



PENINSULA
COLLEGE

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Nursing Student Handbook (2025-26)

Students are accountable for the information and changes to this Handbook. Changes throughout the year will be documented in red and students will be notified.



The Peninsula College Associate Degree Nursing program is accredited by the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA) located at 2600 Virginia, NW, Washington, DC 20037.

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PURPOSE OF STUDENT HANDBOOK

The Student Handbook contains the policies and guidelines of the nursing program. It is the student's responsibility to become familiar with this handbook and refer to it throughout the educational process. It is intended as a supplement but does not replace the policy and procedure publications to which all students of Peninsula College are subject. This handbook should not be construed as constituting a contract, express or implied, between the Nursing Program and any person. The statements and provisions in this handbook are subject to change at the discretion of the Nursing Program.

WELCOME

Welcome to Peninsula College's Nursing Program. Once you obtain licensure as a registered nurse, you will be joining a profession of health providers that combines behavioral, physical, and biological sciences to provide holistic care including wellness promotion and illness prevention to diverse populations. As a registered nurse, you will be a member of a healthcare team in hospitals, clinics, long-term care, and community settings. Nurses have diverse, dynamic, and ever-changing options for employment environments.

The Peninsula College Nursing Program strives to meet the varied needs of the community. Nursing students learn to help clients make educated choices about their health to assist them to regain or maintain a high level of wellness. Students also will learn to holistically care for those who are experiencing the dying process. Students use the nursing process to develop critical thinking skills to promote safe clinical decisions and provide competent care which demonstrates attributes that are necessary for a professional nurse.

Peninsula College provides learning in the classroom, lab, and simulation experiences. A multitude of clinical opportunities in varied settings is also provided in which the nursing student takes an active role in providing care and acting as a member of the health care team. You will participate in developing and meeting your own learning needs, goals and be actively involved in evaluating your own progress.

Peninsula College promotes that lifelong learning is crucial to the profession of nursing. Students are expected to take an active role and initiate their own learning process. As graduates, you are encouraged to continue learning throughout your professional employment.

Peninsula College Nursing Program takes an active role in developing your future as a registered nurse. Through classroom activities, simulations, and diverse, community-based clinical settings you will be exposed to and participate in the role of the novice nurse. As a registered nurse, you will have the opportunity to contribute to the continual development and future of the profession.

The faculty wishes to assist you in achieving your nursing goals during your time as a nursing student and in the future as a member of a healthcare profession.

assignment

FACULTY and STAFF CONTACT INFORMATION

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SECTION I: PHILOSOPHY OF THE NURSING PROGRAM

The Peninsula College Nursing Program is an integral part of the college. The nursing faculty endorses the mission, goals, and guiding principles of Peninsula College and adheres to its policies.

PENINSULA COLLEGE MISSION STATEMENT

Peninsula College educates diverse populations of learners through community-engaged programs and services that advance student equity and success.

PENINSULA COLLEGE NURSING PROGRAM VISION AND MISSION

Vision

The Peninsula College Nursing Program has a vision of graduating students who exemplify ethical, caring, knowledgeable, and technically competent nursing practice in any health care setting. We, as faculty and students, strive to be an asset to the profession of nursing and the community in which we serve.

Mission

The mission of the Nursing Program is to provide an equitable and high-quality nursing education program whose graduates help meet the healthcare needs of the community.

NURSING PROGRAM VALUES: OUR GUIDING PRINCIPLES

- Teaching/learning process is central to the mission of the Nursing Program.
- Members of the Nursing Program community treat each other, the campus community, clinical partners and patients with mutual respect and dignity
- Members of the Nursing Program are open and honest in their communication
- Members of the Nursing Program promote a positive work and learning environment that avoids adversarial relationships
- Members of the Nursing Program act ethically and with integrity

- Members of the Nursing Program engage in collaborative decision-making processes within our college and program, and with our clinical partners and patients

NURSING PROGRAM PHILOSOPHY OPERATIONAL DEFINITIONS

Philosophy of Nursing

Nursing is a health profession practicing in a changing society, blending a unique web of principles from behavioral, physical, and biological sciences in the practice of nursing. The nursing faculty believes that nursing is a learned humanistic art and science that provides holistic care to promote wellness and prevent illness.

The Client

The client is an individual (of any age), a family, a community, or the environment. Individual human beings are viewed as biopsychosocial-cultural-spiritual beings, existing within families (significant others), within communities (society), and within their environment (surroundings). Human beings are open systems within a changing environment, maintaining a dynamic equilibrium. Maslow's hierarchy provides the fundamental concepts for our view on human needs theory.

Wellness/Illness Continuum

Wellness/illness is viewed on a continuum as a multidimensional response of people to their environment. High-level wellness is viewed as a desirable goal for all individuals. It includes the concept that individuals accept responsibility for their own wellness and are moving towards self-actualization. Illness occurs when an individual either has too many stressors or too few coping skills resulting in disequilibrium.

Nursing

The ultimate goal of nursing is to help clients make informed (evidence-based) choices about their health and attain or maintain the highest level of wellness possible. The nursing process is the primary tool by which this goal is accomplished. The nurse's role is to use critical thinking skills to identify intrapersonal, interpersonal, and extrapersonal stressors and to assist the individual to cope with these stressors. The nurse communicates and collaborates with the client, family, and other members of the health care team in establishing goals and planning interventions.

The Nurse

The professional nurse is a caregiver, teacher, counselor, facilitator, advocate, leader, manager, and researcher. The nurse incorporates principles from the arts and sciences to deliver care in a helping relationship.

The Responsibilities of Professional Nursing

The faculty also believes that nursing is accountable to the public for safe and quality health care. The profession of nursing should regulate the preparation and performance qualifications of any personnel who provide nursing services to clients.

Nursing Education

The faculty believes that lifelong learning is integral to the profession of nursing and that all levels of nursing personnel assume responsibility for acquiring new knowledge and skills through continuing education. The faculty also believes that basic knowledge in sciences and humanities, as well as nursing knowledge and skills, are realistically achievable in a community college setting. Completion of the program provides a foundation for continued learning, skill development, and career growth. The graduate from the ADN program in nursing should be able to progress to the baccalaureate level and beyond without undue repetition.

Nursing Students

The faculty believes that students must take responsibility for their own learning and demonstrate commitment to study and the practice of skills. It is the responsibility of students to take the initiative to seek assistance as needed for their learning.

Learning/Teaching

Learning is an ongoing process that can take place in any setting but does so more effectively in a structured atmosphere with the active involvement of the learner. Adult learners have much to learn from each other as well as from the teacher. The exchange of ideas and concerns contribute to the learning experience. Learning occurs best when going from simple to complex, from familiar to unfamiliar. Hands-on practice is essential to the development and mastery of skills.

Teaching is the art and science of structuring content for student learning. This involves providing learning materials and learning experiences to match the students' varied learning styles. Diverse learning styles are recognized and addressed with varied teaching approaches. Learning takes place in classrooms, labs, and clinical settings. Observing professionals, participating in simulation and interacting with patients are valuable learning experiences. Group activities, role-playing, oral presentations, written assignments, and clinical paperwork provide opportunities to practice communication and professional nursing skill sets while preparing students for the role of the professional nurse.

The teacher functions as a role model, facilitating student self-growth, and the quest for knowledge, rather than giving specific answers or content. The nursing teacher's greatest responsibility is to help students learn critical thinking skills, primarily through the nursing process. Students can then apply their nursing knowledge to any clinical situation and develop appropriate plans for client care. Positive feedback and success build confidence, foster growth and facilitate the development of positive attitudes and eagerness to learn more.

SECTION II: CURRICULUM

CONCEPTUAL FRAMEWORK

To achieve the goals of the Peninsula College Nursing Program philosophy, the following conceptual framework has been developed as the organizational plan for the curriculum.

CURRICULAR THREADS

Holistic Assessment

Holistic care – oversight and providing care for the whole person including; biological, psychological, sociological, cultural, and spiritual needs

Health/illness continuum

Wellness/illness is viewed on a continuum as a multidimensional response of people within their environment. Wellness and illness is addressed from a holistic framework.

Sub concepts basic to the health/illness continuum curricular thread:

- Prevention: Maintain, promote, and achieve optimal health by preventing disease
- Wellness: A dynamic, personal state of well-being
- High-level Wellness: An achievable goal for all individuals. It includes the concept that the individuals accept responsibility for their own wellness and are moving towards self-actualization
- Self-actualization: Realization of full potential

- Holistic health: Balance of the whole person's being biological, psychological, sociological, cultural and spiritual needs
- Illness: Illness is a state that occurs when an individual either has too many stressors or too few adaptive mechanisms resulting in disequilibrium

Age – Application of all concepts across the lifespan from birth to death

Setting The environment in which the client is being cared for (community, home, acute care, long term care, etc)

Clinical Decision Making

Nursing Process is a systematic, problem-solving method of planning in order to provide individualized nursing care. (This thread applies to all program competencies.)

Critical Thinking is creative problem-solving

Evidence-Based Practice Care is provided based on research and standards of practice.

Caring Interventions

Caring is “Caring (and nursing) has existed in every society. Every society has had some people who have cared for others. A caring attitude is not transmitted from generation to generation by genes. It is transmitted by the culture of the profession as a unique way of coping with its environment” (Watson, 1979). Actual caring occasions involve actions and choices by the nurse and the individual. The moment of coming together in a caring occasion presents the two persons with the opportunity to decide how to be in the relationship – what to do with the moment (Watson, 1999).

The helping relationship is a therapeutic relationship in which nurses are encouraged to assist clients to achieve wellness by developing unused or underused opportunities.

Safety

Safety Prevention of accidents and injury

Pharmacology is the study of medication and medication safety, with a nursing emphasis, including nursing implications

Managing Care

Nursing management – the collaborative and organized provision of holistic care using the nursing process (see above).

Teaching and Learning

Teaching/Learning – (Within the context of the educational system with nursing students) is a dynamic interaction between teacher and learner which involves communication of information, emotions, perceptions, and attitudes to each other. Teaching is an intentionally designed system of activities to produce specific learning.

Teaching/Learning – (in the context of nursing and care of the client) – is a dynamic interaction between the nurse and the client which involves communication of information, as well as, the emotions, perceptions and attitudes of the client. Teaching is individualized to the client's plan of care.

Collaboration

Group Process is two or more people who come together to achieve specific goals

Teamwork is collaboratively working for a common purpose

Leadership influences others to work together to accomplish a specific goal

Delegation is transferring to a competent individual the authority to perform a selected nursing task in a selected situation

Communication

Communication is any exchange of information or feelings between two or more people. It is an ongoing and dynamic process, which involves verbal and non-verbal interactions that are a process of sending messages or exchanging information to elicit a response

Professional Behaviors

Ethical Responsibility

Ethical responsibility in nursing encompasses nurses applying moral principles in the holistic care of clients, maintaining standards of practice, and individually demonstrating veracity, fidelity, accountability and integrity.

Legal Responsibility

Accountability for following established standards of practice and practicing within the legal guidelines of the profession, the law governing the practice of nursing within Washington State and the policies of the nursing program.

NURSING PROGRAM OUTCOMES

Upon completion of this program a student will be able to:

- Holistically assess the biopsychosocial-spiritual-cultural dynamic needs of the client.
- Use evidence based information and the nursing process to critically think and make clinical judgments and management decisions to ensure accurate and safe care.
- Demonstrate holistic caring behavior towards the client, significant support person(s), peers, and other members of the health care team.
- Provide accurate and safe nursing care in diverse settings.
- Provide teaching based on individualized teaching plan.
- Organize and manage the holistic care of clients.
- Work cooperatively with others in the decision-making process to achieve client and organizational outcomes.
- Utilize appropriate verbal and written channels of communication to achieve positive client outcomes.
- Practice within the ethical, legal and regulatory frameworks of nursing and healthcare, standards and scope of nursing practice.

PROGRAM GOALS

The goal of the Associate Degree Nursing Program is to provide an organized curriculum, which prepares a student to:

- Receive an Associate in Nursing DTA/MRP degree
- Obtain a registered nurse license after passing the licensure exam
- Function in the role as a novice registered nurse

SECTION III PROGRAM PLAN

SEQUENCE OF COURSES

The nursing curriculum is dependent upon proper sequencing of courses. The general education courses in the nursing curriculum are to be completed prior to or during the quarter in which they are listed in the College Catalog. Nursing courses must be completed in the sequence described in the catalog. The student is to meet with his/her designated faculty advisor to plan his/her course of study for each quarter. The student is responsible for meeting all pre or co-requisites. A student will be denied registration or administratively dropped from a course if pre or co-requisites have not been met.

CURRICULUM

The curriculum provides a strong foundation in applied and social sciences and an understanding of the fundamentals of patient care in a variety of settings. Throughout the program students integrate experience caring for patients in acute care hospitals, long-term care facilities, and community agencies. Successful completion of this program leads to an Associate in Nursing, Direct Transfer Agreement/Major Related Program (DTA/MRP). Students with the Nursing DTA/MRP need only to complete senior level courses at select universities in the state of Washington to achieve a Bachelor's of Science in Nursing. Courses transfer as defined by the Associate in Nursing DTA/MRP agreement. Students who plan to transfer to a four-year program should review the universities' requirements for senior-year standing in the Bachelor of Science in Nursing program. Individual colleges may have specific requirements such as a higher GPA, preferred courses for humanities or foreign language requirements.

The courses are sequenced in such a way that course objectives level towards terminal program outcomes. Course sequencing and course objective leveling across curriculum threads, culminating in program outcomes is demonstrated in Appendix C.

DTA/MRP Program Plan

Prerequisites (Sample schedule)

Courses with prerequisites, and the placement level of the student, may extend the Length of Program listed below.

Quarter One

- BIOL &160L General Biology 5
- MATH& 146 Introduction to Stats 5

Quarter Two

- BIOL& 241L Human Anatomy and Physiology I (Fall or Winter). 5
- CHEM& 121L Intro to Chemistry 5

Quarter Three

- BIOL& 242L Human Anatomy and Physiology II (Winter or Spring) 5
- BIOL& 260L Microbiology 5

Additional Required Prerequisites

- PSYCH& 100 Psychology 5
- ENGL& 101 English Composition I 5
- ENGL& 102 English Composition II **or** CMST& 220 Public Speaking **or** CMST& 210 Interpersonal Communication 5
- PSYC& 200 Life Span Psychology 5
- 10 Credits of Humanities from distribution list must be taken prior to Quarter 8 10

Nursing - Year One

Quarter Five

- NURS 101 Nursing I 5
- NURS 111 Fundamental Clinical Nursing Skills 2
- NURS 131 / HUM 131 Policy & Ethics in Healthcare I 1
- NURS 141 / PSYCH 141 Psychosocial Issues in Healthcare I 3

□ NURS 121 / NUTR 121 Nutrition in Healthcare I	3
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Quarter Six

□ NURS 102 Nursing II Theory	6
□ NURS 112 Nursing II Lab	5
□ NURS 122 / NUTR 122 Nutrition in Healthcare II	1

Quarter Seven

□ NURS 103 Nursing III Theory	6
□ NURS 113 Nursing III Lab	5
□ NURS 123 / NUTR 123 Nutrition in Healthcare III	1

Nursing - Year Two

Quarter Eight

□ NURS 201 Nursing IV Theory	6
□ NURS 211 Nursing IV Lab	5
□ NURS 242 / PSYCH 242 Psychosocial Issues in Healthcare II	2

Quarter Nine

□ NURS 202 Nursing V Theory	4
□ NURS 212 Nursing V Lab	6
□ NURS 232 / HUM 232 Policy & Ethics in Healthcare II	2

Quarter Ten

□ NURS 203 Nursing VI Theory	4
□ NURS 213 Nursing VI Lab.	6
□ NURS 233 / HUM 233 Policy & Ethics in Healthcare III	2

Total Credits Required is 135

PROFESSIONAL STANDARDS AND GUIDELINES

Peninsula College nursing program has incorporated the NLN Associate Degree Competencies, QSEN Competencies, The ANA Nurses Code of Ethics Provisions, and Washington state laws (Functions of a Registered Nurse WAC 246-840-705 & Standards of Nursing Conduct or Practice WAC 246-840-700) into the curriculum. Curricular Program Outcomes represent each relevant standard at least once.

Integration of Curricular Program Outcomes and Relevant Professional Standards

>Holistic Assessment: Holistically assess the biopsychosocial-spiritual-cultural dynamic needs of the client.
Professional Standards addressed: 1, A, E, a, b, c, h, I, II, i

>Caring Interventions: Demonstrate holistic caring behavior towards the client, significant support person(s), peers, and other members of the health care team.
Professional Standards addressed: 1, 3, A, D, E, a, b, d, h

>Clinical Decision Making: Use evidence based information and the nursing process to critically think and make clinical judgments and management decisions to ensure accurate and safe care.
Professional Standards addressed: 2, B, C, D, E, F, c, d, g, I, i, ii

>Safety: Provide accurate and safe nursing care in diverse settings.
Professional Standards addressed: 2, 3, B, C, D, E, F, c, e, iii, iv, v

>Teaching and Learning: Provide teaching based on individualized teaching plan.

Professional Standards addressed: 2, 4, A, C, E, a, b, d, h, iii, iv, xi, xii, xiii

>Managing Care:Organizes and manages the holistic care of clients.

Professional Standards addressed: 1, 2, 3, A, B, C, D, E, b, d, II, III, vi, vii, viii, ix, x

>Professional Behaviors: Practice within the ethical, legal and regulatory frameworks of nursing and standards and scope of nursing practice.

Professional Standards addressed: 3, j, k, I, II, III, xiv, xv, xvi, xvii, xviii

>Collaboration: Work cooperatively with others in the decision-making process to achieve client and organizational outcomes.

Professional Standards addressed: 3, D, f, h, vi, vii, viii, ix, x, I, II, III

>Communication: Utilize appropriate verbal and written channels of communication to achieve positive client outcomes.

Professional Standards addressed: 3, C, D, c, f, g, h

NLN Associate Degree Competencies

- 1. NLN Human Flourishing** Advocate for families in ways that promote their self-determination, integrity, and ongoing growth as human beings.
- 2. NLN Nursing Judgement** Make judgments in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and promote the health of patients within a family and community context.
- 3. NLN Professional Identity** Implement one's role as a nurse in ways that reflect integrity, responsibility, ethical practices and an evolving identity as a nurse committed to an evidence-based practice, caring, advocacy and safe, quality care for diverse patients within a family and community context.
- 4. NLN Spirit of Inquiry** Examine the evidence that underlies clinical nursing practice to challenge the status quo, question underlying assumptions and offer new insights to improve the quality of care for patients, families, and communities

QSEN Competencies

- A. QSEN Patient Centered Care** Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values and needs
- B. QSEN Safety** Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.
- C. QSEN Informatics** Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.
- D. QSEN Teamwork and Collaboration** Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.
- E. QSEN Evidence-Based Practice** Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.
- F. QSEN Quality Improvement** Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.

ANA Nurses Code of Ethics Provisions

- a.** ANA Provision 1: The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
- b.** ANA Provision 2: A nurse's primary commitment is to the recipient(s) of nursing care, whether an individual, family, group, community, or population
- c.** ANA Provision 3: The nurse establishes a trusting relationship and advocates for the rights, health, and safety of recipient(s) of nursing care.
- d.** ANA Provision 4: Nurses have authority over nursing practice and are responsible and accountable for their practice consistent with their obligations to promote health, prevent illness, and provide optimal care.
- e.** ANA Provision 5: The nurse has moral duties to self as a person of inherent dignity and worth including an expectation of a safe place to work that fosters flourishing, authenticity of self at work, and self-respect through integrity and professional competence
- f.** ANA Provision 6: Nurses, through individual and collective effort, establish, maintain, and improve the ethical environment of the work setting that affects nursing care and the well-being of nurses
- g.** ANA Provision 7: Nurses advance the profession through multiple approaches to knowledge development, professional standards, and the generation of policies for nursing, health, and social concerns.
- h.** ANA Provision 8: Nurses build collaborative relationships and networks with nurses, other healthcare and

nonhealthcare disciplines, and the public to achieve greater ends

j. ANA Provision 9: Nurses and their professional organizations work to enact and resource practices, policies, and legislation to promote social justice, eliminate health inequities, and facilitate human flourishing.

k. ANA Provision 10: Nursing, through organizations and associations, participates in the global nursing and health community to promote human and environmental health, well-being, and flourishing.

Functions of a registered nurse WAC 246-840-705

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

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

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

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

Standards of Nursing Conduct or Practice WAC 246-840-700

Standard I-Initiating the Nursing Process:

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

Standard II Delegation and Supervision:

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

Standard III Health Teaching.

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

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

(4) Other responsibilities:

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

SECTION IV: ACADEMIC AND CONDUCT POLICIES

Students are required to adhere to the policies as published in the Handbook. The Nursing Program reserves the right to make changes to any of its policies. Students will be informed of changes as they occur. The information in this Handbook replaces any information contained in previous handbooks.

Academic Advising

All nursing students are assigned to a faculty advisor upon entrance into the nursing program. Students are expected to meet with their advisor to discuss their progression throughout the program. Students are required to meet with their advisor during advising week. Clinical evaluations, clinical grades and theory grades are reviewed at every student/advisor meeting. During these student/advisor meetings any necessary corrective action required will be discussed, implemented and documented.

Students who are experiencing difficulty in a nursing theory course and are at risk of failure are required to meet with the relevant course faculty member to develop a Personal Improvement Plan (PIP) and to discuss their progression in the program. For difficulty in clinical, students are expected to meet with their clinical instructor to complete a Clinical Student Counseling Form, and develop a plan for progression in the program. The faculty advisor may be involved in this process as necessary, particularly if the student is struggling in more than one course.

Academic Honesty Policy

When students enter Peninsula College, they are joining a community of scholars in an environment of open inquiry and academic honesty. The college expects students to act in an honest and ethical manner and to accept responsibility for their own intellectual growth and academic achievement. Disciplinary action will be taken in the event of academic misconduct and may include permanent dismissal from the nursing program per the student handbook. If you think it may be wrong, it probably is!

An honest approach to all assignments, quizzes, and exams is expected under all conditions, both in person and online, per Peninsula College's Academic Honesty Policy and the Nursing Program's Handbook. This approach includes:

- Independent test taking: all quizzes and tests should be taken individually and per proctor's instructions unless the instructors specifically give permission for group test-taking.
- No plagiarism: Plagiarism is defined as the use of distinctive ideas or works belonging to another person without providing adequate acknowledgement of that person's contribution. See related policy on Plagiarism.
- No cheating: Cheating is defined as the act of obtaining or attempting to obtain credit for academic work through the use of any dishonest, deceptive, or fraudulent means. This includes cheat sheets, online resources, using other people's test answers, discussing exam/quiz questions before the exam is graded, posting test content online, screenshots or photos of online exams, allowing others to copy from you, etc. Cheating on tests is grounds for dismissal from the program. See related policies on Testing
- No lying or fabrication: Lying or fabrication includes using false claims, making up reasons for missing class, missing a test or assignment deadline.
- Assignments, paperwork, etc. with answers will not be passed/used from previous classes to any members of subsequent classes.

Attendance Policy

Students are required to attend all in person components of their coursework. Absences from nursing courses will not be excused except in the event of severe illness, mental health crisis, medical conditions that pose infection risk to others (See Restrictions Due to Illness policy related to fever with respiratory symptoms, infectious gastroenteritis, etc), or death/critical illness of a family member. A medical excuse letter/note from the student's healthcare provider must be provided at faculty request. Any special

circumstances (including but not limited to religious holidays) must be discussed with the Nursing Director within the first two weeks of the quarter. See also Student Absence for Reason of Faith or Conscience. Student's personal work schedules cannot be accommodated and are not considered an excused absence.

If a student will be absent from class, they must email their instructor and Program Specialist at least 30 minutes prior to the start of class. Makeup activities are at the discretion of the instructor. Excessive absences for any reason may necessitate repetition of the entire course. If a pattern of absence or early departure for illness develops, the student may be required to meet with the nursing faculty and Nursing Director to make a plan for improvement. More than three (3) unexcused absences from theory classroom activities may result in a failing grade for the course at the discretion of the Nursing Director. In general, the nursing program cannot accommodate more than a two-week absence for any reason (family emergency, personal health, pregnancy, etc), and in some cases, even this length of absence may prevent the student from meeting course objectives and successfully completing the course. Depending on the circumstances, the student may need to withdraw with a "W." See Clinical Absences and Late Arrivals policy under Clinical Experience Policies for further policies related to lab and clinical which varies slightly from this policy.

Classroom Policies

1. Respectful and professional behavior is required, this includes remote learning. Review Appendix B.
2. Preparation for class is expected. A pattern of lack of preparation will result in a Personal Improvement Plan.
3. Attendance is expected for all theory classes, including remote learning. Students should be available to interact with the instructor throughout the entire class in the remote learning environment. If unable to attend class, leave a voicemail or email the instructor prior to class time. It is the responsibility of the student to obtain any information missed (from Canvas or a classmate). Be aware that some graded activities may not be able to be made up, resulting in a possible grade of zero for that activity. See also Student Absence for Reason of Faith or Conscience.
4. During periods of inclement weather or in emergency situations (such as orders to revert to temporary online learning the COVID-19 pandemic) students are expected to attend theory classes remotely. Students are expected to have a computing device with microphone, webcam and access to the internet. Students will need a quiet environment in which to attend lectures. Instructors will provide details whether the class will be synchronous (i.e. via Zoom), or asynchronous (i.e. via Panopto on Canvas). For synchronous Zoom classes, please arrive on time and mute yourself on entry to the classroom. Should you have a question or comment, you may "raise your hand" and wait to be called on to unmute yourself. Lectures are recorded, and posted to Canvas. If students do not wish to be part of the recording they can leave their camera off and microphone muted. However, faculty strongly prefer students to have their video feature on to ensure participation.
5. Respectful and professional behavior in the remote environment includes arriving in clean, neat daytime clothing wear. Hair should be groomed. Students should maintain a professional background on Zoom, and should sitting up, maintaining a professional demeanor while in remote class. The students should maintain a private environment while attending class.

Activities such as shopping, lying in bed, doing dishes, driving and doing housework would not be appropriate during class time.

6. Students are expected to arrive on time for class, both at the beginning of a class and following breaks between classes. Arriving late is considered unprofessional behavior. If students do enter a classroom late, it should be done without disrupting the class. As a courtesy to faculty and other students, it is important that instances of late arrival are kept to an absolute minimum. For live classes, students are required to sign in on a sign in sheet by the classroom door if they arrive late. Students that arrive late more than twice per quarter are required to meet with faculty to complete a Conference Summary Form and make a plan to ensure no further late arrivals.
7. Cell phones and pagers must be turned off or to vibrate. Students may not text or email during class time. If you need to take care of something urgent, please leave the classroom to complete your text/phone conversation.
8. When using a laptop in class, students may only access websites and applications directly related to classroom activities.
9. Students should not bring children to in-person classes. (Peninsula College policy)
10. Food and beverages are acceptable in regular classrooms but not in the labs. Students should properly dispose of used food and beverage containers. If the classroom-issued laptops are in use, no food or drink is allowed on the table with the laptop.
11. Students may not audio or videotape any class without the permission of the instructor. Explicit written permission must be obtained for: any shared medium, any media platform (including Peninsula College platforms), audio or video tape postings.

Clinical Experience Policies

Cell Phone Use

During clinical cell phones may only be used to contact instructors and to access electronic drug guides. Please be aware that using a cell phone or looking at a cell phone in a patient care area is generally perceived by patients, families and staff to be highly unprofessional. See below for indications for texting an instructor during clinical. Whenever possible, texting the instructor should be done out of the view of patients and families. For example, step into a supply room, break room, or medication room to text the instructor. Students may not have their cell phone out at any time during a Special Experience, except on a designated break in a break room. Violation of this policy may result in a clinical failure for the day, which would require a clinical makeup day or makeup assignment.

If a student must have a cell phone with them to receive emergency calls, it is to be turned to vibrate mode and specific permission must be obtained by the student from the instructor to make or receive calls. Under these circumstances, cell phones may only be used outside of patient care areas.

Clinical Absences and Late Arrivals

Students are required to attend all lab and clinical components of their coursework. Absences from the lab and clinical portions of the nursing course will not be excused except in the event of severe illness, **mental health crisis**, medical conditions that would affect your ability to safely care for patients (See Restrictions Due to Illness policy related to fever with respiratory symptoms, infectious gastroenteritis, etc), or death/critical illness of a family member. A medical excuse letter/note from the student's healthcare provider must be provided at faculty request. Any special circumstances (including but not limited to religious holidays) must be discussed with the Nursing Director within the first two weeks of

the quarter. See also Student Absence for Reason of Faith or Conscience. Student's personal work schedules cannot be accommodated and are not considered an excused absence.

If a student will be absent from clinical, they must call or text their clinical instructor at least 30 minutes prior to the start of the shift. Students are also required to notify the Nursing Director and Nursing Program Specialist via email of any clinical absence. Students are responsible for scheduling a make up of the clinical experience with their clinical instructor. Excessive absences for any reason may necessitate repetition of the entire course. If a pattern of absence or early departure for illness develops, the student may be required to present documentation from a health care provider that the student is able to safely resume clinical experiences. More than one (1) unexcused absences from clinical or lab may result in a failing grade for the course based at the discretion of the Nursing Director.

In the event of an unforeseeable circumstance, students are allowed one late arrival per quarter. If a student is running late, they should contact their clinical faculty via cell phone 30 minutes prior to the start of the shift, or as soon as possible. As long as the arrival is within 15 minutes of the assigned start time, the student will be allowed to participate in clinical that day. If a student arrives more than 15 minutes late they will be dismissed from the clinical area, and must arrange for a make up of the clinical experience with their clinical instructor. Some special experiences require a precise arrival time, and in those cases, the 15-minute leeway will not be granted and makeup will be required. On the second late arrival during a given quarter, a Clinical Student Counseling Form will be completed with plans for addressing the issue.

Clinical Paperwork

Each clinical nursing course has a guideline for clinical paperwork in the associated syllabus. Please refer to the syllabus and any directions on Canvas for specific requirements for each course. Students are expected to turn in assignments on time. Assignments 1-5 days late will receive a maximum score of 80%. Students will lose 5% per day up to 4 days. After 5 days the student will receive a "0" on the assignment unless there are extenuating circumstances (severe illness, death in the family) and arrangements have been made in advance with the clinical faculty. All assignments must be satisfactorily completed in order to pass the course, including those late assignments that will receive a 0.

Clinical Dress Code

Your presentation in the clinical setting demonstrates Peninsula College's goals of developing students with a professional image, confident demeanor, competent verbal and non-verbal communication and proficiency in nursing skills. Patients, families, and other healthcare providers will react positively to a professional image and behavior. The Peninsula College Nursing Program strives to create a positive impression where patients, families, and other healthcare providers can establish reliance and confidence in the nursing students. Cultural and religious considerations will be evaluated within the confines of the dress code.

Uniform:

- The uniform is navy blue shirts/tops and full-length navy blue pants of good quality opaque fabrics. Navy blue tops and pants must be solid color without pattern. During some clinical experiences, the student may be provided with and expected to change into hospital-issued scrubs. Students should plan to wear their navy blue scrubs uniform for all clinical related activities including prep activities. Scrubs should be professional-looking and should not be

tight or revealing (eg tight tops and tight pants/legging style scrubs are not appropriate). You should be able to bend, squat, reach, and move freely without exposing the midriff.

- Students need to have one set of professional business attire. Professional attire includes: clean, pressed and of opaque material appropriate neckline, hemline, and waistline. Examples of professional attire include: slacks or khakis, a dress shirt or blouse, an open-collar or polo shirt, a dress or skirt at knee-length or below, a knit shirt or sweater, and loafers or dress shoes that cover all or most of the foot. Not acceptable: open-toed shoes, wooden clogs/soles, blue jeans, athletic attire: tight stretch pants/leggings, yoga pants, shorts, sweats, sweatshirts, hoodies, T-shirts or rugby-type shirts.
- Closed-toe, closed-heeled, non-slip professional-appearing shoes that conform to occupational health and safety standards. Athletic shoes may be worn with scrubs, professional shoes should be worn with professional business attire. Shoes should be clean. Clogs with open heels and canvas shoes do not meet the safety requirements.

General Dress Code Guidelines:

- All attire should fit to allow for comfortable sitting, bending, stretching, etc.
- Hair must be clean, neat, and combed away from the face. Shoulder-length or longer hair must be tied back and secured as necessary, so as not to interfere with patient care. Hair color must be a natural color; no blue, bright red, purple, orange, etc. Olympic Medical Center (OMC) policy states “extreme hairstyles are inappropriate.” Hats, head coverings, and caps are not permitted except when required by a specific department or because of religious observances. Sideburns, mustaches, and beards are to be cleaned, combed, and neatly trimmed or groomed. Daily shaving is expected unless one is growing a beard. If working in an area with respiratory/airborne precautions, please be aware that a beard should be groomed such that it allows for a tight seal for your medical mask.
- Jewelry may include one ring (simple band) and one pair of small post earrings (in ear lobes only, no cartilage). Not acceptable: dangling or hoop earrings, multiple or large rings, ear bands, necklaces, bracelets, visible body piercings other than ears. Most facility policies state absolutely no nose rings, tongue rings, studs, etc. OMC does allow for up to two visible body piercings of minimal size (<5mm), other than ear piercings. Tongue rings/studs are not allowed at OMC.
- Small non-offensive tattoos may be left uncovered. Visible face and neck tattoos are not allowed at Jefferson and may not be allowed at OMC. Offensive tattoos must be covered at the discretion of the instructor and/or facility by uniform clothing or flesh-colored tattoo cream. Discuss any concerns with the Director.
- Fingernails should be clean and short. No long nails or artificial nails. Only natural nails or clear nail polish may be worn.
- Use of cosmetics will be in moderation.
- Clean hygiene is expected along with daily deodorant use. Clinical clothes are to be frequently laundered and unwrinkled.
- No perfumes, colognes, or scented products. If you smoke be sure the odor does not cling to your clothing or skin. Some odors including perfumes, tobacco, coffee, onions, and garlic are offensive. Alleviate this problem through teeth brushing, using mouthwash, or breath fresheners.
- **Chewing gum is never allowed.**

- Plain white, black, grey or navy long-sleeve shirts may be worn under scrub tops for warmth at the discretion of the clinical facility, to cover offensive tattoos or for religious reasons. Be aware that clothing below the elbow may pose an infection control risk in the clinical setting, and should be avoided when possible.
- Ties, scarves or any clothing that would touch a patient when bending forward may also pose an infection control risk and is best avoided in the clinical setting.
- Name tags are worn at all times and hospital student identification is always worn at OMC.
- Students should also have: a watch that can count seconds, blue or black pens, a stethoscope with bell and diaphragm, pen light, pocket size alcohol-based hand sanitizer, black Sharpie for wound dressing, blunt end bandage scissors

Clinical Passport—Required immunizations, CPR and background documentation

The Clinical Passport includes requirements for immunizations, CPR and background documentation, and is available on Canvas. Students are responsible for adhering to the guidelines in the Clinical Passport throughout the program. All immunizations are required for program participation. Exceptions are granted for valid medical exemptions in accordance with manufacturer guidelines for that vaccine. Some facilities may accept a religious exemptions for COVID-19 immunizations. All immunization, CPR cards, and background documentation must be provided electronically and must be updated per policy in order to attend clinical experiences. Failure to update and document as required may result in dismissal from the nursing program or failure of the clinical courses. Facilities may require that we send copies of background check documentation. Some facilities require an additional facility-specific background check. Some facilities have specific additional immunization documentation paperwork that may require copies of immunization records.

Complaints from Clinical Agencies

It is imperative that the Peninsula College Nursing Program maintains excellent relationships with all its clinical partners. In the event that the nursing faculty or Nursing Director receives a complaint about a specific student from a clinical facility, the student will be required to meet with the nursing faculty and/or Nursing Director to complete a Clinical Conference Form. This form documents the alleged incident/situation and allows the student to respond. A plan for remedying the situation may be put in place if necessary. Depending on the situation a student may receive a clinical failure for that day, and a makeup day or assignment may be required. This Clinical Conference Form is filed in the nursing student's file. Please note that historically most of these issues have revolved around cell phone usage. Please abide by the cell phone policy.

Criteria for Behavior Not Meeting Program Standards

Nursing students are legally responsible for their own acts, commission, and/or omission. Nursing faculty are responsible for any acts of their students in the clinical area therefore, it is necessary for the student and the nursing faculty to evaluate unsafe behavior. Any student demonstrating unsafe behavior (including violation of the WAC chapter 246-840) is subject to removal from the clinical setting and subsequently unable to progress in the program.

Faculty will complete a Clinical Counseling Form with students. Faculty will use principles of "Just Culture" and the Student Practice Event Evaluation Tool also known as the SPEET rubric as appropriate when counseling students and in determining action to be taken in the event of unsafe clinical

performance and/or behavior not meeting program standards. Please see the “Just Culture” policy for more information.

Definition of behavior not meeting program standards: Students must demonstrate the judgment and professional behavior necessary to protect the client from physical and emotional jeopardy. Students are evaluated throughout the quarter in order to ensure safe professional practice. Students at risk of removal from a course have not met program standards due to: (a) the seriousness of an incident, or (b) demonstrated a pattern of unsafe behavior.

Not Meeting Program Standards is Demonstrated When the Student:	Examples: may not be limited to descriptions below
Violates or threatens the physical safety of the client	Unsafe use of equipment or supplies. Comes unprepared to the practice site. Incorrect positioning. Inadequate preparation for an emergency situation. Leaves an unreliable client alone.
Violates or threatens the psychological safety of the client.	Uses clichés repeatedly. Does not encourage verbalization, or is not aware of differences in ability to communicate. Imposes personal values upon the client. Denies client the right to make decisions about their own care. Fails to provide a therapeutic environment. Uses of profane language. Uses culturally insensitive communication.
Violates or threatens the microbiological safety of the client.	Unrecognized violation of aseptic technique. Comes to the practice site ill. Clinical placement requirements are not current.
Violates or threatens the chemical safety of the client.	Inappropriate use and/or application of medications, treatments, or products.
Violates the thermal safety of the client.	Fails to observe safety precautions. Injures client with the application of hot/cold.
Inadequately and/or inaccurately utilizes critical thinking.	Fails to observe/identify and/or report critical data regarding clients. Makes repeated faulty judgments. Difficulty prioritizing and organizing responsibilities.
Violates previously mastered principles/learning objectives.	Incorrectly performing skills that have been previously evaluated/mastered. Inadequate preparation for procedure. Does not follow practice site policies and procedures.
Assumes inappropriate independence in actions or decisions.	Fails to seek help when a situation is out of control or in an emergency. Performs skills that

	have not been evaluated in the classroom/lab setting. Does not seek supervision or assistance for tasks that have not been previously performed with or evaluated by the instructor.
Displays unprofessional conduct.	Dishonest about tasks performed. Omits treatments or aspects of student responsibilities and does not inform instructor or staff. Does not recognize or acknowledge mistakes/errors. Commits privacy violation.
Displays behavior that puts client safety at risk.	Becomes stressed, anxious, and overwhelmed by changes in the environment and routine. Difficulty adjusting the plan based on new findings or changes to the situation. Difficulty applying knowledge and experience to new or different situations. Inconsistent performance despite having previously made progress toward learning objectives.

Please note: Students are expected to function safely and professionally at all times. These are only some of the examples of unsafe situations and do not represent all examples that can result in a student being removed from a course due to not meeting program standards. Any violation of these criteria will be reviewed by the faculty and Director of Nursing, and will be handled individually regarding the student's continuation in the program.

Dismissal from Clinical Areas

The faculty believes that the physical and emotional welfare of patients and their families have the highest priority. Students must consistently demonstrate physical and mental competence when in clinical areas in order to deliver patient care safely. Therefore, a student may be dismissed from the clinical area who:

- Demonstrates clinically unsafe nursing practice that jeopardizes or has the potential to jeopardize patient welfare. This behavior may be related to many factors; e.g. physical or mental health problems, knowledge deficits, problem-solving skills deficits, anxiety, use of chemicals, oral or written communication skills deficits, etc. See the policy on Criteria for Behaviors Not Meeting Program Standards for additional potential examples. A student who has demonstrated clinically unsafe behavior will be relieved of clinical responsibilities and referred to resources as appropriate.
- Demonstrates behavior that jeopardizes or potentially jeopardizes the operation and management of the health care facility.
- Fails to meet Technical Standards for safe nursing practice outlined in this Handbook
- Fails to adequately prep on patient prior to clinical. Expectations for prep vary by quarter, refer to your syllabus, your instructor and any directions on Canvas.
- Does not comply with timely health record submission.

- Fails to arrive on time. Students are expected to arrive on time to clinical; arriving late is disruptive to patient care and the management of a healthcare facility. See Clinical Absences and Late Arrivals for further details.
- Unprofessional behavior at the discretion of the clinical faculty

A pattern of concern in any of these areas may result in dismissal from the clinical setting, course failure and dismissal from the Nursing Program.

Exposures/Injuries in Clinical Rotation or Campus Laboratory

Nursing students are at risk of harm from exposure to infectious diseases, radiation, hazardous equipment, and environments in which accidents can occur. Neither the clinical agency nor Peninsula College will be responsible for any costs, medical or otherwise associated with an injury or exposure incident. Students are responsible for any associated expenses.

Students are expected to adhere to the following protocol upon accidental exposure or injury during a clinical or campus lab experience. The student will:

- Access emergent care immediately as the accident dictates.
- Notify the clinical instructor, who will assist in following the policy of the clinical facility/college.
- If urgent care is required, seek evaluation and medical care to the emergency department at the closest hospital.
- If urgent care is not required, seek evaluation and medical care at one's Primary Care Provider's office.
- Complete the facility-specific event report and route to the appropriate personnel.

The nursing instructor and the student will complete the Needlestick and Sharp Object Injury and Body Fluid Exposure Report (Appendix P) and the Unusual Occurrence Report (Appendix O), and provide to the Nursing Director within 24 hours. The instructor will also notify the Nursing Director on the day of the incident via phone. The Nursing Director will submit the Peninsula College Campus Safety Incident Report if indicated. The instructor and/or director will follow up with the student.

Health Information Portability and Accountability Act (HIPAA)

Students are responsible for understanding and abiding by HIPAA. More information related to HIPAA and protected health information can be found here:

<https://www.hhs.gov/programs/hipaa/index.html>
<http://app.leg.wa.gov/rcw/default.aspx?cite=70.02>

HIPAA was created to help protect the patient's confidentiality. These are some guidelines to help you protect the confidentiality of your patient and still function as a caregiver for that patient. Violations of this policy can result in immediate dismissal from the nursing program.

- Remain in compliance of the federal, state and facility regulations regarding HIPAA and PSQIA.
- Use client initials; do not write down the full name on anything you take home.
- Do not make a copy of anything from the computer. If given a copy, place it in any of the blue shred bins before leaving the floor.

- Dispose of anything with a patient name on it in the blue shred bins on the floor or if unable to shred, use a “Sharpie” permanent marker to cross out the patient’s name prior to disposal. This includes the medication and intravenous baggies with patient names on them.
- Do not disclose information to anyone not involved in the patient’s care without the patient password or consent.
- Do not discuss patient information in any non-private areas (ie: do not discuss patients in the hospital lobby, hallways, and cafeteria).
- Minimize or exit out of EPIC if called away from the computer.
- Do not share your access to patient information with anyone.
- Do not allow anyone to view your access code and do not give your computer /PYXIS access code to anyone else.
- Never give a computer to someone in clinical who has not been positively identified as someone who is legally designated to have access to the computer.
- Use of social media is to be in compliance with all HIPAA regulations. See Social Media Policy.
- Be aware that computer use is electronically monitored. It is prohibited to access any record other than your assigned patients or another patient you have completed a procedure that needs documentation (this includes yourself and your family members). Inappropriate access will result in immediate disciplinary action.
- Printing, photocopying or downloading **any** patient or related information for clinical prep or any other personal use is a breach of confidentiality as well as theft and could be grounds for immediate dismissal from the program.

Having knowledge of a violation of HIPAA is required to be reported by law. Students can report violations to the nursing director or faculty. Failure to do so may result in corrective action including dismissal from the nursing program.

Indications for Contacting Instructors During Clinical

Instructors MUST be texted or called regarding the following:

- ANY abnormal findings – after you’ve done a focused assessment regarding the findings.
- To do a procedure- as per our policy, you must notify the instructor and wait for instructions. No procedures are to be done alone. It is imperative that you follow this rule, for your own protection. Procedures will be minimized during medication delivery time.
- Your patient is discharged.
- Questions regarding your patient care.
- Any difficulties you are encountering, including your time management.
- If there is an emergent patient problem, notify the primary caregiver first and then contact your instructor.
- Follow medication administration instructions per instructor. Do not text an instructor for a medication during 0900 medication pass unless it is in the last 30 minutes of your scheduled administration of the medication and you haven’t heard from the instructor.
- You must have permission to leave the clinical area for any reason

Mandatory Reporting of Patient Harm, Unreasonable Risk of Patient Harm or Drug Diversion

As mandated by the Washington State Board of Nursing under WAC 246-840-513 the nursing program will report to the Board events involving a student or faculty member that resulted in patient harm, an unreasonable risk of patient harm or diversion of legend drugs or controlled substances within 48 hours.

As mandated by the Board, the nursing education program shall keep a log of all such events reported by a patient, family member, student, faculty or a health care provider. The log must include:

1. The date and nature of the event;
2. The names of the student or faculty member involved;
3. The name of the clinical faculty member responsible for the student's clinical experience;
4. Assessment of findings and suspected causes related to the incident or root cause analysis;
5. Nursing education program corrective action; and
6. Remediation plan, if applicable.

The Unusual Occurrence Form (see Appendix O) will serve as the data collection tool for the log. The supervising clinical instructor and student fill out this form together. Return it to the Nursing Director within 24 hours of the event. The Nursing Director should also be notified that an event of this nature has occurred as soon as possible via cell phone/text.

The nursing education program shall use the principles of just culture, fairness, and accountability in the implementation and use of all incident reporting logs with the intent of:

1. Determining the cause and contributing factors of the incident;
2. Preventing future occurrences;
3. Facilitating student learning; and
4. Using the results of incident assessments for on-going program improvement.

Medical Malpractice and General Liability Insurance

All students enrolled in nursing practice must carry student medical malpractice insurance as well as student medical general liability insurance. Insurance is purchased through a group enrollment plan at Peninsula College. A yearly fee is paid at fall quarter registration. The college cannot be responsible for costs resulting from malpractice or accidents related to clinical practice and, by contract, the clinical facilities in which students practice are not responsible.

Medication Administration (ADDD policy)

Students will be provided with both theory and clinical learning experiences related to safe medication administration appropriate to their level of education. Simulated experiences with medication administration skills will be satisfactorily completed in the Skills Lab before a student is allowed to administer medications in the clinical environment with supervision. Even after supervised check-off in the skills lab and clinical setting, students must always have clinical instructor permission to administer medications to patients. Specific guidelines related to medication administration will be provided by the faculty pertaining to each quarter's clinical experience.

Student orientation to safe medication administration will include, but is not limited to, the following simulated learning experiences:

- Correct reading and interpretation of a medication order
- Safe identification of the patient
- Routes of medication administration, including the nursing judgment required to safely implement the routes of medication administration.
- Use of a Nursing Drug Reference to access information on drug action, contraindications, dosages and routes, side effects, pharmacokinetics, and nursing considerations.

- Safe use of Automated Drug Distribution Devices (ADDDs) and other medication dispensing systems. Students will receive training on Automated Drug Distribution Devices (ADDDs), prior to the use of such in the clinical setting. In addition, students will receive on-site orientation(s) to agency-specific ADDDs, with supervision, by a licensed nurse (instructor or preceptor). WAC 246-945-450 provides specific guidance for nursing student use of ADDDs. Students redemonstrate safe use of the ADDD to the instructor (retrieving, removal, safe storage, returning, wasting per facility policy).
- Processes for administration of controlled substances, medication wastage, and monitoring for drug diversion
- Medication reconciliation procedures.
- Accurate dosage calculation
- Correct documentation of medication administration, including correct cosigner

In case of medication error, adverse events, or drug diversion see related policy above related to reporting Mandatory Reporting of Patient Harm, Unreasonable Risk of Patient Harm or Drug Diversion per WAC 246-840-513

Procedures Prohibited For Students

1. Witness or sign any documents; i.e., operative or other consents, wills, discharge teaching sheets, etc.
2. Administer epidural anesthesia
3. Administer blood or blood products. Students may monitor patients receiving blood or blood products.
4. Administer chemotherapy or monoclonal antibodies
5. Continuous IV medications (i.e., PCAs, heparin, TPN etc.) may not be taken off the IV pump without supervision
6. Administer any IV cardiac medications (diuretics not included).

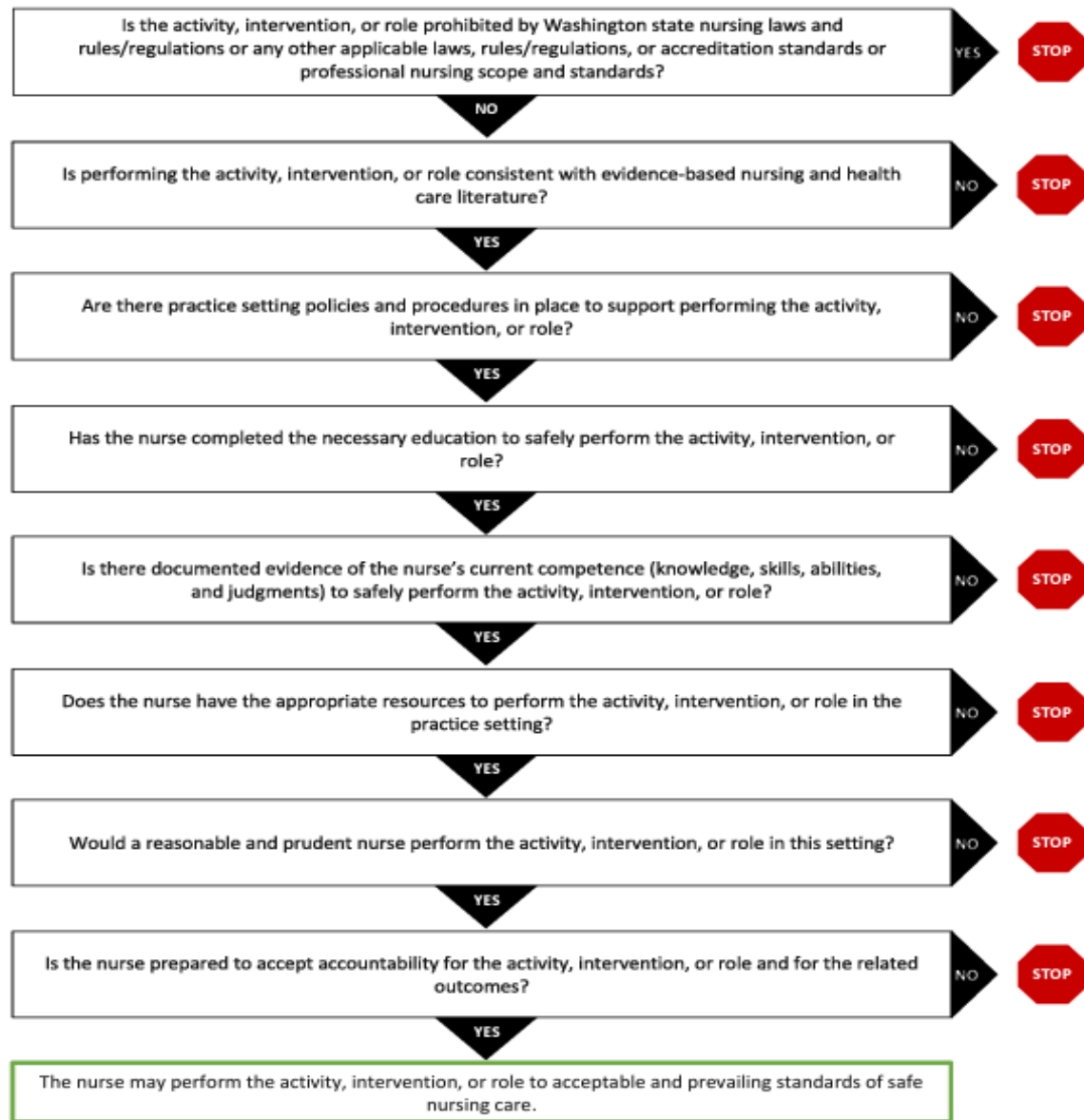
Performing a prohibited procedure may result in immediate dismissal from the nursing program. Note: IV opioids and other potentially sedating medications may be given per hospital policy with direct faculty or preceptor supervision.

Scope of Practice Decision Tree

Please see table below

Scope of Practice Decision Tree

Identify, describe, or clarify the activity, intervention, or role under consideration.



Used with Permission from National Council State Boards of Nursing: Scope of Nursing Practice Decision-Making Framework, Journal of Nursing Regulation, Volume 7, Issue 3, October 2016.

[Chapter 18.79 RCW Nursing Care](#) • [Standards of Nursing Conduct or Practice WAC 246-840-700](#)

Contact Us: NursingPracticeConsultation.ncqac@doh.wa.gov or 360-236-4725

DOH 669-305 March, 3 2017

Scrub Closet

The Nursing Program Scrub Closet is intended to support currently enrolled nursing students by providing access to clean, appropriate, and usable clinical attire and select nursing-related items in order to promote student success and foster a spirit of shared support among students. Access to the Scrub Closet is limited to students currently enrolled in Nursing Program courses and is not available to non-nursing students or the general public. Acceptable donated items include navy blue scrub tops and bottoms, PC Nursing jackets and sweatshirts, stethoscopes, and new or barely worn nursing footwear; other nursing-related items may be accepted with prior approval from a Nursing Instructor. All donated items must be clean, sanitary, and in usable condition, free from stains, tears, excessive wear, or odors, and footwear must be structurally sound. All items are subject to review, and the Nursing Program reserves the right to remove, discard, or donate elsewhere any item at its discretion. The Scrub Closet is facilitated by program staff, and access procedures, hours, and limitations are determined by the Nursing Program. Students are expected to use the Scrub Closet responsibly and respectfully and to take items only as needed to support academic and clinical success; misuse or abuse may result in loss of access. Availability of specific sizes, styles, or items is not guaranteed and is dependent upon donated inventory. Questions regarding the Scrub Closet or requests for approval of donated items should be directed to a Nursing Instructor or designated program staff member.

Simulated Clinical Experiences

The Peninsula College Nursing Program uses simulation as a substitute for traditional clinical experiences, as approved by the Washington State Board of Nursing, not to exceed fifty percent of its clinical hours for a particular course. The simulation is a technique to replace or amplify real experiences evoking or replicating substantial aspects of the real world in a fully interactive manner. This policy is based on WAC 246-840-534. Simulation may be virtual simulation or live, in-person simulation.

1. The nursing program has an organizing framework providing adequate fiscal, human, technological and material resources to support the simulation activities. The nursing education has a budget sustaining simulation activities and training of the faculty. The nursing education program has appropriate facilities, educational and technological resources and equipment to meet the intended objectives of the simulation.
2. The nursing program has integrated simulation into the curriculum in every clinical course, and plans to maintain simulation experiences into the future. Faculty work collaboratively to design simulation scenarios/experiences based on student learning outcomes and assure the simulation activities are linked to the program outcomes. Faculty organize clinical and practice experiences based on the educational preparation and skill level of the student.
3. Simulation activities are managed by individuals who are academically and experientially qualified and who demonstrates currency and competency in the use of simulation while managing the simulation program.
4. All faculty involved in simulations, both didactic and clinical, have training in the use of simulation and engage in ongoing professional development in the use of simulation. All nursing faculty are oriented to the simulation pedagogy/technique and become familiar with simulation facilities, high fidelity equipment and other educational and technological resources.

5. Qualified simulation faculty supervise and evaluate student clinical and practice experiences. Faculty to student ratios in the simulation lab must be in the same ratio as identified in WAC [246-840-532](#) for clinical learning experiences.
6. Debriefing occurs following every simulation experience and is led by a qualified facilitator. Research indicates that debriefing is where most learning occurs in simulation experiences. The debriefing facilitator encourages reflective thinking and provides feedback regarding the participant's performance. The faculty have adopted the Delta/Plus debriefing technique. In this technique the Plus explores what worked well and the Delta explores what the student or faculty would change. Faculty facilitate student reflection and analysis of their actions. Faculty also facilitate identification and review of lessons learned during the simulation activity. Both live simulation and virtual simulation include pre briefing and debriefing.
7. The faculty and students evaluate simulation experiences via the quarterly clinical evaluation. Students also complete a self-evaluation of learning outcomes after each simulation. Students also evaluate simulation experiences as part of the quarterly course evaluation surveys on an ongoing basis.
8. Students are expected to engage in simulation as they would any clinical experience. Students are expected to prepare for their patient experience prior to simulation, and to arrive in their scrub uniform ready to participate.

Skills Performance, Procedures and Check Offs In Clinical

- Students may not give nursing care or perform skills they have not practiced or been checked off in the campus laboratory (if formal lab check off is required). Faculty supervision and approval is required before giving medications and doing procedures other than basic skills. Failure to follow this policy may result in corrective action, including immediate dismissal.
- Once a skill is demonstrated in class and successfully checked off in the on campus lab (unless there is no formal check off required) students are expected to perform the skill in clinical when it becomes available.
- If a student fails to perform a skill previously learned, depending on the skill(s) and the extent of the inability to perform skill(s), the faculty will implement a Clinical Student Counseling Form with a plan for remediation. Some skills must be re-evaluated by a faculty member in the lab setting prior to being allowed to perform them in the clinical setting.
- No procedures will be done alone or with the Primary Caregiver without receiving instructor permission. If the instructor designates an alternate person to supervise, be sure to have that person sign the student skill check off sheet.
- Refer to the skills check off sheet frequently. There are required skills that must be checked off each quarter in order to pass the course. In the event of extenuating circumstances that prevents a student from checking off, an incomplete or an extension for a specific skill may be granted at the discretion of the nursing director.
- There are some skills that students have several quarters to check off on because of their infrequency in the clinical setting, therefore students should check off on these skills as soon as the opportunity arises.
- No required check offs will be done the last week of the clinical except with prior approval. Plan ahead.

Student Errors, Near Misses, Unusual Occurrences and "Just Culture" (Incident Reports and Tracking)

"Just Culture" is a concept that supports reduction of errors and promotion of patient safety. A "Just Culture," promotes open reporting and accountability with a focus on system improvement. Behavioral

choices that lead to errors can be categorized as unintentional “human error,” risky behavior or reckless behavior. Most nursing errors are unintentional behavioral choices where the situational risk is not recognized. Timely, careful review of errors and “near misses” facilitate learning from such occurrences and identifies opportunities for system improvement. In the instances in which a student nurse engages in risky behavior faculty can coach the student, and develop a remedial improvement plan. In the rare instances of reckless behavior choices, disciplinary action including dismissal from the nursing program may be warranted. The Washington State Board of Nursing obtained permission from the North Carolina Board of Nursing to share their Just Culture Student Practice Event Evaluation Tool (SPEET) (see Appendix Q). The SPEET is a tool to evaluate an event and determine the type of behavior risk involved. Per the SPEET, the tool is not used if the event involves misconduct such as academic cheating, breach of confidentiality, fraud, theft, drug abuse, drug diversion, boundary issues, sexual misconduct, mental/physical impairment.

All student unusual occurrences, errors or near misses will be documented on the Peninsula College “Unusual Occurrence Form” by the student and supervising clinical instructor (see Appendix O). The Nursing Director will be provided with documentation within 24 hours of the incident. The Nursing Director will facilitate storage in a confidential file in the Nursing Program Office. These errors will be reported to the Washington State Board of Nursing by the Nursing Director as required (see Mandatory Reporting policy). If the event is appropriate for evaluation with the SPEET tool (see exclusions above) nursing faculty in consultation with the Nursing Director will complete a SPEET and develop an appropriate plan for the student based on the result. See Appendix Q for SPEET tool.

Student Responsibilities During Clinical

Each nursing student maintains professional obligation and responsibility for their actions. Each student is held legally accountable for his or her nursing decisions and behaviors. Each student is also ethically responsible to act and provide care in a safe, caring and moral manner. Your role of accountability, ethical responsibility, and legal behavior starts as you enter the role as a student nurse.

Failure to meet these responsibilities could result in a failing clinical grade and dismissal from the nursing program.

The student must:

1. Adhere to standards of ethical practice and conduct as defined in the American Nurses Association “Code of Ethics” and Peninsula College Nursing Program policies.
2. Demonstrate Expected Student Behaviors listed in Appendix B
3. Adhere to these Policies and Guidelines.
4. Maintain confidentiality with all family/patient information. Information is not to be discussed with anyone except instructors and essential members of the health care team.
5. Protect the rights of the clinical agencies by discussing any problems only within the confines of nursing classes or faculty member’s offices.
6. Know and abide by the policies and procedures of the clinical facility, including the fire and life safety protocols. Students must adhere to the facility computer, EPIC and automated drug dispensing device access policies.
7. In general, students should not provide direct care to patients identified by the facility as combative, violent, or likely to demonstrate aggressive behavior. At OMC these patients are generally housed in Room 294/295, though the charge nurse may identify additional patients inappropriate for nursing students. If a nursing student must enter an environment where a

potentially combative patient is present, they should be accompanied by a licensed nurse or healthcare professional trained in de-escalation techniques. Direct physical contact or care should remain the responsibility of trained healthcare staff. Students are expected to review patient charts, behavior alerts, or safety risk assessments before any clinical interactions. Nursing students are expected to notify their instructor immediately if they feel threatened, uncomfortable or are injured by a patient

8. Portray professional behavior and attitude in clinical settings. Demonstrate accountability and responsibility for all actions and decisions. Maintain complete honesty. Students must not expose the patient to danger, risk, or excessive anxiety.
9. Arrive on time and complete all required clinical hours, including pre/post clinical conference. Students must adhere to the schedule of experiences as arranged for each nursing course. Students must notify the Primary Caregiver and the clinical instructor when leaving the unit or going on break. Students are responsible for their own reliable transportation to clinical experiences. Students are responsible for the makeup of any clinical absences.
10. Be knowledgeable and prepared to care for the patient. Clinical preparation includes any clinical related assignments as well as readiness to perform all previously learned skills.
11. Track comments on evaluations and grades on assignments. Students must take an active role in their clinical development and success. Maintain copies of all clinical evaluations, as additional copies will not be provided.
12. Students may not visit or give nursing care to patients unless an instructor is present in the facility.
13. Students may not give nursing care to relatives or close friends. Students should pick another patient if this situation occurs.
14. Students may not be on the floor or access the hospital computers except during prep times and designated clinical times, without instructor permission. Accessing computers or charting in the lab or on the hospital unit after post-conference is not allowed without instructor permission.
15. While in the clinical learning environment, students are expected to pursue activities that will enhance their clinical knowledge. If there is a lull in activity with assigned patients it is expected that students will seek out additional or alternate learning opportunities.
16. The following are never acceptable uses of clinical time because they do not advance the students' clinical learning and reflect negatively on the student and Peninsula College Nursing Program when observed by staff and visitors:
 - a. Homework/assignments for other courses.
 - b. Reading non-health care related newspapers, magazines, etc.
 - c. Non-patient care related use of the Internet or cell phone
 - d. Socializing in groups
 - e. Wearing ear bud(s) during clinical. This includes bluetooth or wired devices.

Code of Ethics

Students are expected to abide by the American Nurses Association (ANA) Code of Ethics for Nurses.

<http://nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses>

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

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

Complaints/Grievances

It is the general expectation at Peninsula College that academic concerns and complaints be addressed informally when possible. Peninsula College encourages resolution of academic concerns or complaints to occur directly between the student and the instructor. Within the nursing program the following informal steps should be taken:

1. Discuss the issue with the assigned clinical and/or course faculty. If this does not resolve the issue, then
2. Contact the course full-time faculty for the course if different from your assigned faculty. If there is still no resolution, then
3. Discuss the issue with the Director of Nursing

Should a student have an academic concern or complaint that has not successfully been addressed after attempting an informal meeting, the following steps should be used to resolve the issue.

Academic concerns and complaints should be submitted during the quarter in which the concern/complaint arose so that the instructor and college can seek a resolution while the student is still in the class. Concerns or complaints submitted outside of the timeframes outlined in the steps below may not be addressed by Peninsula College.

A student's second and subsequent academic concern or complaint involving the same instructor may proceed directly to step 2 if it occurs during the same quarter in which the first academic concern or complaint arose.

Documented extenuating circumstances, such as medical complications or recall to military duty, shall extend the timeframes outlined in the steps below.

This policy does not apply to the following: final grade change appeals, student conduct issues, academic honesty violations, Title VII complaints, Title IX complaints, and criminal matters. Please refer to the specific Peninsula College policies governing these issues.

Step 1:

The student shall contact the instructor in writing, informing them of their specific concern or complaint with as much detail as possible. A written concern or complaint shall be submitted to the instructor within 7 calendar days of the date when the concern or complaint occurred. **Please also submit your written concern or complaint to the Director of Nursing at the same time.** The instructor shall respond in writing no more than 7 calendar days from receipt of the student's written concern or complaint acknowledging the student's concern or complaint and outlining the instructor's plan to address the concern or complaint. If additional time or information is needed to address the student's concern or complaint, the instructor shall inform the student in their response.

If the student does not receive a response from the instructor within 7 calendar days of submitting their written concern or complaint, they may proceed to step 2.

Step 2:

If step 1 does not produce a satisfactory result for the student, the student shall submit their concern or complaint in writing to ***instruction@pencol.edu*** within 14 calendar days of the instructor's response or lack thereof. ***Instruction@pencol.edu*** will route the student's email to the faculty member's supervising dean, who will respond to the student. The student shall provide the dean with a copy of all written communications between the student and the instructor regarding the student's concern or complaint. Upon receipt of the written complaint, the dean will review all communications exchanged between the student and the instructor related to the concern or complaint.

At the discretion of the dean, the dean may arrange a meeting with the student and instructor to address the student's academic concern or complaint.

The dean shall provide a written resolution of the complaint no more than seven (7) calendar days from receipt of the student's academic concern or complaint. If additional time or information is needed to address the student's concern or complaint, the dean shall inform the student in their written response.

If all internal processes fail to satisfactorily address your concern and there is reason to believe that an external agency is likely to intervene, the following resources provide contact information for departments of education in the state of Washington as well as each of the other fifty states and the regional accrediting association for colleges and universities in the Pacific Northwest.

The Washington Student Achievement Council (WSAC) has authority to investigate student complaints against specific schools. WSAC may not be able to investigate every student complaint. Visit the [WSAC Student Complaints](#) webpage for information regarding the WSAC complaint process.

Further details can be found here:

<http://www.pencol.edu/student-policies-and-procedures/academic-concerns-grade-complaints-and-grievances>

Contacting Instructors

You will often have access to instructor cell phones. This number must be kept private and used only for professional purposes, primarily during clinical and emergencies. If you are trying to reach an instructor you may text or call. Do not call an instructor before 0600 or after 2100, unless you are in the clinical setting or you have a crisis, urgent matter or emergency.

If you communicate with an instructor via email do so to their Peninsula College email account from your Peninsula College email account.

Criminal Background Checks

The ability to successfully clear a criminal history background check in accordance with RCW 74.42.620 and 18.51.070 is required. A clear record is required prior to and during any clinical courses through Peninsula College. Additionally, the Washington State Board of Nursing may deny a license to any person who has been convicted of any "crime(s) against persons" or "crime(s) relating to financial exploitation" per RCW 43.43.830.

Some agencies require copies of student background checks to be on file at the clinical site and/or require their own separate background check; copies will be sent to agencies upon request.

Criminal background checks must be completed through **DISA Medical** prior to entrance into the nursing program. Other community agencies may also require a separate background check. The student will be responsible for all applicable fees associated with the acquisition of the criminal background check.

Students are expected to self-report, at any time throughout the program, any and all incidents that may affect clinical placement.

Credit Allocation Policy

College Policy for allocation is as follows:

- Theory Credit 1:1 One 50 minute hr/wk for 11 weeks = 1 quarter credit
- Laboratory Credit 2:1
Two 60 minute hrs/wk (120 min/wk) for 11 weeks = 1 quarter credit
- Clinical Laboratory Credit 3:1
Three 60 minute hrs/wk (180 min/wk) for 11 weeks = 1 quarter credit

General Sessions, lecture/discussions, group discussions and theory tests are scheduled as theory credit and are calculated 1:1. To obtain this credit number, 11 is divided into the actual number of theory hours to obtain the credit hours.

Campus laboratory demonstrations and clinical laboratory practice is calculated as laboratory credit and are calculated 2:1. To obtain this credit number, 22 is divided into the actual number of lab hours to obtain the credit hours.

Clinical laboratory experiences in which a faculty member is supervising from an offsite location (observation experiences, special experiences, preceptorship experience) are calculated 3:1. An associated seminar, pre/post conference or discussion board is required. To obtain this credit number, 33 is divided into the actual number of lab hours to obtain the credit hours.

Dismissal from the Nursing Program

Students who fail to achieve a passing grade in any course according to the criteria described under Grading in this Handbook will be dismissed from the program. Grades of “Incomplete” must be resolved prior to the start of the next quarter to enable the student to remain in the program. For information about readmission, refer to the Readmission policy in this Handbook. Students may fail clinical and be dismissed from the nursing program if an unremediated pattern of concern develops in any of the areas detailed under Dismissal from the Clinical Setting or Student Responsibilities During Clinical. Students may be dismissed from the program for violations of ethical, legal, or safety standards of the profession.

New policy for Fall 2026 : Any serious violation(s) of professional standards, or behavior(s) that places a patient or others at risk may result in immediate and permanent dismissal without eligibility for readmission.

During the review process for dismissal, students are not allowed to attend theory, clinical, simulation and/or labs. The Director of Nursing will issue the letter of dismissal when warranted via email and/or mailed letter. Students that are dismissed from the program will receive a failing grade in courses that they are enrolled in when dismissed.

Early Intervention Policies (Remediation)

Theory Classes:

If a student's theory grade or grade on any exam is below 81% they will meet with their instructor. At this time a Personal Improvement Plan (PIP) (see Appendix I) will be developed. The PIP is to be completed by the student. The student is to assess the situation to determine/ diagnose/ identify the problem(s) for the poor academic performance on the examination and/or in the course. Next, the student is to develop specific interventions to improve academic performance on future examinations and in the course. When the student meets with the faculty, the interventions and evaluation methods will be discussed. Improvement suggestions may consist of: referral to tutoring, suggested study techniques, referral to counseling services for testing or stress management, etc. If the theory grade falls below 81% for a second time in the quarter, the student will meet with the faculty member again. An assessment of the previous plan for improvement will occur at this time and further development of a plan for corrective action will be discussed for the student to implement. If the final grade is below 76% at the end of the quarter this will be a failing grade. A PIP may not be required on the final exam of the quarter dependent on the student's overall exam grade.

All students at any time, including those who are at or above 81%, may still self-identify to the tutors or faculty that they would like assistance. The tutoring protocol will then be implemented. If a student has

been at or above 81% for the quarter, but fails the final graded assignments, tests, etc., as outlined in the syllabus, and their final grade now falls below the required 76% passing for the quarter, the student will receive a failing grade. Grades are not rounded; 75.9% or lower is a failing grade.

Personal Improvement Plans are maintained by the faculty member until they are completed. At that point they are placed in the student file.

Clinical/Behavioral:

Any concerning issues related to clinical performance or student behavior will be documented on a Clinical Student Counseling Form (Appendix J) as appropriate. Faculty in consultation with the student and Nursing Director, will develop a plan to address the concerning behavior. In the event of significant problematic student behavior, as determined by the clinical instructor, the student may be immediately removed from the clinical setting.

Documentation and written evaluation(s) will be provided to the Nursing Director who will review the evaluation and ensure it is filed in the student file. The nursing faculty for the course in which the student is enrolled, in consultation with the Nursing Director, will make the decision regarding whether the student will be allowed to continue in the clinical area and any conditions placed on that continuation. Dean of Professional Technical Programs, Vice President of Instruction, and Vice President of Student Services may be included in discussions of how to address the problematic behavior, and what further action is necessary.

If a student demonstrates continuing clinical deficiencies, the student is at risk of clinical failure. If the decision is made to suspend or dismiss a student for all subsequent clinical experiences, the student will receive a failing grade for the nursing course. Decisions may be appealed to the Nursing Director. A student will have an opportunity to respond to the circumstances resulting in suspension or dismissal by submitting any relevant data pertaining to the incident(s) following the College's Grade Appeal policy

Electronic Submission of Student Assignments

Students are required to:

- Submit assignments to the appropriate instructor.
- Follow the instructions given by the instructor for the preferred submission method. Generally Canvas submission is preferred, unless the instructor specifically requests it be emailed to their Peninsula College account.
- Submit by the designated due date/time
- Please submit as a Word document, PDF or Google Doc within Canvas
- Please label your assignment document and the subject line as follows:
 - a. Student's last name first initial_title of assignment:
DoeJ_NursingCarePlan

Email

All students are expected to activate and regularly check their Peninsula College student email account. This will be the only email used by instructors to students and students are to use only this email when communicating with instructors. Students may also communicate with instructors electronically via Canvas messaging.

Family Educational Rights And Privacy Act (FERPA)

Confidentiality of Student Records

In order to respect the privacy rights of students, only limited information about a student may be released to individuals off campus without the express written permission of the student.

The Family Educational Rights and Privacy Act (FERPA) affords you certain rights with respect to your records. One aspect of FERPA that includes involvement of students sharing information about other students is the right to consent to disclosures of personally identifiable information contained in your education records. One exception which permits disclosure without consent is disclosure to college officials, including faculty members, with legitimate educational interests. A college official has a legitimate educational interest if the official needs to review an education record to fulfill his or her professional responsibility.

As students, this means that information discussed about other students in an educational environment such as Student Group Supervisor (SGS) experiences or classroom discussions, does not leave the environment in which it was discussed for any reason unless it is between the student and the instructor. Information about any student is not to be discussed with other students without the expressed consent of the student of interest. See [FERPA guidelines](#) and disclosure in full at the Peninsula College website. Violations of this policy can result in immediate dismissal from the nursing program.

Grading (Student Performance Evaluations)

Clinical Course Grading

This refers to grading for NURS 111, 112, 113, 211, 212, 213

Refer to specific course materials, syllabi and directions on Canvas for detailed information on course grading. The clinical course grade is a pass/fail grade. In order to receive a “pass” students must achieve 76% on the clinical paperwork and clinical evaluations, turn in all required assignments, meet all the required objectives for campus laboratory and clinical for that quarter, and maintain “Expected Student Behaviors” (Appendix B). If any of those items are not met this will result in a clinical failure and a grade of “F” or “Fail” will be recorded for the clinical grade. In some cases an incomplete may be granted at the discretion of the Nursing Director, see Incomplete Grades below. Students with a clinical failure may not continue in the nursing program. See Readmission for information about program re-entry.

Regardless of previous performance, any behavior that compromises the safety of patients can result in: review and repeat skills testing, discontinuance of clinical attendance, and/or a failing grade.

Grade Appeal Process and Disputed Grades

If a student disagrees with a grade received in any course, within the following quarter they can pursue the issue. Students are responsible for following the instructions in the Peninsula College Policies for a Grade Appeal: <https://pencol.edu/student-life/student-rights-policies-procedures/grade-appeals>

If students received a failing grade for any course during the nursing program, they are not allowed to attend subsequent nursing courses (theory, clinical, simulation and/or labs) during the appeal process.

Incomplete Grades

Incomplete grades are given for approved academic absences, approved missing academic work, and approved incomplete clinical or laboratory requirements. Students are responsible for tracking incomplete requirements. Incompletes are generally made up by the first clinical week of the subsequent quarter or as soon as possible. An incomplete will impact student financial aid. The nursing program does not intercede in financial aid difficulties related to incomplete status. An appeals process is available but must be initiated by the student. Incompletion by the designated time will result in failure of the previous quarter and dismissal from the nursing program.

It is the student's responsibility to arrange for the makeup of any requirement. At the end of the quarter if any course requirement is incomplete, an "I" will be recorded. If the "I" is due to missed clinical hours, it is the student's responsibility to make an appointment with the Nursing Director before the end of the quarter to arrange for a make-up of these hours. In some cases it may not be possible to make up the hours, and the course may need to be repeated. The requirements to remove other types of "incompletes" are at the discretion of the nursing faculty. Following completion of the incomplete work, it is the responsibility of the student to inform the teacher of record to initiate a grade change.

Late Assignment Grades

Students are expected to turn in all assignments on time. For late assignments, students will lose 5% per day for up to 4 days. After 5 days the student will receive a "0" on the assignment unless there are extenuating circumstances (severe illness, death in the family) and arrangements have been made with the faculty. All assignments must be completed in order to pass the course, including those late assignments that will receive a 0. In general, the nursing program cannot accommodate more than a two-week absence for any reason (family emergency, personal health, etc), and in some cases, even this length of absence may prevent the student from meeting course objectives and successfully completing the course.

Theory Course Grading:

- Earn 76% or above of the total points possible for the individual class.
- Demonstrate the Expected Student Behaviors listed in Appendix B of the Nursing Handbook.

For NURS 101, 102, 103, 201, and 202: 76% (2.0) is required on both Exams and Assignments. If the average is 76% on Exams AND 76% on Assignments, then the final course letter grade is based on the total accumulated points. After verifying a 76% in both Exams and Assignments, the total number of points will be added together. This sum will be used to determine the final letter grade in the course provided the "Expected Student Behaviors" are satisfactory (refer to Appendix B).

If you do not have a minimum of 76% (2.0) on both Exams and Assignments, the final grade will be determined by applying the lower of the two percentages. The percentages are never rounded up. Each quarter of nursing has to be passed with a minimum of 76% (2.0) to be permitted to enroll in each subsequent quarter. Grades are not rounded; 75.9% or lower is a failing grade.

For HUM 131, PSYC 141, PSYC 242, NUTR 121, NUTR 122, NUTR 123, NURS 203, HUM 232, HUM 233 grades are determined by the criteria on the syllabus and information on Canvas (which can include tests, papers, and other assignments). The percentage will be calculated from the total possible number of points.

Tracking Grades

Students are responsible for tracking their own grades and are advised to monitor their grade each week to ensure progression. Available methods for monitoring grades include:

- Grades are visible immediately after they have completed the test.
- Access grades through Canvas.
- Request faculty to verify their current grade

Graduation

All students who believe they have met the requirements of a degree or certificate from Peninsula College are required to submit an Application for Degree to the Admissions Office at least one quarter before graduating. The college transcript evaluator will conduct a degree audit to determine whether the student has earned the degree or certificate for which he/she is applying. Upon completion of the program requirements, an Associate in Nursing DTA/MRP degree is awarded to students successfully completing both years of the program. If you do not apply for graduation your transcript will not list the Associate in Nursing DTA/MRP degree and the RN licensure process will be delayed.

Health Insurance

Health insurance is strongly encouraged as students are responsible for their own health and/or injuries in their environment. Contact Student Services if you need assistance in finding out how to obtain health insurance.

Inclement Weather

During periods of inclement weather it may be necessary to cancel class or clinical. On campus classes will be cancelled if Peninsula College is closed for inclement weather, but classes may be held remotely. In general clinical will also be cancelled if the campus is closed for inclement weather, however individual nursing faculty, at their discretion, may choose to finish a clinical shift or may choose to offer clinical to students that are able to safely attend. Nursing faculty also have the discretion to dismiss clinical early in periods of inclement weather. Clinical will still occur if the campus has a cancellation for a reason that does not affect the clinical site (e.g. localized campus waterline issue). Nursing faculty may also choose to cancel class or clinical during inclement weather even when campus is open at their discretion. Students will be notified by their instructors in this case. Be sure the Nursing Program Specialist has your current contact information.

Licensure

Licensure Applications and Examination

The nursing program will assist students who are in the final quarter of the nursing program to complete two applications necessary to become licensed RNs.

1. You must apply to the Washington State Board of Nursing to become licensed in this state. Application forms are available at <https://nursing.wa.gov/>. If you wish for initial licensure in another state, you can find contact information about boards of nursing on the National Council of State Boards of Nursing webpage at <http://www.ncsbn.org>. It is your responsibility to authorize an official Peninsula College transcript to be sent to the Board of Nursing as directed in the application. Please note: transcripts sent to the Board of Nursing must show the degree or certificate earned which requires that you apply for graduation (see Graduation policy). You will delay your RN licensure if this is not completed.
2. You must also apply to take the licensure exam (NCLEX-RN) either online at the <http://www.ncsbn.org>, by phone, or by mail. After graduation and final grades are posted, the Registrar will post degrees to student transcripts. After degrees are posted the Director of Nursing will send a Certificate of Completion to Board of Nursing, typically within a week after graduation. The Board of Nursing will then issue an Authorization to Test within the National Council of State Boards of Nursing system, and you will be allowed to schedule the NCLEX-RN

exam. If you have not completed the preliminary application with NCSBN and Board of Nursing your RN licensure will be delayed.

Personal Data Questions

The graduate will be required to answer YES or NO to the following questions on the application to the Washington State Board of Nursing in order to become a Registered Nurse.

1. Do you have a medical condition which in any way impairs or limits your ability to practice your profession with reasonable skill and safety?
2. Do you currently use chemical substance(s) in any way which impair or limit your ability to practice your profession with reasonable skill and safety? (Currently means within the past two years. Chemical substances include alcohol, drugs, or medications, whether taken legally or illegally).
3. Have you ever been diagnosed with, or treated for, pedophilia, exhibitionism, voyeurism or frotteurism?
4. Are you currently engaged in the illegal use of controlled substances?
5. Have you ever been convicted, entered a plea of guilty, no contest, or a similar plea, or had prosecution or a sentence deferred or suspended as an adult or juvenile in any state or jurisdiction? Been charged with a crime and are currently facing potential prosecution in any state or jurisdiction? Been made aware that you are a current suspect or under investigation in any state or jurisdiction that has not yet been completely resolved?
6. Have you ever been found in any civil, administrative or criminal proceedings to have:
 - a. Possessed, used, prescribed for use, or distributed controlled substances or legend drugs in any way other than for legitimate or therapeutic purposes?
 - b. Diverted controlled substances or legend drugs?
 - c. Violated any drug laws?
 - d. Prescribed controlled substances for yourself?
7. Have you ever been found in any proceeding to have violated any state or federal law or rule regulating the practice of a health care profession? Been charged with or accused of violating any state or federal law or rule regulating the practice of a health care profession? Been made aware that you are under current investigation in any state or jurisdiction for violating any state or federal law or rule regulating the practice of a health profession?
8. Have you ever had any license, certificate, registration or other privilege to practice a health care profession denied, revoked, suspended, or restricted by a state, federal, or foreign authority?
9. Have you ever surrendered a credential like those listed in number 8, in connection with or to avoid action by a state, federal, or foreign authority?
10. Have you ever been named in any civil suit or suffered any civil judgment for incompetence, negligence or malpractice in connection with the practice of a healthcare profession?
11. Have you ever been disqualified from working with vulnerable persons by the Department of Social and Health Services (DSHS)?

Responsibility of Nursing Program Upon Graduation

The Nursing Director is responsible to send a Certification of Completion form to the WA Board of Nursing. The form will be sent once documentation of program completion has been received from the college transcript evaluator. Students are reminded that they are responsible for authorizing the college

to send an official transcript to the Board of Nursing after the degree is posted. [The link to order transcripts is available on the Peninsula College website.](#) Peninsula College will not release transcripts of any student with outstanding financial obligations to the college. Students are reminded that they are responsible for notifying the program specialist and Nursing Director of any name changes at any time in the program, but this is particularly important around the time of graduation and licensure.

Lockers for Nursing Students

The Nursing Program has a block of 16 lockers reserved for nursing students on campus. Given the limited number of lockers available, nursing students may choose to share lockers. Students sign up for lockers during Fall Quarter and locker assignments are first come, first serve. Students complete a Locker Rental Agreement form with the Nursing Program Specialist in order to receive a locker number and combination. Locker rental is for one academic year. By the last day of class in June, students need to remove all items and clean their locker. Items left behind will be held for 60 days by the Nursing Program prior to disposal. The college nor any of its employees are responsible for the security or well-being of the contents of the lockers. At all times, locker contents must comply with Peninsula College policies, procedures, and safety regulations. Contents may not be in violation of any local, state or federal law. Students are responsible for maintaining sanitary conditions within their locker at all times. Locker combinations will be changed annually during the summer.

Nursing Honors Society: Alpha Delta Nu Epsilon Beta Chapter

In 2016 a chapter of Alpha Delta Nu Epsilon Beta Chapter was chartered for Peninsula College nursing students. This is the only nursing honors society for associate degree nurses. Nursing students are invited to join Alpha Delta Nu as provisional members during the winter of their first year if they maintain a 3.0 in theory courses. Members of the Honors Society coordinate a community service activity. Students are officially inducted into the honors society during the spring of the second year if they continue to maintain a 3.0 GPA and complete their service project. There is a fee to join Alpha Delta Nu to cover the cost of honor cords for graduation, honors pin and refreshments at the induction ceremony. The fee is determined by the Honors Society officers in collaboration with the honors society advisor. Membership in Alpha Delta Nu Honors Society is printed on the student's official transcript on graduation. Officers are elected in the fall of the second year and work with a faculty advisor and the nursing director.

Nursing Student Committee

All nursing students are welcome to participate in the Nursing Student Committee. The Nursing Student Committee helps coordinate nursing student activities such as the Nursing Student Buddy System, Nursing Pinning Ceremony, possible off campus events or conferences, the Welcome Picnic, and community service activities. All Nursing Student Committee activities must be approved in advance by the faculty advisor. Officers are elected in the spring from the first year class to serve during the second year of the program. The Student Committee works with a faculty advisor and the nursing director.

Nursing Technician

After completion of their first clinical course nursing students may be eligible to work as a nursing technician.

Criteria for this are in the Washington Administrative Code (WAC) 246-840-860 and 246-840-870 described below.

Nursing Technician Criteria (WAC 246-840-860) To be eligible for employment as a Nursing technician a student must meet the following criteria:

1. Satisfactory completion of at least one academic term (quarter or semester) of a Nursing program approved by a Board of Nursing (ADN, Diploma, or BSN). The term must have included a clinical component.
2. Currently enrolled in a Nursing board-approved program will be considered to include:
 - a. All periods of regularly planned educational programs and all school scheduled vacations and holidays.
 - b. Thirty days after graduation OR sixty days after graduation if the student has received determination from the secretary that there is good cause to continue the registration period
 - c. Current enrollment will not be construed to include:
 - i. Leaves of absence or withdrawal, temporary or permanent, from the Nursing educational program.
 - ii. Students enrolled in Nursing department classes who are solely enrolled in academic non-Nursing supporting coursework, whether or not those courses are required for the Nursing degree.
 - iii. Students who are awaiting the opportunity to re-enroll in Nursing courses.

Functions of the Nursing Technician (WAC 246-840-870) The Nursing technician:

1. Shall function only under the supervision of the registered nurse.
2. May gather information about patients and administer care to patients.
3. Shall not be responsible for performing the ongoing assessment, planning, implementation, and evaluation of the care of patients.
4. Shall never function as an independent practitioner, as a team leader, charge nurse, or in a supervisory capacity.
5. May administer medications only under the direct supervision of a registered nurse and within the limits described in this section. "Direct supervision" means that the registered nurse is on the premises, is quickly and easily available, and that the patients have been assessed by the registered nurse prior to the delegation of the medication duties to the Nursing technician. The Nursing technician shall not administer chemotherapy, blood or blood products, intravenous medications, scheduled drugs, nor carry out procedures on central lines. There shall be written documentation from the Nursing education program attesting to the Nursing technician's preparation in the procedures of medication administration.
6. Nursing students are expected to notify the Nursing Director and Nursing Program Specialist of employment location and status.
7. The Nursing Program Specialist is available to assist students in completing the required paperwork to become a nursing technician. Students should be prepared to provide their prospective employer with a copy of their Skills Check-Off sheet as proof of their current appropriate scope of practice.

Participation in Nursing Program Governance

The class nominates their class representatives. Two students per class will be selected each quarter. The same student may serve more than one quarter if re-selected by the class.

The following duties apply to the role of class representative:

- Act as a liaison between faculty and the class, with a particular emphasis on communication.

- Representatives present issues and concerns of their fellow students regarding policies and practices of the nursing program for discussion and resolution by the faculty. *Individual students are responsible for directly communicating with faculty related to their personal concerns, grades, or concerns about specific test questions. This is not the role of the class representative.*
- Faculty welcome student input in the curriculum planning and program evaluation process. Representatives are invited to attend curriculum planning and systematic program evaluation meetings with program faculty. Other students may attend with permission of the Nursing Director.
- Representatives attend the biannual advisory board meeting.
- The function of these meetings is to provide an opportunity for shared governance regarding curriculum, policies and procedures, and other decisions in accordance with accreditation standards in which students will be impacted.
- The class representatives may also perform other roles as designated by the class.

Pinning Ceremony

Graduating Peninsula College nursing students celebrate their achievement by planning and participating in a special pinning ceremony at the end of the program. Pinning ceremonies are time-honored celebrations in nursing programs throughout our country. These ceremonies mark a milestone in the education of students as they transition from students to practicing nurses. Each school has a specific pin worn by its graduates to reflect pride in their program. Please note that the pinning does not replace the Peninsula College graduation ceremony and students are encouraged to participate in both. Students are responsible for forming a Pinning Ceremony Planning Committee during Winter/Spring of their second year. The Committee works in consultation with the Nursing Director to plan the Ceremony.

Plagiarism

Plagiarism can be defined as presenting someone else's work as your own. This can be intentional, for example, submitting another student's paper as your own. It can also be accidental, as is seen when a student fails to accurately cite a scholarly source in an evidence-based practice paper. Plagiarism is considered academic dishonesty, and subject to the Academic Honesty Policy

- All work you submit during the nursing program must be your original work.
- Faculty will notify students if an assignment is a group assignment intended for collaboration. All other work must be the student's own individual work.
- All written and other sources that students quote, paraphrase, or summarize must be properly cited.
- Submissions may be reviewed through plagiarism and AI-detection tools.
- A copy of your submission is stored in Canvas for the purpose of verifying the academic authenticity of future submissions.

If there is a perception of plagiarism, whether intentional or accidental, the following steps will be taken:

- Faculty will meet with the student to review the definition of plagiarism, the plagiarism policy, and the plagiarized assignment, and create a remediation plan.
- If the plagiarism is accidental and it is the first documented time the student has committed plagiarism, the remediation plan will be as follows:
 - Complete the Bring Your Own Intelligence Canvas Course

- Revise their assignment, one time, for a maximum grade of 80%, until this is completed, the assignment is entered in the grade book with a score of zero “0”;
- Write a one-page reflective summary on what was learned from this process;
- If the plagiarism was not accidental (e.g. a student submits another student’s work as their own) and/or the student has plagiarized previously (documented in the student file):
 - Student will receive a zero “0” for the assignment; and
 - Student may be referred to the **Executive Vice President**

The following documentation is then included in the student’s file: a written summary of the faculty student meeting, a copy of the plagiarized work, the original source, the remediation plan, and the remediation assignments.

Pregnancy and Lactation

The pregnant student is responsible to advise instructors and the Director of Nursing of the pregnancy, being under a healthcare provider’s supervision, and using every precaution to avoid exposure to radiation and other hazards while in school/clinical. The pregnant student who is in good health may continue with the Nursing courses as long as, in the judgment of the student’s healthcare provider, the requirements of the course will not interfere with her health or her pregnancy, and the state of health does not interfere with meeting course objectives. In general, the nursing program cannot accommodate more than a two-week absence for any reason (family emergency, personal health, pregnancy, etc), and in some cases, even this length of absence may prevent the student from meeting course objectives and successfully completing the course. Depending on the circumstances, the student may need to withdraw with a “W.”

The Nursing Program will work to support those lactating mothers that need to express breast milk on campus and during clinical. There is a private room available across campus for this purpose that can be arranged, or a student may choose to use another private or public space in the nursing building. Students can work with instructors and the Director of Nursing to find an appropriate space. We do allow students to express breast milk during class if they wish, but request they make an effort to be minimally disruptive to other students. During clinical students should work with their clinical faculty or special experience host to find an appropriate time and place to express breast milk at the facility.

Random Drug Testing

A nursing student may be required to submit and pay for random drug testing for the following reasons:

- Request of the clinical facility - in accordance with their policies. Some facilities drug test during student onboarding, which may include testing for Tetrahydrocannabinol (THC). At some facilities, a positive THC screen may preclude students from attending clinical.
- Behavior in the classroom, lab, or clinical setting that is suspicious of substance **use** (i.e. alcohol odor on breath, inappropriate verbal responses, unsafe or unusual behavior, etc.)

Reasonable Accommodation/Academic Adjustment for Persons with Disabilities

Peninsula College is committed to providing individuals qualifying with a disability an equal opportunity to access the benefits, rights, and privileges of college services, programs, activities, and employment in the most integrated setting appropriate to the individual’s needs, in compliance with the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, ADAAA of 2008, the State of

Washington Laws of 1994, Chapter 105, Chapter 49.60 RCW, Chapter 162-22 WAC, Chapter 251-10 WAC, Chapter 356-35 WAC, and Executive Order 93-03. No individual shall, on the basis of disability, be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination in any college program activity. Peninsula College is committed to providing reasonable accommodations, including core services, to qualified individuals with disabilities. The purpose of this policy is to identify the rights and responsibilities of the individual under ADA/504 and to establish clear guidelines for seeking and receiving reasonable accommodations. To receive reasonable accommodations, individuals are responsible for requesting accommodations and documenting the nature and extent of their disability. For a description of services, accommodations, scope, definition, obligation, resources and processes of the above policy, see the Peninsula College website, www.pencol.edu or phone 360-417-6323/TDD: 360-417-6339.

Readmission To The Nursing Program

- Students who received an unsatisfactory or failing grade for the clinical laboratory nursing courses are rarely considered for readmission.
- Students who withdraw for any reason from the Peninsula College Nursing Program while making satisfactory progress may be readmitted on a space-available basis per the readmission process below. Some of the factors that will be considered regarding readmission options include length of time out of the program, which quarter the student withdrew from, behaviors, academic and clinical performance at the time of withdrawal.
- Students who received a failing grade in a nursing theory course, or discontinued attendance due to academic problems are not guaranteed readmittance. If students are readmitted, they must have a plan for their success as they re-enroll in the program. Requirements for readmission are considered on a case-by-case basis to promote individual success. Space availability in the class will be considered. No student will be readmitted after a second failure of the program.
- To be readmitted, a student must contact the nursing director for possible readmission **two quarters** before the desired readmission. For Fall Quarter readmission, students must contact the nursing director by the middle of the Winter Quarter prior. At that time the faculty will determine if the student needs to re-apply to the nursing program or complete a N295 reorientation and re-enter in the quarter that the voluntary withdrawal occurred. As noted above, some of the factors that will be considered regarding readmission options include length of time out of the program, which quarter the student withdrew from, behaviors, academic and clinical performance at the time of withdrawal. Students may exit and re-enter mid-program a maximum of one time for any reason (personal, medical, academic, etc).
- Students that leave the program for any reason must be readmitted within one year of withdrawal or failure. Otherwise, students must reapply to the program, be competitively readmitted, and start the program from the beginning, repeating all nursing program courses.
- Students who competitively reapply to start the program from the beginning after withdrawal or failure may be readmitted one time only. If after being readmitted they leave the program for any reason (medical withdrawal, personal reasons, academic or clinical failure, etc) they are not eligible to re-apply or re-enter the nursing program again in the future.
- All students will be given access to Canvas once they register for N295. Students who re-enter are responsible for contacting Evolve/Elsevier and obtaining the books/codes/learning platforms that are required for the class they are entering. Students are responsible for any additional costs this may incur.

- The following are required the first day of N295:
 - submit current documentation of all required immunizations, including, but not limited to flu and TB.
 - an American Heart Healthcare Provider CPR card, current through June of the entering year
 - all required documents, found in the handbook, must be re-signed

Restrictions Due To Illness

It is the policy of PC Nursing programs to instill in students the importance of honestly reporting all infectious/communicable diseases and conditions to their faculty and/or Director of Nursing that could put the health of fellow students, PC staff and faculty, and clinical partner agency patients and staff at risk. Students are expected to report infectious/communicable diseases and conditions to their faculty to assess their ability to attend program activities. Students with known or suspected communicable disease will not be released to attend program activities until the program faculty and Director of Nursing and/or the Clallam County Health Department determines the student is safe to do so.

The Nursing program is committed to the success of students who may be affected by infectious/communicable diseases and conditions. Each program will work with impacted students on a case-by-case basis as situations come up and within the legal constraints of the program's accreditation and governing organization's rules. To this end, all Nursing Students must follow the Restrictions Due to Illness policy whenever they are participating in on-campus and off-campus activities associated with their program of study. Below are specific policies related to common infectious/communicable diseases and conditions. This list is not exhaustive and other infections or communicable diseases will be handled on a case-by-case basis.

COVID-19 (SARS-Cov-2) and COVID-19 Like-Illness

Nursing students with symptoms of COVID-19 must contact their faculty and/or Director of Nursing and refrain from attending on-campus or off-campus program activities such as clinical rotations. Additionally, students must follow all clinical partner agency and college COVID-19 guidance and policies.

- Student experiencing the following symptoms should test for COVID-19: fever of 100.4 or greater, chills, cough, shortness of breath or difficulty breathing, sore throat, muscle or body ache, new loss of taste or smell, congestion or runny nose, fatigue, nausea, vomiting or diarrhea.
- If you test NEGATIVE for Covid-19 via an at-home test kit, but have the above symptoms, consider retesting every 24-28 hours though at least 5 days after your symptoms started. Resume normal activities when you have had no fever in the past 24 hours (without medication) AND your symptoms have improved.
- Students who are asymptomatic and have been exposed to COVID-19 illness may attend on-campus and off-campus activities (if facility policy allows), but must wear a high-quality mask for 10 days and test for COVID-19 6 days after exposure
- If symptoms develop while on campus or at a clinical site, the student must notify their faculty and immediately leave the facility. Faculty will notify the appropriate staff on campus or at the clinical site. The student should contact their healthcare provider for evaluation and testing, or they may opt to test at home. Students should notify faculty and/or the Director of Nursing of the results of COVID-19 screening.

- Students who test POSITIVE for COVID-19 should follow the advice of their healthcare provider and/or follow CDC guidance depending on setting
- Updated Links for CDC Guidelines For Clinical Setting:
- <https://www.cdc.gov/covid/hcp/infection-control/guidance-risk-assessment-hcp.html>
- https://www.cdc.gov/covid/hcp/infection-control/?CDC_AAref_Val=https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html
- For Classroom/Lab Setting follow general CDC Guidelines for Respiratory Viruses:
<https://www.cdc.gov/respiratory-viruses/guidance/index.html>

Influenza and Respiratory Infections with Fever, Cough, or Other Symptoms Associated with Influenza Like-Illness

Students with confirmed or suspected acute respiratory infections and/or symptoms must contact their faculty and/or Director of Nursing and refrain from attending on-campus or off-campus program activities such as clinical rotations.

- Symptoms including: fever of 100.4° F or greater OR any one of the following: cough, sore throat, headache, body aches, runny nose, nausea, vomiting, and/or diarrhea. Excessive nasal or throat secretions (coughs) that cannot be adequately covered.
- If symptoms are identified upon arrival to campus or clinical site, the student will be sent home and should contact their healthcare provider.
- If symptoms develop while on campus or at a clinical site, the student must notify their faculty and immediately leave the facility. Faculty will notify the appropriate staff on campus or at the clinical site. The student should contact their healthcare provider.
- Students diagnosed with Pertussis must stay home for twenty-one days from the onset of rhinitis or acute cough or until 5 days after the start of effective antimicrobial therapy.

Students are encouraged to be evaluated by their healthcare provider prior to returning to on-campus activities or clinical rotations. Students with influenza-like symptoms may return to on-campus activities and/or clinical rotations when afebrile for 24 hours without the use of fever-reducing medications and cough can be adequately controlled and covered unless COVID or COVID-like illness is suspected. Students with suspected COVID should get tested as soon as possible.

Students with sick family or household members may attend on-campus activities and/or clinical rotations if they are asymptomatic and follow standard precautions and COVID and COVID-like illness is not suspected.

Sore Throats

Students with diagnosed Group A Strep Throat or severe sore throat symptoms must contact their faculty and/or Director of Nursing and refrain from attending on-campus or off-campus program activities such as clinical rotations.

Students with a diagnosed or suspected streptococcal infection must refrain from attending on-campus activities or clinical rotations until they have taken at least 24 hours of appropriate prescribed antibiotics

and must be afebrile for 24 hours without the use of fever reducing medication. Students with sore throats associated with household contacts with diagnosed Group A Strep Throat must be evaluated by their healthcare provider for culture and treatment prior to attending on-campus activities or clinical rotations. If COVID-19 or COVID-19-like illness is suspected then the COVID-19 (SARS-Cov-2) and COVID-19 Like-Illness Policy will be followed.

Gastrointestinal Illness with Acute Diarrhea and/or Vomiting

Students with diagnosed gastrointestinal illness and/or the following symptoms must contact their faculty and/or Director of Nursing and refrain from attending on-campus or off-campus program activities such as clinical rotations.

- Students with an acute diarrhea illness that is severe, accompanied by fever of 100.0° F or greater, abdominal cramps, bloody stools, or diarrhea that lasts longer than 24 hours pending medical evaluation for causative factors.
- Students with Norovirus while symptomatic and for 48 hours after last symptoms.
- Students diagnosed with C. difficile until they have completed half of the recommended treatment and they have had resolution of diarrhea for at least 24 hours and a healthcare provider full release to return. If the student has a recurrence of C. difficile disease, documentation of complete resolution of symptoms and full course of treatment is needed from the healthcare provider.
- Students diagnosed with non-typhoidal Salmonella or Shigatoxin E-Coli after two (2) negative stool cultures collected 24 hours apart and healthcare provider full release to return.

Students infected with other enteric pathogens can return to on-campus activities or clinical rotations 24 hours after symptoms resolve; a healthcare provider release to return note may be required.

Rashes and contagious skin conditions: Hand Foot Mouth Disease, Herpetic Whitlow (herpes infection of the fingers and hands) and Herpes Zoster (Shingles)

Students with rashes and contagious skin conditions must contact their faculty and/or Director of Nursing and refrain from attending on-campus or off-campus program activities such as clinical rotations.

- Students diagnosed with Hand Foot Mouth Disease must be symptom free including rash and mouth sores (usually 7-10 days) and no new lesions for 24hrs.
- Students diagnosed with Herpes Simplex (Oral Herpes) with primary or recurrent orofacial herpes simplex infections may be restricted from working in certain clinical agency units and/or from caring for immunocompromised patients until the lesion is dry and crusted.
- Students diagnosed with Herpetic Whitlow (herpes infection of the fingers and hands) and Herpes Zoster (Shingles) with herpes lesions on the fingers and/or hands or Zoster lesions that cannot be adequately covered are restricted until the lesions are healed, dry and crusted.
- Students with rashes of unknown origin should see their healthcare provider for evaluation. If communicable disease is suspected the student will need a healthcare provider release. If rash does not appear to be disease oriented (poison oak, insect bites, allergic dermatitis, etc.) the student will be allowed to attend on-campus activities and clinical rotations as long as the rash can be covered and is not draining.

Infectious Conjunctivitis (Pink Eye)

Students with Infectious Conjunctivitis (Pink Eye) must contact their faculty and/or Director of Nursing and refrain from attending on-campus or off-campus program activities such as clinical rotations.

- Students with suspect bacterial conjunctivitis (e.g., *H. influenzae* or *S. pneumoniae*) should see their healthcare provider for evaluation and should not return to on-campus activities or clinical rotations until they have had treatment with an antibiotic for a period of at least 24 hours.

Other Illness (not listed above)

Students should contact their faculty and/or Director of Nursing in the event of suspected or diagnosis illness and refrain from attending on-campus or off-campus program activities such as clinical rotations until the student has been evaluated by a healthcare provider. Students must have a full release to return from their healthcare provider in the event of suspected or confirmed infectious/communicable disease or condition that could put the health of fellow students, PC staff and faculty, and clinical partner agency patients and staff at risk.

References

The nursing faculty is happy to provide personal references for nursing students. Nursing students must make the request in writing via email or Canvas messaging one month in advance. The request must include a completed Student Reference and FERPA Release (Appendix M) in order to comply with FERPA regulations. Students must provide the faculty with adequate background information related to the request.

Schedules and Schedule Changes

Occasionally situations may occur that require a change in clinical, lab, or the classroom. While classes are generally held Monday-Thursday, schedules vary by quarter and may include Fridays, weekends and variable shifts. While we will try to minimize the number of occurrences requiring a schedule change, there will be times where we need to adjust or add events, times or dates from the original schedule. We understand this can be challenging to students who have multiple roles and schedules to maintain. We apologize in advance should this occur and appreciate your flexibility and understanding. If you have a significant conflict, contact the Nursing Director.

Social Media Policy

Students are required to review the following Social Media Guidelines by the National Council for State Boards of Nursing (NCSBN):

https://www.ncsbn.org/public-files/NCSBN_SocialMedia.pdf

and watch the NCSBN provided video:

<https://www.ncsbn.org/video/social-media-guidelines-for-nurses>

Students are required to abide by the following NCSBN-based social media guidelines:

- Nursing students recognize that they have an ethical and legal obligation to maintain patient privacy and confidentiality at all times.

- Nursing students are strictly prohibited from transmitting by way of any electronic media any patient-related image. In addition, nursing students are restricted from transmitting any information that may be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient.
- Nursing students must not share, post or otherwise disseminate any information or images about a patient or information gained in the nurse/patient relationship with anyone unless there is a patient-care-related need to disclose the information or other legal obligations to do so.
- Nursing students must not identify patients by name, or post or publish information that may lead to the identification of a patient. Limiting access to postings through privacy settings is not sufficient to ensure privacy.
- Nursing students must not refer to patients in a disparaging manner, even if the patient is not identified. Nursing students must not take photos or videos of patients on personal devices, including cell phones. Nursing students should follow facility policies for taking photographs or videos of patients for treatment or other legitimate purposes using facility-provided devices.
- Nursing students must maintain professional boundaries in the use of electronic media. Like in-person relationships, the nurse has an obligation to establish, communicate and enforce professional boundaries with patients in the online environment. Use caution when having online social contact with patients or former patients. Online contact with patients or former patients blurs the distinction between a professional and personal relationship. The fact that a patient may initiate contact with the nurse does not permit the nurse to engage in a personal relationship with the patient.
- Nursing students must consult facility policies or an appropriate leader within the organization for guidance regarding facility related postings.
- Nursing students must promptly report any identified breach of confidentiality or privacy.
- Nursing students must be aware of and comply with facility policies regarding use of facility-owned computers, cameras and other electronic devices, and use of personal devices in the workplace.
- Nursing students must not make disparaging remarks about facilities or facility employees.
- Do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments.
- Nursing students must not post content or otherwise speak on behalf of the facility unless authorized to do so and must follow all applicable policies of the facility.

Protecting the confidentiality of patients, students, medical facilities, and the nursing program is expected under all conditions, including the use of social media websites (Facebook, Twitter, etc.). Social media websites are for personal use only. *Displaying information about the nursing program, medical facilities, patients, or other students is prohibited; this includes pictures, videos, audio clips, text or any other type of media that either directly or indirectly violates HIPAA or FERPA. Violations of this policy can result in immediate dismissal from the nursing program.*

Having knowledge of a violation of HIPAA or FERPA is required to be reported by law. Students can report violations to the nursing director or faculty. The reporting student will not be identified. Failure to do so may result in corrective action including dismissal from the nursing program.

Skills Lab Policies

Exposures/Injuries in Clinical Rotation or Campus Laboratory

See section with the same name under Clinical Experience Policies. Completion of Appendix P Needlestick and Sharp Object Injury and Body Fluid Exposure Report is required.

Skills Lab Dress Code

Students are required to wear clothing that conforms to safety and health standards for the activity they are performing. In most cases, this would involve clothing that covers the legs and would require closed toed shoes. Long hair should be pulled back. The student scrub uniform is required for check off experiences.

Skills Lab Practice

- Students are expected to practice skills in the lab for 1.5-3 hours per week. A schedule for lab practice hours will be posted each quarter.
- The lab must be kept clean – please put away supplies or equipment you used, remake beds, pick up laundry and leave the lab in a clean, organized state.
- Students will be provided with reusable supplies to practice with, and one set of new supplies to check off with. Supplies for high fidelity simulations are also provided. Please do not open new supplies without instructor permission. A lab fee is assessed on a quarterly basis and paid during the registration process to cover the cost of supplies. This fee covers only a set number of supplies for each student.

Skills Lab Practice On Peers

The Peninsula College nursing program complies with the Peninsula College Policy 305 Use of Human Subjects for Experiments. Peninsula College recognizes the responsibility to protect the rights, well-being, and personal privacy of individuals; to assure a favorable climate for the acquisition of practical skills and the conduct of academically oriented inquiry; and to protect the interests of the institution and the student, addressing classroom, laboratory, and clinical activities where learning by students requires the use of human subjects as part of training procedures, demonstrations, or experiments.

The lab/faculty are not a designated health care center. Treatment of students is not permitted. This includes suture removal, treatment of wounds, etc. Any treatments must occur at a credentialed provider's office.

Peninsula College nursing students will be practicing skills in the campus laboratory, which will include practice on each other. Partial disrobing may be required for practice, however appropriate draping and privacy considerations will be maintained.

A limited number of invasive procedures will be performed in the campus laboratory under the direct supervision of nursing faculty. See Appendix G Human Subjects. Students may voluntarily perform these skills on each other instead of a manikin, which will provide a more realistic experience. If a student would like to perform a skill on another student, they must also be willing to have the skill performed on them--willing students should pair up accordingly. Students must only use new, non-expired, appropriately sterile medical grade supplies provided by the faculty for practice on other students.

Invasive procedures allowed with faculty supervision include:

1. Finger stick for blood glucose assessment
2. Intradermal, subcutaneous and intramuscular injection
3. Venipuncture with IV cannula
4. Nasogastric tube insertion

Skills Lab Check Off

Students will be given an opportunity to successfully demonstrate proficiency in lab skills. There will be several formal check off days during NURS 111, 112, 113 and 211.

- Students should treat check off similar to an exam and be adequately prepared to demonstrate the required skill(s). Please practice hands-on skills from start to finish multiple times prior to check off as if caring for a patient.
- Students are required to sign up ahead of time for a check off time during their designated check off day. Students may not check off informally with an instructor.
- Students are expected to be dressed as if for clinical in their student uniform for check off.
- Students will demonstrate proficiency according to the standardized skills rubric for each skill
- If unable to demonstrate proficiency after the initial attempt, the student will meet with faculty to develop a plan for remediation. Generally there should be at least 1-2 days between check off attempts. Except in the case of extenuating circumstances, students must check off on a given skill prior to the next scheduled check off.
- Failure to successfully check off on a skill after a third attempt will result in dismissal from the nursing program.
- Students are responsible for rescheduling any missed check offs with their lab instructor. Students that will be absent for their check off time must notify their instructor in person or via cell phone immediately.
- Students are responsible for performing previously learned skills. Failure to demonstrate competency with previously learned skills would result in a Personal Improvement Plan with an arrangement for remediation. Students that fail to demonstrate competency in previously learned skills may not be allowed to participate in clinical.

Statement of Non-Discrimination

Peninsula College and the Nursing Program does not discriminate on the basis of race, color, creed, religion, national origin, gender, sexual orientation, age, marital status, disability, or status as a veteran.

Student Absence for Reason of Faith or Conscience

Reasonable accommodation so that grades are not impacted for students who are absent for reasons of faith or conscience, or for an organized activity conducted under the auspices of a religious denomination, church, or religious organization can be requested as follows:

1. Using the form found at: https://pencol.formstack.com/forms/faith_conscience_leave_request requests for leave must be made within the first two weeks of the quarter. The request must be made in writing, preferably by use of the web link above. The date boxes should clearly identify start and end dates of an absence span, or use the "reason for absence" box if dates are not consecutive. Also note all absences that are anticipated during the quarter.
2. The "reason for absence" box also needs to contain specific information about how the requested absence is related to the reason of faith or conscience or an organized activity conducted under the auspices of a religious denomination, church, or religious organization during the quarter.
3. A new form will need to be submitted each quarter for any additional dates.

4. All absences under this policy must be approved by the Vice President of Student Services or designee in advance of the absence. The College will not authorize an absence for a student after the absence occurs without compelling circumstances.
5. The Vice President of Student Services or designee will provide the student with a document verifying the date of the approved absence and further instructions. In order to ensure that their absence does not negatively affect their grades, the student must comply with directions for notifying their instructors of their upcoming authorized absence. The student is solely responsible for ensuring the documentation authorizing the absence is provided to each of the instructors whose classes or assignments will be affected by the absence.
6. After an instructor is notified by the student of an upcoming absence, the instructor will determine what adjustments, if any, will need to be made to the student's scheduled classwork or assignments. The instructor shall inform the student of these adjustments within two days of receiving the student's notification.
7. If the student's desired absence date is on a day when a test is scheduled or an assignment is due, the instructor may require that the student take the test or submit the assignment before or after the regularly-assigned date.
8. Regardless of an instructor's class expectations or grading policies, absences authorized under this policy shall not adversely impact a student's grade.
9. If a student fails to notify any of their instructors of an authorized absence, as directed by the Vice President of Student Services or designee, the instructor is not obligated to make any accommodations for the student's absence or treat the absence as authorized under this policy or law.

Resolution of Concerns: If concerns related to this absence within the quarter of course participation, please seek resolution by following the Academic Concerns and Grade Complaints Process located at: <https://pencol.edu/student-life/student-rights-policies-and-procedures/academic-concerns>

If concerns arise about a grade appeal for a final grade received in a course that has been completed in the previous quarter in which such absence occurred, please use the Grade Appeals Procedure located at: <https://pencol.edu/student-life/student-rights-policies-and-procedures/grade-appeals>

Non grade-related complaints may be resolved following the student Appeal to the Vice President of Student Services which can be obtained by request. See also Institutional Procedure 432.01.

Student Recordkeeping

The Peninsula College Registrar maintains official college records. Grades for student assignments are recorded in the Canvas learning management system. Students have access to Canvas during the quarter they are enrolled in the course. After the course has ended final grades may be viewed through the unofficial transcript system or by requesting an official transcript; details for both are found here: <http://pencol.edu/admissions/transcripts>. Coursework that is submitted electronically to the Canvas learning management system is maintained for two years and is accessible by the faculty until it is archived according to college policy. Nursing student files are maintained for six years in a double-locked system, at which point they are shredded.

Student Rights & Responsibilities

Peninsula College guarantees all students specific rights as a result of their enrollment status and requires that all students assume the obligation of responsible behavior as a condition of their continued enrollment. Peninsula College is a diverse and dynamic learning community. As such, the

College maintains a strong commitment to providing a learning environment that is civil and free from disruptive behavior. All share the responsibility to promote a positive learning environment, demonstrate mutual respect and dignity and avoid adversarial relationships. Thus, students are expected to act as responsible members of this community, maintain a high degree of honesty and integrity, comply with the rules and regulations of the College, and respect the rights, privileges, and property of the college community.

The Nursing Program abides by Peninsula College Policies and Procedures including but not exclusively ADA guidelines, FERPA, gender discrimination, sexual harassment and academic honesty. Students may refer to the Peninsula College website <https://pencol.edu/student-rights-policies-procedures> for review.

Additional Nursing Program Student Rights and Responsibilities

1. Under no circumstances should a student be barred from admission to the Peninsula College Nursing Program on the basis of race, sex, sexual orientation, gender identity, age, citizenship, religion, national origin, disability, illness, legal status, personal attributes, or economic status
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom and quality education; students should exercise their freedom in a responsible manner.
3. The Peninsula College Nursing Program has a duty to develop policies and procedures which provide for and safeguard the students' freedom to learn.
4. Students should be encouraged to develop the capacity for critical judgment and engage in an autonomous, sustained, and independent search for truth.
5. Students are free to take reasoned exceptions in an informed, professional manner to the data or views offered in any course of study. However, students are accountable for learning the content of any course of study for which they are enrolled.
6. Students have protection, through orderly approved standard procedures, against prejudicial or capricious academic evaluation. However, students are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
7. Information about student views, beliefs, political ideation, legal status, United States citizenship status, sexual orientation, or other personal information which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as an element of evaluation.
8. The student has a right to advocate for themselves and other students in the construction, delivery, and evaluation of the curriculum. Students are responsible to provide feedback for end-of-course and end-of-program evaluations.
9. Student information is protected as required by State and Federal Laws

10. Students and student organizations are free to examine and discuss all questions of interest to them, and to express opinions in an informed, professional manner, both publicly and privately

11. Students are allowed to invite and hear any individual of their own choosing within the institution's guidelines, thereby advocating for and encouraging the advancement of their education.

12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, thereby encouraging leadership, e.g., through a faculty-student council, student membership, or representation on relevant faculty committees.

13. Peninsula College Nursing Program has an obligation to clarify those standards of conduct which it considers essential to its educational mission, community life, and objectives and philosophy. These may include but are not limited to, policies on academic dishonesty, plagiarism, punctuality, attendance, and absenteeism.

14. Disciplinary proceedings should be instituted only for violations of standards of conduct. Standards of conduct should be formulated with student participation, clearly written, and published in advance through an available set of institutional regulations. It is the responsibility of the student to know these regulations.

15. Students have the right to due process as outlined in the Complaint/Grievance policy.

16. As citizens and members of an academic community, students are exposed to many opportunities and they should be mindful of their corresponding obligations.

17. Students are not obligated to be members of or to contribute to any organization not directly related to the requirements of the curriculum.

18. Students have the right to personal privacy in their individual/personal space to the extent that their well-being and property are respected.

19. Adequate safety precautions should be provided by nursing programs and clinical sites to ensure a safe and protected environment emotionally, socially, and physically. For example, adequate street and building lighting, locks, patrols, emergency notifications, and other security measures deemed necessary to ensure a safe and protected environment.

20. Dress code is established with student input in conjunction with the school administration, clinical sites, and faculty. This policy ensures that the highest professional standards are maintained, but also takes into consideration points of comfort and practicality for the student.

21. Grading systems and policies are reviewed periodically with students and faculty for clarification and better student-faculty understanding.

22. Students have a clear mechanism for input into the evaluation of their nursing education and nursing faculty.

23. The nursing program tracks its graduates' success in finding entry-level employment as registered nurses and makes this information available to nursing students and applicants.

24. The nursing program works with the Financial Aid Department and Peninsula College Foundation to provide comprehensive, clear, and concise information related to student loans, scholarships and any other student financial aid.

25. The nursing program should facilitate various methods to ensure that clinical sites provide an environment that supports the development of diverse, inclusive, and equitable Professional Identity in Nursing. This may be accomplished through assessment of clinical sites including, but not limited to, ongoing feedback from students, faculty, and implementation of methods and plans for improvements based on clinical site evaluations. Clinical sites should be suitable for students to demonstrate the attainment of required clinical competencies.

Student's Rights and Responsibilities were adapted from the National Student Nurses' Association www.nsna.org

Technical Standards

Students are required to meet Technical Standards for admission and continuation in the nursing program. Certain functional abilities are essential for the delivery of safe, effective nursing care. These abilities are essential in the sense that they constitute core components of nursing practice, and there is a high probability that negative consequences will result for patients/clients under the care of nurses who fail to demonstrate these abilities. A program preparing students for the practice of nursing must attend to these essential functional abilities in the education and evaluation of its students.

This statement of the Technical Standards of the nursing program at Peninsula College identifies the functional abilities deemed by the nursing faculty to be essential to the practice of nursing. Reference material used in the development of these standards include the Washington Nurse Practice Act, The Functional Abilities Essential for the Delivery of Safe, Effective Nursing Care (a descriptive research study conducted by the National Council of State Boards of Nursing), and Core Components and Competencies of ADN graduates (developed by the Council of Associate Degree Nursing of the National League for Nursing). The Technical Standards are reflected in the nursing program's performance-based outcomes, which are the basis for teaching and evaluating all nursing students.

Consistent with its mission and philosophy, the Nursing Program at Peninsula College is committed to providing educational opportunities to students with disabilities. In accordance with the American Disabilities Act of 1990 and Section 504 of the Rehabilitation Act, the Nursing Program provides reasonable accommodations to otherwise qualified students with disabilities. The decision regarding appropriate accommodations will be based on the specifics of each case.

Students with disabilities who think they may require accommodation in meeting the Technical Standards of the nursing program should contact Services for Students with Disabilities(SSD) to discuss the process of identifying reasonable accommodations. Students should seek accommodation advising as soon as possible so that a plan for accommodation can be in place at the beginning of the program.

Applicants seeking admission to the nursing program who may have questions about the Technical Standards and appropriate reasonable accommodations are invited to discuss their questions with Services for Students with Disabilities. Reasonable accommodation will be directed toward providing an equal educational opportunity for students with disabilities while adhering to the standards of nursing practice for all students.

The practice of nursing requires the following functional abilities with or without reasonable accommodations.

1. Visual acuity sufficient to assess patients and their environments and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities:

- Detect changes in skin color or condition
- Discriminating between abnormal and normal color of body fluids or exudates.
- Collect data from recording equipment and measurement devices used inpatient care
- Detect a fire in a patient area and initiate emergency action
- Draw up the correct quantity of medication into a syringe
- Read fine print such as medication and equipment labeling.

2. Hearing ability sufficient to assess patients and their environments and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities:

- Detect sounds related to bodily functions using a stethoscope
- Detect audible alarms within the frequency and volume ranges of the sounds generated by mechanical systems that monitor bodily functions
- Communicate clearly in telephone conversations
- Communicate effectively with patients and with other members of the healthcare team

3. Olfactory ability sufficient to assess patients and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities:

- Detect foul odors of bodily fluids or spoiled foods
- Detect smoke from burning materials

4. Tactile ability sufficient to assess patients and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities:

- Detect changes in skin temperature
- Detect unsafe temperature levels in heat-producing devices used in patient care

- Detect anatomical abnormalities, such as subcutaneous crepitus, edema, masses, or infiltrated intravenous fluid.
- Palpate pulses.

5. Strength, mobility and balance sufficient to perform patient care activities and emergency procedures. Examples of relevant activities:

- Safely transfer patients in and out of bed
- Safely ambulate patients.
- Turn and position patients as needed to prevent complications due to bed rest
- Hang intravenous bags at the appropriate level
- Accurately read the volumes in body fluid collection devices hung below bed level
- Perform cardiopulmonary resuscitation

6. Fine motor skills sufficient to perform psychomotor skills integral to patient care Examples of relevant activities:

- Safely disposing of needles in sharps containers
- Accurately place and maintain position of stethoscope for detecting sounds of bodily functions
- Manipulate small equipment and containers, such as syringes, vials, ampoules, and medication packages, to administer medications

7. Physical endurance sufficient to complete assigned periods of clinical practice

8. Ability to communicate sufficiently to teach others, explain procedures, interact effectively with others, and convey information in writing. This includes:

- Ability to speak, comprehend, read and write in English at a level that meets the need for accurate, clear, and effective communication.
- Ability to read, interpret and communicate using proper medical terminology.

9. Emotional stability to function effectively under stress and emergency situations, to adapt to changing situations, to follow through on assigned patient care responsibilities and to withstand human trauma and its effects.

10. Cognitive ability to collect, analyze, and integrate information and knowledge to make clinical judgments and manage decisions that promote positive patient outcomes. This includes:

- Analytical thinking sufficient to transfer knowledge from one situation to another, problem solve, prioritize tasks and use long-term and short-term memory.

Testing Policies

General Testing Policy

- Students are expected to arrive on time for all tests. Students who arrive late will not be granted additional time for the test.

- Students should use the bathroom before the exam. Please avoid going during the exam to the extent possible.
- The student must have a valid, excused reason to miss an exam (e.g. severe illness, death of a family member, emergency situation etc) including students testing in the Testing Center and/or Access Services. The student must notify their instructor as soon as possible in the event of such an unforeseen circumstance including students testing in the Testing Center and/or Access Services. Whenever possible notification should happen before the test begins. If a student misses an exam without a valid excuse, they will receive a "0" on the exam. In general, no individual testing arrangements can be accommodated, except in the case of students with documented accommodation plans related to student disability. In general, students testing in the Testing Center and/or Access Services should schedule their test on the same day as the classroom exam, and not more than 4 days after the test was administered. In general, any approved makeup testing will be scheduled in the Testing Center.
- Students should bring a pen or pencil and earplugs if desired. All other belongings should be placed at the front of the classroom and may not be accessed during the test.
- Electronic equipment (phone, smart watches, tablets, etc.) must be turned off and may not be accessed or used during testing. **Ear bud(s) are not allowed during testing. This includes bluetooth or wired devices.** They are to be left with other personal belongings in the front of the classroom
- A beverage with a lid is allowed; food is not.
- Students may only have and use the scratch paper provided by the faculty. All scratch paper must be turned in at the end of the test. Having any other documents or materials will be considered cheating.
- Calculators may be used during Canvas testing at the instruction of nursing faculty. No phones, scientific calculators, or other electronic equipment may be used during an examination unless authorized by Services for Students with Disabilities
- Do not talk with others during exams. Raise your hand and wait for the instructor if you have questions
- Do not look at other students' computers/laptops during the test
- Faculty reserve the right to assign seating for individual exams and assign groups for collaborative exams.
- During testing, you may only use the laptop to access and take the test. Nothing else may be accessed on the laptop except as instructed by the faculty. Students may not do homework, check email, access any other parts of Canvas, access any other webpages, take screenshots, print, or any other use.
- If needed, faculty can provide a non-medical dictionary. Proctors or instructors cannot look up a word or provide a definition from their own knowledge to answer a question for a student.

Students found in non-compliance with any testing conduct requirements may receive a Zero (0) on the test. Makeup tests are not available in the event of non-compliance with a testing policy. Cheating on a test is grounds for dismissal from the nursing program.

Comprehensive Computerized Testing (HESI)

HESI testing will be scheduled throughout the academic program. The HESI test is a national testing program for NCLEX preparation.

Students should bring earbuds adaptable to the computer to all HESI tests to accommodate audio questions. Otherwise, no devices or papers may be at your table. The calculator on the computer is accessible, you may not bring your own. Any scratch paper necessary will be provided. You may have a pencil available during testing.

All HESI tests administered during the quarter will be worth ten points and are graded according to the syllabus. Scoring will be as follows:

Student HESI Score	Points Awarded
Average national score or higher	10
1-25 below average	9
26-50 below average	8
51-100 below average	7
101-200 below average	6
201-300 below average	5
301-400 below average	4
401-500 below average	3
501-700 below average	2
Anything under 701 below average	1

It is required that you review your answers after you finish your test and before you leave since this information can only be accessed at this time.

During NURS 203 a passing score of 800 must be achieved on the first version of the Comprehensive Nursing Exit HESI exam. If a score of 800 is not achieved, a remediation plan will be designed by NURS 203 faculty and must be completed prior to taking the second version of the HESI Exit exam. For NURS 102, NURS 103, NURS 201 and NURS 202 students may request a personalized remediation plan for HESI scores under 800.

A fee is required every quarter with the tuition payment for HESI testing. Any additional testing fees assessed by the testing company will be the responsibility of the student.

Makeup Tests

If a student misses an exam, there will be no discussion of that exam, either in general or specific terms, between such student and any member(s) of the class prior to the test make-up. Should any such discussion occur, it shall be considered cheating and will be dealt with accordingly. The student is responsible for contacting the instructor to schedule a makeup test. The type of makeup exam to be given and the scheduling of an appropriate make-up date and time for such exam shall be at the

instructor's discretion. A student with an unexcused absence may not be allowed to complete a makeup exam. In general, makeup tests should be completed within 2 days of return to campus.

Item Analysis

After each unit test is completed on Canvas, faculty perform an item analysis of the test. This is a statistical review of the test questions that gives faculty information about question validity. Given that there are limitations in item analysis due to small sample size (our small class size), faculty have discretion in item analysis and grade change decisions. In general, if item analysis indicates 50% or less of students answered the question correctly, and the discrimination index is negative, the question will be thrown out and all students receive points for the question. If there are any grade changes as a result of item analysis, students are notified via an announcement on Canvas.

Tutoring

Each student is individually accountable and responsible for his or her own learning. If your grades are not currently at a passing minimum, make an appointment with the instructor to discuss the acquisition of a tutor. Tutors are free of charge, but availability is not guaranteed. Tutoring may be provided for academic assistance and study skills. 2nd year students who wish to serve as tutors may offer their availability to the faculty to be utilized as the need arises. A tutor does not replace your personal obligation for completing your homework, reading, and daily studying.

Use of Acceptable Resources

Multiple resources are available for use by the student to enhance learning. Resources such as professional websites, textbooks, professional journals, posted good examples of student work, and student book study guides may be used for learning. Unacceptable resources, such as non-professional websites, test banks from any source, any instructor materials, pirated material, and classmates' work that has not been approved for sharing should not be used at any time. These resource lists are not comprehensive, but are meant to serve as a means of determining the legitimacy of a resource.

If questions arise regarding the legitimacy of a resource, seek guidance from the library, your class representative, assignment instructor or advisor before using the resource. All work done with resources should remain individual and referenced appropriately.

Withdrawal from Course/Program

If a student is considering withdrawing from a course or the Nursing Program, he/she should confer with the faculty teaching the course and his/her academic advisor. If the student decides to drop a course or withdraw from the Nursing Program, the student must officially withdraw by notifying Student Services. Classes can be dropped at the Student Services Office, on the Web, or by calling (360) 417-6340. Informing the instructor alone and/or non-attendance/lack of participation does not constitute a drop/withdrawal. Failure to withdraw from a class by the last day to withdraw deadline, will result in a grade of "F" (failure) or "V" (indicating non-attendance) being recorded in the student's record. If a pre- or corequisite, non-nursing course is dropped, the student may be dropped from the concurrent nursing course, and will not be allowed to progress in the Nursing Program. The student must also complete an "Intent to Withdraw Form" (See Appendix I) and submit to the Director of Nursing or designee.

A student who withdraws while failing theory or clinical is counted as a nursing course failure for readmission.

APPENDIX A: GUIDELINES FOR ADVANCEMENT AND GRADUATION

All Peninsula College nursing students are required to read and submit a signed copy of the **Guidelines for Advancement and Graduation**.

To complete requirements for a Direct Transfer Agreement/Major Related Program-RN degree, the student will be expected to:

1. Prior to entering the nursing program achieve a minimum decimal grade of 2.0 in CHEM& 121L, Intro to Chemistry; MATH 146, Intro to Statistics; ENGL& 101, English Composition I; ENGL& 102 English Composition II OR CMST& 220 Public Speaking OR CMST& 210 Interpersonal Communication; BIOL& 160L, General Biology w/lab; BIOL& 241L, Human A & P I; BIOL& 242L, Human A & P II; BIOL& 260, Microbiology; PSYC& 100, General Psychology, PSYC& 200, Lifespan Psychology. Five credits in each course is required. A minimum of four credits in each course must be completed prior to entering the nursing program. The final credit must be complete prior to graduation.
2. Prior to the second year of the nursing program students must complete two Humanities courses with a minimum decimal grade of 2.0. Ten credits are required by program completion. Eight of these credits must be completed prior to the second year of the nursing program. The final two credits must be completed prior to graduation.
3. Achieve a minimum decimal grade of 2.0 (76%) in NURS 101, NUTR121, HUM131, PSYCH 141, NURS 102, NUTR 122, NURS 103, NUTR 123, NURS 201, PSYCH 242, NURS 202, HUM 232, NURS 203 and HUM 233. Each course is a co-requisite or prerequisite for the next.
4. Achieve a grade of "Pass" in laboratory for Nursing 111, 112, 113, 211, 212, and 213. Each course is a prerequisite for the next.
5. Complete all courses in the first-year nursing curriculum prior to enrollment in second-year nursing courses.
6. Comply with Peninsula College academic policies.

Student Name: _____

Student Signature: _____

Date: _____

APPENDIX B: EXPECTED STUDENT BEHAVIORS AND PROFESSIONALISM

Nursing professionalism in the theory classroom and clinical settings are essential to student success and safety. Expected student behaviors in the Peninsula College Nursing theory classroom and clinical class settings include the following:

- Abide by
 - American Nursing Association (ANA) Code of Ethics located at <http://www.nursingworld.org/Mobile/Code-of-Ethics>
 - Health Insurance Portability and Accountability Act HIPAA located at <https://www.hhs.gov/hipaa/for-professionals/index.html>
 - Family Education Rights Privacy Act FERPA <https://studentprivacy.ed.gov/ferpa>
 - Peninsula College Code of Student Rights and Responsibilities located at <https://pencol.edu/student-life/student-rights-policies-procedures>
 - Peninsula College Academic Honesty located at <https://www.pencol.edu/student-rights-policies-and-procedures/academic-honesty>
 - Nursing Student Handbook with emphasis on:
 - Clinical and Laboratory Policies and Guidelines
 - Classroom Behavior
 - Continue to meet Technical Standards
- Confidentiality- respects the privacy of clients and respects privileged information;
- Accountability- is answerable for one's actions; answers to self, the client, the profession, the Nursing faculty, the clinical facility and Peninsula College;
- Responsibility- executes duties associated with the student nurse's particular role;
- Agency's Policies and Procedures- reads and adheres to the agency policies and procedures;
- Honesty- practices fairness and straightforwardness of conduct; displays moral excellence and truthfulness;
- Punctuality and Promptness- is on time for classroom and clinical assignments;
- Dependability- is trustworthy and reliable;
- Respect- treats others with consideration and courtesy;
- Professional appearance- adheres to the established dress code in all clinical and professional activities;
- Professional boundaries- maintains professional relationship with clients;
- Ethical- adheres to the Nurse's Code of Ethics;
- Legal- operates within the standards of practice related to the student nurse role;
- Safety- prevents or minimizes risks for physical, psychological, or emotional jeopardy, injury, or damage.
- Be prepared for classroom, clinical and laboratory experiences. Sign up for clinical experiences and attend them as committed.
- Meet with an assigned nursing advisor and/or course faculty to assess progress in the program and implement interventions as needed. Refer to guidelines for Early Intervention for implementation of a Personal Improvement Plan.
- Demonstrate an ability to work cooperatively with others.

- Submit papers on time and in a manner consistent with college level performance.
- Accept responsibility for arranging the makeup of all missed course requirements.
- Accept responsibility for one's own learning, clinical performance and student behaviors.
- Participate in program governance and evaluation.

The following behaviors demonstrate misconduct and/or unprofessionalism. These behaviors include but are not limited to:

- Falsification of documents
- Forgery of instructor or other health care professional's signature
- Lying and/or cheating
- Theft of property from the college, clinical agencies, or fellow students
- Plagiarism
- Performing skills outside of the student's Scope of Practice
- Breach of confidentiality
- Discussing one's own personal issues with patients or families
- Developing social/romantic relationships with patients or families.
- Refusing to follow instructions of agency staff or instructors or abide by agency expectations.
- Threats of violence or retaliation toward others.
- The use of abusive language in any format (written, verbal, or otherwise), or disruptive behavior directed toward peers, staff, faculty, or agency personnel.
- Sharing electronic healthcare record (EHR) login information.
- Copying or reproducing Protected Health Information (PHI) in any manner and/or removing PHI from an agency.
- The breach of the ANA Code of Ethics or nursing standards of professional practice.
- Unsatisfactory attendance
- Unsatisfactory progress
- Dishonesty in the classroom or clinical setting
- Attendance in class or clinical setting under the influence of alcohol or other drugs
- Unsafe clinical practice as defined in the student and clinical handbooks
- Behavior inconsistent with clinical facility policy as stated in the facility's policy manual

Students who fail to meet the Expected Student Behaviors and standards of professionalism in theory or clinical courses will be subject to corrective action policy, including possible dismissal from the nursing program.

APPENDIX C: COURSE OBJECTIVE PROGRESSION TOWARDS TERMINAL PROGRAM OUTCOMES

The table below demonstrates the progression of course objectives towards the culmination of terminal program outcome.

Holistic Assessment				
Holistically assess the biopsychosocial-spiritual-cultural dynamic needs of the client				
NURS 101	NURS 111	NUTR 121	HUM 131	PSYCH 141
Identify relevant and abnormal data from a physical assessment.	Perform a basic physical and cognitive assessment in the skills lab setting.	1. Identify the influence of ethnicity, culture and spiritual/religious beliefs on food choice. 2. Identify nutritional concepts in the context of health and wellness across the lifespan.		1. Identify one's own psychosocial-spiritual-cultural beliefs, values and biases. 2. Identify the influences of ethnicity, culture, and spiritual/religious beliefs to health practices.
NURS 102	NURS 112	NUTR 122	NURS 103	NURS 113
Identify relevant and abnormal data in the assessment of chronically ill patient.	1. With cuing assess the client for basic changes in health status. 2. With cuing assess at a basic level, the emotional, cultural, religious and spiritual influences on the client's health status.	Identify relevant and abnormal data in the assessment of nutritional problems in the chronically ill client.	Apply relevant and abnormal data in the assessment of the well, chronically ill and acutely ill adult and pediatric client.	1. Assess the adult and pediatric client for basic changes in health status in acute care and community settings. 2. Assess at a basic level, the emotional, cultural, religious and spiritual influences on the client's health status.
NUTR 123	NURS 201	NURS 211	PSYC 242	NUR 202
Identify relevant and abnormal data in the assessment of nutritional problems in children and adults	Analyze relevant and abnormal data in the assessment of normal and high risk obstetric patient, the normal newborn	Analyze changes in health status in acute care and mental health settings.	Analyze relevant and abnormal data in the assessment of mental health clients.	Analyze relevant and abnormal data in the assessment of the acute and critically ill patient.

experiencing various acute and chronic alterations in health.	and acutely ill adult clients.			
NURS 212	HUM 232	NURS 203	HUM 233	NURS 213 Terminal Program Outcome
1. Analyze changes in health status in acute care and obstetric settings. 2. Analyze the impact of complex developmental, emotional, cultural, religious and spiritual influences on the client's health status.		Analyze relevant and abnormal data in the assessment of the critically and emergently ill patient.		Holistically assess the biopsychosocial-spiritual-cultural dynamic needs of the client
Clinical Decision Making Use evidence based information and the nursing process to critically think and make clinical judgments and management decisions to ensure accurate and safe care.				
NURS 101	NURS 111	NUTR 121	HUM 131	PSYCH 141
Identify the principles of evidence based practice and research application.	Identify evidence-based information and accepted standards of practice related to the performance of basic nursing skills			Discuss evidence of health disparities among racial, ethnic, gender, and socioeconomic groups.
NURS 102	NURS 112	NUTR 122	NURS 103	NURS 113
Identify evidence based information to make clinical judgments and management decisions to ensure accurate and safe care for chronically ill clients.	With cuing apply evidence based information to make clinical judgments and management decisions to ensure accurate and safe care in the long term care setting.	Apply nutritional principles to adults experiencing various chronic alterations in health.	Apply evidence based information to make clinical judgments for chronically and acutely ill adult clients, as well as pediatric clients.	With minimal cuing apply evidence based information to make clinical judgments and management decisions to ensure accurate and safe care of adult and pediatric patients in acute care and

				community settings.
NUTR 123	NURS 201	NURS 211	PSYC 242	NUR 202
Apply evidence based nutritional principles to children and adults experiencing various acute and chronic alterations in health.	Apply evidence based information to make clinical judgments for the normal and the high risk obstetric client, as well as acutely ill adult clients.	Apply evidence based information to make clinical judgments and management decisions to ensure accurate and safe care for clients in acute care and mental health settings.	Apply evidence based information to make clinical judgments for the mental health patient.	Analyze evidence based information to make clinical judgments for acute and critically ill patients.
NURS 212	HUM 232	NURS 203	HUM 233	NURS 213 Terminal Program Outcome
Analyze evidence based information to make clinical judgments and management decisions to ensure accurate and safe care for increasingly complex clients in acute care and obstetrics.		Use evidence based information and the nursing process to critically think and make clinical judgments and management decisions to ensure accurate and safe care.		Use evidence based information and the nursing process to critically think and make clinical judgments and management decisions to ensure accurate and safe care.
Caring Interventions Demonstrate holistic caring behavior towards the client, significant support person(s), peers, and other members of the health care team.				
NURS 101	NURS 111	NUTR 121	HUM 131	PSYCH 141
Identify concepts of caring.	Identify aspects of holistic caring behavior as it relates to the performance of basic nursing skills			Discuss concepts of self-care
NURS 102	NURS 112	NUTR 122	NURS 103	NURS 113
Apply caring concepts when providing care to patients with chronic alterations in health.	With cuing demonstrate holistic caring behavior towards the client, significant support person(s), peers,		Apply caring concepts when providing care to patients with chronic and acute alterations in health.	Demonstrate, with minimal cuing, holistic caring behavior towards the adult and pediatric client, significant support

	and other members of the health care team.			person(s), peers, and other members of the health care team in the acute care and community settings.
NUTR 123	NURS 201	NURS 211	PSYC 242	NURS 202
	Apply concepts of caring to clients with acute alterations in health and obstetric clients, and adapt care to in consideration of the client's values, customs, culture, and/or habits.	Demonstrate holistic caring behavior towards the client, significant support person(s), peers, and other members of the health care team in the acute care and mental health setting.	Apply concepts of caring to clients with alterations in mental health and adapt care to in consideration of the client's values, customs, culture, and/or habits.	Apply concepts of caring to clients with acute and critical alterations in health, and adapt care to in consideration of the client's values, customs, culture, and/or habits.
NURS 212	HUM 232	NURS 203	HUM 233	NURS 213 Terminal Program Outcome
Demonstrate holistic caring behavior towards the increasingly complex client, significant support person(s), peers, and other members of the health care team in the acute care and obstetric setting.		Apply concepts of caring to clients with critical and emergent alterations in health, and adapt care to in consideration of the client's values, customs, culture, and/or habits.		Demonstrate holistic caring behavior towards the client, significant support person(s), peers, and other members of the health care team.
Safety				
Provide accurate and safe nursing care in diverse settings				
NURS 101	NURS 111	NUTR 121	HUM 131	PSYCH 141
Identify principles of safety in patient care.	Adhere to principles of safety when performing basic nursing skills.			
NURS 102	NURS 112	NUTR 122	NURS 103	NURS 113
Applying principles of safety, correlate the performance	Provide accurate and safe nursing care in long-term	Apply drug and nutrient interaction	Applying principles of safety, correlate the performance	Provide holistic accurate and safe nursing care in

of nursing care with desired physiologic and psychologic outcomes in the chronically ill patient.	care setting for one client.	principles to maintain safety.	of nursing care with desired physiologic and psychologic outcomes for clients in chronic, acute care and pediatric settings.	pediatric community settings and in the acute care setting with one to two patients.
NUTR 123	NURS 201	NURS 211	PSYC 242	NURS 202
Apply drug and nutrient interaction principles to maintain safety in the context of children and adults experiencing various acute and chronic alterations in health.	Correlate and analyze the performance of safe nursing care with desired physiologic and psychologic outcomes for clients in obstetric and acute care settings.	Provide holistic accurate and safe nursing care in mental health settings and in acute care setting with two patients.	Correlate and analyze the performance of safe nursing care with desired physiologic and psychologic outcomes for clients in mental health settings.	Correlate and analyze the performance of safe nursing care with desired physiologic and psychologic outcomes for acutely and critically ill clients.
NURS 212	HUM 232	NURS 203	HUM 233	NURS 213 Terminal Program Outcome
Provide holistic accurate and safe nursing care in obstetric settings and in acute care setting with two increasingly complex patients.		Correlate and analyze the performance of safe nursing care with desired physiologic and psychologic outcomes for critically and emergently ill clients.		Provide accurate and safe nursing care in diverse settings
Teaching and Learning				
Provide teaching based on individualized teaching plan				
NURS 101	NURS 111	NUTR 121	HUM 131	PSYCH 141
Identify teaching interventions in the context of a nursing care plan.	Identify areas of patient teaching related to basic nursing skills.	Discuss nutrition-related health promotion topics with a focus on wellness		Discuss principles of teaching, learning and behavioral change in the context of health and wellness.
NURS 102	NURS 112	NUTR 122	NURS 103	NURS 113
Apply principles of patient teaching in	With cuing provide teaching based on an individualized	Discuss nutrition-related health promotion	Identify areas of patient teaching in the context of	With minimal cuing provide teaching based on

the context of chronic illness.	teaching plan in the long term care setting.	topics with a focus on wellness	chronic and acute illness, as well as the pediatric client.	an individualized teaching plan for adult and pediatric clients in acute care and community settings.
NUTR 123	NURS 201	NURS 211	PSYC 242	NURS 202
	Identify components of patient teaching in the context of chronic and acute illness, as well as the obstetric client.	Provide teaching based on an individualized teaching plan in the acute care and mental health setting.	Identify components of patient teaching in the context of alterations in mental health	Identify components of patient teaching in the context of chronic and acute illness and critical illness.
NURS 212	HUM 232	NURS 203	HUM 233	NURS 213 Terminal Program Outcome
Provide teaching based on an individualized teaching plan for the increasingly complex client in the acute care and obstetric setting.		Provide teaching based on individualized teaching plan.		Provide teaching based on individualized teaching plan.
Managing Care				
Organize and manage the holistic care of clients.				
NURS 101	NURS 111	NUTR 121	HUM 131	PSYCH 141
1. Describe elements of the nursing process. 2. With assistance, develops a concept map and care plan.	Demonstrate self organization in the performance of basic nursing skills	Discuss nutrition-related health promotion topics with a focus on wellness		Apply the nursing process to the concept of stress, grief, bereavement, and end of life care.
NURS 102	NURS 112	NUTR 122	NURS 103	NURS 113
Apply the nursing process in the context of the chronic illness.	With cuing organize and manage the holistic care of one client in the long-term care setting.		Apply the nursing process in the context of acute and chronic illness, as well as the pediatric client.	With minimal cuing organize and manage the holistic care of pediatric clients in the community setting and of one to two adult clients in the acute care setting.

NUTR 123	NURS 201	NURS 211	PSYC 242	NURS 202
	Apply the nursing process in the context of acute illness and the obstetric client.	Organize and manage the holistic care of clients in the mental health setting and in the acute care setting for two clients.	Apply the nursing process to the client with mental illness, substance abuse or to clients affected by violence.	Apply the nursing process in the context of the acute illness and critical illness.
NURS 212	HUM 232	NURS 203	HUM 233	NURS 213 Terminal Program Outcome
1. Organize and manage holistic care in the obstetric setting and in the acute care setting for two increasingly complex clients. 2. Supervise a group of students in the long-term care facility, delegating, monitoring, and evaluating appropriately.		Apply the nursing process in the context of critical illness, emergency care and community setting.		Organize and manage the holistic care of clients.
Collaboration Work cooperatively with others in the decision-making process to achieve client and organizational outcomes				
NURS 101	NURS 111	NUTR 121	HUM 131	PSYCH 141
Identify members of the the healthcare team.	Work collaboratively with other students in the skills and simulation lab.			
NURS 102	NURS 112	NUTR 122	NURS 103	NURS 113
Apply principles of collaborative decision making in the context of chronic illness.	With cuing, collaborate with the client and other members of the healthcare team to achieve client outcomes in the long term care setting.		Apply principles of collaborative decision making in the context of acute and chronic illness, as well as the pediatric client.	With minimal cuing, collaborate with the adult and pediatric client, significant support person(s) and other members of the healthcare team to achieve

				client outcomes in acute care and community settings.
NUTR 123	NURS 201	NURS 211	PSYC 242	NURS 202
	Apply principles of collaborative decision making in the context of acute illness, as well as the obstetric client.	Collaborate with the client, significant support person(s) and other members of the healthcare team to achieve client outcomes in the acute care setting and mental health setting.	Apply principles of collaborative decision making in the context of alterations in mental health.	Apply principles of collaborative decision making in the context of acute and critical illness.
NURS 212	HUM 232	NURS 203	HUM 233	NURS 213 Terminal Program Outcome
Collaborate with the increasingly complex client, significant support person(s) and other members of the healthcare team to achieve client outcomes in the acute care setting and obstetric setting.	Apply the scope of decision making to scenarios related to delegation, management and clinical practice.	Apply principles of collaborative decision making in the context of critical illness, emergency care and community setting.		Work cooperatively with others in the decision-making process to achieve client and organizational outcomes.
Communication				
Utilize appropriate verbal and written channels of communication to achieve positive client outcomes				
NURS 101	NURS 111	NUTR 121	HUM 131	PSYCH 141
Identify communication techniques in the professional relationship.	Identify non-therapeutic and therapeutic communication skills			
NURS 102	NURS 112	NUTR 122	NURS 103	NURS 113
Identify appropriate communication to achieve positive client outcomes in the context of chronic illness.	1. With cuing utilize appropriate verbal and written channels of communication to achieve positive client outcomes in the long term care setting.		Identify appropriate communication to achieve positive client outcomes in the context of chronic illness and acute illness, as well as in the	1. With minimal cuing utilize appropriate verbal and written channels of communication to achieve positive client outcomes in acute care and

	2. With cuing utilize therapeutic communication skills when interacting with clients in the long term care setting.		context of pediatric client.	community settings. 2. With minimal cuing utilize therapeutic communication skills when interacting with adult and pediatric clients and support persons in the acute care and community setting.
NUTR 123	NURS 201	NURS 211	PSYC 242	NURS 202
	Identify appropriate communication to achieve positive client outcomes in the context in the context of acute illness, as well as the obstetric client.	Utilize appropriate verbal and written channels of communication to achieve positive client outcomes in the acute care setting and mental health setting.	Identify appropriate therapeutic communication related to mental health, mental illness, substance abuse, and violence to clients across the lifespan.	Identify appropriate communication to achieve positive client outcomes in the context of acute and critical illness.
NURS 212	HUM 232	NURS 203	HUM 233	NURS 213 Terminal Program Outcome
Utilize appropriate verbal and written channels of communication to achieve positive client outcomes for the increasingly complex client in the acute care setting and obstetric setting.		Identify appropriate communication to achieve positive client outcomes in the context of critical illness, emergency care and community settings.		Utilize appropriate verbal and written channels of communication to achieve positive client outcomes
Professional Behaviors Practice within the ethical, legal and regulatory frameworks of nursing and standards and scope of nursing practice.				
NURS 101	NURS 111	NUTR 121	HUM 131	PSYCH 141

Identify historical and contemporary issues influencing the development of professional nursing practice.	Demonstrate professional behavior in the skills lab and simulation lab.		1. Discuss legal, ethical and regulatory issues in professional nursing 2. Identify a structured approach for ethical decision making in healthcare. 3. Discuss scope of nursing practice and nurse decision making.	
NURS 102	NURS 112	NUTR 122	NURS 103	NURS 113
Identify ethical, legal and regulatory frameworks of nursing and standards and scope of nursing practice in the context of chronic illness.	1. Practice within the ethical, legal and regulatory frameworks of nursing and standards and scope of professional nursing practice in the long term care setting. 2. Demonstrate professional behavior in the long term care setting.		Identify ethical, legal and regulatory frameworks of nursing and standards and scope of nursing practice in the context of acute and chronic illness, as well as in the context of the pediatric client.	Practice within the ethical, legal and regulatory frameworks of nursing and standards and scope of professional nursing practice in the acute care and community setting.
NUTR 123	NURS 201	NURS 211	PSYC 242	NURS 202
	Identify ethical, legal and regulatory frameworks of nursing and standards and scope of nursing practice in the context of acute illness as well as the obstetric client.	1. Practice within the ethical, legal and regulatory frameworks of nursing and standards and scope of professional nursing practice in the acute care and mental health setting. 2. Demonstrate professional	Identify ethical, legal and regulatory frameworks of nursing and standards and scope of nursing practice in the context of with mental illness, substance abuse, and violence.	Identify ethical, legal and regulatory frameworks of nursing and standards and scope of nursing practice in the context of acute and critical illness.

		behavior in the acute care and mental health setting.		
NURS 212	HUM 232	NURS 203	HUM 233	NURS 213 Terminal Program Outcome
Practice within the ethical, legal and regulatory frameworks of nursing and standards and scope of professional nursing practice for the increasingly complex client in the acute care and obstetric setting..	1. Apply the scope of decision making to scenarios related to delegation, management and clinical practice 2. Apply the nurse practice act, standards of care and agency policies and procedures that affect the scope of nursing practice and management and leadership in nursing 3. Apply legal/ethical issues in professional nursing, to include but not limited to the role of the student nurse, nurse technician, the professional nurse and the nursing manager; including statutory, regulatory and common laws as they relate to the practice settings	Identify ethical, legal and regulatory frameworks of nursing and standards and scope of nursing practice in the context of critical illness, emergency care and community setting.	1. Explore how laws, ethical practice and policies are changed in nursing and healthcare. 2. Apply principles of ethical decisions using the Jonsen Model in the profession of nursing to various scenarios across the lifespan 3. Apply the principles of policies and ethics to scenarios for the patient who is critically ill, experiencing disaster and in the context of community health. 4. Explore national and global policies and ethics in healthcare and nursing with comparison to our regional policies and ethics.	Practice within the ethical, legal and regulatory frameworks of nursing and standards and scope of nursing practice. Demonstrate professional behavior in diverse settings.

APPENDIX D: GUIDELINES FOR WRITING IN THE NURSING PROGRAM

The purpose of writing is to improve students' education and communication. It is our goal that through writing, students will be able to develop critical and independent thinking skills that enable them to make judgments and decisions, as well as, internalize their experiences in a wide variety of life roles and intellectual activities. Writing is a means for the instructor to monitor academic growth, personal growth, patterns of thought and communication.

There will be major written assignments each quarter. Directions will be provided at the time the assignment is made.

General Instructions

1. APA format
2. Typed, 12-point font, double-spaced unless otherwise specified by the instructor.
3. Submit all assignments electronically per electronic policy, unless otherwise instructed by individual instructor.
4. Conform to the Peninsula College Communication Competencies :
5. Follow the specific instructions for each writing assignment.
6. Submit assignments on time.
7. Use additional resources as needed for remediation of writing competency

Resources

Students enrolled in the Peninsula College Nursing Program have the following resources available to them.

- Writing, computer and math labs in Maier Hall
- Library Media Center
- Tutoring
- Student Services and the Counseling Center
- Distance Learning Support through advisors in Student Services

APPENDIX E: MEDIA RELEASE FORM

PENINSULA COLLEGE MEDIA RELEASE FORM

By signing this form, I hereby give permission to Peninsula College to use my photograph to promote Peninsula College and their programs.

I understand that these photos may be used in a variety of promotional vehicles for Peninsula College, including the Quarterly Bulletin, the catalog, brochures and newsprint advertising.

Name:

Signature:

Date:

APPENDIX F: GRADE SCALE

GRADING SCALE						
96-100	4.0		85	2.9	70	1.4
95	3.9		84	2.8	69	1.3
94	3.8		83	2.7	68	1.2
93	3.7		82	2.6	67	1.1
92	3.6		81	2.5	66	1.0
91	3.5		80	2.4	65	0.9
90	3.4		79	2.3	64	0.8
89	3.3		78	2.2	63	0.7
88	3.2		77	2.1	62	0.6
87	3.1		76	2.0	61	0.5
86	3.0		75	1.9	60	0.4
			74	1.8	59	0.3
			73	1.7	58	0.2
			72	1.6	57	0.1
			71	1.5	≤ 56	0.0

APPENDIX G: HUMAN SUBJECTS POLICY AND INVASIVE PROCEDURE CONSENT

Human Subjects Policy and Invasive Procedure Consent Form

The nursing program has a Human Subjects Policy to include opportunities to perform limited invasive procedures under faculty supervision.

General Rationale: These skills are difficult to simulate with any degree of realism and the first time a student practices is on a patient in the health care setting. This can be very stressful for the student (and the patient!). The anxiety about performing these on patients without realistic lab practice has led to students practicing these skills on each other and family members in less than ideal conditions (and possibly unsafe conditions- particularly true with IV starts) without faculty supervision.

The procedures desired are:

Learning Activity	Rationale	Benefit to student	Risks/Discomforts
Finger stick to assess blood glucose (puncture of skin with a small sterile lancet to obtain a drop of blood for testing in a hand held monitor)	No ability to practice without real patients and real blood.	Opportunity to demonstrate beginning proficiency. It is a minor procedure but tricky to perform well without practice.	Minor exposure to blood. Minor discomfort. Possible tissue trauma, infection, bruising
Intradermal injection, subcutaneous, and intramuscular injections with sterile water.	Students have a more realistic experience practicing an injection on a live subject than a manikin.	Opportunity to demonstrate beginning proficiency. It is difficult to perform well without practice.	Minor exposure to blood. Minor discomfort.PIP Possible tissue trauma, infection, bruising
NG Tube Insertion	NG tube insertion is much different on a live subject than on a manikin. It would improve safety and allow students develop empathy if students practice on each other in a controlled environment.	Opportunity to demonstrate beginning proficiency. It is difficult to perform well without practice.	Minor exposure to body fluids. Minor discomfort. Possible aspiration or tissue trauma
IV starts	IV arms are minimally satisfactory in simulating the experience. Because of	Opportunity to demonstrate beginning proficiency.	Minor exposure to blood. Minor discomfort

	this, students tend to practice on live subjects without supervision. It would improve safety to allow students to practice on each other in a controlled setting.	It is difficult to perform well without practice.	Possible tissue trauma, infection, bruising
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Students would have the opportunity to “opt-out” but would not be able to themselves perform the procedures on other students and would use alternate activities for practice such as are currently used.

A faculty member who is a registered nurse must be in attendance during any practice sessions in which these procedures are practiced. Students will not perform, nor allow to be performed on them, any of these procedures unless a Nursing Program faculty member is present.

Students must only use non-expired, medical grade, unopened supplies for practice on other students as provided by the faculty.

I have read and understand the above risks and benefits.

☐ I would like to participate in invasive skills practice. I can opt out of any invasive skill. I will give verbal consent at the time of practice. I agree to follow the above guidelines.

☐ I will not participate in invasive skills practice and will use a manikin for practice.

Student Name: _____

Student Signature: _____

Date: _____

In the event that a student wishes to change their above consent, they will notify their skills lab instructor and provide a newly completed form.

APPENDIX H: PERSONAL IMPROVEMENT PLAN (PIP)

This form is to be completed by the student. The student is to assess the situation to determine/ diagnose/ identify the problem(s) for the poor academic performance on the examination and/or in the course. Next, the student is to develop specific interventions to improve academic performance on future examinations and in the course. When the student meets with the faculty member (course designee), the interventions and evaluation methods will be discussed.

Student Name: _____ PC ID # _____

Date Initiated: _____ PC E-mail address: _____

Reason for PIP:

81% or less on Exam

Risk of course failure

Other: _____

Assessment of Situation and Identification of Problem(s)	What do you think was the cause of a low grade on the exam or in the course?
Plan of Improvement	What specific improvement plans will you implement?
What date will you evaluate the above Plan of Improvement?	
Student Signature: _____ Date: _____ Faculty Signature: _____ Date: _____	
Evaluation of Plan:	Did your plan work? If, so what did your grade improve to? If not, what is the next step?
Student Signature: _____ Date: _____ Faculty Signature: _____ Date: _____	

APPENDIX I: Program Withdrawal

This form documents withdrawal from the Peninsula College Nursing Program. Please fill this form out completely and submit it to the Program Director.

Last Name: _____ First Name: _____

PC Number: _____ Date: _____

PC E-mail address: _____

Course: _____

Reason for withdrawal (please circle appropriate option): Personal Academic

Do you wish/intend to return to the program? (please circle the appropriate response)

Yes No Uncertain

Do you have a statement you would like to make regarding your intentions to return to the program or reasons for withdrawal?

Student Signature: _____

Course Faculty Signature: _____

Nursing Program Director Comments

Signature: _____

Date: _____

APPENDIX J: CLINICAL COUNSELING FORM**Peninsula College Nursing Program
Clinical Counseling Form**

Student: _____ PC ID# _____ Date: _____

Course: _____ Clinical Instructor: _____

Per Clinical Evaluation Tool and/or Safe Practice Guidelines give a description of the reason for counseling:

____ Unsatisfactory Clinical Performance ____ Unsafe Clinical Practice ____ Other

Remediation action plan: Identify actions that are intended to fix the behavior / problem. Include date and resources required to be successful with action remediation plan. Actions must be specific and state a date to be completed. To be completed by both student & faculty.

Remediation Interventions	Contact Information	Date to be completed

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Evaluation of the Remediation plan: ____ Satisfactory ____ Unsatisfactory

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

APPENDIX K: READING COMPLETION OF STUDENT HANDBOOK

Peninsula College

Nursing Program

Student Handbook

I have received, read, understand and agree to abide by the contents of the Nursing Student Handbook.

Signature: _____ Date: _____

Print Name: _____

APPENDIX L: CONFERENCE SUMMARY FORM

Peninsula College Nursing Program

Conference Summary Form

STUDENT:

DATE:

COURSE:

Summary of Conference Outcome:

I understand the above expectation.

STUDENT SIGNATURE _____ DATE: _____

FACULTY SIGNATURE _____ DATE: _____

FACULTY SIGNATURE _____ DATE: _____

APPENDIX M: STUDENT REFERENCE REQUEST and FERPA RELEASE

In accordance with FERPA (Family Educational Rights and Privacy Act) regulations, any student wishing a recommendation from nursing faculty will provide the following information.

Student Name (please print):

I request _____ (please print nursing faculty name) to serve as a reference for me and to provide requested reference in written form.

Date needed (please print):

The purpose of the reference (check all applicable items):

- ☐ Application for employment
- ☐ Scholarships or honorary awards
- ☐ Admission to another educational institution

I authorize the above person to release information and provide an evaluation about any and all information from my educational records at Peninsula College, including education at other institutions I have previously attended which is part of my PC education records to the following (please print):

1. _____
(Name and Address)

2. _____
(Name and Address)

3. _____
(Name and Address)

4. _____
(Name and Address)

I understand that I have the right not to consent to the release of my education records; I have a right to receive a copy of any written reference upon request, and that this consent shall remain in effect until revoked by me, in writing, and delivered to the above faculty member prior to the faculty member's receipt of any such written revocation.

Student Signature _____

Date : _____

This STUDENT REFERENCE REQUEST and FERPA RELEASE will be attached to a copy of each reference sent on behalf of the requesting student and will be maintained in the student's nursing file.

APPENDIX N: RISKS AND HAZARDS STATEMENT OF RESPONSIBILITY

I am aware that during the nursing experience in which I am participating under the arrangements of Peninsula College, during the academic year, certain dangers may occur, including but not limited to the following: abrasions, cuts, punctures, muscle strain, back strain, eye injury, exposure to infectious disease etc.

In consideration for the right to participate in this experience and the other program activities with Peninsula College, I have and do hereby assume all risks involved and withhold the State of Washington, Peninsula College, its employees, agents, and assigns, harmless from any and all liability actions, causes of actions, debts, claims, and demands of every kind and nature whatsoever, which may arise from or in connections with participation in any activities arranged for me by Peninsula College. The terms thereof shall serve as a release and assumption of risk for the heirs, executors, administrators, and member of my family, including minors.

By my signature on this document, I acknowledge that I have been informed and further that I understand that I should have either personal medical insurance prior to enrolling in this program, or that I should enroll in student medical insurance. My preference is shown by my initials in the box (s) below.

- ☐ I have personal medical insurance
- ☐ I decline enrolling in a medical insurance program. I am fully aware of the risk and dangers which may occur during my nursing experience and other activities arranged for me by Peninsula College.

Signature of student: _____

Date _____

Printed name of student _____

APPENDIX O: UNUSUAL OCCURRENCE REPORT

PENINSULA COLLEGE NURSING PROGRAM

UNUSUAL OCCURRENCE REPORT

Student Name:

Faculty Name:

Date report completed:

This form is to be completed by the student and the faculty member together. The completed form is to be submitted to the Nursing Director within 24 hours of the event.

Occurrence Demographics

Date of Occurrence:

Time of Occurrence:

Location of event:

Category of Event: (check one)

- ☐ Error
- ☐ Near Miss
- ☐ Fall
- ☐ Other: _____

Who was the recipient of the Unusual Occurrence?

- ☐ Patient
- ☐ Visitor
- ☐ Staff
- ☐ Student
- ☐ Other (specify): _____

Status of the recipient of the Unusual Occurrence:

- ☐ No Harm
- ☐ Harm
- ☐ Death
- ☐ Other (specify): _____

Type of Incident:

- ☐ Medication error:
 - ☐ Wrong dose/rate
 - ☐ Wrong route
 - ☐ Wrong client
 - ☐ Wrong drug/solution
 - ☐ Wrong time/delayed/out of sequence

- ☐ Adverse/allergic reaction
- ☐ Extra dose/ repeated
- ☐ Omission
- ☐ Patient self-medicated
- ☐ Other (specify):
- ☐ Needle stick (complete "Needle Stick and Sharp Object Injury and Body Fluid Report")
- ☐ Blood/Pathogen exposure
- ☐ Fall event
 - ☐ Witnessed: Yes No
 - ☐ Assisted to the floor: Yes No
 - ☐ Fall from:
- ☐ Injury to body
- ☐ Failure to assess and/or respond to an adverse change in client condition
- ☐ Breach of confidentiality
- ☐ Other:

Describe event in detail here:

Reflection on Contributive/Causative Factors

- ☐ Medication Error:
 - ☐ Allergy not documented
 - ☐ Assessment inaccurate/Incomplete
 - ☐ Drug not documented as given
 - ☐ Drug not checked with order/MAR
 - ☐ Drug not available
 - ☐ MAR misread/misinterpreted/ incomplete
 - ☐ Medication not scanned
 - ☐ Drug name similarity with other drug
 - ☐ Overlooked medication
 - ☐ Other (specify): _____
- ☐ Inadequate communication
- ☐ Inadequate preparation and/or knowledge for providing patient care
- ☐ Deviation from protocols

- ☐ Equipment or medical device malfunction
- ☐ Environmental safety – for self, patient or others
- ☐ Inappropriate or inadequate supervision or assignment by faculty, preceptor, other student, health care team, patient, or visitor
- ☐ Interruptions/Distractions
- ☐ Client factors-for example, combative, agitated etc. (Specify):
- ☐ Technical knowledge deficit
- ☐ Other: _____

Follow-Up Action

Who was alerted?

- ☐ PC Faculty-specify name(s):
- ☐ PC Nursing Director
- ☐ Patient
- ☐ Patient's family-specify:
- ☐ Healthcare Provider-specify:
- ☐ Other:

Informed clinical agency:

- ☐ Yes-specify name and title of individual(s): _____
- ☐ No
- ☐ Unknown
- ☐ N/A

Agency incident report completed:

- ☐ Yes (specify who completed the agency report): _____
- ☐ No
- ☐ Unknown
- ☐ N/A

Completion of Just Culture Student Practice Event Evaluation Tool (SPEET) indicated by faculty

- ☐ Yes
 - ☐ Outcome (circle one): Human Error Risky Behavior Reckless Behavior
- ☐ No

Changes occurring as result of incident:

- ☐ System changes
- ☐ Policy changes
- ☐ Practice changes
- ☐ Curriculum changes
- ☐ Nothing at present
- ☐ Other:
- ☐ Unknown

☐ N/A

Measures to prevent his type of incident from occurring in the future including student remediation plan as appropriate:

APPENDIX P: NEEDLESTICK AND SHARP OBJECT INJURY AND BODY FLUID EXPOSURE REPORT

Peninsula College Nursing Program

Needlestick and Sharp Object Injury and Body Fluid Exposure Report

Please complete concurrently with Unusual Occurrence Form

Student Name:

Birthdate:

SID#:

Date of Injury:

Where did the injury occur? (check one)

- | | |
|--|--|
| ☐ Patient Room | ☐ Venipuncture |
| ☐ Outside Patient Room (hallway, nurse's station, etc.) | ☐ Dialysis Facility |
| ☐ Emergency Department | ☐ Procedure Room (X-ray, EMG, etc.) |
| ☐ Intensive/Critical Care Unit | ☐ Clinical Laboratories |
| ☐ Operating Room | ☐ Autopsy/Pathology |
| ☐ Outpatient Clinic/Office | ☐ Blood Bank |
| ☐ Service/Utility Area (laundry, central supply, etc.) | |
| ☐ Other, describe _____ | |

Was the source patient known? (check one)

- ☐ Yes, Medical Record # _____ ☐ no ☐ unknown ☐ not applicable

Was the injured student the original user of the sharp item? (check one)

- ☐ yes ☐ no ☐ unknown ☐ not applicable

Was the sharp item: (check one)

- ☐ contaminated (known exposure to patient or contaminated equipment)
☐ uncontaminated (no known exposure to pt. or contaminated equipment)
☐ unknown

For what purpose was the sharp item originally used: (check one)

- ☐ unknown/not applicable
☐ injection, intramuscular/subcutaneous, or other injection through the skin (syringe)
☐ heparin or saline flush (syringe)
☐ other injection into (or aspiration from) I.V. injection site or I.V. port (syringe)
☐ to connect I.V. line (intermittent I.V./piggyback/I.V. infusion/other I.V. line connection)
☐ to start I.V. or set up heparin lock (I.V. catheter or Butterfly™ –type needle)
☐ to draw a venous blood sample
☐ to draw an arterial blood sample (ABG)
☐ to obtain a body fluid or tissue sample (urine/CSF, Amniotic fluid/other fluid, biopsy)
☐ fingerstick/heel stick
☐ suturing
☐ cutting (surgery)
☐ electrocautery
☐ to contain a specimen or pharmaceutical (glass items)
☐ other, describe _____

Did the injury occur: (check one)

- ☐ before use of item (item broke or slipped, assembling device, etc.)

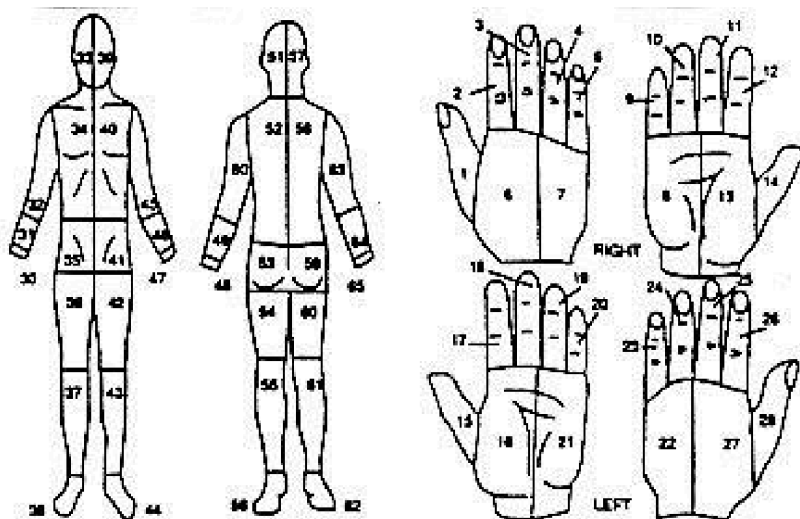
- ☐ during use of item (item slipped, patient jarred item, etc.)
- ☐ between steps of multistep procedure (between incremental injections, passing instruments, etc.)
- ☐ disassembling device or equipment
- ☐ in preparation for reuse of reusable instrument (sorting, disinfecting, sterilizing, etc.)
- ☐ while recapping a used needle
- ☐ withdrawing a needle from rubber or other resistant material (rubber stopper, I.V. port, etc.)
- ☐ other after use, before disposal (in transit to trash, cleaning up, left on bed, table, floor, or other inappropriate place, etc.)
- ☐ from item left on or near disposal container
- ☐ while putting the item into the disposal container
- ☐ after disposal, stuck by item protruding from opening of disposal container
- ☐ after disposal item protruded from trash bag or inappropriate waste container

What device or item caused the injury?

If the item causing the injury was a needle, was it a “safety design” with a shielded, recessed, or retractable needle?

☐ yes ☐ no/not applicable

Mark the location of the injury:



Describe the circumstances leading to this injury:

BODY FLUID EXPOSURE:

Which body fluids were involved in the exposure? *(check all that apply)*

- | | |
|---|--|
| ☐ blood or blood product | ☐ pleural fluid |
| ☐ vomit | ☐ amniotic fluid |
| ☐ CSF | ☐ urine |
| ☐ peritoneal fluid | ☐ other, describe _____ |

Was the exposed part: *(check all that apply)*

- | | |
|--|--|
| ☐ intact skin | ☐ nose |
| ☐ non-intact skin | ☐ mouth |
| ☐ eye(s) | ☐ other, describe _____ |

Did the blood or body fluid: *(check all that apply)*

- ☐ touch unprotected skin
- ☐ touch skin through gap between protective garments
- ☐ soak through protective garments
- ☐ soak through clothing

Which protective items were worn at the time of the exposure? *(check all that apply)*

- | | |
|---|--|
| ☐ single pair latex/vinyl gloves | ☐ surgical gown |
| ☐ double pair latex/vinyl gloves | ☐ plastic apron |
| ☐ goggles | ☐ lab coat, cloth |
| ☐ eyeglasses | ☐ lab coat, other _____ |
| ☐ faceshield | ☐ other, describe _____ |
| ☐ surgical mask | |

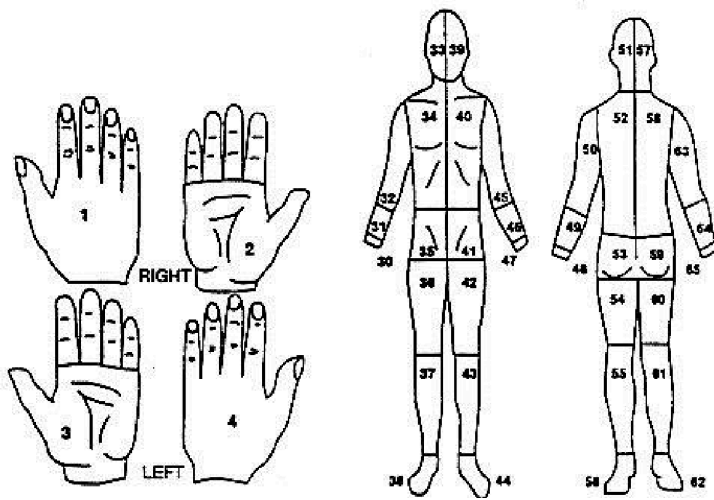
Was the exposure the result of: *(check one)*

- | | |
|--|---|
| ☐ direct patient exposure | ☐ touched contaminated equipment |
| ☐ specimen container leaked/spilled | ☐ touched contaminated drapes/sheets/gowns, etc. |
| ☐ specimen container broke | ☐ unknown |

Estimate the quantity of blood or body fluid in contact with your skin or mucous membranes: *(check one)*

- ☐ small amount (up to 5 cc, or up to a teaspoon)
- ☐ moderate amount (up to 50 cc, or up to a quarter cup)
- ☐ large amount (more than 50 cc)

Mark the size and location of the exposure:



Describe the circumstances leading to this exposure:

Instructor comments:

Instructor Signature: _____ Date: _____

Student Signature: _____ Date: _____

Return to Director of Nursing within 24 hours of the incident.

NCBON Just Culture STUDENT PRACTICE EVENT EVALUATION TOOL (SPEET)

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

Criteria Score _____

NCBON Just Culture STUDENT PRACTICE EVENT EVALUATION TOOL (SPEET)

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

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

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

Evaluator: _____

School Name: _____

Date of Event: _____

NOTE: This SPEET is NOT used if event involves misconduct such as: academic cheating, confidentiality, fraud, theft, drug abuse, diversion, boundary issues, sexual misconduct, mental/physical impairment. Instead, these are managed through established mechanisms outside of this clinical framework.

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

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

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

Counseling = Comforting, calming, supporting student while examining event.

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

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

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

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