WAYNE COMMUNITY COLLEGE

NURSING STUDENT MANUAL 2016-2018

Wayne Community is a Tobacco-Free and Drug Free Institution

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WELCOME TO NURSING AT WAYNE COMMUNITY COLLEGE

The nursing faculty welcomes you to the Wayne Community College nursing programs! We are happy that you have chosen to begin your nursing education at WCC. You have chosen a very rewarding, challenging, and dynamic career that will offer you many varied opportunities to pursue both your nursing practice and lifelong learning goals. The faculty is committed to helping you to meet your educational goals and to become a highly skilled member of the nursing profession. We wish you success as you begin your journey.

BRIEF HISTORY OF NURSING PROGRAMS

The nursing department at Wayne Community College has the unique honor of being the oldest department at the college. In 1957 when WCC was established as the Goldsboro Industrial Center, the school of Practical Nursing, which had been implemented in 1950 as part of the Vocational Education Department of the Goldsboro City Schools, was immediately transferred to the Industrial Education Center. Again in the late 1960s, WCC responded to the need for increased numbers of highly skilled nurses by implementing an Associate Degree Nursing program in the fall of 1971. Since 1965 the Practical Nursing and Associate Degree Nursing programs have graduated a combined total of 1,967 nurses. We look forward to adding you to the list of graduates.

The Practical Nursing curriculum prepares individuals with the knowledge and skills to provide nursing care to children and adults. Students participate in assessment, planning, implementing, and evaluating nursing care. Graduates are prepared to provide nursing care primarily in long-term care settings such as nursing homes and acute care settings such as general hospitals. Graduates of this program are eligible to apply to take the National Council Licensure Examination (NCLEX-PN) which is required for practice as a Licensed Practical Nurse.

The Associate Degree Nursing curriculum provides individuals with the knowledge and skills necessary to provide nursing care to clients and groups of clients throughout the lifespan in a variety of settings. The curriculum explores the roles of the nurse as provider of nursing care, as manager of care, as member of the discipline of nursing, and as a member of the interdisciplinary team. Employment opportunities include acute care such as general hospitals, long-term care settings, industry, and community agencies.

Graduates of this program are eligible to apply to take the National Council Licensure Examination (NCLEX-RN) which is required for practice as a Registered Nurse

The Practical Nursing and the Associate Degree Nursing programs are approved by the North Carolina Board of Nursing (NCBON). The NCBON is a valuable resource for information related to nursing education and nursing practice in North Carolina (www.ncbon.org).

The Practical Nursing and Associate Degree Nursing programs are accredited by the Accreditation Commission for Education in Nursing, Inc. (ACEN). They can be reached at

Accreditation Commission for Education in Nursing, Inc.
3343 Peachtree Road NE, Suite 850
Atlanta, Georgia 30326
www.acenursing.org

INTRODUCTION

The purpose of this student manual is to provide information that will be useful to you as a Wayne Community College nursing student. Keep it close by and refer to it often as you progress through the program. It includes important information about the program itself and regulations and policies that apply to students in the program. You will find other useful information in the Wayne Community College Catalog and Student Handbook and the WCC Website: www.waynecc.edu.

ORGANIZATIONAL STRUCTURE

PRESIDENT
Dr. Thomas Walker

VICE PRESIDENT FOR ACADEMIC and STUDENT SERVICES
Dr. Gene Smith

DIVISION CHAIR
ALLIED HEALTH and PUBLIC SERVICES
Dr. Patricia Pfeiffer

DEPARTMENT CHAIR, NURSING
Sue Beaman

NURSING FACULTY
Marielle Blizzard
Bonnie Gray
Gabrielle Alexander
Joanne McClave
Melissa Smiley
Sherry Smith
Billy Tart
Virginia Raper

NURSING STUDENTS

Rev.: 6/98; 6/2000;
7/01; 6/02; 6/03
6/04, 6/05, 7/06
7/07, 5/08, 8/09,
8/11, 8/12,6/13,
3/16, 8/16

WAYNE COMMUNITY COLLEGE NURSING CURRICULUM MODEL

NORTH CAROLINA COMMUNITY COLLEGE SYSTEM
MISSION, GOALS, OBJECTIVES

WAYNE COMMUNITY COLLEGE, MISSION, AND GOALS

INSTITUTIONAL LEARNING OUTCOMES

WAYNE COMMUNITY COLLEGE NURSING PHILOSOPHICAL FRAMEWORK

Individual Health Healthcare Environment Nursing Nursing Education

MISSION

PROGRAM LEARNING OUTCOMES

CONCEPTUAL FRAMEWORK

MAJOR CONCEPTS	Individual	Health	Healthcare	Environment	Nursing	Nursing Education
Threads:						
Clinical Decision Making						
Caring						
Communication						
Basic Needs						
Teaching/Learning						
Growth & Development						
Pharmacology						
Management/Supervision						
Personal Development						

COURSE LEARNING OUTCOMES

MODULE LEARNING OUTCOMES

Class Lab Clinical

SYSTEM OF EVALUATION

Rev: 3/85; 7/88;
9/90; 2/95; 5/00; 5/04
6/06; 3/07; 2/09 effective 8/10, Correction 11/11, 3/15

WAYNE COMMUNITY COLLEGE
NURSING DEPARTMENT
PHILOSOPHICAL FRAMEWORK

MISSION

The faculty of the department of nursing is committed to the mission, goals, and learning outcomes of Wayne Community College. We endorse the concept of open-door admissions to the college. However, we recognize the need for restrictions on the number of students admitted to our nursing programs and for setting admission standards to ensure quality practitioners. The nursing faculty is committed to providing accessible high quality, learner-centered, and outcome-based nursing education to meet the diverse and changing health-care needs of the service area. The nursing faculty is committed to promoting the development of qualified students prepared for the professional roles of practical nurse and registered nurse to perform competently and safely their respective roles within the legal and ethical framework of nursing at the entry level. Within this mission, the goal of the nursing faculty is to promote the highest quality of nursing care to the individual, families and significant persons, and the community. The aim is to facilitate optimum health, quality of life , and achievement of potential for the individual.

Graduates of the nursing programs meet the educational requirements to take their respective National Council Licensure Examinations (NCLEX-PN and NCLEX-RN).

PHILOSOPHY OF THE DEPARTMENT OF NURSING

The philosophy of the nursing department is developed from the faculty's beliefs regarding the individual, health, healthcare, nursing, environment, and nursing education.

Individual We believe the individual is a dynamic, multidimensional, biophysical, psychosocial, cultural, and spiritual being with unique needs who interacts constantly with the internal and external environment in an effort to achieve and/or maintain homeostasis throughout the life span. The individual is viewed as a member of a family, community, and a culturally diverse society.

Health We believe health is a dynamic state of being that moves along a wellness to illness continuum that may culminate in death. Health beliefs, past experiences, biophysical, psychosocial, cultural, spiritual, and environmental factors influence the individual's perception of health and adaptive responses.

Healthcare We believe that quality healthcare should be accessible to all individuals. Professional nurses assume multiple roles in providing healthcare services to persons in settings wherever nursing is required. Nurses adhere to the American Nurses Association Code of Ethics and the professional standards that define safe, competent, and effective nursing practice. Through multifaceted awareness and action, nurses shape the healthcare delivery system.

Environment We believe environment is the sum of all internal and external conditions and elements that influence the development and performance of the individual. The environment is constantly changing and may alter an individual's health and/or well-being and require adaptive responses.

Nursing We believe nursing is a science and an art of integrating and assimilating knowledge and skills derived from biological, sociological, and behavioral sciences and information technology to deliver client-centered, culturally competent, holistic care. Through caring, empathy, use of ethical principles, and the development of a therapeutic relationship with the individual and significant support person(s), the nurse integrates the art of nursing with the scientific foundation for nursing practice that utilizes the nursing process. Incorporating evidence-based practice, the nurse functions collaboratively with the interdisciplinary team to assist individuals to reach their maximum health potential through assurance of quality client outcomes, promotion of wellness, prevention of illness, and restoration of health or assistance in achieving a dignified death.

Nursing Education We believe nursing education is a continuous and dynamic process shared by students and faculty. The nursing curriculum at Wayne Community College provides a foundation of nursing knowledge and practice incorporating concepts from biological and social sciences and general education courses. The curriculum is designed to offer the opportunity for learning through the use of diverse resources, technologies, and varied learning experiences to acquire the knowledge and skills needed to perform competently and safely as entry-level practitioners and as life-long learners. Learning is defined as the process "by which behavior is changed as individuals acquire and apply knowledge, attitudes, and skills" (WCC Educational Philosophy, 2004). The curriculum is founded on adult and collaborative learning principles. Basic assumptions include self-direction, utilizing adult experience, problem and activity-centered learning (Rachel, 2002). Acknowledgment of prior learning and experiences can assist in motivating the student to achieve his/her potential. The student is expected to assume responsibility for learning and thinking critically utilizing the faculty as a resource.

References:

Rachel, J., (2002). Andragogy's detectives: A critique of the present and a proposal for the future. *Adult Education Quarterly, 52(3), 210-222.*

Wayne Community College. (2004). *College procedures manual: Educational philosophy 03-0101.* Goldsboro, N.C.: WCC.

Revised:
3/85; 7/88; 9/91
2/95; 6/97; 5/00
5/01; 6/03; 5/04;
1/06; 6/06; 2/09 effective 8/10

WAYNE COMMUNITY COLLEGE
NURSING DEPARTMENT
CONCEPTUAL FRAMEWORK

This conceptual framework provides a systematic ordering of facts, concepts, and beliefs that direct the design of the curriculum and that provide a basis on which to evaluate the curriculum. The framework is eclectic and is derived from the philosophy and mission of the nursing program.

The conceptual framework unites the broad concepts of the individual, health, healthcare, the environment, and nursing to provide a conceptualization of nursing education.

Curriculum threads have been identified and developed to form the basis for the nursing programs. They include:

Clinical Decision Making	Basic Needs	Pharmacology
Caring	Teaching/Learning	Management/Supervision
Communication	Growth & Development	Personal Development

The following discussion indicates how these threads are woven within the planned program.

CLINICAL DECISION MAKING

The major framework of the curriculum focuses on the development of clinical decision making utilizing the nursing process as a problem solving methodology. The nursing process is a scientific, problem-solving method used to deliver quality, individualized, safe nursing care to diverse groups of individuals across the age spectrum. Effective utilization of the nursing process incorporates critical thinking, clinical reasoning and integration of evidence-based practice. These concepts are introduced in NUR 101: Practical Nursing I and NUR 111: Intro to Health Concepts and expanded throughout the Practical Nursing and Associate Degree Nursing curricula as a basis for clinical decision-making and nursing practice. The nursing process utilizes circular steps for planning and providing nursing care. A four-step nursing process is introduced in NUR 101: Practical Nursing I and is expanded throughout the Practical Nursing program as a basis for nursing practice.

The four components are defined as follows:

"Assessment is an ongoing process and consists of participation in the determination of nursing care needs based upon collection and interpretation of data relevant to the health status of a client. Planning nursing care activities includes participation in the identification of client's needs related to the findings of the nursing assessment.
Implementation of nursing activities consists of delivering nursing care according to an established health care plan and as assigned by the registered nurse or other person(s) authorized by law.
Evaluation consists of participation in determining the extent to which desired outcomes of nursing care are met and planning for subsequent care." (NC Administrative Code, 21 NCAC 36 .0225 Components of Nursing Practice for the Practical Nurse, 2002).

A five-step nursing process is introduced in NUR 111: Intro to Health Concepts and is expanded throughout the Associate Degree Nursing program as a basis for nursing practice utilizing a conceptual approach.

The five components are defined as follows:

"Assessment is an ongoing process and consists of the determination of nursing care needs based upon collection of data relevant to the health status of a client, group, or community.
Analysis is the interpretation of data including formulation of a nursing diagnosis.
Planning nursing care activities includes identifying the client's needs and selecting or modifying nursing interventions related to the findings of the nursing assessment.
Implementation of nursing activities is the initiating and delivering of nursing care according to an established plan.
Evaluation consists of determining the extent to which desired outcomes of nursing care are met and planning for subsequent care." (NC Administrative Code, 21 NCAC 36 .0224 Components of Nursing Practice for the Registered Nurse, 2002).

CARING

The act of caring is the foundation on which nursing is built. Nursing incorporates caring interventions in order to protect and enhance individuals' personal worth and human dignity and enable individuals to meet their basic needs. Caring interventions also contribute to health promotion, enhanced quality of life, and achievement of desired outcomes. Caring is guided by compassion, mutual trust, competence and moral and ethical values. Caring behaviors are universal and vary among cultures.

The concept of caring as a central focus of nursing is introduced in NUR 101: Practical Nursing I and NUR 111: Intro to Health Concepts as student's explore each basic need and begin to develop nursing skills to assist clients to meet individual needs. Caring and caring behaviors are emphasized across the curriculum as students increase their knowledge, gain clinical experience and internalize caring as an integral component of professional nursing practice.

COMMUNICATION:

Communication is the exchange of ideas, information, and the expressions of emotions between individuals. The communication process involves collaborative, social, formal and therapeutic interactions which may be verbal or non-verbal. Students are socialized to interdisciplinary practice through classroom and clinical learning experiences. Interdisciplinary practice promotes collaboration between and among staff in the integration of information to identify and appropriately prioritize client care needs. Working as members of the interdisciplinary team, students have the opportunity to develop needed collaboration and communication skills which in turn better prepares them for practice in a clinical setting.

The principles of therapeutic and non-therapeutic communication are introduced in NUR 101: Practical Nursing I and NUR 111: Intro to Health Concepts. They are expanded and emphasized throughout the program as the student is assisted to develop greater expertise in communication skills. The communication process is enhanced by use of information technology which enables the nurse to access and utilize information for implementing nursing care. The faculty believes that nursing students must be educated in the use of informatics as a tool to review, organize, evaluate and communicate information.

BASIC NEEDS

The concept of basic needs is derived from viewing the individual as a dynamic, multidimensional, biophysical, psychosocial, cultural and spiritual being. The individual constantly interacts with an

internal and external environment in an effort to meet both biophysical and psychosocial needs. Basic needs are introduced in NUR 101: Practical Nursing I and NUR 111: Intro to Health Concepts then advanced from simple to complex throughout the curriculum.

TEACHING/LEARNING

Teaching is a system of activities intended to produce learning. Learning is a purposeful and life-long process which results in changes in cognitive, affective and psychomotor behaviors. In order for learning to take place, there has to be active participation by both teacher and learner.

Principles of teaching/learning are introduced in NUR 101: Practical Nursing I and NUR 111: Intro to Health Concepts. In the Practical Nursing curriculum, emphasis is placed on participation in client teaching/counseling as planned by the registered nurse. In the Associate Degree nursing curriculum, students are expected to assess learning needs, develop, implement, and evaluate teaching for diverse clients/families. Teaching/learning principles are advanced from simple to complex throughout the curriculum.

GROWTH AND DEVELOPMENT

Growth and Development refers to the biophysical and psychosocial changes which occur throughout the life cycle of the individual. Concepts about growth and development are based on Erikson's Stages of Psychosocial Development, Piaget's Theory of Cognitive Development, and age group norms throughout the life span. Other theories are introduced when pertinent. The basic needs of different age groups are introduced in NUR 101: Practical Nursing I and NUR 113: Family Health Concepts. Alterations in basic needs are considered as the student begins to plan and provide individualized nursing care based on the client's present stage of the life cycle. Growth and development concepts are integrated throughout both the Practical Nursing and Associate Degree Nursing curricula.

PHARMACOLOGY

Pharmacology is the study of drugs and their effects on the body and disease . Pharmacokinetics, pharmacodynamics, basic drug classifications, prototypic medications, dosage calculations, and medication administration are studied and applied in the class and laboratory setting. The application of these principles is then transferred to the clinical setting in the Associate Degree and Practical Nursing programs.

MANAGEMENT/SUPERVISION

Management is the process of planning, organizing, directing and controlling human and material resources necessary to achieve client and institutional goals. Supervision is providing guidance for the accomplishment of a nursing task or activity, with initial direction and periodic inspection and evaluation of the actual accomplishment of the task or activity. Management also includes quality improvement. Quality improvement is a problem-solving process in which health problems are identified, analyzed and resolved through the introduction of changes in practice to achieve identified client outcomes. Participating in quality improvement processes allows the student to critically evaluate the knowledge base to support client care, understand the gap between prevailing practice and best practice, and contribute in closing the gap between prevailing and best practice.

In the Practical Nursing curriculum, general concepts of delegation are introduced in NUR 101: Practical Nursing I. Application of these concepts occurs in NUR 102: Practical Nursing II and NUR 103:

Practical Nursing III. Basic principles of supervision are first introduced in NUR 102: Practical Nursing II. Application of these principles continues in NUR 103: Practical Nursing III.

In the Associate Degree Nursing curriculum, principles of organizing and directing (including delegation) are first introduced in NUR 111: Intro to Health Concepts as students plan and organize care for assigned clients. Knowledge and application of these principles are expanded in each subsequent nursing course.

PERSONAL DEVELOPMENT

Personal development is a student-centered thread integrated throughout the curriculum. It begins in the first semester as the student is expected to assume responsibility for learning with the assistance of faculty as a resource. The student's development increases throughout the program as students accept accountability and responsibility for their actions in providing safe, competent care. The student is assisted to act as client advocate and participate in quality improvement processes which include assessment and evaluation of client outcomes. Personal development is fostered through independent study, critical thinking, self-evaluation and evaluation by others. By the end of the program, the new graduate should perceive nursing as a dynamic process that requires life-long learning and continued personal development throughout his/her nursing career.

References:

North Carolina Board of Nursing. (2002). *Administrative Code* 21 NCAC 36 .0224. Raleigh, NC: North Carolina Board of Nursing

North Carolina Board of Nursing. (2002). *Administrative Code* 21 NCAC 36 .0225. Raleigh, NC: North Carolina Board of Nursing

3/85; 7/88; 7/91;
3/95; 7/97; 5/00;
5/01; 5/04; 1/06;
6/06; 3/07; 2/09 effective 8/10
3/16

Wayne Community College
Associate Degree Program Learning Outcomes

Upon completion of the Associate Degree Nursing program, the new graduate is expected to:

1. Apply the nursing process, critical thinking skills, and evidence-based practice to provide individualized, safe, competent, and effective nursing care to diverse clients across the lifespan.
2. Demonstrate caring behaviors when implementing nursing care to diverse clients across the lifespan.
3. Use a variety of communication skills to establish and maintain a therapeutic and/or effective relationship with clients, families, and members of the interdisciplinary healthcare team.
4. Utilize resources, informatics and technologies in the delivery of nursing care.
5. Develop and implement teaching plans for clients and families incorporating teaching and learning principles.
6. Utilize basic management skills to implement nursing care and quality improvement processes to evaluate and enhance outcomes for diverse groups of clients and families.
7. Collaborate with client and members of the interdisciplinary team to plan, implement, and evaluate the healthcare plan.
8. Function within the legal and ethical framework of registered nurse practice and demonstrate accountability for own professional growth.

4/85; 7/88; 6/96; 5/00;
5/04; 6/06; 3/07; 2/09 effective 8/10

Wayne Community College
Practical Nursing Program Learning Outcomes

Upon completion of the Practical Nursing program, the new graduate is expected to:

1. Participate in applying the nursing process and quality improvement activities to provide individualized, safe, competent, and effective nursing care in a structured setting under supervision.
2. Demonstrate caring behaviors in implementing nursing care to diverse clients across the lifespan.
3. Use verbal and non-verbal communication skills to establish and maintain effective relationships with clients, families and members of the interdisciplinary healthcare team.
4. Utilize established policies, procedures, practice and technology in the delivery of nursing care.
5. Participate in the teaching and counseling of clients as assigned by the registered nurse.
6. Organize care for groups of clients.
7. Work cooperatively as a member of the interdisciplinary team in implementing the health care plan.
8. Function within the legal and ethical framework of licensed practical nurse practice and demonstrate accountability for personal development.

6/06; 9/06; 3/07; 2/09 effective 8/10

Wayne Community College
Associate Degree Nursing Curriculum
Effective Fall 2010

First Semester		**Class**	**Lab**	**Clinical**	**Semester**
ACA 111	College Student Success	1	0	0	1
BIO 168	Anatomy & Physiology I	3	3	0	4
NUR 111	Intro to Health Concepts	4	6	6	8
NUR 117	Pharmacology	1	3	0	2
					15
Second Semester					
BIO 169	Anatomy & Physiology II	3	3	0	4
PSY 150	General Psychology	3	0	0	3
1st 8 Weeks					
NUR 112	Health-Illness Concepts	3	0	6	5
2nd 8 Weeks					
NUR 211	Health Care Concepts	3	0	6	5
					17
Summer Term					
PSY 241	Developmental Psychology	3	0	0	3
NUR 114	Holistic Health Concepts	3	0	6	5
					8
Third Semester					
BIO 175	General Microbiology	2	2	0	3
ENG 111	Expository Writing	3	0	0	3
1st 8 Weeks					
NUR 113	Family Health Concepts	3	0	6	5
2nd 8 Weeks					
NUR 212	Health System Concepts	3	0	6	5
					16
Fourth Semester					
ENG 112	Writing/Research in the Disc	3	0	0	3
Humanities/Fine Arts Elective **		3	0	0	3
NUR 213	Complex Health Concepts	4	3	15	10
					16
				Total Credit Hours	72

** See Appendix A for list of approved courses.
Nursing Lab and Clinical hours: 3 contact hours = 1 credit hour

November 2009

ASSOCIATE DEGREE NURSING
ADVANCED STANDING ALTERNATIVE FOR LICENSED PRACTICAL NURSES
Fall 2011

		Class	Lab	Clinical	Semester
Prerequisite/Transfer Credit					
BIO 168	Anatomy & Physiology I	3	3	0	4
BIO 169	Anatomy & Physiology II	3	3	0	4
PSY 150	General Psychology	3	0	0	3
NUR 117	Pharmacology	1	3	0	2
					13
Course Equivalency upon completion of NUR 214: Nsg Transition Concepts with C or better					
NUR 111	Intro to Health Concepts	4	6	6	8
NUR 112	Health-Illness Concepts	3	0	6	5
NUR 211	Health Care Concepts	3	0	6	5
					18

CRITERIA FOR ADVANCED STANDING

1. Meet admission criteria for Associate Degree Nursing Program.
2. Graduate of an approved practical nursing program and grades of "C" or better in all courses on the Practical Nursing curriculum.
3. Current unencumbered license to practice as a Licensed Practical Nurse in North Carolina which must remain unencumbered while enrolled in the nursing program. The Nursing Department will verify license.
4. The Nursing Department will validate content in all NUR courses.
5. Complete NUR 214 Nursing Transition Concepts Course with a grade of C (78%) or better. Admission to NUR 214 based on space available. See selection critieria.
6. Admission contingent on space available.

Summer Term					
ACA 111	College Student Success	1	0	0	1
PSY 241	Developmental Psychology	3	0	0	3
NUR 114	Holistic Health Concepts	3	0	6	5
					9
Third Semester					
BIO 175	General Microbiology	2	2	0	3
ENG 111	Expository Writing	3	0	0	3
1st 8 Weeks					
NUR 113	Family Health Concepts	3	0	6	5
2nd 8 Weeks					
NUR 212	Health System Concepts	3	0	6	5
					16
Fourth Semester					
ENG 112	Writing/Research in the Disc	3	0	0	3
Humanities/Fine Arts Elective **		3	0	0	3
NUR 213	Complex Health Concepts	4	3	15	10
					16
				Total Credit Hours	72

** See Appendix A for list of approved courses.

Nursing Lab and Clinical hours: 3 contact hours = 1 credit hour

Effective Fall, 1996; 8/97
Rev. 6/99' 1/01; 6/02; 6/03;
6/04; 7/06; 8/10

WAYNE COMMUNITY COLLEGE
PRACTICAL NURSE PROGRAM
Effective Fall 2016

		Class	Lab	Clinical	Semester
FIRST SEMESTER					
NUR 101	Practical Nursing I	7	6	6	11
BIO 163	Basic Anatomy and Physiology	4	2	0	5
ACA 111	College Student Success	1	0	0	1
					17
SECOND SEMESTER					
NUR 102	Practical Nursing II	7	0	9	10
PSY 150	General Psychology	3	0	0	3
					13
SUMMER TERM					
NUR 103	Practical Nursing III	6	0	9	9
ENG 111	Expository Writing	3	0	0	3
					12
			Total Hours		42

Nursing Lab and Clinical hours: 3 contact hours = 1 credit hour

Effective Fall, 97
8/97; 6/99; 6/06
8/16

IV. POLICIES

A. ATTENDANCE POLICY

The Nursing Department faculty believes that students demonstrate responsibility for and commitment to their educational goals through regular attendance. Attendance and promptness are expected professional behaviors of all nursing students.

1. Class and Laboratory Attendance
   Attendance is checked at the beginning of each class/lab. Students are expected to attend all classes and labs. Students should come to class on time and should not ask to leave early. If student is late, he/she will be counted absent unless he/she asks the instructor after class to have the absence changed to a tardy. When a student has been tardy three times, this will constitute one hour of absence. Students will be counseled for excessive absences. It is the student's responsibility to obtain assignments and materials missed when absent from class/lab.

2. Clinical Attendance
   Clinical experience is an integral part of the program. Students are expected to attend all clinical experiences. It is recognized that absence may be unavoidable (e.g. illness). Students who have been absent from clinical due to health problems may be required to produce a statement from his/her health care provider stating they may return to clinical. Students will not be excused for routine medical and dental appointments or any other personal business. Attendance will be checked at the beginning of each clinical experience. Students are expected to be in the clinical area on time. Each time a student is late, it will be noted in the roll book. When a student has been tardy three times, this will constitute an hour of absence. The number of clinical absences will be reflected on the student's clinical evaluation Progress Report and may influence references for employment. When a student is ill and unable to report to the clinical area, he/she must notify the assigned instructor and the clinical agency within 15 minutes of the time scheduled to report clinical that he/she will be absent.

3. Overall Attendance:
   The Nursing Department believes students demonstrate responsibility for and commitment to their educational goals through regular attendance; therefore, students must attend 88% of the total hours of any class to receive a passing grade. Instructors will excuse no absences under this policy. When absences in a nursing course exceed 12% of the total contact hours for any one course, the student will be given an automatic "W" if prior to the last day to drop a class or a "WF" if after the last day to drop a class and must withdraw from the nursing program. Students are expected to attend all classes, labs, and clinicals. It is the student's responsibility to obtain assignments and materials missed when absent from class/lab/clinical. You should come to class on time and should not ask to leave early. If you are late, you will be counted absent unless you ask your instructor after class to have the absence changed to a tardy. When a student has been tardy three (3) times, this will constitute one (1) hour of absence.

   In case of extenuating circumstances, exceptions can be made with approval of the Nursing Department Chair and recommendations of the nursing faculty. The College considers course attendance a student's responsibility. Absences do not relieve the student of meeting all the requirements of the course.

B. CODE OF CONDUCT AND ACADEMIC INTEGRITY

The Nursing Department reserves the right to maintain a safe and orderly educational environment for students and staff. Students are expected to conduct themselves in accordance with generally accepted standards of behavior and scholarship as dictated in the WCC Student Code of Conduct and Academic Integrity policies as well as the Code of Ethics for Nurses (Appendix C). See WCC Catalog and Student Handbook for further explanation of the Student Code of Conduct and Academic Integrity policies. Any student violating the WCC Code of Conduct and/or Academic Integrity (i.e., cheating, plagiarizing, or other dishonorable acts) in academic work is subject to disciplinary action up to and including dismissal from the program.

1. Audio/video recording classes/labs is not permitted.
2. Cell phones, pagers (beepers), and walkie-talkies cause unnecessary disruption to the learning/teaching process in the classroom, lab, clinical and library settings. All cell phones, pagers (beepers), and walkie-talkies must be in the off mode and out of sight during instructional times.
3. No social networking will be tolerated during instructional times. Students must adhere to individual clinical facility policies on electronic devices and internet usage during clinical rotations.

C. TRANSFER CREDIT

Requests for Transfer Credit for NUR courses are submitted to the Department Chair for Nursing. Course descriptions and credit hours of the applicant's coursework are compared with that of the WCC Curriculum. Credit is approved at the discretion of the Nursing Department Chair.

D. AUDITING POLICY

In addition to the WCC Auditing Policy (refer to current WCC General Catalog and Student Handbook 2016-2017), the Nursing Department designs individual "Audit Contracts" which identify the specific student responsibilities required to receive a grade of "Au."

E. TESTS AND FINAL EXAMS

1. Students are expected to take tests as scheduled. However, students who must be absent on the day of the scheduled test are required to notify the course coordinator prior to the test and make arrangements with the course coordinator for taking the test the first time the student returns to the college campus or the clinical site. The instructor has the option of giving the student an alternate test.

2. Students may use basic calculators approved by the nursing department during testing unless otherwise stated on the course syllabus.

3. The Scantron grade sheet constitutes the official test score. Only answers recorded on the Scantron sheet will be graded unless otherwise instructed. It is the student's responsibility to utilize the Scantron sheet correctly. Students must sign the honor code with each test.

4. All personal items will be removed from the testing area and placed along the wall in the back or side of the classroom with the exception of #2 pencils and approved basic calculator.

5. Students are allotted 75 minutes for unit tests and 110 minutes for final exams. Time begins at the start of the roll call for the testing period. All students will remain in the testing area until dismissed by the instructors.

6. After taking a test or exam, students are not to discuss the topics or questions with other nursing students. Doing so will result in dismissal from the program.

7. Post-test reviews are scheduled at the discretion of the course coordinator. No notes will be taken during the test reviews. Students will have 24 hours to seek clarification or rationale for any test question via e-mail or by appointment.

8. Test grades will be posted on-line at the discretion of the course instructor, within 7 days.

9. Final examinations are given during the designated exam period at the end of each semester.

10. Conferences are held with students who have a mid-term grade average below 78%. Conferences are also held at the end of each clinical rotation and other times as requested by the student or instructor to discuss the progress and grade of the student.

11. Collaborative testing will be utilized at the discretion of the course coordinator.

F. ATI TESTING POLICY

Assessment Technologies Inc. (ATI) Comprehensive Assessment and Review Program is utilized at Wayne Community College. A policy has been developed to facilitate the assessment of at-risk students and establish a review and remediation process to enhance their success in the program and on NCLEX after graduation. Policy can be found in Appendix G.

G. REFERENCE MATERIALS

Students receive formal instruction during the course ACA 111: College Student Success, in Library services, Academic Skills laboratory, and other resources available to facilitate their independent learning needs. During the program, references of a clinical nature with a copyright date that is more than five years old should not be used without the instructor's approval.

H. TEXTBOOKS

All students are expected to purchase textbooks as specified each semester. These textbooks are to be purchased prior to the second scheduled class meeting. Students should check with the instructor BEFORE purchasing used textbooks.

I. GRADING SCALE

CLASSROOM:

A = 93-100
B = 85-92
C = 78-84
D = 70-77
F = 0-69

ROUNDING POLICY: All test and exam grades, or mathematical percentages thereof, are held to the nearest tenth throughout the entire semester. The final course grade is calculated to the nearest whole number with 0.4 or less rounded down to the nearest whole number, and 0.5 or more rounded up to the nearest whole number.

CLINICAL: In all clinical courses, students are evaluated on their performance in the clinical area as either "Satisfactory," or "Unsatisfactory" on all the clinical competencies. One "Unsatisfactory" in clinical performance on the Final Clinical Evaluation Tool will constitute a grade of "F" for the course and the student will not be allowed to progress to the next semester. The descriptors "Satisfactory" and "Un-satisfactory are defined on each clinical evaluation tool. A student who demonstrates unsafe clinical behavior is subject to dismissal from the program.

APPROVED: REV8/11

J. PROGRESSION POLICIES

Students in the Nursing Programs are required to meet the college's academic standards. (Refer to current WCC General Catalog and Student Handbook). Additional standards are:

1. Maintain a grade of "C" or better in each course in the curriculum.
2. Achieve a "Satisfactory" evaluation on all clinical competencies.
3. Successfully complete all prerequisites to each nursing course before progressing to the next nursing course.
4. Successfully complete all course requirements as so designated in course syllabi
5. Meet clinical agency requirements for student placement.
6. Formal withdrawal from a course or from the College must be made through the Office of Admissions and Records as directed in the WCC Catalog and Student Handbook. Please be aware of the last day to drop a class without penalty. The last day to drop a class is noted in the college calendar for each semester. (See WCC Catalog and Student Handbook).
7. Students who fail to progress in the nursing programs, but remain in school at WCC must complete a "Change of Major" form in the Office of Admissions and Records.

REV8/11

K. GRADUATION REQUIREMENTS

In order to graduate from the Nursing Programs, the student must:

1. Meet WCC graduation requirements (See current WCC General Catalog and Student Handbook).
2. Earn a grade of "C" or better for each required course in the nursing curriculum.
3. Submit an Application for Graduation as directed in the WCC General Catalog and Student Handbook.

L. READMISSION POLICY

Because of the organization of the learning experiences in the Nursing Programs, the course sequence may be offered only one time per year; therefore, students requesting readmission to the nursing program will not be able to re-enter until the course is offered again. In addition to the Wayne Community College "Readmission Policy," the student is subject to the following:

1. Complete the admission process and submit an updated Student Medical History and Physical Exam Form.
2. Follow a prescribed program of knowledge and skill development based upon identified deficiencies as recommended by faculty and Department Chair.

3. Admission is a competitive process based on total point count and space available.
4. Readmission will be limited to a maximum of one time.

APPROVED: April, 1985; REV. 1991; 5/01

M. APPEALS/GRIEVANCE PROCEDURE

Student will refer to WCC Catalog and Student Handbook for grade appeal and grievance procedures.

REV: 5/4/15

N. CRIMINAL BACKGROUND AND DRUG SCREEN

Affiliating clinical agencies with which the College has contracted to provide clinical experiences for nursing students require students to submit to criminal background checks, and drug screening prior to participation in clinical experiences at the site. The results of the background check and drug screen may determine if a student is eligible to enter clinical agencies. Students are responsible for the cost of the background check and drug screen.

1. Applicants should be aware that a student must be able to enter and/or remain in all clinical agencies to progress within the program. If a clinical site denies a student placement in the facility, the student would be unable to complete the required clinical component of the course. The student will be withdrawn from all NUR courses and will not be allowed to progress in the program.
2. Currently the nursing program uses an on-line vendor for background checks, sex offender registry checks and drug screening. Information on how to complete the process is included with the letter of acceptance to the program.
3. The background check and drug screening must be completed by the specified date prior to the start of the semester in which the student enrolls. Failure to complete the process as specified will jeopardize enrollment in the nursing program.
4. Any criminal conviction that occurs subsequently to the criminal background check must be communicated in writing to the Director of Counseling Services within 5 days after such conviction has been entered by the court, notwithstanding the pendency of any appeal. A new background check will be requested at this time at the expense of the student.

Applicants to the nursing programs should be aware that if they have pled guilty to or been convicted of a felony or misdemeanor (other than a minor traffic violation), the NC Board of Nursing may restrict or deny licensure. The NC Board of Nursing requires criminal history checks for each person applying for licensure to practice nursing in the state of North Carolina.

REV: 8/11

O. CLINICAL INFORMATION

Nursing students gain experience at a number of clinical sites. Students may be assigned an evening clinical rotation or a clinical experience outside of Wayne County. Students must provide their own transportation for clinical experiences. Students are expected to follow the policies and procedures of each facility to which they are assigned.

1. Clinical rotations are distributed for each course. They are subject to change at the discretion of the faculty only.

2. Clinical ID Badges: Students are required to wear a picture ID during all clinical experiences as directed by clinical facility. The program will arrange for you to have the picture made. There is no charge for the initial badge; however, there will be a charge for replacements.
3. Students are expected to be prepared for clinical experiences. This preparation often includes data collection at the clinical site prior to the clinical experience. Students are expected to dress appropriately (see page 24 and 25) and wear name pin and picture ID if appropriate while in the clinical setting. In addition, students should identify him/her self to staff in the area and state your purpose for being on the unit.
4. Students are expected to incorporate prior learning into planning and implementing nursing care. A student who is not prepared to implement safe nursing care will be sent home or off the unit to complete adequate preparation for clinical assignment and will receive an unsatisfactory for the clinical assignment.
5. Students must obtain report from appropriate staff before beginning client care assignment and continue to collaborate with both the instructor and appropriate staff during the clinical experience.
6. As WCC nursing students, you will not act as witness for legal documents such as advance directives, surgical consents, blood product and vaccine consent.
7. When students are assigned to the hospital, they are not to visit other floors. Hospital visiting hours and routines are to be observed when visiting relatives or friends in the hospital.
8. Students are to park in the areas designated for student parking as directed by clinical agencies.
9. Students are allowed 30 minutes for lunch on clinical days based on length of clinical day.
10. Students are allowed 15 minutes for scheduled breaks provided their assigned clients have had their personal care and treatments completed.
11. Students may not leave their assigned areas in the clinical agency without permission from the instructor. In community settings, the appropriate staff must be advised of your whereabouts.
12. Students are not to make or receive phone calls while in the clinical area. In case of emergency, students should advise family to contact the Wayne Community College Nursing Department.
13. If a student becomes ill while in the clinical facility, she/he should report immediately to the instructor. Students will not be treated on the units. Should it become necessary to receive emergency room treatment or be admitted to the hospital, all costs involved are the responsibility of the student.
14. Students are not to photocopy, print, or remove copies of client's records.

Rev 5/15

P. DISMISSAL

Students who demonstrate behavior which conflicts with safety essential to nursing practice will be dismissed immediately. "Unsafe clinical practice is behavior that places the client or staff in either physical or emotional jeopardy. Physical jeopardy is the risk of causing physical harm. Emotional jeopardy means that the student creates an environment of anxiety or distress which puts the client or family at risk for emotional or psychological harm. Unsafe clinical practice is an occurrence or pattern of behavior involving unacceptable risk." Scanlan, Care, Gessler. (2001) Dealing with the Unsafe Student in Clinical, Nurse Educator. 26 (1), 23-27. In addition, unsafe practice includes deliberate or negligent acts or omissions regardless of whether actual injury to the client is established. Any student whose behavior causes concern as to alcohol or drug use will be required to submit to immediate drug screening at his/her own expense. Failure to comply or evidence of drug or alcohol in screening test will result in immediate dismissal from the nursing program. The student may use the Appeals Procedure for WCC. During the appeal process, the student may attend class, but may not attend the clinical portion of the nursing courses.

Approved 1985; REV. 1991, 2001, 2007, 2010

Q. BEHAVIORS SUBJECT TO DISCIPLINARY ACTION UP TO AND INCLUDING DISMISSAL FROM THE NURSING PROGRAM

1. Inappropriate or unprofessional behavior including but not limited to violations of the American Nurses Association Code of Ethics (See Appendix C for Code of Ethics) and behaviors and activities listed in North Carolina Administrative Code (21 NCAC 26.0217 Revocation, Suspension or Denial of License) governing the North Carolina Board of Nursing (ncbon.org).
2. Impaired thinking and clinical judgment that impacts on ability to make appropriate clinical decisions and provide safe care for assigned clients/clients. Any student whose behavior demonstrates an inability to think clearly and render safe care will be asked to leave the clinical area and meet with the Department Chair.
3. Unsafe clinical behaviors such as but not limited to:
   a. Lack of accountability.
   b. Falsification of client record.
   c. Medication or treatment errors that threaten client/client safety.
   d. Administering medications or performing procedures without appropriate supervision.
   e. Breach of confidentiality. To ensure confidentiality, students may not remove copies of the client/client record, either duplicated or downloaded from the nursing unit.
   f. Failure to comply with established policy or procedure at assigned clinical site.
   g. Repetitive errors in judgment.
   h. Poor or inconsistent skills in assessment and client care.
4. If a clinical site denies a student access to their facility, the student will not be able to progress in the nursing program.

R. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

Respect for the dignity and confidentiality of others is required. Students in the Nursing Programs will be given instruction on the Health Insurance Portability and Accountability Act guidelines during new student orientation. Students must comply with HIPAA guidelines.

S. DRESS CODE

Students are expected to use good judgment in the selection of clothes, styles, and appearance for the classroom. A WCC-issued name tag should be worn at all times in class, lab, and clinical as indicated. Chewing gum, smoking, eating, and drinking are not permitted in the classroom, lab, or clinical area except in designated areas. Students are to dress in a professional manner any time they are representing the school. The following guidelines shall govern appearance and behavior:

1. When collecting data for pre-clinical assignments, a clean, unwrinkled lab coat and name tags (agency identification) are to be worn over acceptable street clothes. Unaccepted apparel for pre-clinical assignments would include but may not be limited to the following:
   - Jeans
   - Shorts
   - Mini skirts
   - Bare midriff, strapless, halter, tube, backless, and tank tops
   - See-through or excessively tight clothing
   - Attire that exposes cleavage
   - Flip flops/open-toed shoes
2. The student uniform is to be worn for clinical experience as well as simulation experiences and as directed by faculty (See Appendix F for uniform requirements).

UNIFORM: Must be clean and neat at all times. The uniform skirt should be no shorter than the bottom of the knee. A slip must be worn with skirt uniforms. A plain white crew-neck tee shirt must be worn under the male uniform jacket

SHOES: Must be clean, solid white, closed-toe, closed-heel approved clinical shoe. (No holes or mesh)

HOSE: White without runs, support hose are recommended. Males and females may wear plain white trouser socks of mid-calf or higher height.

LAB COAT: The lab coat is to be worn for pre-clinical assignments and during other clinical experiences as designated. Students are not to wear lab coats during clinical. A plain white jacket may be worn during clinical (no sweaters are allowed).

NAMEPIN: See noted above in first paragraph.

COSMETICS: No perfume, after-shave, nail polish, or excessive makeup is permitted. Finger nails should be neatly trimmed and short enough to prevent scratching clients. No artificial/acrylic nails are permitted.

JEWELRY: Restricted to watch, wedding ring sets, and small stud, pierced earrings. (1 set only in the earlobe). No other visible body piercing is allowed.

HAIR: Hair styles must be professional in appearance and should not interfere with student duties. Hair must be clean and neat. Ponytails are permitted if length no longer than the top of the shirt collar. Head bands and hair ties must match color of hair. Ribbons, clips, or scrunches are not permitted. Mustaches and beards must be worn short and neat.

TATOOS: All must be covered

PERSONAL HYGIENE: Good personal hygiene must be maintained.

**** Violations of the Dress Code should be corrected at once. This may result in the student being dismissed from the clinical area to correct the situation. ****

T. PHYSICAL AND EMOTIONAL HEALTH

The Board of Nursing for Educational Units in Nursing require that there be evidence that the physical and emotional health of the student be such that he/she can be expected to provide safe nursing care to the public.

Each student must submit evidence of satisfactory physical and emotional health prior to admission to the nursing programs.

Nursing faculty will continue to evaluate the student's health and overall behavior throughout the program. If at any time a student's physical or emotional health is interfering with the student's academic achievement, the faculty can require the student to seek and submit appropriate

validation that his/her current physical and mental health is such that he/she has the ability to render safe nursing care. Based on evaluation of this data, a decision will be made as to whether or not the student will be allowed to continue in the program. A student who presents problems in physical or emotional health which have not responded to appropriate treatment within a reasonable time will be dismissed from the nursing program in order to protect his/her own health and that of a client to whom he/she is assigned.

Evaluation of Physical and Emotional Health:

Physical Health is defined as being free of disabling or contagious disease, being able to perform fine and gross motor skills, and being able to perform normal weight-bearing activities. Assessment of the physical health of the applicant is made through the use of a physical examination performed by the applicant's health care provider within 12 months prior to entering the nursing program. Observation of the student's physical health continues throughout the nursing program. Tests and immunizations required include: yearly tuberculin skin test, or if a positive converter, completion of the NC Department of Health and Human Services Record of Tuberculosis Screening form; Measles, Mumps, Rubella; Varicella (Chicken Pox); Tetanus booster within last 10 years; and other tests and immunizations as required by associated clinical agencies.

If a physical condition threatens to prevent or prevents satisfactory classroom or clinical performance, the individual in question is counseled and referred to an appropriate professional. The recommendation of the professional is utilized in advising the student in regard to continued enrollment in the program until the identified condition is satisfactorily corrected.

Emotional Health is defined as reacting appropriately to stressful situations, withstanding everyday environmental stresses with little difficulty, using healthy coping mechanisms, and understanding one's own ability to cope with stressful situations.

Assessment of emotional health of applicants is made through the use of physical examination, interviews, and letters from psychiatrists or therapists if intensive therapy is in progress or has occurred, and psychological evaluations, if necessary.

Throughout the curriculum, assessments of the emotional health of students are made by the use of observations of student behavior and by instructor-student conferences. When emotional conditions prevent satisfactory classroom/lab or clinical performance, recommendations are made on an individual basis, for consultation with the appropriate professional(s). The recommendations of the professional(s) are utilized in advising students with regard to continued enrollment in the nursing program. A person may be denied admission to or continued enrollment in the program until the identified condition is satisfactorily corrected.

U. TECHNICAL STANDARDS

All students in the Nursing Programs are expected to perform assigned skills, class assignments, and clinical activities at the same level, with or without accommodations. It is the responsibility of the applicant/student to read the technical standards carefully and to ask for clarification of any standard that is not understood.

Wayne Community College complies with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. Therefore, any disability affecting an applicant's ability to

comply with these technical standards must be evaluated by the Disability Services Counselor and the Nursing faculty for an applicant/student with a disability who is otherwise qualified. Demonstration of one or more technical standards may be required.

The following skills/abilities include those cognitive, physical, and behavioral standards required for successful completion of the curriculum.

WAYNE COMMUNITY COLLEGE
NURSING PROGRAMS TECHNICAL STANDARDS

Standard	**Examples of Necessary Behaviors (not all inclusive)**
Critical thinking ability sufficient for clinical judgment.	Identify cause and effect relationship in actual or simulated clinical situations; analyze data; develop or participate in the development of nursing care plans.
Interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds.	Establish rapport with clients/clients, families and colleagues.
Communication abilities sufficient for interaction with others in verbal and written form.	Collect assessment data; explain treatment procedures, initiate health teaching, document and interpret nursing actions and client/client and family responses.
Physical abilities sufficient to move from room to room and maneuver in small spaces.	Moves around in client/client's rooms, workspaces and treatment areas; administer cardio-pulmonary procedures.
Gross and fine motor abilities sufficient to provide safe and effective nursing care.	Move, calibrate, use equipment and supplies; lift, transfer, and position mobile and immobile clients/clients.
Auditory ability sufficient to assess and monitor health needs.	Hears monitor alarm, emergency signals, auscultatory sounds, cries for help
Visual ability sufficient for physical assessment, performance of nursing procedures and maintenance of environmental safety.	Observe client/client responses such as skin color, facial expression, specimen color.
Tactile ability sufficient for physical assessment and performance of nursing procedures.	Perform palpation, functions, of physical examination and/or those related therapeutic intervention, e.g. insertion of a catheter.
Emotional stability and mental alertness in performing nursing care.	Maintain a calm and efficient manner in high stress situations with clients/clients, families and colleagues.

V. INFECTIOUS/COMMUNICABLE DISEASE POLICY

PURPOSE:

To contribute to the delivery of safe care to the public by establishing measures to:

1. Protect clients from exposure to students with infectious diseases.
2. Protect students from exposure to clients with infectious diseases.

DEFINITION:

Infectious diseases, for the purposes of these guidelines, are defined as those diseases which are considered transmittable in a social environment. Such diseases include, but are not limited to: Diphtheria, Tetanus, Petussis, Hepatitis B, HIV Positive Serology, Acquired Immunodeficiency Syndrome (AIDS), Chickenpox, Red Measles (Rubeola), German Measles (Rubella), Mumps, Tuberculosis, and Herpes.

PROCEDURE:

This policy addresses procedures to be followed when a student has or is exposed to an infectious disease, has significant exposure to blood, body fluid, or secretions of a client, or is assigned to an HIV-positive client.

1. **PROCEDURES FOR SCREENING STUDENTS REGARDING THEIR EXPOSURE TO INFECTIOUS DISEASE**

a) **TUBERCULOSIS:** Screening with PPD Skin Test annually is required. Those who historically have a positive skin test must have documentation of one negative chest x-ray and must complete a questionnaire annually regarding current health status (DEHNR #3405 form may be obtained from the Health Department or the Nursing Department).

b) **RUBEOLA (RED MEASLES), MUMPS, AND RUBELLA (GERMAN MEASLES) – MMR:** Anyone born before January 1957 must have proof of immunization for rubella, rubeola and mumps according to NC State Policy or lab titer may be used to verify immunity. Individuals born in 1957 or later without **serologic evidence** of immunity to rubella, rubeola, and mumps need to have documentation of two (2) doses of MMR, 4 weeks apart.

c) **VARICELLA IMMUNITY:** Varicella immunity must be demonstrated by a positive varicella zoster titer or documentation of two (2) varicella vaccinations.

d) **TETANUS:** Booster up-to-date (required every 10 years) or Tdap if no tetanus booster within last ten years.

e) **INFLUENZA:** An **ANNUAL** influenza vaccine of the current year's strain is required by September 1st or as soon as the vaccine is available each academic year.

SECTION B: RECOMMENDED

1. **HEPATITIS B VACCINE:** This series of three (3) vaccines is not mandatory, but is strongly recommended for anyone at risk for exposure to blood and body fluids. If the vaccine is contraindicated or if the student declines to take the vaccine, she/he must sign a declination (waiver) form.

***THE STUDENT MUST MAKE SURE HE/SHE HAS THE PROPER DOCUMENTATION FROM THESE TESTS ATTACHED TO THE HEALTH/PHYSICAL FORM. THE STUDENT WILL NOT BE ALLOWED TO ENTER CLASSES IF HEALTH/IMMUNIZATION REQUIREMENTS ARE NOT MET.**

Any applicant who has an infectious disease will be evaluated by a physician in keeping with the standards, requirements, and recommendations of the Centers for Disease Control, NC Infection Control Laws (10A NCAC 41A.0201); facility policies, and in keeping with the provisions of this policy.

Once admitted to the program, enrollment decisions concerning the individual shall be based upon a consideration of the following factors:

a. the potential harm that the individual poses to other people
b. the ability of the individual to accomplish the objectives of the Nursing program, and
c. whether or not a reasonable accommodation can be made that will enable the individual to safely and efficiently accomplish the objectives and or tasks of the curriculum in question without significantly exposing the individual or other persons to the risk of infection.

Re-entering students must meet all requirements of this Health Policy.

2. **PROCEDURES FOR STUDENTS WHO HAVE INFECTIOUS DISEASE**

Any student who develops symptoms of an infectious disease must report this to a faculty member. The faculty member and Program Director will consult with infection control personnel in the clinical facility to determine the student's eligibility to participate in clinical experiences when it has been determined that a significant risk of transmission exists. Students are encouraged to report a positive HIV status to the Program Director as soon as this result is known. Confidentiality shall be maintained by a case number system.

According to 10A NCAC 41A.0206, students who have exudative lesions or weeping dermatitis shall refrain from handling client care equipment and devices used in performing invasive procedures and from all direct client care that involves the potential for contact of the client, equipment, or devices with the lesion or dermatitis until the condition resolves.

The evaluation of an applicant or currently enrolled student with a known bloodborne disease will include a physician's statement of the individual's health status as it relates to the individual's ability to adequately and safely meet the objectives of the curriculum.

A currently enrolled student with a known bloodborne disease will have an ongoing medical evaluation throughout the program, especially as it relates to Standard Precautions.

If it is determined that the individual student's performance in clinical areas does not reflect their ability to safely and adequately meet the objectives of the curriculum, the student shall be terminated from the program.

In each instance, a determination must be made as to an appropriate and limited confidential release of the student's positive bloodborne disease status to the student's instructors in order that the performance may be adequately reviewed and supervised on an ongoing basis. When a student is known to be HIV positive, the student's college-approved

physician and the Program Director will carefully evaluate whether or not a designated person at the clinical agency needs to be told of the student's positive bloodborne disease status. The student will be advised of, and must consent to, the release of information.

If the student with a negative TB skin test is exposed to a client with tuberculosis, a baseline PPD must be done immediately, unless a baseline has been done within the last ten weeks. If the student converts from negative to positive, he/she will be referred to his/her private physician or the health department (unless medically contraindicated). Students with prior positive PPD's who are exposed will be given a chest x-ray 10 weeks from the time of exposure.

3. **PROCEDURE TO FOLLOW WHEN A STUDENT HAS EXPOSURE TO BLOOD OR BODY FLUIDS.**

IMMEDIATELY TAKE THE FOLLOWING STEPS:

A. The victim of exposure should **immediately** take appropriate precautionary measures. For eye, mouth, and other mucous membrane exposures, flush/rinse the exposed are area thoroughly with running water for fifteen minutes. For needle sticks, other puncture wounds, or contamination of any body part with blood, scrub with soap and water for a minimum of five minutes.

B. **Report the incident** to the appropriate person immediately following first aid measure.
   1. Instructor
   2. Department Chair
   3. Division Chair
   4. Exposure Control Plan Coordinator
   5. If the exposure victim is an employee, notify the Human Resources Director
   6. If the exposure victim is a student, notify the Student Activities Coordinator
   7. If the exposure victim is a guest of the college, notify the Chief Financial Officer

C. **Source Individual:** If the source individual is known and present, counsel the individual regarding the incident and the need for medical consultation, follow-up and testing to determine if HBV and HIV infectivity is indicated. Testing of the source individual must be done at no cost to him/her. The college medical provider information will be provided by the appropriate Exposure Control Plan Coordinator. If the source of the individual is known but unavailable, contact him/her as soon as feasible to inform him/her of the incident and the need for counseling, follow-up, and testing. If legal consent for testing cannot be obtained, this should be established in the records. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented. If the source individual refuses to be tested or does not report for testing within a reasonable time, the source individual's physician should be contacted; or if the physician is not known, contact the County Health Department Director. When the source individual is already known to be infected with HBV or HIV, testing need not be repeated.

D. **Exposure Victim:** Counsel the individual exposed regarding the need for medical consultation, follow-up and testing. This is at no cost to the exposure

victim, and at a convenient time and location, preferably immediately after reporting the incident and completing appropriate reports.

E. Complete the **Incident Report Form** (Appendix E) Additional information should be obtained if the source of the individual is known. It is necessary to report the incident to the appropriate insurance company within forty-eight (48) hours. Employees may be required to complete Worker's Compensation forms, students will need to obtain the student accident insurance policy number and brochure, and all others may be required to file a claim against the college's liability policy.

F. The College will provide the medical provider(s) with documentation regarding the exposure, the route of exposure and circumstances under which the incident occurred, and the identity of the source individual, unless such identification is not feasible or is prohibited by state or local law. (Recorded on Incident Report Form, Appendix E) A description of the duties of the exposure victim if an employee will also be provided as well as copies of any relevant records required to be maintained by the employer, such as vaccination records. The college will also provide the OSHA regulations regarding blood-borne pathogens if the medical provider does not possess a copy of the current regulations.

G. **Baseline blood samples and blood tests should be conducted on both parties on the day of exposure.** If known, the source individual's blood will be tested by a physician for HBV and HIV within two (2) hours or as soon as feasible. If the source individual cannot be identified, the exposure victim's blood will be tested for HBV and HIV within two hours. Blood sample collection and testing is done with the individual's consent. A responsible College employee should request a College vehicle as soon as possible and should transport both parties to the College's medical provider for these tests. Ideally, this should be someone who can provide as much information as possible about the incident to the medical provider, stay with the exposure victim as long as possible if desires, and answer any insurance questions that may be requested. If the exposure victim consents to baseline blood collection, but does not consent to HIV serologic testing at the time of the incident, the sample shall be preserved for at least 90 days. If within 90 days the victim elects to have the baseline sample tested, such testing shall be done as soon as feasible.

H. The College will obtain a copy of the healthcare professional's written opinion regarding the incident and results of the testing. The College will provide the exposure victim a copy of the healthcare provider's written opinion within 15 days of the completion of the evaluation. The written opinion for Hepatitis B vaccination shall be limited to whether the vaccination is indicated and if the victim has received the vaccination. It shall note that the exposure victim has been informed of the results of the evaluation, that the exposure victim has been informed about any medical conditions resulting from the exposure to blood or other potentially infectious materials, which require further evaluation or treatment. All other findings or diagnoses shall remain confidential and shall not be included in the written opinion.

I. Each case will be evaluated individually and test results reviewed. Results of the source individual's tests shall be made available to the exposure victim and the exposure victim shall be informed of the applicable laws and regulations concerning disclosure of identity and infectious status of the source individual.

J. If tests are negative (especially for HIV) they should be repeated at six (6) weeks, twelve (12) weeks, and six (6) months after exposure. Consent for re-testing should be obtained on each occasion. Counseling on the process of the future follow-up and testing should be provided and follow-up testing appointments should be made at the time of the initial testing if possible.

K. Follow-up of the exposure victim will include counseling, medical evaluation of any acute febrile illness that occurs within twelve (12) weeks post-exposure, and use of safe and effective post-exposure measures according to recommendations for standard medical practices.

L. All parties involved will treat the results of the investigation of the exposure confidentially.

The Exposure Control Plan Coordinator maintains all documentation of the incident and medical follow-up.

References:

North Carolina Office of Administrative Hearings (2005). Control Measures- General (10A NCAC 41A .0201). Retrieved from http://ncrules.state.nc.us/ncac/title%2010a%20-%20health%20and%20human%20services/chapter%2041%20-%20epidemiology%20health/subchapter%20a/10a%20ncac%2041a%20.0201.html

North Carolina Office of Administrative Hearing (2010). Infection Prevention-Health Care Settings (10A NCAC 41A .0206). Retrieved from http://reports.oah.state.nc.us/ncac/title%2010a%20-%20health%20and%20human%20services/chapter%2041%20-%20epidemiology%20health/subchapter%20a/10a%20ncac%2041a%20.0206.pdf

Wayne Community College Occupational Safety and Health Plan, Chapter 4: Biohazard Exposure Control Plan, 5/28/13

W. STANDARD PRECAUTIONS

All students will utilize standard precautions as recommended by the Centers for Disease Control when providing care to all clients.

1. All clients, their blood and other body fluids, will be considered to be infectious at all times.
2. Whether or not the client is known to have an infectious disease, the faculty and student shall:
   A. Wear personal protective equipment when handling client's blood, body fluids, and/or items soiled with blood or other body fluids.
   B. Proper hand hygiene must be performed before and immediately after contact with clients, their blood, and other body fluids.
   C. Consider sharp items as being potentially infective and handle with extreme care to prevent accidental injury.
   D. Dispose of sharp items in puncture resistant containers immediately after use.
   E. Follow infection control procedures at all times.

X. MISCELLANEOUS

A. ADVISEMENT/COUNSELING

A nursing department instructor is assigned to each student as his/her advisor. These instructors assist students with registration, pre-registration, course changes, and any other academic needs. Each instructor posts a minimum of five hours per week at his/her respective offices during which time students may make appointments for conferences. Students who receive an early alert and/or midterm will be counseled by the course coordinator or designee.

Counselors in Student Services are available to all nursing students for personal guidance and help in all areas. Students are encouraged to seek help when needed. WCC staff is available in the Career Services Office of the Wayne Business and Industry Center to aid students in completing resumes, applications, and job referrals. Staff in the Financial Aid Office is available to assist students who are in need of financial assistance. Applications for loans, scholarships, and work-study assistance are available.

B. DISABILITY SUPPORT SERVICES

WCC is committed to seeing that students with disabilities have equal access to and participation in all programs of study. Disability support services are available for students who require academic accommodations. To determine eligibility, contact the Disability Coordinator in the Student Services offices.

C. ADVERSE WEATHER

When weather conditions are such that it is not advisable to open the college, announcements are made first via the WayneCC Alert system and on area radio, television stations, and other campus systems. Announcements are made in the early morning and students should not report for **EITHER CLASS OR CLINICAL** assignments if the college is closed because of inclement weather. The college opens at 8 a.m. Any delays will be timed from 8 a.m. For example, if the college is on a two-hour delay, the opening time will be 10 a.m. unless a specific opening time is reported in the announcement.

D. CHANGE OF ADDRESS

Students must notify the Office of Admissions and Records and the Nursing Department as soon as there is a change of address, phone number, or name.

E. PARKING

1. CAMPUS: WCC parking decals must be displayed according to school policy (See WCC Catalog and Student Handbook) to park on Campus. Park in designated student parking areas.

2. CLINICAL: Park in designated areas at all clinical sites.

APPENDIX A

OPTIONAL GENERAL EDUCATION COURSES FOR AAS PROGRAMS

The following courses may be used to meet the General Education course requirements in Humanities/Fine Arts.

For ADN Student to satisfy block 1 of the RN/BSN state articulation agreement take a Humanities/Fine Arts course indicated by a *.

Humanities/Fine Arts Electives

*ART 111	Art Appreciation
*ART 114	Art History Survey I
*ART 115	Art History Survey II
DRA 111	Theatre Appreciation
DRA 126	Storytelling
DRA 211	Theatre History I
ENG 231	American Literature I
ENG 232	American Literature II
ENG 241	British Literature I
ENG 242	British Literature II
ENG 261	World Literature I
ENG 262	World Literature II
ENG 273	African-American Literature
HUM 110	Technology and Society
*HUM 115	Critical Thinking
HUM 120	Cultural Studies
HUM 121	The Nature of America
HUM 130	Myth in Human Culture
HUM 211	Humanities I
*MUS 110	Music Appreciation
*MUS 112	Introduction to Jazz
*PHI 215	Philosophical Issues
*PHI 240	Introduction to Ethics
REL 110	World Religions
REL 211	Introduction to Old Testament
REL 212	Introduction to New Testament
REL 221	Religion in America

Appendix B:
UNC Colleges and NCCCS RN/BSN Articulate Agreement

Block 1 (23 course credits)

- Consists of certain prerequisite nursing courses that are (or will be) taken as a part of all North Carolina community college AAS nursing programs. The courses are:

Course Category	Transferable courses	Credits
English Composition	Select two: ENG 111, 112, 114	6 (3,3)
Human Anatomy and Physiology with lab	BIO 165&166 or 168 & 169	8 (4,4)
Humanities/Fine Arts	Select one from the following: ART 111, ART 114, ART 115, MUS 110, MUS 112, PHI 215, PHI 240, HUM 115	3
Psychology	PSY150, PSY 241	6 (3,3)

Block 2 (18-19 credits):

- Consists of additional university general education requirements that are not a part of an AAS degree but are required to earn a BSN.
- These general education requirements will be met by completing one listed course in each of the first four categories and two in the last.

Course Category	Transferable courses	Credits
English Literature	ENG 231,232	3
History	HIS 111, 112, 131, 132.	3
Fine Arts	Select one additional course not taken in Block 1 from the following: ART 114, ART 115, MUS 110, MUS 112	3
College Transfer Math	MAT 143 or MAT 171	3 or 4
Sociology	SOC 210 and one of the following: SOC 213, SOC 220, SOC 225, SOC 230, SOC 240	6(3,3)

Block 3 (17-18 credits):

- Consists of additional nursing or other requirements that are not a part of an AAS degree but are required to earn a BSN. These courses are:

Course Category	Transferable courses	Credits
Statistics	MAT 152	4
Microbiology with lab	BIO 175 or 275	3 or 4
Chemistry with lab	CHM 151 or CHM 130 and CHM 130A or CHM 131 and 131A	4
Social Science/ Elective: Select 2 from either category or one from each.	ECO 251, ECO 252, POL 120. Suggested electives include but are not limited to foreign language, speech, culture, and computer science. Electives must be selected from the Transfer Course List in the Comprehensive Articulation Agreement.	6 (3,3)

Note: Individual nursing programs may require a maximum of two courses or six credits to meet school specific degree requirements that are not a part of the RN to BSN AA. In no case will these additional requirements necessitate completing more than 128 credits in order to earn a BSN. Each UNC RN to BSN institution will develop, publish, and maintain on their website a RN to BSN degree plan that identifies specific degree requirements that are not part of the RN to BSN AA.

Block 4 (normally 30-34 credits but may vary depending on credit allocation in block 5):

- Consists of credit awarded by the constituent institutions' for nursing course (NUR) content taken as a part of the AAS degree program.
- These credits are awarded only after an RN student has successfully completed one or two initial nursing courses.

Block 5 (remaining credits, normally 30-34 but may vary depending on credit allocation in block 4):

- Consists of university-based courses that are taken as a part of the RN to BSN program.
- The number of awarded credits in blocks 1 through 5 must total between 120 and 128; the number of credits required to earn a BSN at the UNC constituent institutions' RN to BSN Programs.

APPENDIX C

CODE OF ETHICS FOR NURSES – PROVISIONS

AMERICAN NURSES ASSOCIATION CODE OF ETHICS FOR NURSES (Approved 2015)

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 in 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 integrity of the profession, and integrate principles of social justice into nursing and health policy.

Additional information can be found at www.ana.org

APPENDIX D

HEPATITIS B VACCINE DECLINATION (WAIVER)

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at high risk of acquiring Hepatitis B Virus (HBV) infection.

I have read the Hepatitis B vaccination information. I understand the protection the vaccine could offer and have been given the opportunity to be vaccinated at my expense. However, I am declining Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease.

If in the future I want to be vaccinated with Hepatitis B vaccine, I will arrange to obtain the vaccine from my health care provider and notify the Nursing Department Chair and supply promptly the appropriate documentation to include in my health record.

For the following reason, I decline vaccination at this time:

_____1. Personal reasons.

_____2. I have previously received the complete series of three Hepatitis B vaccination.

_____3. Antibody testing has revealed that I am immune to Hepatitis B.

_____4. For medical reasons, the Hepatitis B vaccine is contraindicated.

I will provide to Wayne Community College medical documentation concerning my prior vaccination, immunity, or medical contraindication to Hepatitis B vaccine.

_____ _____

(Student, Name) Date

_____ _____

Witness Date

Place in Student File

APPENDIX E

Wayne Community College Incident Report Form

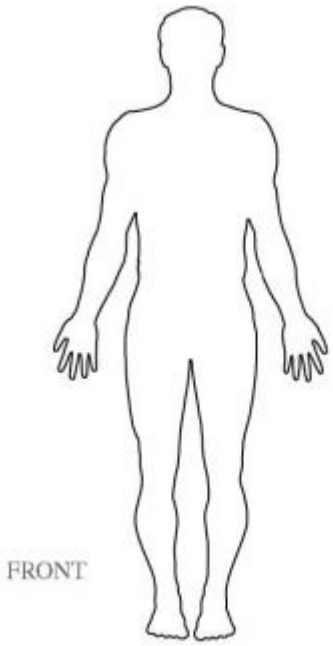
Complete all pages front and back.

1.	Date of Incident:	Time of Incident:	❍ A.M. ❍ P.M.

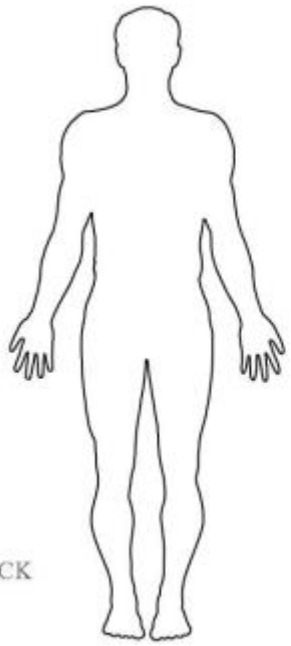
2.	Identification of Person Involved: ❍ Student	❍ Employee	❍ Guest	
Name:		Date of Birth:	Datatel #	
Street Address:		City:	State:	Zip:
Mailing Address:		City:	State:	Zip:
Home Phone:		Home e-mail:		
Cell Phone:		Work e-mail:		
Work Phone:		Other e-mail:		

3.	❍ Chest Pains	❍ Diabetes-related	❍ Seizures	❍ Exposure Reaction
Known Allergies:				
Other Complaints:				

Please mark the areas of injury on the illustrations below.

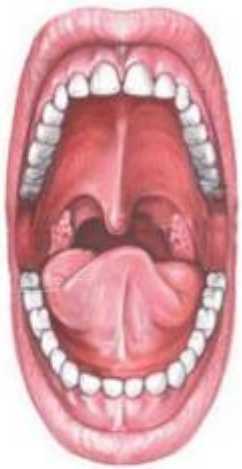


FRONT



BACK

TOP



4.	Area Injured:			
	How did the injury occur?			
	Describe all first aid administered:			
	Who administered first aid? List names.			
	Who was the instructor or supervisor?			
	Where did the incident occur? ❍ Lab ❍ Classroom ❍ Grounds ❍ Other _____			
	❍ On Campus	Location:	Building:	Room Number:
	❍ Off Campus	Location:	Building:	Room Number:
	Was the person transported for medical care? ❍ Yes ❍ No		Mode of Transportation:	
	Where was the person transported for medical care? ❍ Hospital ❍ Immedicate Care ❍ Health Dept.			
	The person injured declined: ❍ First Aid ❍ Medical Services ❍ Transportation ❍ Baseline Blood Sampling* ❍ Blood Testing* ❍ Follow-up Services			

**Note: If bio-hazard exposure occurs, testing is required to safeguard all parties. If a source individual refuses to be tested, a court order may be obtained by the Wayne County Health Department. If an exposure victim declines testing, they do so at their own risk. We strongly recommend baseline blood sampling, even if blood tests are not performed at the time of exposure. This baseline sample helps to determine if the source was infectious and if the exposure victim was indeed infected.*

All initial testing is done at WCC expense.

Signature of Injured Person or Representative: _____

Relation to Injured Person: _____ Date: _____

5.	Nature of Incident:	❍ Burn(s)	❍ Bite	❍ Bio-hazard Exposure*
		❍ Sharps	❍ Fracture	❍ Needle Stick
		❍ Laceration	❍ Abrasion	❍ Allergic Reaction
		❍ Chemical Exposure	❍ Other _____	

6.	Incident-related issues or complaints:			
	Known Allergies:			
	❍ Chest Pains	❍ Diabetes-related	❍ Seizures	❍ Exposure Reaction
Other Complaints:				
Provide Details:				

By signing this form, the injured person agrees to follow WCC Procedures unless they have specifically declined services as noted above.

7.	Signature of Injured Person:	Date:
	Signature of Representative:	Date:
	Signature of Source Person:	Date:
	Signature of Person Initiating Report:	Date:
	Signature of Supervisor or Department Chair:	Date:

Procedure Summary - What to do, who to notify, where to go after filling out this form:

8.	**Injured Person**	**Procedure**
	Employee	1. Notify all appropriate people on the "Emergency Levels" page of the Emergency Response Plan or red emergency cards located across campus. 2. All employee injuries will be filed against Worker's Compensation Insurance. If Worker's Comp claim is denied, the employee's personal health insurance plan may be charged, subject to deductibles and co-pays. Be sure Human Resources gets notified so they can begin this important paperwork. 3. Complete this Incident Report Form in its entirety. This form remains at WCC in the Human Resource Department. 4. Obtain a completed, appropriate healthcare provider authorization form that authorizes the medical provider to treat the injured person and directs the medical provider regarding billing process. Failure to have the appropriate authorization could result in lack of payment by WCC or its insurance carrier.
	Student	1. Notify all appropriate people on the "Emergency Levels" page of the Emergency Response Plan or red emergency cards located across campus. 2. All student injuries will be filed against the Student Accident Insurance Plan as long as the student is covered. The Plan brochure and policy number is available in the Student Activities office. Obtain a copy of the brochure to take to the medical provider. The college's medical provider will accept the Student Accident Insurance Plan. WCC cannot guarantee that any other medical provider will accept this insurance. If not, the student may need to pay for medical treatment and submit a claim to the Student Accident Insurance Plan after the fact. 3. Complete this Incident Report Form in its entirety. This form remains at WCC in the Student Activities Office. If the injury involves bio-hazard exposure, a copy of this form will be forwarded to Human Resources for bio-hazard record keeping. 4. Obtain a completed, appropriate healthcare provider authorization form that authorizes the medical provider to treat the injured person and directs the medical provider regarding billing process. Failure to have the appropriate authorization could result in lack of payment by WCC or its insurance carrier.

continued...

	Injured Person	Procedure
	Bio-hazard Exposure Source	1. Notify all appropriate people on the "Emergency Levels" page of the Emergency Response Plan or red emergency cards located across campus. 2. All baseline blood sampling and subsequent blood testing conducted with appropriate authorization will be billed directly to Wayne Community College. 3. Complete this Incident Report Form in its entirety. This form remains at WCC in the Human Resources Department bio-hazard record keeping files. The HR Department will approve payment requests made by the medical provider as received in the Business Office. 4. Obtain a completed, appropriate healthcare provider authorization form that authorizes the medical provider to test the bio-hazard exposure source person and directs the medical provider regarding billing process. Failure to have the appropriate authorization could result in lack of payment by WCC.
	Campus Guest	1. Notify all appropriate people on the "Emergency Levels" page of the Emergency Response Plan or red emergency cards located across campus. 2. All guest injuries will be filed against the College's liability Insurance Plan. The Plan details, claims forms and claims process are available in the Business Office. These claims will be handled on a reimbursement basis and will only cover out-of-pocket costs. In the event that a campus guest is involved in a bio-hazard exposure incident, the initial testing will be done by the College's medical provider at no cost to the guest and will be billed directly to WCC. 3. Complete this Incident Report Form in its entirety. This form remains at WCC in the Business Office with a copy in the Human Resources Department if related to a bio-hazard exposure. 4. Obtain a completed, appropriate healthcare provider authorization form that authorizes the medical provider to test the bio-hazard exposure source person's blood and directs the medical provider regarding billing process. Failure to have the appropriate authorization could result in lack of payment by WCC.

APPENDIX F

UNIFORM REQUIREMENTS

For student convenience, a vendor will be available for purchase of required uniforms. Uniform orders will be placed on a specified date. Each student is required to have 2 complete uniforms.

Female:	2 Designated white skirts or pants
	2 Designated Uniform tops
	1 Lab Coat
Men:	2 Designated Uniform tops and white pants
	1 Lab Coat

Additional Requirements:

- Stethoscope (Latex Free)
- Blood Pressure Cuff (Latex Free)
- Bandage scissors
- White closed-toe, closed heel approved clinical shoes
- White hose/trouser socks (support hose recommended)
- Watch with second hand
- Penlight

APPENDIX G

Wayne Community College
ATI Policy

I. **ADN**

The following policy describes the use of the Assessment Technologies Inc. (ATI) Comprehensive Assessment and Review Program as a supplemental retention tool to be utilized across the associate degree curriculum. The use of ATI includes:

ATI Plan – Getting Started (Steps to Success – Orientation)

ATI – Nurse Logic (Knowledge & Clinical Judgment, Nursing Concepts, Priority Setting Frameworks, Testing & Remediation)

ATI – Learning System RN (Tutorials: Practice [23] and Final [11] related to Content Area)

ATI – Content Mastery Series RN (Practice and Proctored assessments)

This policy has been developed to facilitate the assessment of at-risk-students and establish a review and remediation process to enhance their success in the program and on the NCLEX-RN after graduation.

1. Success Plan: Students must complete designated assessments in the ATI plan – Getting Started, Nurse Logic, Learning System RN, & Content Mastery Series RN (practice, tutorial, and proctored assessments) as assigned in each course across the ADN curriculum by the course coordinator/designee. The use of ATI throughout the ADN program will enhance student outcomes by providing opportunities to reinforce information learned in various courses. Practice and tutorial assessments will allow for practice and review with aligned course or previous course content.

   Scoring: Scoring depends upon the assessment. Practice and tutorial assessments provide a percentage grade based on the number of questions in the assessment. Proctored assessment scoring is based on achievement of levels of proficiency as indicated by ATI. Students are required to score at a Level 2 or higher level of proficiency. Students not scoring at a Level 2 or higher will be required to complete remediation of the content tested. The ATI Comprehensive Predictor provides a predictability score, indicating the probability of passing the NCLEX-RN in the form of a percentage.

   The expected level of student achievement is:

Tutorial/Practice Assessments	78% (Rationale OFF)
Proctored Assessments	Level 2
Comprehensive Predictor	90% Predictability Score

   Note: This excludes the proctored Critical Thinking Entrance and Exit assessment.

Rationale: While a set passing score has not been mandated for the Critical Thinking Entrance and Exit Examinations, students are required to take the examinations. Data from these examinations and the Self-Assessment Inventory provide information that can be used in counseling students for success in ADN program. This data also provides information regarding our Program Outcomes.

2. Required nursing courses and related RN ATI Content Mastery proctored assessments are listed below:

NUR 111	Critical Thinking Entrance
NUR 111	Fundamental of Nursing Practice
NUR 114	Mental Health
NUR 114	Nutrition
NUR 113	Pharmacology
NUR 113	Maternal-Newborn
NUR 212	Nursing Care of Children
NUR 212	Leadership
NUR 213	Medical-Surgical
NUR 213	Critical Thinking Exit
NUR 213	RN Comprehensive Predictor

Students must provide documentation of completion of assigned practice and/or tutorial assessments (non-proctored) prior to the ATI Content Mastery assessment (proctored assessment).

Rationale: The completion of assigned practice and/or tutorial assessments will assist in preparing students for the proctored assessment.

3. Progression: Achievement of specific scores is not required for progression in the ADN program; however, the completion of assigned assessments is required. Students who do not meet these requirements will not be allowed to progress in the nursing program.

4. Remediation:
Remediation is required for any proctored assessment with a score below a Level 2 (or below 90% predictability on the Comprehensive Predictor). Remediation consists of review of the "Individual Performance Profile". In addition, the student will be required to submit a report of an assigned practice assessment or custom practice assessment with a score of 90% within 1 week of proctored assessment to the appropriate instructor, or as directed.

Remediation for the ATI RN Comprehensive Predictor is required for students that do not achieve a 90% or greater predictability score. This consists of retaking the ATI RN Comprehensive Predictor at a later date as scheduled by the course coordinator or designee.

Rationale:
Allowing students to repeat the NCLEX-RN Comprehensive Predictor one additional time reflects our commitment to student success. Students will be cautioned that this score is valid only at the time the examination is taken and does not guarantee a 90% chance of passing NCLEX-RN at the time the licensure exam is taken. Students will be counseled to continue to review and take sample test questions prior to the exam.

II. **PN**

1. The PN Comprehensive Predictor will be administered in NUR 103.

   The proctored ATI PN Comprehensive Predictor Exam is a component of NUR 103: Practical Nursing III. Students must take the examination during this course and achieve a predictability score of 90% which indicates the probability of passing NCLEX-PN on the first attempt.

   Rationale:
   A score on the Comprehensive Predictor indicating a 90% probability of passing NCLEX-PN is indicative of a student's potential for success on NCLEX-PN. Students will be cautioned that this score is valid only at the time the examination is taken and does not guarantee a 90% chance of passing NCLEX-PN at the time the licensure exam is taken.

   Remediation: Students scoring less than 90% probability of passing the NCLEX-PN will be counseled to remediate the "Individual Performance Profile".

APPENDIX H

NURSING FACULTY INFORMATION

FACULTY	OFFICE/PHONE	E-MAIL ADDRESS
Patty Pfeiffer, EdD, MSN, MSA, RNC-OB,CNE	Holly 107, Ext. 6783	pfeiffer@waynecc.edu
Sue Beaman, MSN, CNE, RN	Pine 206, Ext. 6784	sbeaman@waynecc.edu
Marielle Blizzard, MSN, RN	Pine 209, Ext. 6789	mablizzard@waynecc..edu
Bonnie Gray, MSN, RN- BC,CNE	Pine 205, Ext. 6771	bsgray@waynecc.edu
Gabrielle Alexander, MSN, RN-C	Pine 211, Ext. 7061	gtalexander@waynecc.edu
Joanne McClave, MSN, RN	Pine 207, Ext. 6788	jmcclave@waynecc.edu
Missy Smiley, MSN, RN	Pine 208, Ext. 6790	mssmiley@waynecc.edu
Sherry Smith, MSN, RN	Pine 204, Ext. 6785	shsmith@waynecc.edu
Billy Tart, MSN, RN	Pine 210, Ext. 6787	botart@waynecc.edu
Virginia Raper, MSN, RN	Pine 203, Ext. 6791	vdraper@waynecc.edu

APPENDIX I

HIPAA

The Health Insurance Portability and Accountability Act (HIPAA) was passed in 1996 and went into effect April, 2003. The act includes several provisions. The one we are concerned with here is the Privacy Rule.

HIPAA's privacy rule is designed to ensure "that individuals' health information is properly protected while allowing the flow of health information needed" to provide good care. HIPAA concerns all personal patient/client information, referred to as Protected Health Information (PHI). Protected health information:

1. is any information that can identify and individual which is used or held by a health care provider
2. covers information stored on paper, in electronic records and oral communications.
3. protects patients/client from having their personal information disclosed to others without their consent.

What does this Act mean to you as nursing students?

Privacy in the context of medical care holds that no one should have access to private health care information without the client's consent and that clients should have access to records containing his or her own information. Confidentiality relates primarily to the protection of information. Protecting clients' privacy and maintaining the confidentiality of client information have always been core nursing values and are discussed in the American Nurses Association Code of Ethics. Nurses have a "duty of confidentiality", which means they must protect their clients' privacy. When nurses learn personal information about a client, they are ethically and legally required not to disclose it to any person or any agency other than those involved in the client's care or other designated person or agency.
Examples of breaches of confidentiality and privacy include, but are not limited to, the following:

1. Discussing client information in any public area where those who have no need to know the information can overhear. Find a private room or area when discussing treatments and administering procedures. Do not discuss clients in elevators, cafeteria, or hallways.
2. Improperly accessing, reviewing, and/or releasing client identifiable information:
   a. Name
   b. Address
   c. All Dates (DOB, Admission/Discharge Dates)
   d. Telephone numbers
   e. Fax numbers
   f. Electronic mail addresses
   g. Social Security Numbers
   h. Medical Record Numbers
   i. Health Plan Beneficiary Numbers
   j. Medical Status or diagnosis
3. Improperly accessing, reviewing, and/or releasing client medical information. Access to client information must be limited to what you as a student needs to know to care for assigned clients. It should be obvious that you don't need information about clients you are not caring for. The basic rule to follow when determining appropriate use of PHI is "what is the least amount of information I need in order to do my job?"

4. Discussing client information with people not entitled to the information. If asked about personal client information by a friend, another student or staff member who is not involved in that client's care, you must not share that information.
5. Pressing the client for information not necessary for care planning.
6. Leaving client medical information in a public area.
7. Discarding copies of client information in non-secured trash cans. Dispose of PHI in the proper bins or shred it.
8. Displaying information on a screen (handheld computers, etc.) that is viewed by unauthorized users.
9. Leaving a computer unattended in an accessible area with medical record information unsecured.
10. Failing to log off computer terminal.
11. Sharing or exposing password.
12. Preparing written or oral class assignments about clients without concealing their identity.
13. Interacting with the client's family in ways not authorized by the client.

Concerns about the Privacy Act

1. Concern about violating confidentiality during emergency situations by calling out information about a client when others might hear. The privacy act does not prohibit this.
2. Concerns have been raised about providers (doctors, nurses, other health care providers) sharing client information when asking for consults, or transferring care from one provider to another. Written permission is not required to do this.
3. Discussing clients with physicians, nurses, or family members by telephone is allowed (provided, of course, the client wants family to know of their condition).
4. Health care facilities that use sign-in sheets can continue to do so. Calling a client's name in the waiting room is also allowed.

Penalties for Non-Compliance.

Civil Money Penalties:
$100 per failure to comply with a Privacy Rule requirement.

Criminal Penalties:

1. $ 50,000 and up to one-year imprisonment for knowingly obtaining and disclosing individual HPI.
2. $100,000 and up to five years imprisonment if wrongful conduct involves false pretenses.
3. $250,000 and up to ten years imprisonment if the wrongful conduct involves the intent to sell, transfer, or use individual HPI for commercial advantage, personal gain, or malicious harm.

Scenario

Consider the example of a male client in the waiting room. He's the only male in the room. His health care provider is discussing his condition – medications he's on for the treatment of testicular cancer- with another provider. Everyone in the waiting room can hear the conversation.

What could be done differently to protect this client's privacy?

The caregivers should have tried to find a private room or area where details could not be overheard. Even when the client's name is not specifically used in conversation, remember that details about h is or her case or condition can be identifying factors in certain circumstances.

Reference:

1. United States Department of Health & Human Services (2012). *Office of civil rights.* Summary of the HIPAA Privacy Rule. Retrieved on May 8, 2012 from www.hhs.gov/ocr/privacy/hipaa/understanding/summary/- 25k

2. Anderson, F. (2007). Finding HIPAA in your soup, decoding the privacy rule. *107(2)*, p. 66-71. *American Journal of Nursing.*

7/07

Wayne Community College
Nursing Department

I, _____, have received oral and written instruction in the Health Insurance Portability and Accountability Act (see attached). I have read and agree to comply with the guidelines as set forth in the Health Insurance Portability and Accountability Act.

_____	_____
Nursing Department Chair	Student
_____	_____
Date	Date

APPENDIX J

I, _____, have been given a copy of the nursing program policies and information as set forth in the Nursing Student Manual, 2016-2018 for Wayne Community College. I have read these policies and information myself in their entirety and have had my questions answered. I understand and agree that, as a student in the nursing program of Wayne Community College, I am bound and responsible to comply with all these policies. I also understand and agree that I am subject to all requirements, provisions, and procedures contained in these policies.

_____ _____
Student Signature Dept. Chair Nursing Signature

_____ _____
DATE DATE

APPENDIX J

Declaration:
I have read and understand the technical standards required for the Nursing Programs. I hereby declare that I am able to meet the above listed essential technical standards as noted in the 2016-2018 Nursing Student Policy Manual.

_____
Name of Applicant (Print or type)

_____ _____
Signature of Applicant Date

_____ _____
Witness Date