



RIVERLAND
Community College



Nursing (RN Track) Dual Admission Student Handbook

2025-2026

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FORWARD

This handbook has been prepared for use by the students enrolled in the Nursing (RN Track) Dual Admission Program at Riverland Community College. It addresses the general information, policies, and standards necessary to maintain an effective and efficient nursing education program.

Nursing students must refer to the Riverland College Student Handbook for all information that is not specific to the nursing program. This handbook can be located at:

www.riverland.edu/studenthandbook/

The policies within this handbook are in effect for all students enrolled in the Nursing (RN Track) Dual Admission Nursing Program. Students are held responsible for being informed on all nursing policies, procedures and regulations as published in this handbook, and the Riverland College student handbook. Students are also held responsible for any new nursing related policies or changes in existing policies announced via verbal communication, D2L/BRIGHTSPACE, or your Riverland student e-mail account.

ACCREDITATION AND APPROVAL

HIGHER LEARNING COMMISSION

The Higher Learning Commission of the North Central Association of Colleges and Schools accredits Riverland Community College.



Higher Learning Commission
230 South LaSalle Street, Suite 7-500
Chicago, IL 60604
Phone: 800.621.7440 / 312.263.0456
www.hlcommission.org

ACCREDITATION COMMISSION FOR EDUCATION IN NURSING

The Accreditation Commission for Education in Nursing, Inc. (**ACEN**) accredits the Nursing (RN Track) Dual Admission Nursing Program and is approved by the Minnesota State Board of Nursing (MBON).



Accreditation Commission for Education in Nursing, Inc.
3390 Peachtree Road NE, Suite 1400
Atlanta, GA 30326
Phone: 404-975-5000
Fax: 404-975-5020
www.acenursing.org

RN LICENSURE IN OTHER STATES

The Associate Degree Nursing curriculum meets educational requirements for professional licensure or certification in the state of Minnesota. Riverland's Nursing Program has not made a determination of whether the ADN curriculum meets educational requirements for initial licensure in any other state.

<https://www.ncsbn.org/14730.htm>

MINNESOTA STATE & RIVERLAND'S MISSION & VISION STATEMENTS

MINNESOTA STATE COLLEGES AND UNIVERSITIES MISSION

The Minnesota State College and Universities system of distinct and collaborative institutions offers higher education that meets the personal and career goals of a wide range of individual learners, enhances the quality of life for all Minnesotans and sustains vibrant economies throughout the state.

Minnesota State Colleges and Universities provide high quality programs comprising:

- Technical education programs delivered principally by technical colleges, which prepare students for skilled occupations that, do not require a baccalaureate degree.
- Pre-baccalaureate programs delivered principally by community colleges, which offer lower division instruction in academic programs, occupational programs in which all credits earned will be accepted for transfer to a baccalaureate degree in the same field of study, and remedial studies.
- Baccalaureate programs delivered by state universities, which offer undergraduate instruction and degrees; and
- Graduate programs, delivered by state universities, include instruction through the master's degree, specialist certificates and degrees, and applied doctoral degrees.

MINNESOTA STATE COLLEGES AND UNIVERSITIES VISION

The Minnesota State Colleges and Universities will enable the people of Minnesota to succeed by providing the most accessible, highest value education in the nation.



MINNESOTA STATE

Continuing Education & Customized Training

RIVERLAND COMMUNITY COLLEGE VISION, MISSION, VALUES AND HEART

Vision: We will offer the best opportunity for every enrolled student to attain academic and career goals in an ever-changing world.

Mission: To transform lives through excellence in service, education, and career training.

Values: Cultivating student growth through service, collaboration, innovation, and respect.

Heart: We are dedicated to our employees, our students, and our region.



RIVERLAND'S NURSING (RN TRACK) DUAL ADMISSION PROGRAM MISSION, PURPOSE, & PHILOSOPHY

RN PROGRAM MISSION STATEMENT

The Riverland Nursing (RN Track) Dual Admission Program will prepare students with the knowledge, skills, and values necessary to provide safe, effective care within the scope of the nurse, within a supportive, empowering, intellectually challenging, and diverse environment.

RN PROGRAM VISION

The Riverland Nursing (RN Track) Dual Admission Program will foster excellence in learning through innovation, responsiveness, resourcefulness and collaboration.

RN PHILOSOPHY STATEMENT

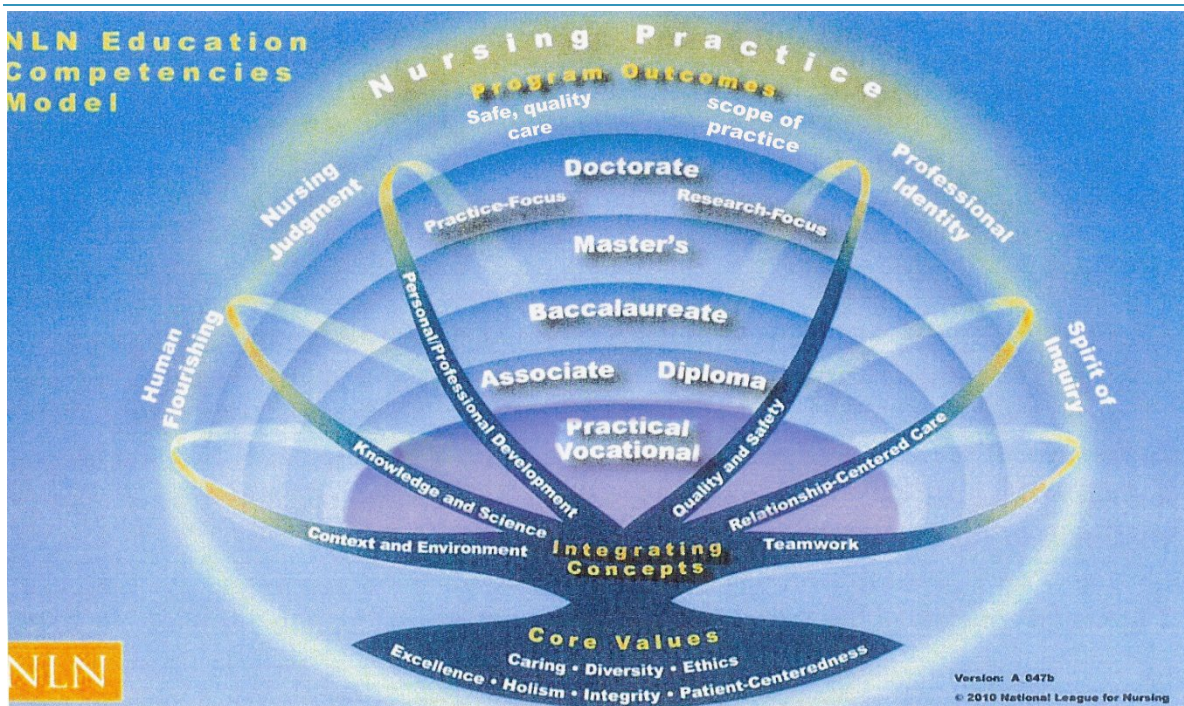
The philosophy of the Riverland Nursing (RN Track) Dual Admission Program is in congruence with the vision, mission, values and heart of Riverland Community College.

The nursing faculty are committed to life-long learning and providing an environment conducive to scholarship and service. The nursing faculty at Riverland views nursing as, “the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through diagnosis and treatment of human response, and advocacy in the care of individuals, families, groups, communities and populations”, as defined by the Nursing Social Policy Statement (ANA, 2010).

RURAL NURSING FOCUS

Riverland Community College and the Nursing Program's clinical partners are part of a rural community in Southeast Minnesota. "A rural health nurse is a generalist who practices professional nursing in communities with low populations that are geographically and often culturally isolated. Rural nurses have close ties to and interaction with the communities in which they practice and often practice with a great deal of autonomy and independence. A strong and varied experience base is crucial in rural nursing, as the population that the rural nurse must care for ranges from infants to the elderly. Therefore, a rural nurse must know about every stage of life. Experience with rural communities is a benefit to understand the cultural context within which the people live. For most rural nurses, traveling between isolated communities is part of their role. Rural nurses may operate from a clinic or small hospital, while others may base themselves out of a large health center" (Rural Nursing Organization at www.rno.org).

NURSING (RN TRACK) DUAL ADMISSION PROGRAM CONCEPTUAL FRAMEWORK



(National League for Nursing, 2010, p.8)

The Riverland Community Nursing (RN Track) Dual Admission Program's conceptual framework is based on the National League for Nursing (NLN) Educational Competencies Model and the components within it. The model consists of the following components (National League for Nursing, 2010):

1. **Core Values:** Seven core values, implicit in nursing's historic paradigm, are foundational for all nursing practice.
 - Caring
 - Diversity

- Ethics
- Excellence
- Holism
- Integrity
- Patient-centeredness

They are shown at the root of the model to indicate that each type of nursing program and each competency must be grounded in these fundamental values. (p. 8)

2. **Integrating Concepts:** Emerging from the seven core values are six integrating concepts:

- Context and environment
- Knowledge and science
- Personal and professional development
- Quality and safety
- Relationship-centered care
- Teamwork

These concepts are shown as bands around the program types illustrating their progressive and multidimensional development in students during their learning experiences. The critical feature of the bands is an enveloping feedback mechanism that acknowledges the ongoing advancement of nursing education, as new graduates return new learning, gleaned from multiple sources, to nursing practice through nursing education. In this way, nursing practice and nursing education remain perpetually relevant and accountable to the public and all those in need of nursing. (p. 8)

Rural Nursing shapes the integrating concepts in the following ways:

1. **Context and Environment:** includes local small hospital care, distances between health care agencies; core values shaped by the community; caring for your neighbors; and the changing health care scene in small communities.
2. **Knowledge and Science:** includes accidents, injuries, and illnesses typical of rural communities that nurse will likely see; and the medical care that can be provided.
3. **Personal & Professional Development:** includes nurses performing in a “generalist” role and being comfortable with all nursing skills.
4. **Quality & Safety:** includes how we communicate between rural and larger urban area health care agencies, including telehealth; and safe patient transportation and care between agencies.

5. **Relationship-centered Care:** includes caring for patients and families you know from the community; and working with a consistent health care team.
6. **Teamwork:** includes working with consistent small health care team but collaborating with larger urban areas agencies to provide quality patient care.

3. **Program Student Learning Outcomes:** The goals of nursing education for each type of nursing program can be summarized in four broad program outcomes. Nurses must use their skills and knowledge to enhance human flourishing for their patients, their communities, and themselves. They should show sound nursing judgment and should continually develop their professional identity. Finally, nurses must approach all issues and problems in a spirit of inquiry. All essential program-specific core nursing practice competencies and course outcomes are assumed within these four general aims. (p. 9) The student learning outcomes are as follows:

1. **Human Flourishing:** Advocate for patients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings, provide patient-centered care.
2. **Nursing Judgment:** Make judgments in practice, substantiated with evidence, which integrate nursing science in the provision of safe, quality care and promote the health of patients within a family and community context.
3. **Professional Identity:** Implement one's role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context.
4. **Spirit of Inquiry:** Examine the evidence that underlies clinical nursing practice to challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for patients, families, and communities.
5. **Safe Care:** Provide care that is safe, culturally, and developmentally appropriate, centered on building and sustaining positive, healthful relationships with individuals and families.
6. **Scope of Practice:** Practice within the legal and ethical scope of professional nurses, guided by accepted standards of practice (NLN, 2010).

**For clarity, the Nursing Program has added Student Learning Outcomes #5 and #6.

The program has condensed the twenty-two concepts listed above (core values, integrating concepts, and program outcomes into behaviors sets which for ease of use can be traced across the curriculum in course organization, content, and evaluation strategies.

THE QUALITY AND SAFETY EDUCATION FOR NURSES (QSEN)

This project is designed to meet the challenge of preparing future nurses who will have the Knowledge, Skills and Attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems

within which they work. Using the Institute of Medicine¹ competencies, QSEN faculty and a [National Advisory Board](#) have defined quality and safety competencies for nursing and proposed targets for the knowledge, skills, and attitudes to be developed in nursing pre-licensure programs for each competency. These competencies are included in the Student Learning Outcomes and include: **Patient-Centered Care, Teamwork and Collaboration, Evidence-Based Practice (EBP), Quality Improvement (QI), Safety, and Informatics** (<http://qsen.org/competencies>).

STUDENT LEARNING OUTCOMES

Student Learning Outcome	Definition	Integrating Concept	Core Values
Human Flourishing	Fostering human flourishing in their clients, team members and themselves	Patient/Relationship-Centered Care	<ul style="list-style-type: none"> • Caring • Patient Centeredness
Nursing Judgment	Showing increasing ability to make clinical nursing judgments	Context and Environment	<ul style="list-style-type: none"> • Diversity • Holism
Professional Identity	Developing a professional identity as a nurse	Personal and Professional Development	<ul style="list-style-type: none"> • Ethics
Spirit of Inquiry	Developing and fostering a spirit of inquiry	Knowledge and science, Informatics, Evidence-Based Practice (EBP)	<ul style="list-style-type: none"> • Excellence
Safe Care	Safe care that is culturally and developmentally appropriate centered on building and sustaining positive, healthful, relationships with families and individuals.	Quality Improvement and Safety	<ul style="list-style-type: none"> • Integrity
Scope of Practice	Practicing within the legal, ethical and professional scope of the nurse	Teamwork and Collaboration	<ul style="list-style-type: none"> • Communication

WHAT IS THE NURSING (RN TRACK) DUAL ADMISSION PROGRAM?

The Nursing (RN Track) Dual Admission Program is a partnership with Winona State University (WSU) and Mankato State University (MSU). The Nursing (RN Track) Dual Admission Program is intended for students pursuing an Associate's Degree in Nursing (ADN) intending to bridge it to their Bachelors of Science in Nursing (BSN) degree. This program allows students to complete credits towards a BSN while they are completing required pre-requisites and ADN nursing courses at Riverland Community College.

WHAT IF I AM ALREADY AN LPN?

If a student is a LPN – he or she will complete a Transitions course in the first nursing semester of the ADN Nursing program and get seven credits advanced standing in the Nursing Program.

PROGRAM TRACKS

Each program track can be found on our website at:

<https://www.riverland.edu/academics/programs/nursing-rn-track-dual-admission-program-starting-fall-2019-as/description/>

LEGAL LIMITATIONS FOR LICENSURE

Applicants should be aware that there are legal limitations both on the acquisition and retention of the RN license. Briefly, these limitations may prohibit licensure for the individual who has employed fraud or deceit in obtaining a license has been convicted of a felony or gross misdemeanor, is intemperate or addicted to drugs, is guilty of unethical practice in nursing, or is judged unfit or incompetent to practice nursing. The Minnesota Board of Nursing reviews applications for licensure to determine the individual's eligibility to be licensed.

NURSING (RN TRACK) DUAL ADMISSION PROGRAM POLICIES

STUDENT REPRESENTATIVES

Within the Department of Nursing there are a variety of committees and meetings which are designed to conduct the business of the nursing program. Student participation in committees and meeting is a constructive way for students to voice their concerns and to make suggestions for changes in the program. Student representatives are expected to attend designated departmental meetings and committees to communicate their concerns and suggestions.

STUDENT REPRESENTATIVE SELECTION

Student representatives (limit of 2 students) are elected by each class at the beginning of the semester. If the representative cannot, for whatever reasons, fulfill these duties they may resign, and a new representative will be elected.

RESPONSIBILITIES OF STUDENT REPRESENTATIVES

- Attending at least one Nursing Department Meeting per semester (or ask an alternate to attend).
- Attend at least 1 Team Teaching Meetings per semester (or ask an alternate to attend).
- Attend the fall and spring Advisory Committee meetings (or ask an alternate to attend).
- Bring student feedback to the meetings and bring feedback from the committee to their peers.
 - Student representatives are expected to share concerns as reflected by feedback obtained from the class and not simply offer their own opinions. Student representatives will email their concerns via the SBAR format to the Nursing Program Coordinator at least one week in advance.
- Work with faculty on the committee on various tasks.
- Assist in the work of the committee.

The following is a brief description of each committee in which students are invited to participate:

Department of Nursing Meetings

1. Nursing faculty have the authority and responsibility to:
 - a. Coordinate, develop, implement, and evaluate the nursing curriculum subject to the governance structures of the college faculty.
 - b. Develop and implement policies for the Nursing Program within the framework of the college policies.
 - c. Act on recommendations from standing and ad-hoc committees.
 - d. Revise by-laws as needed.
2. To review and revise the:
 - a. Philosophy, mission, program outcomes and student learning outcomes of the nursing program
 - b. Conceptual framework
 - c. Systematic Program Evaluation Plan
3. To approve all program documents including:
 - a. Graduate competencies
 - b. Program definitions
 - c. Program policies for students
4. To approve student policies for:
 - a. Admission
 - b. Advanced placement
 - c. Graduation
 - d. Progression
 - e. Readmission

5. To act on the recommendations from:
 - a. Standing committees
 - b. Teaching faculty
 - c. Ad hoc committees
6. To provide a forum for:
 - a. Sharing information
 - b. Discussion of current issues and trends in education and nursing
 - c. Curriculum coordination
7. To facilitate the development of effective working relationships
8. Provide forum for student representatives to voice class concerns and issues related to nursing course and program. Student Representatives will be included in a minimum of 1 meeting per semester.

Teaching Teams

1. Goal: Coordinate, develop, implement, and evaluate the nursing courses.
2. Objectives: Serve as the teaching team for the selected course(s).
 - Develop calendar and teaching assignments for each course.
 - Maintain the policies set by full faculty.
 - Evaluate student performance and make recommendations for student progress/graduation.
 - Provide forum for student representatives to voice class concerns and issues related to nursing course and program. Student Representatives will be included in a minimum of 2 meetings per semester.
 - Respond to student issues in a timely manner.
 - Review course curriculum each semester and make recommendations for revisions to curriculum committee and full faculty, as necessary.

Nursing Department Advisory Committee

Advise stakeholders on the design, development, implementation, evaluation, maintenance, and revision of the Associate Degree, Practical Nursing, and NA programs.

COMMUNICATION POLICY

PROGRAM COMMUNICATION

- Students must establish and maintain a Riverland Community College email account.
 - This account is free of charge and is active as long as a student remains enrolled at Riverland Community College.

- The College assigned student email account is the official means of communication with all students enrolled in the nursing programs at Riverland Community College.
- No other email account may be used as means of **official** communication with administration, nursing faculty, or staff.
 - This policy is enforced to protect faculty, staff, and student privacy.
- If an email is received from an account other than that assigned by the College, the faculty and staff have been advised to request the information from the student's Riverland email account.
- Students are expected to read their email on a daily basis to ensure that they are aware of information circulated by the Nursing Program.
- Changes in policy and procedures, reminders of important dates, and Riverland emails will not be sent to another email address due to problems with attachments.
- In addition to the college email, students are also expected to check the course's D2L/BRIGHTSPACE site daily for updates and communication from faculty.

COURSE LEVEL COMMUNICATION

D2L/BRIGHTSPACE Homepage-The primary place to get news and updates about the course will be the D2L/BRIGHTSPACE home page for the specific course. Please check the home page daily. Entries on this page will be timed and dated by the faculty posting the information. Faculty do have the ability to see which students have read the specific posting(s).

Discussion Board- There is also a Discussion Board available for common questions. There are separate discussions for student questions, for faculty, and for student-to-student communication. The Discussion Board platform is a good place to ask questions that others in the class may also be wondering about. This is a reliable and acceptable format for faculty to discuss and correspond with students about course matters.

Campus E-mail- All students are expected to check their Riverland e-mail frequently. Faculty often use e-mail to communicate with individual students. College-wide news and announcements will also be sent to students through their email account.

Phone- Students may also use their phones to communicate with the faculty and with other students. All faculty office phone numbers are listed in the course syllabus. Faculty's personal cell phone number may be shared with students at the discretion of the faculty. If a faculty gives out their personal cell phone number, the expectation is to be respectful and only utilize it during business hours.

Social Media- The usage of faculty's personal social media page is not to be utilized for any lines of communication. If you are already associated with a faculty member's social media prior to the start of the program, you can stay associated with them. If you are not already associated with a faculty member's social media prior to the program, faculty members will not accept your request.

Communication Response Time- Nursing faculty will make every reasonable effort to respond to student messages via email, discussion board, phone, or in-person in a timely manner—within 24 hours during the work week and within 72 hours if the message is sent over the weekend or holiday. Please understand that if faculty members are on break—they may not respond during the time they are on break. When faculty are at their clinical sites with students, they may not be responding during those hours. Please be patient and allow for a reasonable response time.

****Please be aware that all communication will be monitored for appropriate professional communication standards. Lack of appropriate etiquette toward others, faculty, or fellow students will not be tolerated. ****

CLASSROOM POLICY

Courtesy is essential in the learning environment. To be fair to everyone in the class, nursing faculty have developed some basic rules of courtesy in the classroom. Failure to adhere to these policies may lead to dismissal from the classroom setting.

- Cell phones and pagers must be turned off or put in the silent/vibrate mode. If there is an urgent situation, the student should notify the faculty prior to class of the need to keep the cell phone available. Unless the faculty is aware ahead of time, the use of smart watches to communicate in class is prohibited.
- While classroom discussion during nursing theory is vital to the learning process, individual conversations are disrespectful and disruptive. Faculty members reserve the right to ask students to leave the classroom if their private discussions become disruptive.
- Arrive on time and be prepared to participate. Faculty reserve the right to lock the door at the start of class, it will be unlocked during breaks.
- Stay throughout the entire class.
- No children are allowed during class time for nursing students.
- Audio and video recorders are permitted only with the permission of the faculty.
- Students may not distribute class notes, handouts, audio recordings or other faculty-provided materials for commercial purposes, through the Internet, or for any reason other than personal study among classmates enrolled in the course.
- Classrooms are not, by law, public places so any recordings of what occurs in a classroom are not publicly distributable without the written permission of those who are recognizable from the recording. Posting recordings or distribution of classroom presentations in any format, including on D2L/BRIGHTSPACE, without the express permission of the faculty, is a violation of copyright law and is therefore a violation of our College Student Code of Conduct and could result in disciplinary action.

ASSIGNMENT POLICY

To promote responsibility, time management, and academic integrity, the following policy will apply to all assignments submitted by nursing students:

1. Due Dates:

All assignments must be submitted by the specified due date and time. Due dates will be clearly stated in the course syllabus or assignment instructions.

2. Late Submissions:

Assignments submitted after the due date will incur a penalty of **10% of the total assignment grade**

per calendar day late. For example, an assignment worth 100 points submitted one day late will have a maximum possible score of 90 points.

3. **Maximum Penalty:**

Assignments submitted more than **five (5) calendar days** after the due date will **not be accepted** and will receive a grade of **zero (0)** unless prior arrangements have been made or extenuating circumstances apply.

4. **Extensions:**

Students may request an extension prior to the due date. Approval is at the discretion of the instructor and may require supporting documentation (e.g., medical certificate, personal emergency).

5. **Exceptional Circumstances:**

In cases of serious illness, family emergency, or other significant events, students are encouraged to contact the instructor as soon as possible. Documentation may be required, and accommodations will be considered on a case-by-case basis.

LATENESS POLICY FOR ACADEMIC WORK

- The student who requests more than one date extension for assignments, exams, quizzes, or other grade components in any one academic semester is in noncompliance with the nursing policies.

EXAM POLICY

Exam Day

- Students are expected to take all exams at the scheduled time. Students are expected to show up 5 minutes early to start of the exam.

Late Arrivals

- Students arriving late may be seated at the discretion of the proctor and may not receive extended time.
- If the student is allowed to take the exam, the student can be deducted 1 point per 1 minute that the student is late.

Missed Exams

Excused Absences:

- A missed exam may be excused only in cases of documented emergencies, serious illness, or university-approved activities.
- Documentation must be provided within 48 hours of the missed exam.
- A make-up exam scheduled within one week of the original date.
- Make-up exams may differ in format and content from the original.

Unexcused Absences:

- Failure to attend an exam without valid documentation or prior approval will result in a grade of zero for that exam.
- No make-up opportunities will be provided for unexcused absences.

Extensions

- The student who requests more than one date extension for written assignments, exams, quizzes, or other grade components in any one academic semester is in noncompliance with the nursing policies.

Exam Timing

First Semester

- Students will receive 1.5x extended time for all timed exams.
- Example: A 50-minute exam will allow 75 minutes for completion.

Second Semester

- Students will receive 1.25x extended time for all timed exams.
- Example: A 50-minute exam will allow 63 minutes for completion.

Third and Fourth Semesters

- Exams will follow a 1-minute-per-question time rule.
- Example: A 50-question exam will allow 50 minutes for completion.

Assigned Seating

- Students will be assigned specific seats for each examination by the instructor or examination coordinator.

Randomization

- Seating may be randomized for each exam to reduce the risk of academic dishonesty.
- Students must sit in their assigned seats. Unauthorized seat changes may result in disciplinary action.

Spacing and Room Setup

- At least one seat of space will be maintained between students whenever possible.

Special Accommodations

- Students requiring accommodations must notify faculty and submit documentation through the Disability Support Services office in advance.
- Alternative seating or locations may be provided as needed.

Exam Room Conduct

- Silence must be maintained at all times.
- Any student suspected of cheating will be reported to the Academic Integrity Committee and may face disciplinary actions per the nursing program's code of conduct.
- Use restroom prior to starting exam; during the exam students may only leave for emergencies.
- Bags, books, and unauthorized materials must be left at the front or outside of the exam room.

- All electronic devices must be turned off and stored away.
- Use of electronic devices during the exam is strictly prohibited unless explicitly authorized.
- Receive scratch paper from the proctor and turn in prior to leaving the testing room.
- Do not ask the proctor questions pertaining to content or argue rationale during the exam.

Exam Review Policy

- Faculty will set up all exams to allow the students the opportunity to review the questions they missed on the exam through lockdown browser. Students will not be allowed to write any information during the time they are reviewing their test or take screenshots of the exam.
- Students who score below 80% on an exam may request to review their exam within two weeks of the exam date. Students will be permitted to review the questions that were incorrect only, with the instructor. A comprehensive review of the entire exam will not be offered.

Student Request for Reconsideration Process:

Students who wish to challenge an exam question after reviewing their results may submit a formal request for reconsideration. This process must be followed exactly:

Submission Requirements

- The request must be submitted **via email** to the course faculty **within 24 hours** of the exam review.
- Only **three (3) questions maximum** may be submitted for reconsideration per exam.

Email Must Include:

- **Identification of the Question:**
 - Clearly state the number or identifying information of the question you are challenging.
- **Student's Rationale:**
 - Explain why you selected the original answer.
 - Provide your reasoning based on your understanding of the course content.
- **Supporting Documentation:**
 - Include references from class notes, ATI materials, or required course textbooks.
 - Clearly cite the source, page number, and relevant passage.
 - You may attach a screenshot or picture of lecture slides or textbook content if applicable.

Review Process

- The faculty will evaluate:
 - The question and correct answer.
 - The rationale and supporting documentation provided.
- A decision will be communicated to the student after the review.

ATI TESTING POLICY

1. Practice Assessments

- Complete **Practice Test A** by the posted due date to earn **5 points**
- Complete **Practice Test B** by the posted due date to earn **5 points**
- Both practice tests must be completed **on time and before the proctored exam** to be eligible to test

2. Proctored ATI Initial Exam – Scoring

- **Level 2 or 3:** 10 points
- **Level 1:** 5 points
- **Below Level 1:** 0 points

3. Remediation Requirements (After Initial Attempt – All Students)

- After the initial proctored exam attempt, **all students** must complete **handwritten remediation**, even if they earned a Level 2 or 3. Use the **“Topics to Review”** provided by ATI:
- Individual Performance Profile with topics to review should be printed and staples to the front of remediation submission.
- Write out the **topic heading** for each area listed on the student feedback report.
- List **three bullet points** about what you learned for each topic.
- Bullet points should come from the ATI textbook or review materials.
- **Example:**
 - **Accident/Error/Injury Prevention: Client Safety Priority Action**
 - ♣ Falls risk increases after surgery
 - ♣ Assess for orthostatic hypotension
 - ♣ Keep call light and essentials within reach

4. Remediation Deadlines & Points

- Students will earn **5 points** for submitting well-done, handwritten remediation by the due date
- Students who are retaking the exam must submit remediation **before** the retake. If remediation is not submitted, the student will **not be allowed to test** and will receive a **zero**
- Students who earned Level 2 or 3 must submit remediation by the same deadline to receive the 5 points in the gradebook.

5. Proctored Exam Retake

- Students who do **not** achieve a Level 2 must remediate and take the **scheduled retake**
- The retake is offered **once only** on a scheduled date—**no alternate date** will be provided
- Missing the retake will result in a **zero** on the proctored assessment.

Retake Scoring:

- **Level 2 or 3:** 10 points
- **Level 1:** 5 points
- **Below Level 1:** 0 points

6. Students Who Miss the Initial Proctored Exam

- Students who miss the initial exam will **not** be offered a make-up
- These students will take the **scheduled retake** as their **first and only attempt**

- Regardless of score, they must submit **handwritten remediation within 48 hours** for their score to be recorded in the gradebook

7. Optional Retake (For Mastery Only)

- Any student may retake an ATI exam for additional practice
- This optional retake **does not affect the grade** but is encouraged for continued learning

Comprehensive Predictor Exam (Final Semester Only)

The Comprehensive Predictor follows the **same expectations** for practice tests, scoring, remediation, and retake procedures outlined above.

Total Possible Points: 50

- **Practice Test A:** 12 points
- **Practice Test B:** 13 points
- **Proctored Exam Scoring:**
 - **70% or higher:** 25 points
 - **62.7%–69.9%:** 13 points
 - **Below 62.7%:** 0 points
- Students scoring **below 70%** must complete handwritten remediation and take the **scheduled retake**
- Students scoring **70% or higher** may retake the exam for mastery, but their original score will remain unchanged.

DOSAGE CALCULATION POLICY

Students are required to demonstrate competency in medication dosage calculations to ensure safe medication administration practices.

To pass the dosage calculation requirement, students must achieve a minimum score of **90%** on the dosage calculation exam.

Students will have no more than **three (3) attempts** to pass. Failure to achieve a passing score within three attempts will result in **course failure**.

Remediation must be completed between attempts. It is the student's responsibility to seek and complete remediation prior to re-testing. Faculty may provide guidance or resources; however, the initiative to improve lies with the student.

Dosage calculation attempt outcomes will be as follows:

- **First Attempt**
 - Student passes → **Score earned is recorded in the grade book.**
 - Student fails → **Score earned is recorded in the grade book and remains regardless of subsequent attempts**
 - Remediation is required before the second attempt

- Failure to remediate → Student forfeits second attempt and proceeds directly to the third attempt
- **Second Attempt**
 - Student passes → **Grade book score does not change**
 - Student fails → No additional score recorded
 - Remediation is required before the third attempt
 - Failure to remediate → Student forfeits third attempt, resulting in course failure
- **Third Attempt**
 - Student passes → **Grade book score does not change**
 - Student fails → **0%** entered in the grade book and results in **course failure**

All exam dates will be scheduled and communicated in advance. Students must complete all attempts within the designated course timeframe.

Students are encouraged to treat each attempt seriously and use remediation to ensure readiness. Passing the dosage calculation requirement is mandatory for successful course completion.

SKILLS CHECK OFF POLICY

Students are required to demonstrate competency in multiple nursing skills throughout the semester. To pass a skill check off, students must complete at least **80% of the required steps correctly** and **not miss any designated critical steps**. Critical steps will be clearly marked on each checklist. Missing a critical step will result in **automatic failure** of that attempt, regardless of overall performance.

Students will have no more than three attempts to pass each skill. Upon failing a skill, remediation must be completed before the next attempt. It is the student's responsibility to coordinate remediation with faculty. Failure to complete remediation will result in forfeiture of the next attempt.

Skill attempt outcomes will be as follows:

- **First Attempt**
 - Student passes → **100%** entered in the grade book
 - Student fails → **No score recorded**
 - Remediation is required before the second attempt
 - Failure to remediate → student forfeits second attempt and proceeds directly to the third attempt
- **Second Attempt**
 - Student passes → **75%** entered in the grade book
 - Student fails → **No score recorded**
 - Remediation is required before the third attempt
 - Failure to remediate → student forfeits third attempt, resulting in course failure
- **Third Attempt**
 - Student passes → **50%** entered in the grade book
 - Student fails → **0%** entered in the grade book and results in **course failure**

Students are encouraged to take each attempt seriously and use remediation time to ensure readiness. Passing all skill check offs is required to successfully complete the course.

GRADING POLICY FOR PROGRAM

Students must achieve 80% or more in theory and in clinical and have an overall grade of 80% to obtain a passing grade. The end of course grade will be entered using the final calculated score of theory and clinical combined. If less than 80% is achieved in theory **and/or** clinical, the final calculated grade will be entered using the lowest score.

The final grade percentage for the course will be rounded **only** at the end of the semester and will follow rounding rules (0.5% and higher will be rounded up and 0.4% and lower will be rounded down). Subcategories will not be rounded. (Theory will remain as stated and clinical will remain as stated).

If the end of course grade is not passing before the rounding occurs, then the final course grade will not be rounded up or down. Example, if the end of course grade is a 79.5%, rounding rules would not apply. If the end of course grade is 84.5%, then it would be rounded up to an 85%.

92-100%= A

85-91= B

80-84= C

74-79= D

Less than 74 percent= F

All students must pass all classroom proctored exams, assignments, and quizzes with an 80% average.

Final grades at the end of the semester will be rounded to the nearest whole number.

ACADEMIC INTEGRITY AND TECHNOLOGY

Professional Responsibility

As future nurses, students are held to the highest standards of honesty, professionalism, and ethical behavior. Integrity in academic work reflects directly on clinical competence and ultimately on patient safety. Nursing students are responsible not only for their own conduct but also for contributing to an ethical and accountable learning environment. As outlined in the [ANA Code of Ethics for Nurses](#), honesty in learning is a moral and legal obligation.

Academic Conduct

Students must complete all coursework with integrity. Cheating, plagiarism, falsification of information, and dishonest collaboration are strictly prohibited and considered violations of nursing program policy. Examples include, but are not limited to:

- Cheating on exams or quizzes
- Copying another student's work, in whole or part
- Falsifying attendance or clinical documentation
- Failure to report clinical errors
- Sharing test content with students who have not yet tested
- Submitting work generated by AI tools when not permitted

Violations may result in a zero on the assignment, failure of the course, or dismissal from the nursing program. Any student dismissed for academic dishonesty will not be eligible for readmission.

ARTIFICIAL INTELLIGENCE (AI) & SMART TECHNOLOGY

To protect academic integrity, patient privacy, and ethical standards in healthcare education, the following rules apply:

1. Use of AI in Coursework

- Use of AI tools (e.g., ChatGPT, Grammarly, AI-based tutoring platforms) is prohibited on graded assignments, reflections, or clinical documentation unless explicitly authorized by the instructor.
- If permitted, students must disclose AI use and follow any citation or formatting requirements provided.
- Undisclosed or unauthorized use of AI tools is considered academic misconduct and may result in disciplinary action, including dismissal.

2. Smart Devices in Clinical & Simulation Settings

- Smart stethoscopes, smart glasses, or AI-enhanced devices may only be used in lab or clinical with prior written faculty approval.
- Devices may not record, store, or transmit patient information without explicit written consent from the facility and the patient. Unauthorized recording is a HIPAA violation and grounds for immediate dismissal.
- All use must uphold confidentiality, professionalism, and patient safety standards.

3. AI & Smart Devices During Exams

- All AI-enabled devices, including smart watches, phones, and glasses, are strictly prohibited in testing environments.
- Possession or use of such devices during an exam may result in a zero and/or further disciplinary action.

4. Faculty Rights

- Faculty reserve the right to inspect or restrict the use of smart devices at any time during class, lab, clinical, or simulation if their use appears inappropriate or violates policy.

SOCIAL MEDIA

Riverland is committed to the protection of patients, student, health care organization, and employee privacy and confidentiality. The National Council of State Boards of Nursing (NCSBN) has issued a stance regarding the use of social media within health care. The mission and philosophy of the Riverland Nursing Program is in congruence with this stance. Adherence to outlined expectations for behavior is mandatory.

White Paper: A Nurse's Guide to the Use of Social Media can be found at the following website and should be reviewed prior to signing the "Student Accountability Verification Form".

https://www.ncsbn.org/Social_Media.pdf

Social media are defined as mechanisms for communication designed to be disseminated through social interaction, created using highly accessible and scalable publishing techniques. Social media is commonly thought of as a group of Internet-based applications that are built on the ideological and technological foundations of the web that allows the creation and exchange of user-generated content.

Examples include, but are not limited to: LinkedIn, Wikipedia, Second Life, Flickr, blogs, podcasts, RSS feeds, Allnurses.com, Twitter, Facebook, YouTube, MySpace, tiktok, ChatGPT, reddit, etc.

The nursing program at Riverland recognizes that social media sites are important communication tools for our community. While this policy may need to be modified as new technologies and social networking tools emerge, the spirit of the policy will remain the protection of sensitive and confidential information.

Communication from the nursing program, including correspondence between faculty/staff and students will be conducted within college-sanctioned communication channels:

- Myriverland.edu email
- Desire 2 Learn (D2L/BRIGHTSPACE) for academic and clinical coursework.

Be aware of your association with Riverland in online social networks. If you identify yourself as a student, ensure your profile and related content is consistent with how you wish to present yourself to colleagues, clients, and potential employers. Identify your views as your own. When posting your point of view, you should neither claim nor imply you are speaking on Riverland's behalf, unless you are authorized to do so in writing. As a student within the nursing program at Riverland, you may encounter confidential information within the College or within the patient care environment during clinical practicum. Consistent with the HIPAA training, it is your responsibility to remember the following when using social media:

- Never use the patient's name (any identifier including initials, hospital name, etc.) or personal health information in any way.
- Do not disclose confidential information about the nursing program, the College, its employees, or its students.
- Never state individual opinions as being endorsed by Riverland College or the nursing program.

- Do not use information or conduct activities that may violate Riverland’s academic policies, or may violate local, state, or federal laws and regulations.
- No student shall videotape faculty or fellow students for personal or social media use without the express written permission of the faculty or fellow student. At NO time shall patients/clients be videotaped or photographed without written permission of the patient/client and the facility.

Riverland does not tolerate content from students that is defamatory, harassing, libelous or inhospitable to a reasonable academic environment. Social media may be used to investigate student behavior.

CLINICAL EXPECTATIONS

STUDENTS RESPONSIBILITIES FOR CLINICAL

1. Attend scheduled clinical sessions on or off campus.
2. **No cell phones are permitted at clinical.** If a student at clinical has an emergency and he or she needs a cell phone, students are to report to their immediate faculty prior to the start of clinical to discuss the situation. Violation of this policy may result in dismissal from the program. If a student is caught with a cell phone, that student will be sent home; a follow-up appointment will be made with the faculty and nursing administrator before returning to clinical. If a student is sent home, that student must make up that clinical day per the availability of the faculty.
3. If a student misses clinical due to illness, a doctor’s note will be required to return.
4. Arrive on time.
5. Adhere to the guidelines for attire in the clinical area. Refer to the guideline on attire in this Student Handbook.
6. Notify the faculty or clinical facility if he/she is ill, late, or unable to come for pre-clinical or clinical experience **prior to** start of the scheduled experience. A no call no show may result in dismissal from the program.
 - If the student is late, per faculty discretion, the student will be deducted 1 point per 1 minute that the student is late.
7. If the absence was approved, arrange with clinical faculty within the time designated in the syllabus and/or student handbook to make up missed clinical experience.
8. It is the student responsibility to learn content that was missed.

NOTE: Students are expected to practice within the guidelines and boundaries of the profession as stated in the Minnesota Statute and Minnesota Board of Nursing Rules. The only title that may be used when acting in the capacity of a student in the Nursing Program, and the format for the signature on clinical documents is:

Your Name, NS, Riverland Community College.

Students who have other titles (e.g., LPN, RT, MD, PhD, JD) may not use these titles in the capacity of a Riverland Nursing Program student and/or under the auspices of the Riverland Nursing Program.

DRESS CODE FOR CLINICAL/LAB EXPERIENCE

The nurse, as a health professional, has certain responsibilities regarding their uniform. The rationale for the uniform involves cleanliness, the need for freedom of movement and safety, identification of personnel, and professional appearance.

Whenever students are instructed to be in uniform, the complete student nurse uniform is required. In general, the uniform is required for clinical, lab, and simulation. A student who does not adhere to this code may be asked to leave the clinical facility by the clinical faculty or the nurse in charge. This will result in an unexcused absence from the clinical.

If the facility has a dress code that is different, students are responsible to adhere to the facility's code. Students shall *not* go to a health care facility posing as a student unless assigned to that facility and then only in accordance with the nursing program dress code requirements.

The Uniform Policy:

- Clean, wrinkle-free scrub top with bottoms (uniforms to be purchased through an approved scrub store). Orientation to uniforms will be provided at nursing program orientation. Pants must be full length and skirts knee length or longer. No material may touch the ground.
- No smoking of any kind in clinical uniforms.
- An approved color long-sleeved shirt is allowed under the scrub top. Sleeves must be able to stay up on arms for hand hygiene and when required for infection control purposes. An approved sweater or cover-up may be worn; it must have the Riverland insignia and be worn only in the clinical area.
- LAB ONLY- No hoodies or coats are allowed in the lab. If students want to dress for warmth, we encourage wearing a long sleeve shirt under the uniform. Students can also wear professional zip-up jackets.
- No stocking hats/hats allowed.
- All students must wear socks. If students wear a skirt uniform, the stockings must be full length. No anklets or bare legs are permitted. The hose and socks must be white.
- White, black, gray athletic style shoes with a non-skid surface and flat heels that are only to be worn for clinical only. Shoes must be clean and in good repair. No open back shoes permitted.
- Head coverings, if worn, will be a solid color, free of fringe or other adornments and tucked under scrub top.

- Riverland Nursing Photo ID will be worn on the front of the uniform above the waist in both the clinical and laboratory settings.
- Clothing should be loose enough to permit freedom of movement and of sufficient length to maintain modesty.
- Undergarments must not be visible.
- Hair must be a “natural hair color,” clean and styled in a professional, well-groomed manner which does not obstruct the visual field or allow contamination of clean or sterile areas. Hair must be short, tied back with an appropriate clip or band or in a bun. Male students must shave or have neatly groomed facial hair. Hair accessories must be approved by clinical faculty.
- Fingernails should be short in length (less than ¼ inch). If polish is worn, it should be clear or light colored. If nail polish is used, it must be intact and free of any chipping or cracking. No artificial nails are permitted.
- Maintain personal hygiene which eliminates body odor including foul breath. Refrain from using fragrances, perfume, or cologne, etc.
- The only jewelry allowed during the clinical experience is a wedding ring and conservative post or loop earrings, one per ear and of ½” diameter or less. If you have a piercing for a medical reason, please get that approved by faculty prior to starting clinical experiences.
- Items which endorse a particular belief system or political candidate are inappropriate while in uniform.
- Visible **alternate** body piercing is not permitted (i.e., nose, eyebrow, lip, eyelid, tongue).
- Visible tattoos or body art are not permitted in the clinical area and must be covered if deemed offensive or vulgar in nature. All tattoos and body art may need to be covered based on clinical partner policies.
- Make-up in moderation is allowed.
- Nursing uniforms can only be worn on campus or in clinical.
- All Nursing students will adhere to any dress code requirements in effect in a particular clinical agency.
- Jeans are not allowed in any clinical setting.
- Students must have a black pen, sweep-second hand watch, and stethoscope with them at clinical.
- Gum chewing is prohibited in the clinical area, during simulation, or skills labs.

UNSAFE CLINICAL PERFORMANCE

Unsafe clinical performance, failure to meet clinical, simulation, lab objectives, or inadequate preparation for clinical, simulation, or lab experiences could lead to dismissal from the program or could result in course failure irrespective of accumulated theory and lab points.

- Any skill requiring sterile technique and/or preparation and administration of medications or solutions via the IV, IM, Subcut, or gastric tube route without faculty supervision is considered unsafe clinical behavior.
- Other examples of unsafe clinical behaviors include, inaccurate or inadequate monitoring and reporting client status changes, unsafe psychosocial behavior, and any behaviors that jeopardize client physical and/or psychological safety.

- Failure from a nursing course for unsafe clinical performance may be grounds for not receiving faculty recommendation for readmission to the nursing program.

CLINICAL POLICIES OVERVIEW AND EXPECTATIONS

Riverland uses several hospitals, long-term care facilities, clinics, public health agencies, school health services, and other community-based organizations for providing optimum clinical experiences. The schools establish clinical-use contracts with each facility that stipulate mutual expectations for both services and regulations. It is the intent of Riverland Community College that all nursing students represent themselves in professional attire and performance, while in an affiliated clinical facility.

Faculty, to meet course objectives, may utilize a variety of experiences. Such experiences may include, but not be limited to, group and independent learning projects and alternative time schedules. Students will be expected to provide nursing care for clients of all genders and with a variety of medical and psychosocial conditions. Students should be prepared to accommodate alternative learning assignments and evening experiences if deemed necessary by the faculty. Appropriate notification will be given.

Students are permitted in the health care setting only during clinical hours and specified preparation hours. Friends or family members, including children, are not allowed at the pre-clinical preparation or any time during the clinical experience.

CLINICAL PROGRAM REQUIREMENTS

Legal contracts are arranged with clinical and practicum sites. These contracts specify information that the college must collect from students. Students must submit the required documentation prior to the deadline. Failure to submit this information prior to the deadline will result in the students' inability to attend clinical courses. All requirements must remain valid for the duration of all clinical and practicum experiences. It is the student's responsibility to maintain the records.

LAB/CLINICAL/SIMULATION POLICIES

STUDENT RESPONSIBILITIES FOR LAB AND SIMULATION

The Allied Health Simulation Lab provides an environment for students to actively learn critical thinking and clinical skill development. Faculty, manikins, and other equipment are available to learn in a supportive, hands-on environment.

To enhance active learning, Riverland has established the following policies for all to follow:

- No eating or drinking in the lab.
- If there are videos, equipment, and/or manikins broken or damaged, report this immediately to the Lab staff.

- No children or visitors are allowed in the lab. Only students registered for a nursing class can participate in the Lab.
- No lab items leave the lab unless checked out.
- Before leaving the lab/simulation class and lab, all students must return the environment to its original state. All students must:
 - Return chairs under tables or stack near walls.
 - Pick up area and discard all waste material in trash container.
 - All used items returned to their container.
 - Wipe up all spills on the floor.
 - Straighten all bed linen.
 - Return all lab supplies in correct containers. All needles and sharps are placed in red sharp container boxes.
 - Turn off all lights in simulated “patient rooms.”
 - Replace manikins neatly where they were found.
- Confidentiality must be maintained after leaving the lab/simulation area. Sensitive information may **not** be shared during this experience.
- All rules for handling bio-hazardous waste must be followed according to our policies. When in doubt, consult faculty or lab supervisor.
- According to **MN Statutes SECTION 151.37**, students cannot have in possession any solutions or medication. Therefore, any of these products will directly be monitored by a faculty or Nurse Administrator and will be kept secure in the lab. They will be distributed only when using them under direct supervision in a course or in training in the lab. Riverland will also distribute any needles and syringes purchased by students only when under direct supervision in the lab.
- Safety is always first in the lab.
- Standard precautions are to be utilized in all nursing simulation and lab procedures.
- All individuals utilizing sharps in the laboratories are responsible for disposal in the designated sharps containers provided in the labs.
- All unused needles and syringes must be returned to their designated locked location and may not be left unattended in the laboratory.
- Faculty and students may not remove syringes, needles, and medications from the laboratory for practice at any time.
- Any sharps, such as needles of any kind, breakable bottles or any solutions cannot leave the lab at any time. Any item that must remain sterile and is meant to be used only on manikins in the lab cannot leave the lab.
- Any of these specified, unused supplies at the end of a course or the program will become property of the Allied Health Simulation Lab.
 - Needles/syringes of any kind

- Solution bags or vials
- Foley/Catheter
- If a student wants to practice in the lab using any of the items mentioned above, please contact the lab supervisor to set up a time.

STUDENT RESPONSIBILITIES FOR SIMULATION

Students may be required to attend simulation events outside of their regular lecture, lab, or clinical day.

- The uniform must follow the clinical/lab requirements as posted above.
- A Riverland picture ID badge will be worn on the front of the uniform above the waist in the laboratory setting.
- Hands must be washed before and after working with simulation mannequins and equipment.
- Students must maintain confidentiality in simulation experiences.
- Student jackets, bags, etc., can be brought into the Allied Health Simulation Lab with faculty approval.

ATTENDANCE FOR LAB, CLINICAL, AND SIMULATION

- Attendance at all laboratories, simulations, and clinical experiences is mandatory and is essential to ensure course outcomes are met.
- Students are not allowed to move from one section of lab to another without prior permission from faculty. Students are required to stay in the section that they registered for during the entire semester.
- Students must be present for the entire scheduled laboratory, simulation, or clinical time. If a student is unable to attend or is going to be late, the faculty (or clinical area) must be notified before the scheduled laboratory, simulation, or clinical start time.
 - If the student is late, per faculty discretion, the student will be deducted 1 point per 1 minute that the student is late.
- In the event of an approved absence, as outlined above, arrangements to make up the experience must be initiated by the student prior to the next scheduled experience.
- All missed time in the laboratory, simulation, or clinical, needs to be made up as arranged with the clinical faculty. It is the student's responsibility to learn content that was missed.
- Unexcused absence from **one or more** of the following per semester: laboratory, simulation, and clinical could result in possible failure of the course and/or termination from the program.
- Lateness to clinical, lack of preparation or non-adherence to school or institutional policies could result in possible failure of the course and/or termination from the program.
 - Faculty reserves the right to request proof of illness or family emergency for any reported absence.

COVID-19 UPDATES

Riverland Community College will be following recommendations and guidance from the Centers for Disease Control and Prevention (CDC) and the Minnesota Department of Health (MDH) to help control the spread of COVID-19. Clinical agencies may have additional requirements. Students are expected to adhere to the guidelines set forth by Riverland

and the clinical agencies. The guidelines may change at any time so students should monitor their Riverland email and stay connected with the nursing faculty.

CLINICAL PLACEMENT AND DOCUMENTS:

1. Some clinical agencies will not allow students to care for COVID-19 patients or potential COVID -19 patients.
2. There may be restrictions in other areas/units as to whether students will be allowed.
3. Students may be required to provide COVID-19 test results.

CLINICAL PLACEMENT:

Some clinical agencies are requiring students to get vaccinated against COVID-19. If a student refuses the COVID-19 vaccination, there is no guarantee that an alternative clinical site will be available that does not require the COVID-19 vaccination. If a clinical site allows for COVID-19 vaccination exemptions, it will be up to the clinical site to make the determination for exemptions from the vaccination.

The nursing programs continue to follow the requirements of the Minnesota Board of Nursing (MBON), which allows for a percentage of the clinical time to be spent in simulation.

Furthermore, the MBON requires that:

- Curriculum needs to be consistent across the program to provide equal learning opportunities for all students.
- When a nursing student declines a required clinical vaccination, there is not a basis for that student to request an accommodation for a disability.
- If the clinical agency allows, plans need to be in place to provide *reasonable accommodations* for those who cannot be vaccinated based on protected status (i.e., medical or religious grounds).
- As noted in the **Board of Nursing Laws & Rules 6301.2340, Subp. 3.A. (4)(a)**: Nursing education program ensures students of practical and professional programs have learning opportunities with faculty oversight to acquire and demonstrate competence in clinical settings with patients across the life span and with patients throughout the whole wellness, acute, and chronic illness continuum- simulation in this case is not an equivalent experience.

COVID-19 VACCINATION:

Prior to each semester, whether a student is enrolled in a clinical course or not, the nursing programs will require proof of COVID-19 vaccination in Clinician Nexus. If exemptions are allowed by the clinical site, those exemption documents will need to be on file for each student with the nursing program.

CLINICAL PLACEMENT DETERMINATION:

Multiple factors will be used to determine who can and will be placed at a site. These include:

1. Completeness of the student's core required documents for clinical placement.
2. The student's willingness to accept clinical placement. Students have the right to decline clinical placement while understanding that alternate sites may not be available during any given semester.
3. Requirements of the various sites

PROGRAM PROMOTION AND PROGRESSION

PREREQUISITES

Nursing students must successfully complete the prerequisite courses for each required nursing course to progress in the nursing sequence. (See program plan for prerequisites).

SUCCESSFUL ACADEMIC PROGRESS

1. Students must enroll in and successfully complete (with a minimum letter grade of C) all nursing and general education courses in the sequence identified on the Curriculum Plan to progress in the program. Required general education courses can be taken earlier, but not later, than the identified semester.
2. Progression in the nursing program requires a grade of C or better in all required courses in the curriculum plan.
3. A C- is not considered a passing grade.
4. A Minimum GPA of 2.00 is required for graduation from Riverland's Associate Degree program. However, if your plans are to continue to Winona State University, students will have to satisfy the requirements of the WSU Nursing program.
5. Nursing courses that combine theory, clinical and/or lab require that all portions must be passed at a minimum of 80% to pass the course. In the event a student does not pass theory or the clinical or lab portion of a course, the final letter grade for the course entered will be reflective of the theory or clinical or lab portion not passed.
6. Allowance for rounding of grades at the end of the course. The only time rounding will occur, using standard rounding rules, is to determine the final course grade. At the end of the semester the final course grade will be rounded to the nearest whole number. There will be no rounding of grades during the semester.
7. The Nursing Program reserves the right to deny admission/readmission based on academic failure and/or code of conduct violations.
8. The medication dosage exam must be passed at a level of 90% within a maximum of three attempts in any given course.

UNSUCCESSFUL ACADEMIC PROGRESS

Unsuccessful Course Completion

1. If a student fails to obtain a minimum of a C grade in one or more nursing courses in a semester, the student will be allowed one opportunity to repeat the course(s) on a space available basis per college/university nursing program policy.
 - a. A withdrawal constitutes an attempt for a course and will count as one failure to complete the course.
 - b. The student must repeat the course(s) within one year (2 semesters, not including summer) of the last day of the semester not successfully completed.

2. If a student fails one or more nursing courses in semester 1 all NURS courses in semester 1 must be repeated upon return. For a student to be eligible for return, the student must reapply by submitting a new application and will be ranked with all of the new applicants.

EXIT FROM THE PROGRAM

- A student may be exited from the nursing program for academic or code of conduct related issues.
 - Exited students will not be eligible to progress in the nursing program.
1. Academic Exit
 - a. Failure to successfully obtain a minimum of a C grade in a nursing course on the second attempt will result in exit from the nursing program.
 - b. Failure to obtain a minimum of a C grade in a nursing course in a subsequent semester will result in exit from the nursing program.
 2. Code of Conduct Exit: Ethical Misconduct and/or Unsafe Behavior
 - a. A student may be exited for ethical misconduct and/or unsafe behavior at any time in the program.
 - b. A student who is exited due to ethical misconduct and/or unsafe behavior must follow college/university policies related to conduct and due process.
 - c. Students are not automatically allowed to retake nursing coursework or be readmitted.
 - d. This program reserves the right to excuse a student for ethical misconduct and/or unsafe behavior at any point in the programs.

REAPPLICATION TO THE PROGRAM

A student who is exited from this program for failure to meet conduct expectations will be considered for readmission to the program based on faculty review. Students who are exited from this program for the reasons stated above under "Academic Exit" will not be considered for readmission to the program. Students who are allowed to reapply to the program must meet the current published admission criteria and the following criteria:

1. A student may be readmitted only one time.
 - a. Reapplication to the program is required.
 - b. If a student reapplies and is subsequently exited a second time for either academic failure and/or failure to meet conduct expectations, the student is permanently exited from the program.
 - c. This program reserves the right to deny admission based on ethical misconduct and/or unsafe behavior.
2. All current program admission requirements must be met prior to re-application or re-admittance.
 - a. This includes all prerequisite courses, CPR, health, health insurance, liability insurance, and background study requirements.
 - b. Students applying for readmission after the program exit must retake all nursing courses even if previously successful in these courses.

RE-ADMISSION POLICY

Students who wish to be considered for re-admission into the nursing program after withdrawal in good academic standing from a nursing course or departure from the nursing program for reasons other than academic or code of conduct must follow these steps:

1. Students may be required to supply documentation addressing why they departed, the individual extenuating circumstances that contributed to the program exit, and an individual learning plan for promoting success. This documentation will be placed in the student's permanent folder.
2. Re-entry is allowed on a space available basis as determined by the nurse administrator.
3. Students progressing in the program plan without interruption will be placed in their courses prior to seating being made available for re-entry students. Priority for readmission will be based on the student cumulative GPA of courses required for a degree completed to date.
4. Students must re-enter within one year (2 semesters, not including summer) of the last day of the semester not completed or the semester of departure from the program.

STUDENT OCCURRENCE FORM

If a student receives a student occurrence form, they will have to follow the guidance on that form to progress in the program. See [Appendix B](#). Students that do not follow through with this form in the time indicated may be dismissed from the program.

Students may not have more than one occurrence form per semester and no more than one safety performance contract during the whole program.

LPN LICENSURE REQUIREMENTS FOR CURRENT LPNs IN THE PROGRAM

Current LPN licensure must remain unencumbered while in the nursing program. If LPN licensure becomes encumbered during the program, the student may be ineligible to continue in the program. LPN licensure status may be monitored in Minnesota and nationally.

PROGRAM READMISSION POLICY

This policy applies to any students who wish to be considered for readmission into the nursing program after unsuccessful completion of a nursing course after semester 1, withdrawal from a nursing course, or departure from the nursing program for any reason.

The following criteria must be met for readmission:

1. Students are required to supply documentation addressing why they departed, the individual extenuating circumstances that contributed to the unsuccessful completion of a nursing course, and an individual learning plan for promoting success. This documentation will be placed in the student's permanent folder.
2. Admission is allowed on a space available basis as determined by the Nurse Administrator.
3. Students progressing without interruption will be placed in their courses prior to seating being made available for returning students. Priority for readmission will be based on the student cumulative GPA of courses required for a degree completed to date.

4. Students are required to re-enter within one year of the last day of the semester not successfully completed.
5. A student who fails due to ethical misconduct and/or unsafe behavior will be readmitted based on college policies related to conduct and due process.
6. A student who fails due to academic issues will be readmitted based on decisions of the Nursing Department policies.
7. All current program admission requirements must be met prior to readmission. This includes all prerequisite courses, CPR, health, health insurance, liability insurance, and background study requirements.

The Nursing Student Readmission Form ([Appendix E](#)) and current transcript must be submitted within the required time.

INCOMPLETES

An Incomplete ("I") grade may be assigned only when, upon the student's request, the nursing faculty consents to an extension of time for course completion. Since each nursing course is sequential, incompletes must be completed within the time set by nursing faculty. "I" grades automatically become "F" grades if course requirements are not satisfactorily completed in the time agreed upon. "F" grades prohibit the student from continuing in the nursing sequence. (See policies on Riverland college website for protocol for requesting "I" grades).

WITHDRAWALS

Students may initiate requests for withdrawals from nursing courses according to college protocol.

1. Students should be aware of the college/university policy for automatic withdrawal for non-attendance/participation.
<https://www.riverland.edu/student-services/registrars-office/total-withdraw-tuition-refund-policy/>
2. Students should be aware of the last day in the semester in which a withdrawal can be initiated. This date is posted in the academic calendar on the Riverland campus website.
3. Students who withdraw from a nursing course(s) and wish to be considered for re-entry on a space available basis in a subsequent semester must refer to the program re-entry process outlined above.
4. Grades at the time of withdrawal may be taken into consideration for any request for re-entry.

MOVING STUDENT TO DIFFERENT CLINICAL OR LAB SECTIONS

This type of action is based on the practical needs of an individual, the class, or to maintain program integrity. It is unrelated to student performance. The following serve as examples to clarify this procedure:

1. If a nursing lab section becomes too large, one or more students will be asked to relocate to another section.
2. The student may be relocated to another clinical agency to better facilitate his/her learning experience.

APPEALS PROCESS

If there is a dispute between the student and faculty member concerning the outcome outlined above, the following steps will occur:

1. The student will meet with the faculty within three business days to explain why the action in question is unreasonable and propose alternatives for resolving the issue. If there is no resolution at step one, the student may proceed to step two.
2. Within 3 business days of the meeting with the faculty the student may request to appear before the nursing faculty and re-state his/her objection(s) and offer proposed solutions. If there is no resolution at step two the student may proceed to step three.
3. Within 3 business days of the appearance before the nursing faculty, the student may speak with the Nurse Administrator and re-state his/her objection(s) and offer proposed solutions. The Nurse Administrator may ask for more information from the student and faculty before deciding.
4. If no resolution is secured in the preceding three steps, the student may begin the complaint process found at: [https://www.riverland.edu/riverland/assets/File/policy/2000/2000%20-%20Student%20Complaint%20and%20Grievance%20Policy%20\(002\).pdf](https://www.riverland.edu/riverland/assets/File/policy/2000/2000%20-%20Student%20Complaint%20and%20Grievance%20Policy%20(002).pdf)

STUDENT CODE OF CONDUCT POLICY

ACADEMIC AND NON-ACADEMIC CONDUCT EXPECTATIONS

Please see the Riverland Community College Student Handbook for an explanation of the types of misconduct, penalties for misconduct, procedures and appeals. <https://www.riverland.edu/about-riverland/policies-and-procedures/student-code-of-conduct-policy-procedure/>. The nursing program uses this policy to manage code of conduct violations.

Students enrolled in the nursing program at Riverland Community College accept the moral and ethical responsibilities that have been credited to the profession of nursing and are obligated to uphold and adhere to the professional Code of Ethics.

The current edition of the American Nurses Association Code for Nurses with interpretive statements outlines the goals, values, and ethical principles that direct the profession of nursing, and it is the standard by which ethical conduct is guided and evaluated by the profession.

Because nursing students, after graduation, may be licensed to practice nursing and are required to assume responsibility for the life and welfare of other human beings, every nursing student is expected to demonstrate competence and safe patterns of behavior which are consistent with professional responsibilities, and which are deserving of the public's trust.

In the professional judgment of the faculty, any behavior deemed inconsistent with professional responsibilities and/or unsafe are addressed as an “academic issue” and may be subject to a failure grade (F) for the course and/or a dismissal from the program. Any dispute between students and faculty regarding an assigned grade will be managed according to the process for Grade Appeals as defined in the Riverland Community College’ grade appeal process.

Examples of behaviors that are considered “academic” and therefore may result in academic consequences may include:

- A pattern of neglect of clinical responsibilities, risk to patient safety, or failure to practice in the best interest of clients and the public in any practice setting (lack of evidence of preparedness to take care of clients for any scheduled clinical experience).
- Violation of confidentiality, privacy, or security standards as discussed in the Health Insurance Portability and Accountability Act (HIPAA). This includes all social media such as sharing confidential information through phone, e-mail, Facebook or any other media.
- Engaging in academic dishonesty, cheating, or fraud, including but not limited to:
 - a) plagiarism from the work of others, including work by other students or from published materials without appropriate citation
 - b) the buying and selling of course assignment and research papers
 - c) performing academic assignments (including examinations) for other persons
 - d) unauthorized disclosure and receipt of academic information
 - e) allowing other students to copy answers from exams or assignments
 - f) using disallowed materials or methods for examinations or assignments.
- Knowingly producing false evidence or false statements, making charges in bad faith against any other person, or making false statements about one’s own behavior related to academic or clinical matters.
- Failing to report incidents involving clients/patients.
- Failing to report observed unethical or proscribed behavior.
- Taking food, medications, client belongings or materials from clinical settings without approval or authorization.
- Failure to question a medical order when in doubt.
- Transgression of professional boundaries
- Violation of clinical affiliate policy
- No call no show to clinical, lab, or simulation

DRUG AND ALCOHOL USE

The use of mood-altering drugs, including prescription, over the counter drugs, alcohol, illicit mood altering drugs including: narcotics, depressants, stimulants, hallucinogens, marijuana, or any other material that results in behavior or appearance that adversely affects academic performance or client safety, may be grounds for dismissal or academic termination from the nursing program. In addition, it also may be subject to disciplinary sanctions (consistent with local, state, and federal law), up to expulsion and referral for prosecution.

Therefore, chemical use in the academic setting may be handled as violations of the Student Conduct Policy and/or as student academic issues. Student academic issues require “academic decision making” and will be handled through the Student Code of Conduct Process as defined in the Riverland College Student Handbook if there is a dispute. Conduct issues require conduct decision making and will be handled as stated above under Student Conduct.

Adverse effects of performance shall be determined to be present, but not limited to:

- If the student is perceptibly impaired
- Has impaired alertness, coordination, reactions, responses, or effort.
- If the student's condition threatens the safety of himself, herself, or others.
- If the student's condition or behavior presents the appearance of unprofessional or irresponsible conduct detrimental to the public's perception of Riverland nursing program.

In addition, engaging in academic dishonesty, cheating, or fraud as defined above under “academic expectations,” may be treated as both a conduct and academic issue and subject to the same processes as described for chemical use.

In these types of situations, the faculty member will notify the Nurse Administrator who will consult with the Dean of Students.

FACULTY PERFORMANCE REVIEW

1. If faculty identify concern(s) about the student’s performance, faculty, following the Riverland Community College’s Student Code of Conduct Policy, will notify the student of the concerns which may result in a face-to-face meeting and/or a written performance plan which could include:
 - a. Early Alert (EARS) may be submitted on behalf of the student.
 - b. Communication to the student about what the concern(s) are and no further action to be taken.
 - c. Placement of the student in probationary status and developing a contract with him/her outlining:
 - Unacceptable behaviors.
 - Required corrective action goals.
 - Time for evaluation of corrective action outcomes.
 - Date probationary status will end provided the corrective action(s) is/are attained.
 - Consequences of failure to meet terms of the contract.
 - d. Determination that the student has become ineligible to progress in the program.
 - Depending on the identified concern(s), the student may or may not be allowed to return to the clinical, classroom, or lab area until the concerns have been addressed. The student will be responsible for making up any time lost during that time period.
2. If the faculty requests a face-to-face meeting, the student is expected to show up as scheduled.
 - a. Failure of the student to appear at this meeting or failure to provide a 24-hour notice of need for rescheduling could result in an automatic dismissal from the program.

- b. Faculty also reserve the right to make decisions about the concern(s) of the student in the program without the student present if the student fails to appear at the meeting.
3. If a student is dismissed from the program or wants to appeal a grade and the student wants to appeal that decision, the student must follow the Grade Appeal Procedure in preparation for an appeal. This procedure can be found on the Riverland's website at:
<https://www.riverland.edu/about-riverland/policies-and-procedures/course-final-grade-appeal-procedure/>

<https://www.riverland.edu/about-riverland/policies-and-procedures/course-final-grade-appeal-form/>

4. If a student wants to file a Complaint or Grievance, the student must follow the Student Complaint and Grievance Policy. This policy can be found on the Riverland's website at:
[https://www.riverland.edu/riverland/assets/File/policy/2000/2000%20-%20Student%20Complaint%20and%20Grievance%20Policy%20\(002\).pdf](https://www.riverland.edu/riverland/assets/File/policy/2000/2000%20-%20Student%20Complaint%20and%20Grievance%20Policy%20(002).pdf)

CLINICAL DISCIPLINARY PROCEDURES:

MISCONDUCT NOTED IN THE CLINICAL EXPERIENCES

It is important for the nursing student to note that the nursing program also designates some behaviors as misconduct that might not apply to the general college student. Behaviors noted in any clinical experience that may cause actual or potential harm to clients may lead to immediate dismissal from the program.

Examples of those behaviors might include but are not limited to the following:

ACADEMIC MISCONDUCT

(List not intended to be exhaustive) honesty and integrity issues.

- Seeking to mislead staff members and/or faculty members about extent or quality of care given.
- Submitting false documentation in order to attain entrance and/or maintain enrollment in the nursing program.
- Seeking to mislead staff/faculty about level of skill.
- Seeking to mislead staff about specific assignment.
- Seeking to chart false or inaccurate data.
- Consciously failing to follow explicit directions from the faculty or supervising staff member that produces or could produce foreseeable harm to persons in the clinical agency.
- Knowingly failing to follow agency policy or procedures, which produces or could produce foreseeable harm to persons in the clinical agency.
- Violation of client confidentiality.

NONACADEMIC MISCONDUCT

(List is not intended to be exhaustive) inappropriate or unethical behavior including but not limited to:

- Threatening or intimidating any persons in the clinical agency

- Use of inappropriate touch or unwelcome touch with persons in the clinical agency.
- Use of harassing language with people in the clinical agency.
- Stealing objects from persons in the clinical area.
- Use of demeaning language (stereotypical, prejudicial)

INFRACTIONS IN THE CLINICAL AGENCY

Policies including but not limited to:

- Misappropriation of medications
- Violation of the controlled substance policy
- Unauthorized use of computers and/or computer passwords. Accessing restricted databases, files, or tampering with computer equipment, sending threatening e-mails
- Reporting to the clinical site under the influence of alcohol or a controlled substance
- Nursing faculty are mandated reporters of professional misconduct and will act in accordance with the current reporting procedures.
- Any faculty involved in the incident(s) may also file a complaint against the student. For example, when a student threatens a faculty member, or attempts to carry out such a threat.

COMPLAINTS AND GRIEVANCES

If a student has a complaint, grievance, or grade appeal, the nursing department strongly encourages students to bring their concern(s) forward. To promote a positive learning environment, the nursing program expects the student to attempt to first resolve concern(s) with the staff/faculty member to whom the concern(s) is directed.

1. If a student is dismissed from the program or wants to file a grade appeal and the student wants to appeal that decision, the student must follow the Grade Appeal Procedure in preparation for an appeal. This procedure can be found on the Riverland's website at:

<https://www.riverland.edu/about-riverland/policies-and-procedures/course-final-grade-appeal-procedure/>

<https://www.riverland.edu/about-riverland/policies-and-procedures/course-final-grade-appeal-form/>

2. If a student wants to file a Complaint or Grievance, the student must follow the Student Complaint and Grievance Policy. This policy can be found on the Riverland's website at:

[https://www.riverland.edu/riverland/assets/File/policy/2000/2000%20-%20Student%20Complaint%20and%20Grievance%20Policy%20\(002\).pdf](https://www.riverland.edu/riverland/assets/File/policy/2000/2000%20-%20Student%20Complaint%20and%20Grievance%20Policy%20(002).pdf)

PROGRAM ADMISSION REQUIREMENTS

HEALTH REQUIREMENTS

In addition to the core performance standards, the following requirements need to be met to enter and progress within the program.

- Students must submit a completed health information form (Health Science Division Physical Examination, Immunizations/Required Clinical Verification Form) before specified deadlines. The required immunizations listed on this form must be maintained to participate in the clinical portion of the nursing courses.
 - ✓ Proof of immunity (titer) to measles (rubeola), German measles (Rubella), chicken pox (Varicella), and mumps.
 - ✓ Hepatitis B vaccination (series of three) or a signed waiver on file. If a student has had a pediatric vaccination for Hepatitis B, a titer will be required to prove immunity.
 - ✓ Tetanus/Diphtheria booster OR Tetanus/Diphtheria/Pertussis booster done within the last ten years.
 - ✓ Yearly influenza
 - ✓ COVID-19 vaccination if not approved for an exemption.
- Students must present evidence of freedom from active TB per a negative Mantoux, or a negative QuantiFERON (TB gold test) QFT-G annually (negative chest x-rays are no longer acceptable). If you have not had a Mantoux test done within a 12-month time, you must complete a two-step testing process, one to three weeks apart. Two Mantoux tests must be on file or have proof of the QuantiFERON (TB gold test).
- Students must maintain good health throughout the program to meet expected course outcomes. The Minnesota State Performance Standards must be met throughout the program to continue to progress. If a core standard cannot be met, the student will fail the course.
- A student who is temporarily unable to meet clinical requirements due to health issues must consult a health professional for appropriate evaluation and/or treatment. Students will be required to submit a copy of the most recent health professionals' order.
- Students must meet the policy requirements of the health agencies to which they are assigned. Students who refuse to comply with the policy requirements of the health agencies to which they are assigned will fail the course.

CPR REQUIREMENT

Nursing students are required to obtain and remain current with CPR certification for Health Professionals. CPR must include Adult, Child, Infant, AED. Proof of certification will be collected prior to the start of the program. Students are not permitted to participate in the clinical experiences of the program if they have not met this requirement.

Proof of certification must cover and remain valid throughout the entire program.

Fall Semester Admission CPR certification dates August through the following December. Spring Semester Admission CPR certification dates January through the following May.

BACKGROUND STUDIES

Minnesota law requires background studies on individuals who provide direct contact services to patients and residents in facilities and programs approved by the Minnesota Department of Human Services (DHS) or the Minnesota Department of Health (MDH). These studies are conducted each year by the DHS or similar agency approved to perform the study for practice in Minnesota. In 2014 a state law was passed to require background study subjects to be fingerprinted and photographed. An individual who is disqualified because of the study and whose disqualification is not set aside by the Commissioner of Health will not be permitted to participate in any clinical activities in a Minnesota licensed health care facility. Students not in compliance with due dates for background study completion will lose their place in the program. Additionally, students who are disqualified or fail to participate in the background study process will not be eligible to progress in the program.

HEALTH INSURANCE REQUIREMENT

Nursing students are required to carry health insurance to fulfill the requirement of the nursing program. A copy of health insurance will be collected prior to the start of the program. Students are not permitted to participate in the clinical experiences of the program if they have not met this requirement.

CONFIDENTIALITY REQUIREMENT

Students may not give information about a patient or clinical experience to anyone who is not employed at the clinical facility. Confidentiality related to patient information also extends to electronic forms of communication such as e-mail and social media sites. Outside of the clinical site clinical experiences are to be discussed during nursing course related activities only.

Conversation relating to patients is permitted only in the clinical and clinical conference areas or in a secure classroom. Students taping lectures are to use the tape for their individual study purposes only. No lecture tapes may be posted electronically. Patients or any clinical occurrences are not to be discussed in public places such as the cafeteria, student lounge, or at home. Any information gathered for assignments from the chart, or the computer must be scrutinized to remove anything that would identify the individual such as the hospital number, or name before information is removed from the building.

No pictures can be taken at the clinical site. The only area that pictures can be taken of students will be in the lobby or outside of the clinical agency.

Failure to maintain patient confidentiality may result in the clinical facility's denial of the student's access to a clinical site and/or failure of the course.

Conversation related to student interactions in the classroom, nursing skills or simulation lab or clinical need to be confined to those surroundings. Students are held to the American Nurses Association (ANA) Code of Conduct of Professional Nurses as it addresses professional behaviors.

If you are unsure about any aspect of confidentiality, you are expected to discuss it with the appropriate nursing faculty and/or clinical staff prior to procuring or disseminating any patient information.

MANDATORY HIPAA TRAINING

Prior to beginning any clinical nursing course, students must complete the Health Insurance Portability and Accountability Act (HIPAA) training. Every year the student must sign the Nursing Program Confidentiality Form.

LIABILITY INSURANCE

Liability insurance in the amount of one million dollars must be carried by each student. A group policy with one million dollars coverage is available through the College. The fee is assessed in the fall semester of the nursing program to cover the student for the entire academic year. A private policy with one million dollars coverage is also acceptable.

STUDENT TECHNOLOGY REQUIREMENTS

E-MAIL

The college official communication method is through the Riverland student e-mail accounts. All students need to check their e-mail account frequently. This is the only account that faculty will use for e-mailing students.

COMPUTER REQUIREMENTS

All students need to have access to a personal computer/laptop with a high-speed internet connection. Basic computer and word processing skills are required. Common software requirements include (but are not limited to) a word processing program (i.e., Microsoft Word), Power Point/Power Point Viewer, Acrobat Reader, Flash Player, Quick Time Player, Real Time Player. All written assignments (i.e., papers) that are electronically submitted must be in a doc, docx, or rtf format.

RIVERLAND COMMUNITY COLLEGE STUDENT CODE OF CONDUCT

<http://www.riverland.edu/policy/Student-Code-of-Conduct-3000.pdf>Appendix

MINNESOTA STATE ASSOCIATE DEGREE NURSING PROGRAMS PERFORMANCE STANDARDS

The system of Minnesota State Colleges provides the following example of performance standards that associate degree nursing students are required to meet and maintain to provide safe and effective care, to be successful and progress in nursing programs. The standards are based on The Minnesota Nurse Practice Act. The examples listed are for illustrative purposes only, and are not intended to be a complete list of all tasks in a nursing program.

Students with documented disabilities, or who believe they may have a protected disability, can request accommodation, which may assist with meeting the standards for nursing programs. Please contact the Support Services Office at 507-433-0600, to schedule an appointment with a Support Services Counselor.

Requirements	Standards	Examples include but are not limited to...
Critical-thinking Skills	Critical thinking ability for effective clinical reasoning and clinical judgment consistent with level of educational preparation	<ul style="list-style-type: none"> • Ability to assess, plan, implement, and evaluate care. • Organize workload to manage time effectively and prioritize the delivery of client care. • Use resources effectively to understand the evidence, context of situations, and perspectives (their own and others) to make logical and informed decisions. • Possess problem-solving skills, including the ability to reason, measure, calculate and use data to make decisions in time-pressured environment. • Assimilate information from class, lab and clinical to demonstrate achievement of learning outcomes. • Ongoing demonstration of skills mastery while integrating and mentally sorting new information.
Interpersonal Skills	Interpersonal skills sufficient for professional interactions with a diverse population of individuals, families,	<ul style="list-style-type: none"> • Maintain and protect client confidentiality and privacy. • Establish professional and ethical relationships with others. • Accept feedback and integrate new understanding into behavior. • Display personal accountability, integrity, understanding that student behavior affects others. • Practice the ability to delegate. • Promote a team-building environment. • Provide effective and therapeutic care in a variety of cultural settings. • Convey empathy, compassion and sensitivity in interactions and relationships.

Communication Skills	Communication skills sufficient for verbal and written professional interactions	<ul style="list-style-type: none"> • Assimilate verbal and non-verbal information, process and exchange information with clients, families, instructors and members of the healthcare team. • Accurately interpret and document nursing actions and client responses. • Display the capacity to engage in successful conflict resolution and advocate for client rights and needs. • Effectively communicate in English in verbal, written, and electronic resources with colleagues, school staff, and members of the interdisciplinary team. • Use therapeutic communication techniques to provide support to peers, clients and families. • Process relevant information; accurately and timely communicate to the healthcare team. • Ability to design teaching plans for client education and assess effectiveness. • Provide disease prevention and health promotion, care coordination and case findings.
Psychomotor Skills	Psychomotor skills sufficient for providing safe, effective nursing care	<ul style="list-style-type: none"> • Move about client's room and/or workspaces to complete client assessment. <ul style="list-style-type: none"> • Administer rescue procedures - cardiopulmonary resuscitation. <ul style="list-style-type: none"> • Demonstrate the ability to work for long periods. • Safely use and calibrate equipment in a variety of settings. • Perform procedures necessary to safely admit, transfer, or discharge a client. <ul style="list-style-type: none"> • Prepare and administer medications and treatments. <ul style="list-style-type: none"> • Perform nursing skills safely and efficiently.
Assessment Skills	Assessment skills sufficient for providing safe, effective nursing care	<ul style="list-style-type: none"> • Ability to provide comprehensive assessment of client's health status through collection and synthesis of data to establish baseline status for client. <ul style="list-style-type: none"> • Ability to integrate assessment information to form a plan of care. • Recognize emergent needs; perform appropriate targeted assessment, interventions and evaluation. <ul style="list-style-type: none"> • Assume accountability for delivered care; recognize limits of knowledge, skills and licensure scope. • Understand and process healthcare provider orders according to assessment data, evaluate effectiveness of interventions and communicate with members of the healthcare team. <ul style="list-style-type: none"> • Demonstrate distinction between provider-dependent and independent nursing interventions.

Emotional-Behavioral Skills	Demonstrates appropriate behavior to function effectively under stress and assume accountability for one's actions	<ul style="list-style-type: none"> • Demonstrate emotional stability while encountering a wide variety of emotions in self and others. • Communicate empathy, recognize own values, attitudes, beliefs, emotions and experiences affect perceptions and relationships with others. • Personal flexibility to adapt to rapidly changing environments. • Ability to apply sound judgement in pressured situations.
Professional Conduct Skills	Process attributes that include compassion, altruism, integrity, honesty, responsibility and tolerance	<ul style="list-style-type: none"> • Provide safe and effective care to patients along the age continuum without regard to disability, ethnic origin, gender status or social standing. • Recognize and preserve individual human dignity. • Advocate for the client's best interest. • Demonstrate professional accountability and ability to work in hierarchical environment. • Demonstrate intent to follow the ANA Code of Ethics. • Practice participation in development of healthcare policies, procedures. • Demonstrate understanding of nursing theory and practice.
Environmental Stressors	Other considerations	<ul style="list-style-type: none"> • Ability to work with infectious agents and blood-borne pathogens. • Ability to work in area with potential chemical and radiation hazards, potential allergens such as latex. • Ability to work in areas of potential violence. • Ability to work in close proximity to others.

Other	Sensory	<ul style="list-style-type: none">• Visual and auditory ability to perform assessments, safe nursing care, and meet program outcomes.
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References

H.C. Gonzalez, E-L. Hsiao / Teaching and Learning in Nursing
15 (2020) 53e56

Minnesota Board of Nursing Nurse Practice Act – Minnesota
Statute Section 148.171

Presented and revised by AD and PN Nursing Directors
Spring 2020.

APPENDIX A

GLOSSARY OF TERMS:

TERM	DEFINITION
Caring	<p>"promoting health, healing, and hope in response to the human condition."</p> <p>"A culture of caring, as a fundamental part of the nursing profession, characterizes our concern and consideration for the whole person, our commitment to the common good, and our outreach to those who are vulnerable. All organizational activities are managed in a participative and person-centered way, demonstrating an ability to understand the needs of others and a commitment to act always in the best interests of all stakeholders (NLN, 2007).</p>
Collaboration	<p>Is defined as health care professionals assuming complementary roles and cooperatively working together, sharing responsibility for problem-solving and making decisions to formulate and carry out plans for safe patient care (https://www.ncbi.nlm.nih.gov).</p>
Context and Environment	<p>In relation to organizations, refer to the conditions or social system within which the organization's members act to achieve specific goals. Context and environment is a product of the organization's human resources, and also the policies, procedures, rewards, leadership, supervision, and other attributes that influence interpersonal interactions. In health care, context and environment encompass organizational structure, leadership styles, patient characteristics, safety climate, ethical climate, teamwork, continuous quality improvement, and effectiveness.</p>

Core Competencies	Are the discrete and measurable skills, essential for the practice of nursing, that are developed by faculty in schools of nursing to meet established program outcomes. These competencies increase in complexity both in content and practice during the program of study. The core competencies are applicable in varying degrees across all didactic and clinical courses and within all programs of study, role performance, and practice settings. They structure and clarify course expectations, content, and strategies, and guide the development of course outcomes. They are the foundation for clinical performance examinations and the validation of practice competence essential for patient safety and quality care.
Course Outcomes	Are the expected culmination of all learning experiences for a particular course within the nursing program, including the mastery of essential core competencies relevant to that course. Courses should be designed to promote synergy and consistency across the curriculum and lead to the attainment of program outcomes.
Diversity	Means recognizing differences among persons, ideas, values and ethnicities, while affirming the uniqueness of each. A culture of diversity embraces acceptance and respect. We understand that each individual is unique and recognize individual differences, which can be along the dimensions of race, ethnicity, gender, sexual orientation, socioeconomic status, age, physical abilities, religious beliefs, political beliefs, or other ideologies. A culture of diversity is about understanding ourselves and each other and moving beyond simple tolerance to embracing and celebrating the richness of each individual. While diversity can be about individual differences, it also encompasses institutional and system-wide behavior patterns (NLN, 2007).
Excellence	Creating and implementing transformative strategies with daring ingenuity. A culture of excellence reflects a commitment to continuous growth, improvement, and understanding. It is a culture where transformation is embraced, and the status quo and mediocrity are not tolerated (NLN, 2007).

Ethics	Involves reflective consideration of personal, societal, and professional values, principles and codes that shape nursing practice. Ethical decision making requires applying an inclusive, holistic, systematic process for identifying and synthesizing moral issues in health care and nursing practice, and for acting as moral agents in caring for patients, families, communities, societies, populations, and organizations. Ethics in nursing integrates knowledge with human caring and compassion, while respecting the dignity, self-determination, and worth of all persons.
Evidence-Based Practice	A problem-solving approach to clinical decision-making within a health care organization. It integrates the best available scientific evidence with the best available experiential (patient and practitioner) evidence.
Health	Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (WHO, 2017)
Holism	Is the culture of human caring in nursing and health care that affirms the human person as the synergy of unique and complex attributes, values, and behaviors, influenced by that individual's environment, social norms, cultural values, physical characteristics, experiences, religious beliefs and practices, and moral and ethical constructs within the context of a wellness-illness continuum.
Human Flourishing	Can be loosely expressed as an effort to achieve self-actualization and fulfillment within the context of a larger community of individuals, each with the right to pursue his or her own such efforts. The process of achieving human flourishing is a lifelong existential journey of hope, regret, loss, illness, suffering, and achievement. Human flourishing encompasses the uniqueness, dignity, diversity, freedom, happiness, and holistic well-being of the individual within the larger family, community, and population. The nurse helps the individual in efforts to reclaim or develop new pathways toward human flourishing.

Integrity	<p>"Respecting the dignity and moral wholeness of every person without conditions or limitation."</p> <p>"A culture of integrity is evident when organizational principles of open communication, ethical decision making, and humility are encouraged, expected, and demonstrated consistently. Not only is doing the right thing simply how we do business, but our actions reveal our commitment to truth telling and to how we always were ourselves from the perspective of others in a larger community" (NLN, 2007).</p>
Informatics	<p>The specialty that integrates <i>nursing</i> science with multiple information management and analytical sciences to identify, define, manage, and communicate data, information, knowledge, and wisdom in <i>nursing</i> practice.</p>
Knowledge and Science	<p>Refers to the foundations that serve as a basis for nursing practice, which, in turn, deepen, extend, and help generate new knowledge and new theories that continue to build the science and further the practice. Those foundations include (a) understanding and integrating knowledge from a variety of disciplines outside nursing that provide insight into the physical, psychological, social, spiritual, and cultural functioning of human beings; (b) understanding and integrating knowledge from nursing science to design and implement plans of patient-centered care for individuals, families, and communities; (c) understanding how knowledge and science develop; (d) understanding how all members of a discipline have responsibility for contributing to the development of that disciplines' evolving science; and (e) understanding the nature of evidence-based practice.</p>
Nursing	<p>Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, facilitation of healing, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, groups, communities, and populations (ANA, 2017).</p>
Person	<p>The one receiving the nursing care. But importantly, Person is <i>defined according to the recipient of nursing care (the patient or client)</i> and may include the patient's family and friends and the community. The nurse needs to consider how the patient defines family when planning care.</p>

<p>Nursing Judgement</p>	<p>Encompasses three processes; namely, critical thinking, clinical judgment, and integration of best evidence into practice. Nurses must employ these processes as they make decisions about clinical care, the development and application of research and the broader dissemination of insights and research findings to the community, and management and resource allocation.</p> <p><i>Critical thinking</i> means identifying, evaluating, and using evidence to guide decision making by means of logic and reasoning. Clinical judgment refers to a process of observing, interpreting, responding, and reflecting situated within and emerging from the nurse's knowledge and perspective (Tanner, 2006). Integration of best evidence ensures that clinical decisions are informed to the extent possible by current research (Craig & Smith, 2007).</p>
<p>Patient Centeredness</p>	<p>Is an orientation to care that incorporates and reflects the uniqueness of an individual patient's background, personal preferences, culture, values, traditions, and family. A patient centered approach supports optimal health outcomes by involving patients and those close to them in decisions about their clinical care. Patient centeredness supports the respectful, efficient, safe, and well-coordinated transition of the patient through all levels of care.</p>
<p>Personal and Professional Development</p>	<p>Is a lifelong process of learning, refining, and integrating values and behaviors that (a) are consistent with the profession's history, goals, and codes of ethics; (b) serve to distinguish the practice of nurses from that of other health care providers; and (c) give nurses the courage needed to continually improve the care of patients, families, and communities and to ensure the profession's ongoing viability.</p>
<p>Professional Identity</p>	<p>Involves the internalization of core values and perspectives recognized as integral to the art and science of nursing. These core values become self-evident as the nurse learns, gains experience, and grows in the profession. The nurse embraces these fundamental values in every aspect of practice while working to improve patient outcomes and promote the ideals of the nursing profession. Professional identity is evident in the lived experience of the nurse, in his or her ways of -being, -knowing, and -doing.</p>

Program Outcomes	Are the expected culmination of all learning experiences occurring during the program, including the mastery of essential core nursing practice competencies, built upon the seven core values and six integrating concepts.
Quality and Safety	Is the degree to which health care services 1) are provided in a way consistent with current professional knowledge; 2) minimize the risk of harm to individuals, populations and providers; 3) increase the likelihood of desired health outcomes; and 4) are operationalized from an individual, unit, and systems perspective
Relationship Centered Care	Positions: (a) caring; (b) therapeutic relationships with patients, families, and communities; and (c) professional relationships with members of the health care team as the core of nursing practice. It integrates and reflects respect for the dignity and uniqueness of others, valuing diversity, integrity, humility, mutual trust, self-determination, empathy, civility, the capacity for grace, and empowerment.
Spirit of Inquiry	Is a persistent sense of curiosity that informs both learning and practice. A nurse infused by a spirit of inquiry will raise questions, challenge traditional and existing practices, and seek creative approaches to problems. The spirit of inquiry suggests, to some degree, a childlike sense of wonder. A spirit of inquiry in nursing engenders innovative thinking and extends possibilities for discovering novel solutions in ambiguous, uncertain, and unpredictable situations
Teamwork	Means to function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision making to achieve quality patient care.

APPENDIX B

RN Program Student Occurrence Form

Information	
Student Name	
Course	
Faculty Name	
Incident Details	
Date of Occurrence	
Time of Occurrence	
Location of Occurrence	
Meeting Details	
Date of Meeting	
Time of Meeting	
Members Present for Meeting	
Description of Occurrence	
Student Description of Occurrence	
Faculty Description of Occurrence	
Applicable Policy	
Policy from _____	
Plan	
Preventive Measures	
Faculty Recommendations	

Student Signature: _____

Date: _____

Faculty Signature: _____

Date: _____

Student handbook updates for fall 2020:

- Uniform policy updated to include no hoodies.
- Student Progression Committee **renamed** to Performance Review for Student Success committee.
 - Under this committee, the steps in the process changed to include a purpose statement and easier to understand language and clearer steps for faculty and students.
 - Forms for this committee were updated to make them more user friendly for faculty and students.
- Exam rules: Lateness to exam language has been included.
- Reapplication to the program update: This passage was added- **Students who are exited from this program for the reasons stated above under “Academic Exit” will not be considered for readmission to the program.**
- COVID-19 Clinical Updates

Update Fall 2021

- **Covid-19 Policy**- Updated 8-16-21- Students were notified via email.
- Removal of lengthy student progression review process. Faculty will no longer meet with students in groups. Faculty will address student concerns when they happen through a reasonable means to help get students back on track.
- ATI Testing Expectations added.
- Updated grading policy to be more specific of what they need in clinical and in theory to pass the course
- Updated test review policy

Update Fall 2022

- Written assignment: Late papers will be penalized 10% per day until received.
- **Exam Review Policy for online/off campus exams:** Review of the exam/quiz will be determined by the course instructor/faculty. Refer to the syllabus for exam review policy of online/off campus exam results.

Update Summer 2023

- Validate document for currency. Spellcheck cleanup. Grammar cleanup.
- Updated Clinical Expectations section: “Is not under the influence of illegal or recreational drugs, drug products, or alcohol.”
- Updated Uniform Policy: No smoking of any kind in clinical uniforms.

Update Summer 2024

- Align AD and PN mission and vision statements.
- Remove Nursing Education Definition.
- Remove FAQs of the RN (Dual Admission) explanation.
- Clarifications to social media communication with faculty members.
- Updated classroom policies to promote on-time attendance. "If the student is late, per faculty discretion, the student will be deducted 1 point per 1 minute that the student is late."
- Updated exam policies to promote on-time attendance. "If the student is late, per faculty discretion, the student will be deducted 1 point per 1 minute that the student is late."
- Updated ATI testing expectations and point reward expectations. "If the student is late, per faculty discretion, the student will be deducted 1 point per 1 minute that the student is late."
- Updated student responsibilities for clinical. "If the student is late, per faculty discretion, the student will be deducted 1 point per 1 minute that the student is late."
- Updated lab expectations "If the student is late, per faculty discretion, the student will be deducted 1 point per 1 minute that the student is late."
- Changed covid vaccination information from TCCP to Clinician Nexus.

Update Summer 2025

- Revised uniform policy guidance