area with soap and water or flush the area with copious amounts of water if a mucus membrane is exposed.
- The health care provider rendering care should be informed that the injury is job related and will send the Form 827 to SAIF Corporation.
- In the event of a contaminated needle stick injury or mucus membrane exposure to blood or body fluids, the source of the blood exposure will be asked to donate a blood sample for HBV, HCV and HIV testing.

TITLE: Physical Contact and Invasive Procedure Consent Form

POLICY: As a precursor to working with patients in the practicum setting, each student will learn and perform a variety of clinical competencies in a group setting with fellow students and instructors. Due to the nature of this program, students are advised that physical contact between the instructor and student, or student to student is required for some lab assignments (e.g. taking blood pressure, taking pulse, listening to heart sounds). In the clinical setting, close physical contact between the instructor and student, or student to student may be required in the delivery of care, or during direct supervision.

If you have concerns about these requirements, you are encouraged to discuss these with the instructor prior to the first class session to determine if appropriate alternative assignments exist. If you do not think you will be able to participate to the extent required by the course, you are encouraged to withdraw from the Program/Course following College policies for withdrawal.

During the skills lab component of practicum instruction appropriate touching and physical contact as well as the performance of certain invasive procedures will be required between students under the supervision of the nursing faculty. Students are

asked to sign the *Physical Contact and Invasive Procedure Consent Form* giving permission for fellow students in the nursing program at Central Oregon Community College to perform the procedures on them under the supervision of the nursing faculty. Invasive procedures include: intradermal injections, subcutaneous injections, venipuncture, non-pharmacological inhalers, and physical assessments.

PROCEDURE: Sign the *Letter of Agreement, Video and Photography Consent, and Physical Contact and Invasive Procedure Consent Form* found at the back of this handbook and turn the form into the Team Coordinator.

TITLE: Professional Appearance: Student Dress Code- On Campus

POLICY: Nursing faculty believes that appropriate dress and grooming contribute to a productive learning environment. The faculty expect students to give proper attention to personal cleanliness and to wear clothes that are suitable for the college learning environment. Grooming and dress will not create a distraction that would interfere with the educational process.

TITLE: Professional Appearance: Student Dress Code- Clinical

POLICY: **Overall appearance must be appropriate and professional and comply with the policies of the clinical facilities.**

Students must be in compliance with dress codes for all clinical sites utilized by the Nursing Program. For St. Charles Medical Center, please see work instruction **W09612** on the SCMC intranet.

COCC Dress Code:

- Clean, pressed uniform in Hunter Green or Evergreen. Appropriate dress or pants and top (no denim or jean-type uniforms; no draw strings showing).
- Garments worn under uniform tops should be a neutral, solid color or matching green. Please no bright colors, or garments with patterns.
- Uniforms must fit modestly. Pants must be worn at the waistline, and may not be 'rolled down' to the hip. Skirts/dresses should be at or below the knee.
- Clean shoes that are predominately neutral (white, beige, light grey), hunter green, or black, with closed toe, enclosed heel, and socks/stockings.

- Watch with second hand, or “seconds” capacity.
- Jewelry must not be a source of contamination or patient injury. Jewelry should be kept at a minimum. Dangling earrings, necklaces (including lanyards), and bracelets, or large rings are **not** permitted.
- No visible body piercing jewelry may be worn and must be removed; this includes, but is not limited to, jewelry in the upper ear, eyebrows, nose, lip and tongue. Ear lobe piercing is acceptable up to two per ear. Stud earrings only, no loops or dangling earrings. Nose piercings may be replaced with a clear plug.
- Tattoos must be covered.
- Students should bring bandage scissors, pen lights, pens, and a stethoscope to clinical.
- Well-tailored, clean, professionally appearing street clothes (no jeans- white or colored, t-shirts, tank tops, etc.), with hunter green or white lab jacket and name badge, or clinical uniform, must be worn to clinical areas when selecting clinical patients.
- No gum chewing.

TITLE: Professional Appearance: Student Nametags and Program Patches

POLICY: Students must wear COCC identification and any additional facility specific required ID when in the clinical setting.

PROCEDURE: Students will obtain photo identification through Student Life, and Program Patches through the campus bookstore. Patches are to be **sewn on** the left shoulder of the uniform top and clinical lab coat (if worn in the clinical setting). Clinical facility identification must be worn at all times. Facility ID badges must be returned to the clinical instructor in June, or at the time a student exits the program.

TITLE: Professional Appearance: Grooming- LRC and Clinical

POLICY: Good grooming includes cleanliness, neatness, and the promotion of a professional image.

- Hair is kept clean and must be of a natural hue. Hair must be worn in such a manner that it is confined away from the face so that it will not fall forward or over the face while performing patient care. Radical hair styles are to be avoided. This includes but is not limited to dreadlocks, mohawks, or shaved patterns.
- Facial hair is kept clean and trimmed. Men are asked to delay the growth of a new beard until after clinical sessions are completed for the term.
- No excess make up.
- No perfume, aftershave, or scented hair products.
- Short and clean fingernails. Nail polish, artificial nails or tips pose an infection control risk to patients and are not allowed.
- Daily hygiene includes clean hair and body and the absence of offensive odors—use an effective body deodorant daily, breath mints or mouth sprays as needed.
- Skin abrasions and/or wounds need to be covered to prevent contamination from patient to student and student to patient.

TITLE: Work and Rest Prior to Clinical Assignment

POLICY: Out of concern for patient safety and the quality of the learning experience, students are required to have an eight hour break between their job and attending clinical. It is highly recommended that students get a minimum of six hours of sleep the night before clinical. Students having difficulty completing required preparation assignments for patient care should discuss this with his/her clinical instructor or a Team Coordinator.

TITLE: Practicum Preferences

POLICY: The Nursing Faculty will solicit and take into consideration student preferences as practicum schedules are built. The Nursing Program may not be able to meet every student's preference. Students are required to make arrangements to attend practicum experiences during their assigned time. Students failing to complete and return

practicum preference forms by the required date will forfeit their preference.

Students should not be placed on clinical units where he/she is employed as a Certified Nursing Assistant (CNA) or Licensed Practice Nurse (LPN). If unavoidable, students will only be assigned to that unit on a different shift than worked. For students working as float CNAs/LPN, students will be placed on units where students infrequently work. For students employed in non-nursing roles, the preference is that clinical placements not be on units where students regularly work.

- PROCEDURE:**
- Students will be asked to rank shift/time and site preferences as possible.
 - Students employed at the clinical site will be asked to provide employment information including clinical unit and shift.
 - Students will be asked to provide written rationale for strong preferences.
 - Students with transportation and/or childcare needs will be considered first.

TITLE: Capstone Clinical Experiences

POLICY: Students are required to complete a 4 week full time (144 hours) capstone clinical experience the final term of the program (NUR 208).

- PROCEDURE:**
- Capstone clinical experiences require concentrated periods of clinical time.
 - Students desiring placement in clinical areas outside the medical-surgical setting must demonstrate a strong clinical performance in NUR 206 and NUR 207 for consideration.
 - Students will be asked for preferences regarding available clinical placements. Assignments are based on student preference, learning style, available preceptors, job site, transportation needs, and childcare needs.
 - Students will be assigned to day, evening or night shift for 8, 10, or 12 hour shifts, Monday through Sunday including any holidays during these periods. (See course syllabus for number of required clinical hours.)
 - Clinical schedules are determined by the Clinical Teaching Associate's assigned work schedule and are developed by the Faculty Liaison.
 - Students cannot recruit his/her Clinical Teaching Associate, or healthcare facility. Students are encouraged to pass recommendations along to Nursing Faculty.
 - Students are not allowed to be scheduled for the capstone clinical experience where they work as CNAs, or LPNs.
 - Students will not be assigned a Clinical Teaching Associate that is a relative, direct supervisor where employed, or with whom the student has a close personal

relationship.

- Students will not be scheduled for more than 40 hours/week, or more than 3 consecutive 12 hour shifts.
- Students are expected to make up clinical absences as the school schedule allows.
- Students (or Faculty) will not be allowed to schedule long clinical stretches in order to make-up missed clinical days due to the potential for patient care errors.
- Students are expected to make advanced arrangements with employers in order to accommodate the clinical intensive experience.
- Faculty are under no obligation to accommodate student needs regarding work schedules. Faculty will negotiate schedules as possible with students in advance of the capstone experience.

College Policies

Student Rights and Responsibilities

Like most institutions, COCC maintains a "Student Rights & Responsibilities" statement which guides students as to their responsibilities (e.g. academic honesty, adherence to campus policies), but also ensures them of their rights (e.g. protection of private information, right to participate in student government). The full document can be found by going to COCC's home page, clicking on "Current Students", "Student Life", and on "Student Policies".

Harassment Statement

It is the policy of the Central Oregon Community College Board of Directors that there will be no discrimination or harassment on the basis of age, disability, gender, marital status, national origin, color, race, religion, sexual orientation or veteran status in any educational programs, activities or employment. Persons having questions about equal opportunity and nondiscrimination should contact the Equal Employment Officer, c/o COCC's Human Resources office, (541) 383-7216. Faculty, staff and students are protected from discrimination and harassment under Title VII of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972.

Examples of discriminatory harassment include:

- Using epithets, slurs, or stereotypes.
- Threatening, intimidating, or engaging in hostile acts that relate to a protected characteristic.
- Offensive jokes or pranks targeted at members of a protected group.
- Placing on walls, bulletin boards or elsewhere on COCC's premises, or circulating in the workplace by oral, written, electronic or graphic means any material that belittles, mocks, or shows hostility toward a person or group because of protected characteristics.

Americans with Disabilities Statement & Non-Discrimination Statement

COCC is an affirmative action, equal opportunity institution. Students with documented disabilities who may need special instructional accommodations or who may need special arrangements in the event of an evacuation should notify the instructor as soon as possible, no later than the second week of the term. Students may contact COCC Disability Office in Boyle Education Center to discuss special needs, 383-7583.

Student Insurance

Students are not covered by medical insurance while on campus or involved in college classes and activities. Students are responsible for their own medical and dental insurance coverage.

***NOTE:** Students are referred to the Central Oregon Community College Catalog for a complete list and description of College policies.*

Campus Resources

Please see the COCC web-page for a full accounting of available student services and campus resources.

Personal Counseling

The goal of personal counseling is to assist you in resolving issues that may be preventing you from achieving your potential at COCC. Help with time management, stress, depression and the many other personal situations affecting students. Call the CAP center at 383-7200 to schedule an appointment.

COCC provides this service to students through a partnership in which the College has contracted with St. Charles Behavioral Health to provide professional counselors on campus. SCMC has numerous therapists with a wide range of experience in all aspects of mental health. All counselors hold master's degrees in their field and are licensed professional counselors.

Financial Counseling: Contact the Financial Aid Office at 383-7410.

Tutoring

The tutoring center offers group and individual tutoring six days a week in a wide variety of subjects. Call 383-7538 or stop by the lower level of the library for details.

Cooperative Work Experience (CWE) Nursing

CWE Nursing stands for Cooperative Work Experience in Nursing. This allows students enrolled in the Nursing Program, current Nursing Assistants or Practical Nurses, to receive college credit for practicum experience. A student can receive up to 4 credits of CWE while practicing in a position that requires direct patient care. Each credit of CWE equals 33 hours of work; 32 hours of direct patient care, and one hour to compile a journal. Permission must be obtained from the designated Nursing Department Faculty member to sign up for CWE and the student is responsible for getting his or her own job.

- CWE Nursing I (5.715) is for Nursing students who are Certified Nursing Assistants.
- CWE Nursing II (5.716) is for Nursing students who are LPNs.

It is the student's responsibility to sign up for the correct number of CWE credits and to submit journal to the designated Nursing Department Faculty member by the end of the term. If no journal is submitted, a grade of Incomplete ("I") grade will be assigned for the term.

Special Topics: Nursing

Allows first* and second year students to pursue a special content area in nursing. One example is 'Special Studies in Nursing Education', where *student teachers* assist Faculty in the Learning Resource Center. Special study arrangements must be made through the Nursing Program coordinators. (NUR 188, NUR 288) **Not offered first term of the program.*

Graduation

Nursing Program Pin and Pinning Ceremonies

A pin has been designed for this Nursing Program. Students are eligible to order a pin at completion of the practical nurse or registered nurse program. Order forms can be obtained from the Administrative Assistant. Student cohorts may choose to have a pin designed for their graduating class. Students may hold pinning ceremonies prior to graduation. These events are student planned and funded. Seeking donations from community healthcare partners is not allowed, fund raising events can be held with the approval of the Nursing Program Director.

Degree Checks, Application for Graduation Certification & Licensure in Oregon

Certificate/Degree Completion and Graduation

To determine that all course work toward the PN Certificate and Associate of Applied Science Degree in Nursing is being completed, students need to meet with their advisor at a minimum during their second and fifth term to review their GradTracks online degree audit. Students may also access this at any time in their Bobcat web account to track their progress. Once all program requirements have been met, students will be automatically awarded their degree within 3 weeks after the end of their final term. Automatic degree awarding is done only for the student's declared program of study as shown in GradTracks. If students wish to be awarded an embedded certificate ([PN Certificate](#)), or a degree other than their declared program, they will have to submit the manual application for degree located on the COCC website.

Application for Certification and Licensure in Oregon

Applications for the Practical Nursing and Registered Nursing Licensure Examinations are provided by the Oregon State Board of Nursing (OSBN) and can be found on the OSBN website. The Oregon State Board of Nursing will provide necessary information directly to the candidate (student) in the term prior to graduation. An OSBN representative may visit first and second year classes to discuss the NCLEX-exam during Spring term. For special questions or concerns, students may visit the Oregon State Board of Nursing website www.OSBN.State.OR.US or contact the education specialist directly at:

17938 SW Upper Boones Ferry Rd, Portland, OR 97224, or call 971-673-0685, or FAX 971-673-0684.

Letters of Reference

Students may request a *Nursing Student Reference* form to be completed by his/her clinical instructor. This request authorizes the release of information about the student's performance in clinical. Faculty ask that students request references **at the time** he/she is completing NUR 108, NUR 207 and/or NUR 208. The instructor will complete and return the form to the student to be used as a reference.

It is the student's responsibility to:

- ♦ inquire whether his/her clinical instructor would complete a Nursing Student Reference
- ♦ retain copies of the completed forms for future use as a reference.

Healthcare facility applications that require specific reference forms to be completed by faculty must be individually negotiated. Students must provide a copy of the form, and must submit a stamped and addressed envelope for any agency that requires the direct mailing of a recommendation to the facility.

Completing references is a service to the student and faculty are under no obligation to provide a reference if requested. If faculty agree to complete the *Nursing Student Reference* or write a specific agency requested letter of reference, students can expect a realistic, honest appraisal of his/her performance which may include areas for continued growth.

Under no circumstances will copies of *Clinical Evaluation Tools*, or other forms from the student record, be provided to potential employers. The College can validate completion of terms/Program, and will complete *Nursing Student Reference* forms which are based on the Program Outcomes and Clinical Evaluation Tool.

Please see the following pages for the '*First Year*' and '*Second Year Nursing Student Reference*' forms.

Nursing Student Reference First Year Student

Student's Name (print): _____
Instructor's Name: _____

Student Signature: _____ Date: _____

Students: Your signature authorizes the nursing faculty to release information regarding your performance in the Nursing Program. This form will be returned to you for your use as a reference.

Instructor: Please complete the following sections and return the form to the student.

KEY	1-Area for Continued Growth	2-Meets	3-Exceeds
AS PROVIDER OF CARE: Provide patient-centered care based on established standards, and contribute to and participate in nursing care delivery.			
		1	2 3
• Provides a safe physical and psychological environment for the patient.		1	2 3
• Assists the patient to achieve optimum comfort and functioning.		1	2 3
AS MANAGER OF CARE: Set priorities, organize and deliver nursing care to groups of patients.			
		1	2 3
AS COMMUNICATOR: Communicate effectively, therapeutically, and professionally with a diverse group of individuals.			
		1	2 3
• Keeps staff informed of patient status and care completion.		1	2 3
AS TEACHER: Reinforce teaching plans or teach from established standards.			
		1	2 3
AS MEMBER WITHIN THE DISCIPLINE OF NURSING: Provide holistic nursing care based on ethical/legal principles of healthcare within the scope of practice of the practical nurse.			
		1	2 3
• Demonstrates accountability for nursing care given by self.		1	2 3
• Maintains organizational and patient confidentiality.		1	2 3
• Practices within the ethical, legal, and regulatory frameworks of nursing practice.		1	2 3
• Demonstrates professional behaviors: reports on time, dresses in a professional manner according to agency policy, and demonstrates growth by change in behavior after constructive suggestions.		1	2 3

Comments:

Nursing Faculty: _____ Date: _____

Nursing Student Reference
Second Year Student

Student's Name (print): _____
Instructor's Name: _____

Student Signature: _____ Date: _____

Students: Your signature authorizes the nursing faculty to release information regarding your performance in the Nursing Program. This form will be returned to you for your use as a reference.

Instructor: Please complete the following sections and return the form to the student.

KEY	1-Area for Continued Growth	2-Meets	3-Exceeds
AS PROVIDER OF CARE: Applies the nursing process to provide and direct holistic, individualized patient care in acute, critical, community-based and long term care settings.	1	2	3
AS MANAGER OF CARE: Coordinates and manages the delivery of care to meet the health care needs for a group of patients.	1	2	3
<ul style="list-style-type: none"> • Demonstrates the ability to establish priorities for patient care needs and deliver patient care for a group of patients. 	1	2	3
<ul style="list-style-type: none"> • Adapts priorities for changing situations. 	1	2	3
AS COMMUNICATOR: Utilizes therapeutic and professional communication skills to achieve patient outcomes in collaboration with healthcare providers from across the continuum of practice settings.	1	2	3
<ul style="list-style-type: none"> • Establishes effective communication with health team, nurse, and faculty. 	1	2	3
AS TEACHER: Develops and implements individualized teaching plans for patients, families, caregivers, and members of the health care team.	1	2	3
AS MEMBER WITHIN THE DISCIPLINE OF NURSING: Internalizes and models professional behaviors and values of the registered nurse.	1	2	3
<ul style="list-style-type: none"> • Demonstrates accountability for nursing care given by self. 	1	2	3
<ul style="list-style-type: none"> • Maintains organizational and patient confidentiality. 	1	2	3
<ul style="list-style-type: none"> • Practices within the ethical, legal, and regulatory frameworks of nursing practice. 	1	2	3
<ul style="list-style-type: none"> • Demonstrates professional behaviors: reports on time, dresses in a professional manner according to agency policy, and demonstrates growth by change in behavior after constructive suggestions. 	1	2	3

Comments:

Nursing Faculty: _____ Date: _____



2600 NW College Way • Bend, Oregon 97701

Nursing Program Student Handbook – Letter of Agreement and Consent

This **Letter of Agreement and Consent** is to be read and signed by every student upon entering the Nursing Program or upon enrollment in a nursing (NUR) course at Central Oregon Community College.

Student Name: _____
Please Print Clearly

Student ID Number: _____

My signature confirms that I have been provided with an electronic copy of the *Nursing Program Student Handbook, Nursing Program Entrance and Technical Standards Policies, Nursing Program Progression Policies, and Nursing Program Readmission, Advanced Placement, and Transfer Student Policies*, and have read and understand their content. I agree to abide by the policies detailed therein. Furthermore, I understand that failure to abide by the policies will result in a review of my progression in the Nursing Program/Course and may result in a progression Communication Record, a Probationary Record, or immediate dismissal. I understand that this signed *Letter of Agreement and Consent* will be placed in my student file and I may request a copy from the Nursing Department Secretary.

Date: _____

Student's Signature

Consent for Photography/Video

I agree to be photographed or videoed by the nursing program at Central Oregon Community College during course work for **NUR 098, NUR 106, NUR 107, NUR 108, NUR 206, NUR 207, and NUR 208**. I understand that such photographs or videos will be used by COCC for various publications, advertisement displays, teaching, or in other similar ways. I understand that I will receive no compensation for my time and services and waive all personal rights to such photographs or videos.

Date: _____

Student's Signature

Consent for Physical Contact and Invasive Procedures

I give permission for fellow students and instructors in the nursing program at Central Oregon Community College to perform invasive procedures on myself as a part of the course work for **NUR 098, NUR 106, NUR 107, NUR 108, NUR 206, NUR 207, and NUR 208**. I understand that these procedures will be performed using Universal Precautions and that I will participate in assuring use of these precautions.

During the skills lab component of practicum instruction, appropriate touching and physical contact as well as the performance of certain invasive procedures will be required between students under the supervision of the nursing faculty. These procedures will be performed as a part of the Learning Resource Center (LRC) **Supervised Coaching Sessions** under the direct supervision of the nursing faculty. ***The only invasive procedure that may be practiced during LRC Open Practice Labs is physical assessment****.

In the clinical setting, close physical contact between the instructor and student, or student to student may be required in the delivery of care, or during direct supervision.

Approved Invasive Procedures:

- Administering Intradermal (ID) injections
- Administering subcutaneous injections
- Performing venipuncture
- Administering inhalers
- *Physical assessments

*The following invasive procedures are **NOT** approved:*

- *Administering intramuscular (IM) injections*
- *Inserting nasogastric tubes*
- *Inserting urinary catheters*
- *Administering oral medications*

Date: _____

Student's Signature

Date: _____

Nursing Program Director Signature

OFFICIAL COPY
TO BE ON FILE