



RIVERLAND
Community College



MANE NURSING STUDENT HANDBOOK

2018-2019 Implementation

Riverland Community College MANE Nursing Program Student Handbook

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FORWARD

This handbook has been prepared for use by the students enrolled in the Associate Degree Nursing program at Riverland Community College. It addresses the general information, policies and standards necessary to maintain an effective and efficient nursing education program.

The *Riverland College Student Handbook* addresses the policies for all students at the College, including nursing students. 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 found at: <http://www.riverland.edu/studenthandbook/>

The policies within this handbook are in effect for all students enrolled in the MANE nursing program. Students are held responsible for being informed on all nursing policies, procedures and regulations as published in this handbook, the college catalog and college student handbook. Students are also held responsible for any new nursing related policies or changes in existing policies announced via your Riverland student e-mail account.

ACCREDITATION AND APPROVAL

Riverland Community College is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools.

The Riverland Community College Associate Degree Nursing Program is approved by the Minnesota State Board of Nursing and accredited by the Accreditation Commission for Education in Nursing, Inc. (ACEN).

Accreditation Commission for Education in Nursing, Inc. 3343
Peachtree Road NE, Suite 850
Atlanta, GA 30326

Phone: 404-975-5000
Fax: 404-975-5020

www.acenursing.org/

INTRODUCTION

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, including 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.

RIVERLAND COMMUNITY COLLEGE VISION, MISSION AND HEART

Vision: Achieve: "Best in Class" status in programs through excellence in teaching, scholarship and service.

Mission: Riverland Community College inspires personal success through education.

The Heart of Riverland: Riverland Community College is dedicated to our students, our mission and our communities.

WHAT IS MANE?

MINNESOTA ALLIANCE FOR NURSING EDUCATION (MANE)

An innovative education consortium between a state university and 7 community colleges phase one adopters. This partnership includes Metropolitan State University, Anoka-Ramsey Community College, Inver Hills Community College, Normandale, North Hennepin Community College, Ridgewater Community College, Riverland Community College, and Century College. The consortium has evolved in response to the evidence and with a commitment to excellence and innovation to partner to expand the capacity for baccalaureate prepared nurses in Minnesota. The goal of MANE is to make baccalaureate nursing education available to student across the state, allowing qualified students to graduate with a baccalaureate degree within four years on every partner campus. The collaborative nursing curriculum, developed jointly with practice partners will prepare the nurse of the future to care for Minnesota's increasingly diverse and aging population.

MANE MISSION

The mission of the Minnesota Alliance for Nursing Education (MANE) is to increase baccalaureate prepared nurses through collaborative, transformative educational strategies.

MANE VISION

Through increased access to baccalaureate nursing education MANE will prepare professional nurses to promote health and meet the evolving and complex healthcare needs of an increasingly

diverse population in Minnesota.

MANE PHILOSOPHY STATEMENT

We believe the purpose of nursing education is to prepare professional nurses in a partnered curriculum to practice successfully in today's complex health care environment, respond to future health care needs, and lead in the broader health care system. A commitment to excellence in professional nursing practice, based on a set of shared core nursing values and innovation, is reflected in the use of integrative review in a spiraled, competency-based curriculum. We believe in a transformative curriculum that moves away from independent silos of education to a combined effort between universities, community colleges, and practice with the goal of increasing numbers of baccalaureate prepared nurses in Minnesota. This shared curriculum fosters a seamless transition from associate to baccalaureate nursing education. We believe baccalaureate nursing education enhances a comprehensive understanding of healthcare policy, research, systems leadership, and community health nursing.

MANE nursing graduates are educated to use the best available evidence in making sound clinical judgments during provision of safe, high quality, holistic nursing care across the lifespan and the health continuum. We believe with the use of informational technology, a nurse is prepared to provide health care in a variety of environments. We believe nurses act as transformational leaders as vital members of a health care team. A strong focus on health promotion supports nursing graduates to best serve diverse individuals, families, and communities locally, nationally, and globally.

We believe adult learners must be actively engaged in the learning process. We value lifelong learning, reflective nursing practice, and insights gained through self-analysis and self-care. Faculty members teaching in the MANE curriculum model professionalism, scholarship, inclusiveness, beneficence, and collegiality. This transformative approach to nursing education encourages deep understanding of key nursing concepts while addressing the changing healthcare environment.

MANE CONCEPTS

The curriculum includes concepts that are spiraled throughout the curriculum.

Macro-Concepts

- *Foci of Care*
- *Professional Integrity*
- *Psychological Integrity*
- *Physiological integrity*
- *Lifespan/Growth and Development*

Curricular Concepts

- *Professional development and identity*
- *Collaborative practice*
- *Safety*
- *Holism*
- *Communication/Informatics*

- *Evidenced-Based Practice & Quality Improvement*
- *Diversity and Culture*

See MANE Glossary of Terms in Appendix A.

MANE COMPETENCE STATEMENTS

Competencies describe the knowledge; skills and attitudes expected upon graduation and are categorized according to the nine baccalaureate essentials (AACN, 2008). The competencies are leveled for the baccalaureate and associate degree completion points. A hallmark of the competency model is a spiral approach to teaching and learning. Competencies are revisited throughout the curriculum with increasing levels of difficulty and with new learning building on previous learning.

- A competent nurse develops insight through reflection, self-analysis, self-care and lifelong learning.
- A competent nurse demonstrates leadership as part of a health care team.
- A competent nurse effectively uses leadership principles, strategies and tools.
- A competent nurse locates, evaluates, and uses the best available evidence.
- A competent nurse utilizes information technology systems including decision support systems to gather evidence to guide practice.
- A competent nurse practices within, utilizes and contributes to the broader health care system.
- A competent nurse practices relationship centered care.
- A competent nurse communicates effectively.
- A competent nurse's personal and professional actions are based on a set of shared core nursing values.
- A competent nurse makes sound clinical judgments.

PROGRAM STUDENT LEARNING OUTCOMES

Program student learning outcomes are broad performance indicators of learning at the successful completion of the curriculum. These outcomes relate to the knowledge, skills and attitudes needed of the baccalaureate and associate degree graduate. These are measured after semesters five and eight of the curriculum.

5 SEMESTER BENCHMARK

- Demonstrate reflection, self-analysis, self-care, and lifelong learning into nursing practice.
- Apply leadership skills to enhance quality nursing care and improve health outcomes.
- Utilize best available evidence and informatics to guide decision making.
- Collaborate with inter-professional teams to provide holistic nursing care.
- Adapt communication strategies to effectively respond to a variety of health care situations.
- Incorporate ethical practice and research within the nursing discipline and organizational environments.

- Practice holistic, evidence-based nursing care including diverse and underserved individuals, families, and communities.

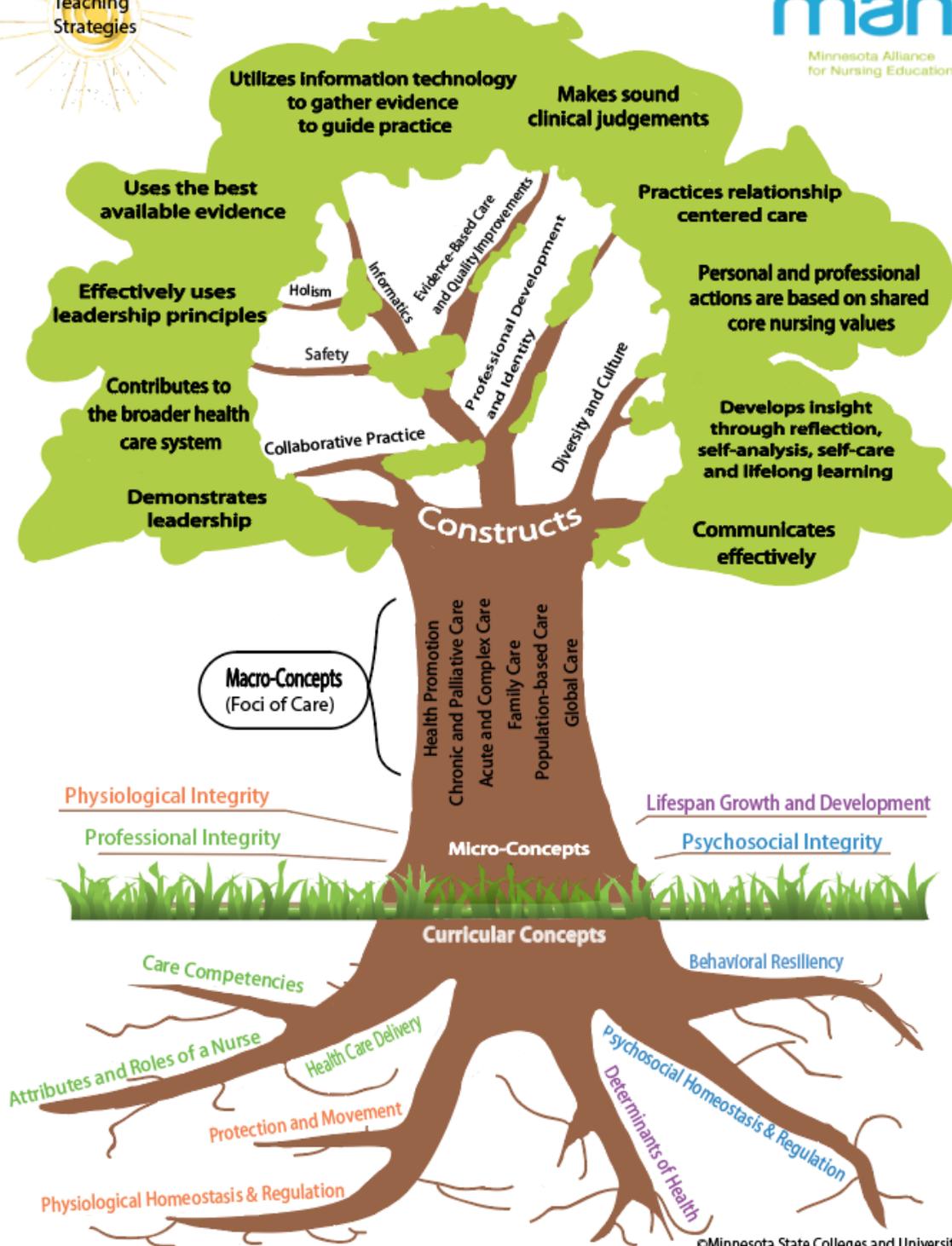
8 SEMESTER BENCHMARK

- Integrate reflection, self-analysis, self-care, and lifelong learning into nursing practice.
- Demonstrate leadership skills to enhance quality nursing care and improve health outcomes.
- Evaluate best available evidence utilizing informatics to guide decision making.
- Collaborate with inter-professional teams to provide services within the broader health care system.
- Adapt communication strategies to effectively respond to complex situations.
- Promote ethical practice and research within the nursing discipline and organizational and political environments.
- Practice holistic, evidence-based nursing care including diverse and underserved individuals, families, communities, and populations.



MANE Curriculum Conceptual Model

A Competent Nurse:



RIVERLAND COMMUNITY COLLEGE MANE TRADITIONAL RN CURRICULUM TRACK

	Semester and Courses	Credits	Semester and Courses	Credits
Year 1	Semester 1 <ul style="list-style-type: none"> • ENGL 1101 Composition I • CHEM 1121 General, Organic & Bio Chem • PSYC 1105 General Psychology • MnTC GOAL 6 Humanities/Fine Arts • Any MnTC credit (if not previously taken) 	3 3 4 3 3	Semester 2 <ul style="list-style-type: none"> • BIOL 2021 Anatomy & Physiology I • PSYC 1240 Developmental Psychology • SPCH 1200 or 1310 Interpersonal or Intercultural • MnTC GOAL 5 <i>Sociology or Anthropology</i> 	4 3 3 3
Year 2	Semester 3 <ul style="list-style-type: none"> • NURS 2700 Foundations of Nursing Health Promotion (4 lecture/2 lab/3 clinical) • NURS 2750 Nutrition and the Role of the Professional Nurse • BIOL 2022 Anatomy/Physiology II 	9 N 2 N 4	Semester 4 <ul style="list-style-type: none"> • NURS 2800 Chronic & Palliative Care (3 lecture/3 clinical/1 lab) • NURS 2820 Pharmacology and the Role of the Professional Nurse • NURS 2850 Applied Pathophysiology for Nursing I • BIOL 2040 Microbiology 	7 N 3 N 2 N 4
Year 3	Semester 5 <ul style="list-style-type: none"> • NURS 2900 Acute & Complex Care(3 lecture/3 clinical/1 lab) • NURS 2920 Applied Pathophysiology for Nursing II • NURS 2950 Nursing Leadership I (2 lecture/1 clinical) • PHIL 1130 Ethics <p style="color: red; margin-top: 10px;">BENCHMARK – Finish Associate Degree Nurse program (75 total credits 35 N/40 gen ed) and eligible for NCLEX-RN/ licensure exam</p>	7 N 2 N 3 N 3	Semester 6 <i>Continue with Upper Division Credits taught by Metropolitan State University on Riverland campus from this point forward for BS degree</i> <ul style="list-style-type: none"> • NURS 406 Nursing Care of the Family (3 lecture/1 clinical) • NURS 416 Epidemiology for Nursing • Metro STAT 201 Statistics (unless taken previously) or another lower div. gen. ed. course – MATH 2021) • WRIT 331 Writing in your Major or equivalent 	4 N 3 N (4) 4
Year 4	Semester 7 <ul style="list-style-type: none"> • NURS 459 Population-Based Care (5 lecture/2 clinical) • NURS 464 Nursing Leadership II (4 lecture) • NURS 446 Nursing Informatics • Upper Division Elective 	7 N 4 N 2 N 3 or 4	Semester 8 <ul style="list-style-type: none"> • NURS 490 Integrative Seminar & Practicum (4 lecture/3 clinical) • NURS 485 Global Health Perspectives for Nursing • Upper Division Elective 	7 N 3 N 4

- Co-requisite courses are highlighted in purple (red for bachelor's degree program). All nursing courses in each semester must be successfully completed to progress to the next semester.
- General education courses can be taken earlier but not later than the identified semester.
- **To apply:** ATI TEAS (6th edition) Test required, all courses from Year 1 semester 1 must be complete with a minimum GPA of 2.75, Year 1 semester 2 courses must be complete or in progress at time of application and finished with a minimum 2.75 GPA.
- Credits in AD Degree: 35 nursing; 40 gen ed= 75 total. Credits in B.S. Program: 65nursing; at least 55 upper and lower div. pre-requisites & gen ed = 120 total

*Students with a previous bachelor's degree from an accredited university have their Upper Division credits met.

Reference: http://www.mntransfer.org/students/plan/s_mntc.php.

RIVERLAND COMMUNITY COLLEGE MANE LPN TO RN CURRICULUM TRACK

	Semester and Courses	Credit	Semester and Courses	Credit
Year 1	Semester 1 <ul style="list-style-type: none"> • ENGL 1101 Composition I • CHEM 1121 General, Organic & Bio Chem • PSYC 1105 General Psychology • MnTC GOAL 6 Humanities/Fine Arts • Any MnTC credit (<i>if not previously taken</i>) 	3 3 4 3 3	Semester 2 <ul style="list-style-type: none"> • BIOL 2021 Anatomy & Physiology I • PSYC 1240 Developmental Psychology • SPCH 1200 or 1310 Interpersonal or Intercultural • MnTC GOAL 5 <i>Sociology or Anthropology</i> 	4 3 3 3
Year 2	Semester 3 <ul style="list-style-type: none"> • Advanced Standing for PN Education (5 nursing credits) • NURS 2720 Transition to the Role of the Professional Nurse (3 lecture/1 lab) • NURS 2750 Nutrition and the Role of the Professional Nurse • BIOL 2022 Anatomy/Physiology II 	4 N 2 N 4	Semester 4 <ul style="list-style-type: none"> • NURS 2800 Chronic & Palliative Care (3 lecture/3 clinical/1 lab) • NURS 2820 Pharmacology and the Role of the Professional Nurse • NURS 2850 Applied Pathophysiology for Nursing I • BIOL 2040 Microbiology 	7 N 3 N 2 N 4
Year 3	Semester 5 <ul style="list-style-type: none"> • NURS 2900 Acute & Complex Care (3 lecture/3 clinical/1 lab) • NURS 2920 Applied Pathophysiology for Nursing II • NURS 2950 Nursing Leadership I (2 lecture/1 clinical) • PHIL 1130 Ethics <p>BENCHMARK – Finish Associate Degree Nurse program (75 total credits 35 N/40 gen ed) and eligible for NCLEX-RN/licensure exam</p>	7 N 2 N 3 N 3	Semester 6 <i>Continue with Upper Division Credits taught by Metropolitan State University on Riverland campus from this point forward for BS degree</i> <ul style="list-style-type: none"> • NURS 406 Nursing Care of the Family (3 lecture/1 clinical) • NURS 416 Epidemiology for Nursing • Metro STAT 201 Statistics (unless taken previously) or another lower div. gen. ed. course – MATH 2021) • WRIT 331 Writing in your Major or equivalent 	4 N 3 N (4) 4
Year 4	Semester 7 <ul style="list-style-type: none"> • NURS 459 Population-Based Care (5 lecture/2 clinical) • NURS 464 Nursing Leadership II (4 lecture) • NURS 446 Nursing Informatics • Upper Division Elective 	7 N 4 N 2 N 3 or 4	Semester 8 <ul style="list-style-type: none"> • NURS 490 Integrative Seminar & Practicum (4 lecture/3 clinical) • NURS 485 Global Health Perspectives for Nursing • Upper Division Elective 	7 N 3 N 4

- Co-requisite courses are highlighted in purple (red for bachelor's degree program). All nursing courses in each semester must be successfully completed to progress to the next semester.
- General education courses can be taken earlier but not later than the identified semester.
- **To apply:** ATI TEAS (6th edition) Test required, copy of LPN licensure, all courses from Year 1 semester 1 must be complete with a minimum GPA of 2.75, Year 1 semester 2 courses must be complete or in progress at time of application and finished with a minimum 2.75 GPA.
- Credits in AD Degree: 5 LPN advanced standing credits + 30 nursing; 40 gen ed= 75 total. Credits in B.S. Program: 5 LPN advanced standing credits + 60 nursing; at least 55 upper and lower div. pre-requisites & gen ed = 120 total. **Students with a previous bachelor's degree from an accredited university have their Upper Division credits met. Reference: http://www.mntransfer.org/students/plan/s_mtc.php.*

MANE CURRICULUM GUIDING STANDARDS

Program Student Learning Outcomes are framed around the AACN Baccalaureate Essentials (AACN, 2008)

1. Liberal Education for Baccalaureate Generalist Nursing Practice
2. Basic Organization and Systems Leadership for Quality care and Patient Safety
3. Scholarship for Evidence-Based Practice
4. Information management and Application of Patient Care Technology
5. Healthcare Policy, Finance and Regulatory Environments
6. Inter-professional Communication and Collaboration for Improving Patient Health outcomes
7. Clinical prevention and Population Health
8. Professionalism and Professional Values
9. Baccalaureate Generalist Nursing Practice

Quality and Safety Education for Nurses (QSEN, 2010)

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

See Appendix B for references used for curriculum Development.

DUAL ADMISSION

- An applicant admitted to a MANE college will be dually admitted to a MANE university.
- Students must meet the academic performance criteria of both institutions, and the MANE program, in order to continue to the baccalaureate degree.
- The university will advise students during semester five related to enrollment processes for upper level courses.

LEGAL LIMITATIONS

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.

RIVERLAND COMMUNITY COLLEGE NURSING STUDENT REPRESENTATIVE ROLE AND RESPONSIBILITIES

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 make suggestions for changes in the program. Student representatives will attend designated departmental meetings and committees to communicate the concerns and suggestions that are representative of their nursing class.

Student Representative Selection: Student representatives are elected by each class at the beginning of the academic year (4th week 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

1. Attend at least one Nursing Department Meeting per semester (or ask an alternate to attend). Attend at least 2 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).
2. 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.
3. Work with faculty on the committee on various tasks
4. 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 meetings 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 educators on the design, development, implementation, evaluation, maintenance, and revision of the Associate Degree, Practical Nursing, and CNA programs.

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 communication with 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 site daily for updates and communication from faculty.

COURSE LEVEL COMMUNICATION

The primary place to get news and updates about the course will be the D2L 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.

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.

All students are expected to check their campus e-mail frequently. Faculty often use e-mail to communicate with individual students. College-wide news and announcements will also be sent to you through your email account. Make sure that e-mail addressed to you @my.riverland.edu is received.

You may also use the phone to communicate with the faculty and students. All faculty office phone numbers are listed in the course syllabus. Personal cell phone numbers may be shared with students at the discretion of the instructor.

Nursing faculty will make every reasonable effort to respond to student messages via email, discussion board, or phone 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 that time. When instructors are at their clinical sites, 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.

ACADEMIC AND CONDUCT EXPECTATIONS

ACADEMIC

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 possible dismissal from the program. Any dispute regarding an assigned grade will be handled according to the process for Grade Appeals as defined in the Riverland Community College *Student Handbook*.

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; and 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

STUDENT CONDUCT

A student, group of students, or student organization whose conduct is determined to be inconsistent with the published codes in the Riverland Community College *Student Handbook* is subject to “Penalties for Misconduct” as defined in the Handbook. Any action which results in negative impact on a student will contain the elements of “Due Process” as defined in the *Riverland Community College Student Handbook*.

EXPECTATIONS THAT MAY HAVE BOTH ACADEMIC AND CONDUCT CONSEQUENCES

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 and 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 Riverland Grade Appeal 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; or 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.

RIVERLAND COMMUNITY COLLEGE STUDENT CODE OF CONDUCT <http://www.riverland.edu/policy/Student-Code-of-Conduct-3000.pdf> Appendix

CLASSROOM POLICY

Courtesy is essential in the learning environment. Distractions can severely inhibit learning. 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 might lead to dismissal from the classroom and/or 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 instructor prior to class of the need to keep

the cell phone available. Unless the instructor is made 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 when the discussion is heard by the entire class, individual conversations are disrespectful and disruptive. Instructors reserve the right to ask students to leave the classroom if their private discussions become disruptive
- Please arrive on time and prepared to participate fully in the classroom activities.
- Please stay throughout the entire class. Students leaving before class is finished is disruptive and disrespectful to those participating in the classroom teaching and learning.
- No children are allowed during class time for nursing students.
- Audio and video recorders are permitted only with the permission of the instructor. Be courteous and attend to them only before, after or during breaks in theory class. Students may not distribute class notes, handouts, audio recordings or other instructor-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, 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.

WRITTEN ASSIGNMENTS

It is expected that all students will turn in written assignments on the scheduled dates. All written assignments are due by the date and time specified in the course syllabus. Late papers will be penalized five points per day until received. A student requesting a date extension for a written assignment must receive permission from the instructor or designated faculty member prior to the due date of the assignment.

Written assignments must adhere to Riverland Nursing Program Guidelines for written assignments, as well as the requirements specified in the course syllabi.

LATENESS POLICY

The student who requests more than one date extension for written assignments, exams, quizzes, or other grade components in any one academic semester is considered to be in noncompliance with the nursing policies. The student will be required to participate in the Evaluation of Progression Review process in order to discuss this pattern of lateness.

The student's instructor will use the worksheet included in this booklet to clarify the Evaluation of Progression Review process, review Nursing Program and College policies, and help the student to prepare for the Evaluation of Progression Review.

See Evaluation of Progression Review Process and Evaluation of Progression Review Worksheet (Appendix F) and the section on the Grievance/Complaint policy in the Riverland Community College Student Handbook.

EXAM POLICY

- Students are expected to take all exams at the scheduled time.
- Students who are unable to take an exam at the scheduled time must notify the instructor beforehand and obtain the instructor's permission for a different date *prior to* the scheduled exam time. Failure to do so could result in a zero for that exam.
- Any tests taken late must be taken within two business days to receive points for that exam.
- If a student does not take the test within 2 business days, the student will receive a zero for that exam. Extenuating circumstances will be handled on a case-by-case basis.
- If there is a scheduling conflict with the Student Success Center to take a missed exam and the exam cannot be taken within 2 business days, this will be handled on a case by case basis.
- There will be no re-testing for any theory component. Please see course syllabi for specific information.

RIGHTS OF NURSING FACULTY

- Instructors reserve the right to substitute another exam for the scheduled exam that the student was unable to take.
- Instructors reserve the right to substitute a *different format* for the missed exam, for example, the teacher may select the format of essay examination instead of the multiple-choice test that was originally scheduled.

EXAM REVIEW

- Students will have the opportunity to seek clarification on specific exam items missed by meeting with the faculty member responsible for the specific exam item.
- Students who believe that there is an error or possibly more than one correct answer to an item must bring documentation of their contention to the appropriate faculty member for discussion.
- Students may request the opportunity to review an exam within one week of their exam date. Exam review will be provided within one week of the original exam unless extenuating circumstances are identified by faculty.
- Students will not be allowed to write down any information during the time they are reviewing their test.

STUDENT BEHAVIOURS DURING AND AFTER THE EXAM

- Use restroom prior to starting exam; during the exam students may only leave only for emergencies.
- Arrive five (5) minutes prior to the beginning of the exam, as a courtesy to classmates.
- Put all belongings (except pencil and calculator) in front of testing room. This includes cell phones and smart watches. Please turn off cell phones during testing.
- Leave caps and jackets in front of testing room.
- Sign in on the attendance roster.
- Sit as directed by the proctor.
- Receive one half-sheet of colored or marked scratch paper provided by proctor.
- Write name at the top of the colored scratch paper.
- Write only on the colored or marked scratch paper during the exam.

- Turn in the colored or marked scratch paper to proctor when exiting the room.
- Abide by “no talking” to peers after the exam starts.
- Do not ask the proctor questions pertaining to content or argue rationale during the exam.
- Complete exam during the allotted time
- View rationale if available on computerized exam.
- If the exam is computerized log out after viewing rationale or after completing exam.
- Quietly exit building immediately. Do not congregate inside the building to wait for peers or friends.
- Abide by the testing rule of “no test item discussion” unless with instructor.
- Faculty reserve the right to assign seats during any exam.
- Students must request the opportunity to review an exam within one week of their exam date. Exam review will be provided within one week of the original exam unless extenuating circumstances are identified by faculty. Students will not be allowed to write down any information during the time they are reviewing their test.

PROFESSIONAL INTEGRITY

Nursing is a helping profession where those giving care reflect directly upon the well-being of the patient and his/her family. Therefore, it is the responsibility of each member of the profession to ensure the rights of the patient to receive safe and adequate care. (A nursing class is a functional unit responsible for its own actions as they affect all class members and ultimately those whom they serve.) It follows that all responsibility for honesty in learning, which is basic to competence and thus patient safety (as expressed in the ANA Code for Nurses at

<http://www.nursingworld.org/mainmenucategories/ethicsstandards/codeofethicsfornurses/code-of-ethics.pdf>), is a moral and legal responsibility of the student regarding his/her own actions and the actions of other members of the group.

Student honesty in class work - You are expected to be honest in completing all class assignments. Cheating and plagiarism are not acceptable. Definitions of, and penalties for, dishonesty are the prerogative of each instructor (RCC Academic Student Handbook).

Examples of violations of this policy include, but are not limited to:

- Cheating on exams;
- Copying in part or whole other student's written material;
- Falsifying information and attendance relating to independent assignments;
- Failure to report known clinical errors;
- Falsifying information in the clinical setting;
- Discussing test contents with student(s) that have not yet taken the exam.

Violations of this policy will result in immediate referral to the Nursing Progression Review Committee with a recommendation for dismissal from the nursing program. Any student dismissed for violation of this policy **will not be** eligible for readmission consideration.

SOCIAL MEDIA

RCC is committed to the protection of patient, 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 RCC 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, and MySpace. The nursing program at RCC 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. Social media often spans traditional boundaries between professional and personal relationships and thus takes additional vigilance to make sure that one is protecting personal, professional, and college reputations. The following policy serves as a guideline for those seeking to establish a social media outlet.

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 for academic and clinical coursework

The nursing program supports the use of social media in personal/non-school or non-work contexts. Be aware of your association with RCC 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 RCC's behalf, unless you are authorized to do so in writing. As a student within the nursing program at RCC, 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 name (any identifier including initials, hospital name, etc.) and personal health information in any way.
- Do not disclose confidential information about the nursing program, the College, its employees, or its students.
- Never stating personal opinions as being endorsed by the College or

- nursing program.
- Do not use information and conduct activities that may violate RCC 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.

If you identify yourself as a RCC student online, it should be clear that any views you express are not necessarily those of the institution. In the event that opposing views arise on a social media feed, exercise professional judgment. RCC 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.

PROGRAM PROMOTION AND PROGRESSION

PREREQUISITES

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

PROGRAM PROMOTION/PROGRESSION

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 MANE Curriculum Plan in order to progress in the program, with the exception of:
 - a. The 8 credits of upper division liberal studies electives may be taken at any time during the program.
 - b. NURS 446 Nursing Informatics may be taken the semester before, during, or after semester Seven (7), but must be completed before semester 8.
2. Progression in the nursing program requires a grade of C or better in all required courses in the MANE curriculum plan.
 - a. A C- is not considered a passing grade.
 - b. A Minimum GPA of 2.0 is required for graduation.
 - c. Nursing courses that combine theory, clinical and/or lab require that all portions must be passed at a minimum of 78% 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.
 - d. Earned points will be carried out two decimal points. There will be no rounding of points to determine letter grades.

II. Unsuccessful Academic Progress

A. 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 3 of the program plan, the student is eligible to return to the program on a space available basis. The student must follow the progression policy for the program.

B. Exit from a MANE Program

- A student may be exited from a MANE 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. All MANE member programs reserve the right to exit a student for ethical misconduct and/or unsafe behavior at any point in the programs.

C. Reapplication to a MANE Program

A student who is exited from a MANE program for academic failure and/or failure to meet conduct expectations may reapply to the program and must meet the current published admission criteria and the following criteria:

1. A student may be readmitted to MANE one time only.
 - a. Reapplication to the program is required, either to the original home campus or another MANE member program.
 - b. If a student reapplies, either to the original home campus or another MANE member program, and is subsequently exited a second time for either academic failure and/or failure to meet conduct expectations, the student is permanently exited from all MANE programs.
 - c. All MANE applications are reviewed across all programs each application period to ensure that a student is only readmitted once.
 - d. All MANE member programs reserve 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 but is not limited to all CPR, health and immunization requirements, and background study requirements.
 - b. Transcripts from all MANE institutions in which a student was accepted to the nursing program and received grades in nursing courses will be included in the required application documents.
 - c. Students applying for readmission after program exit must retake all nursing courses even if previously successful in these courses, based on college policy.

D. Withdrawal from a MANE nursing program course

Students may initiate requests for withdrawals from nursing courses according to college/university policy/procedures.

1. Students should be aware of the college/university policy for automatic withdrawal for non-attendance/participation.
2. Students should be aware of the last day in the semester in which a withdrawal can be initiated.
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.
4. Grades at the time of withdrawal may be taken into consideration for any request for re-entry.

5. A withdrawal constitutes an attempt for a course and will count as one failure to complete the course.
6. Due to the concept-based nature of the curriculum, nursing courses within any given semester must be taken concurrently.

III. Re-Entry Policy for Students with Altered Progression Not Related to Academic or Code of Conduct Issues.

Students who wish to be considered for re-entry 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. Space available for registering in each subsequent semester will be determined at the end of each semester.
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 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.

IV. LPN Licensure

Current LPN licensure must remain unencumbered whilst 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.

GRADING SCALE FOR PROGRAM

The MANE Nursing Program grading scale is as follows:

Grading Plan with Shading
95 – 100% = A
92 – 94.9% = A-
90 – 91.9% = B+
87 – 89.9% = B
85 – 86.9% = B-
83 – 84.9% = C+
78 (minimum) – 82.9% = C

75 – 77.9% = C-
72 – 74.9% = D
< or = to 71.9% = F

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. See College Student Handbook at : <http://www.riverland.edu/studenthandbook>
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.
4. Grades at the time of withdrawal may be taken into consideration for any request for re-entry.

INCOMPLETES

An Incomplete ("I") grade may be assigned only when, upon the student's request, the nursing instructor consents to an extension of time for course completion. Since each nursing course is sequential, incompletes must be completed within the time frame 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).

RE-ENTRY PROCESS

FOR STUDENTS WHO SELECT TO EXIT AFTER SUCCESSFUL COMPLETION OF SEMESTER 5.

This process applies to community college MANE students who wish to be considered for re-entry into the sixth semester of the MANE curriculum plan.

A student who selects to step-out of the nursing program at the associate degree level after successful completion of semester 5 of the nursing program must follow the following steps:

1. Must inform the nursing program by completing the "Intent to continue form".
2. May return to the program within 1 academic years and resume the curriculum in the 6th semester on a space available basis at the university.
3. Must notify the university nursing program administrator a minimum of one semester prior to the desired return date to determine if space is available.
4. Follow university protocol regarding previously admitted students.

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, 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 Director of Nursing. Space available for registering in each subsequent semester will be determined at the end of each semester.
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 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/university policies related to conduct and due process.
6. A student who fails due to academics 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 CPR, health, liability insurance, and background study requirements, and a cumulative GPA of 2.75.

The Nursing Student Readmission Form (see Appendix E) and current transcript is submitted within the required time frame.

EVALUATION OF PROGRESSION REVIEW PROCESS

Evaluation of Progression Review is a problem-solving process between the student and the nursing faculty to discuss identified unsatisfactory behaviors. The student will be required to participate in this process if in noncompliance with the Nursing Program's policies.

The Evaluation of Progression Review process is used to respond to identified concerns whenever they occur throughout the students nursing education at Riverland Community College.

Steps in the Evaluation of Progression Review Process:

The student demonstrates unsatisfactory classroom, lab, or clinical behavior(s) as delineated by the criteria for ongoing clinical evaluation and/or the student demonstrates noncompliance with the Nursing Program policies.

1. The student receives either a hard copy or electronic version (sent to their RCC email account) of a written description of the event(s) and an identification of the problematic behavior(s). Depending on the identified event(s), the student may or may not be allowed to return to the clinical, classroom, or lab area until a decision is rendered. The student will be responsible for making up any time lost during the pending Evaluation of Progression Review.
2. The student confers with the instructor to receive clarification about the identified event(s). They use the Evaluation of Progression Review worksheet to clarify the criteria for ongoing evaluation and the Evaluation of Progression Review process. The instructor provides assistance to the student as to how to prepare for the Evaluation of Progression Review process. The student is responsible for formulating a plan of action for resolution of the difficulty. After both parties sign and date the worksheet, or acknowledge it via email, a date for the Evaluation of Progression Review process is sought.

3. The student attends the scheduled meeting with the Nursing Progression Review Committee, shares his/her perception of the event(s), and presents an action plan to work through the identified problem(s). Nursing faculty members may ask questions to clarify their understanding of the student's presentation. The student may have an advisor or advocate present at the Evaluation of Progression Review. A student's advisor or advocate may attend this meeting but may not participate except to advise the student.
4. The student leaves the meeting and the committee discusses the student presentation, the severity of the issues, and consider possible solutions. The solution may range from but is not limited to:
5. No further action to be taken.
6. Placement of the student in probationary status and developing a contract with him/her outlining:
 - a. Unacceptable behaviors.
 - b. Required corrective action goals
 - c. Time frame for evaluation of corrective action outcomes.
 - d. Date probationary status will end provided the corrective action(s) is/are attained.
 - e. Consequences of failure to meet terms of the contract.
7. Determination that the student has become ineligible to progress in the program.
8. The faculty will notify the student of the formal decision in writing via the student's RCC email account within 3 business days of the Progression Review and if warranted, will also advise the student of recourse via the grievance procedure.
9. If the student chooses to grieve the faculty's decision, he/she must notify the Nursing Director within 3 business days of receiving the decision. The Director will review the Progression Review Worksheet, and if indicated, a copy of the contract. The Director may confirm or deny the faculty's decision, or ask for more information before reaching a decision or may recommend a modified action.
10. The Director will notify the student of the formal decision within 5 business days of receiving the notification from the student and if warranted, will also advise the student of recourse via the grievance procedure as outlined by the Student Handbook.

NON-DISCIPLINARY ADMINISTRATIVE ACTIONS

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 student's instructor will use the worksheet included in this booklet to clarify this procedure. (Appendix F). 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 in order to better facilitate his/her learning experience.

APPEALS PROCESS

If there is a dispute between the student and faculty member concerning the outcome of a Non-Disciplinary Academic Action, the following steps will occur:

1. The student will meet with the instructor within 3 business days to explain why the action in question is unreasonable and propose alternatives for resolving the issue. The instructor and the student will together use the worksheet provided in this booklet (Appendix G) to review this policy. 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 instructor 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 Nursing Director and re-state his/her objection(s) and offer proposed solutions. The Director may ask for more information from the student and faculty before making decision.
4. If no resolution is secured in the preceding three steps, the student may begin the written grievance process as outlined Riverland Community College Handbook. See section in the handbook titled Grievance/Complaint Policy.

DISCIPLINARY PROCEDURES

Disciplinary procedures are consequences of inappropriate behavior, conduct or action.

ON CAMPUS DISCIPLINARY PROCEDURES MISCONDUCT: ACADEMIC AND OR NONACADEMIC

Misconduct is subject to disciplinary action. There are two types of misconduct depicted in the Riverland Community College Student Handbook. The two types of misconduct are designated as Academic Misconduct and Nonacademic Misconduct. Please see the Riverland Community College Student Handbook for an explanation of the types of misconduct, penalties for misconduct, procedures and appeals. (<http://www.riverland.edu/policy/Academic-Misconduct.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 will be addressed by using the Evaluation of Progression Review Process.

The student's instructor will use the worksheet included in this booklet and clarify the Evaluation of Progression Review, review Nursing Program and College policies, and instruct the student on how to prepare for the Evaluation of Progression Review.

See Evaluation of Progression Review and Evaluation of Progression Review Worksheet (Appendix F) and the section on the Grievance/Complaint policy in the Riverland Community College Student Handbook.

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 instructor 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 persons 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 instructor involved in the incident(s) may also file a complaint against the student. For example, when a student threatens an instructor, or attempts to carry out such a threat.

COMPLAINTS AND GRIEVANCES

If a student has a complaint concerning alleged improper, unfair, arbitrary or discriminatory treatment by nursing faculty or personnel, the nursing department strongly encourages students to bring their issues forward. In order to promote a positive learning environment, the nursing program expects the student to attempt to first resolve concerns with the faculty member to whom the complaint is directed.

If the complaint is unresolved with an informal meeting with the faculty member, the student may contact the Director of Nursing for assistance with resolution. A formal written complaint should be submitted using the Student Complaint Form found in the RCC Student Handbook. If the

student chooses to file a formal written complaint, the process includes:

- The student will submit the Student Complaint Form to the Director of Nursing. If a meeting is requested by the student, it will be arranged between the student, the appropriate nursing personnel and Director of Nursing.
- If the student feels a satisfactory resolution is not reached and feels the decision was improper, unfair, or arbitrary, the student has the right to file a formal complaint with the college. The written grievance must be filed within 10 days of receipt of the Director of Nursing's decision. See the policy "Complaint/Grievance Policy/Procedure" found on the College website.

CLINICAL POLICIES OVERVIEW AND EXPECTATIONS

MANE schools use several hospitals, long-term care facilities, clinic, 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 stipulates mutual expectations for both services and regulations. It is the intent of the MANE schools that all nursing students represent themselves in professional attire and performance, while in an affiliating clinical facility.

A variety of experiences may be utilized by faculty to meet course objectives. 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 possible 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.

HEALTH REQUIREMENTS

In addition to the core performance standards the following need to be met in order 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
- 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 period, you must complete a two-step testing process, one to three weeks apart. Two Mantoux tests must be on file or have proof the quantiferon (TB gold test).
 - Students must maintain good health throughout the program in order 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 as a result 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 course.

HEALTH INSURANCE REQUIREMENT

Nursing students are required to carry health insurance in order 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

Patient confidentiality is absolutely essential. The patient has the legal right to confidentiality in all aspects of his/her care and the nurse has a legal and ethical responsibility to safeguard the patient's confidentiality. **Confidentiality related to patient information also extends to electronic forms of communication such as e-mail and social media sites.** Students may not give information about a patient or clinical experience to anyone who is not employed at the clinical facility. 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 lecture 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 carefully 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 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 of 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.

MINNESOTA STATE TECHNICAL STANDARDS FOR ENTRY LEVEL NURSING PROGRAMS

Technical standards have been developed that describe required abilities for effective performance in Minnesota State nursing education programs. The standards are compatible with the scope of practice as defined by the Minnesota State Board of Nursing. The examples show how a standard may be applied in entry level nursing education programs. The examples listed are for illustrative purposes only, and not intended to be a complete list of all tasks in an entry level nursing program. Reasonable accommodations to meet standards may be available for otherwise program-qualified individuals with disabilities. Contact the college/university's Disability Services Office as soon as possible for more information if you think you may need an accommodation for a disability.

INTELLECTUAL

Capability	Standard	Examples
Cognitive Perception	The ability to perceive events realistically, to think, clearly and rationally, and to function appropriately in routine and stressful situations. Students must be able to independently and accurately assess or contribute to the assessment of a client.	<ul style="list-style-type: none">• Identify changes in client health status• Prioritize multiple nursing activities in a variety of situations

<p>Critical Thinking – Careful thought, reasoned judgment. Differentiated from personal opinion and superficial memorization of facts by the ability to obtain and use an appropriate quantity and quality of data for a given situation. Critical thinkers question assumptions, routines, and rituals, reconsider “known facts” when new information becomes available and develop new “rules” when old ones fail or are unavailable.</p>	<p>Critical thinking skills demanded of nurses require the ability to learn and reason: to integrate, analyze and synthesize data concurrently. Students must be able to solve problems rapidly, consider alternatives and make a decision for managing or intervening in the care of a client</p>	<ul style="list-style-type: none"> • Able to make effective decisions in the classroom and in the clinical sites. • Develop/contribute to nursing care plans that accurately reflect client concerns. • Able to make decisions reflective of classroom learning in the clinical sites.
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MOTOR SKILLS

Capability	Standard	Examples
<p>Motor Skills</p>	<p>Ambulatory capability sufficient to maintain a center of gravity when met with an opposing force as in lifting, supporting, and/or transferring a client</p>	<ul style="list-style-type: none"> • Position clients • Reach, manipulate, and operate equipment, instruments and supplies, e.g. syringes, sterile equipment, and monitors • Perform/use electronic documentation (keyboarding) • Lift, carry, push and pull

		<ul style="list-style-type: none"> • Perform CPR
Mobility	Ambulatory capability sufficient to maintain a center of gravity when met with an opposing force as in lifting, supporting, and/or transferring a client	<ul style="list-style-type: none"> • Propel wheelchairs, stretchers, etc., alone or with assistance as available • Transport supplies to client room • Work around bedside with other personnel • Lift a child • Move and lift clients in and out of bed, wheelchair or cart • Assist with transfer and walking of patients who may require substantial support • Lift a minimum weight
Activity Tolerance	Ability to tolerate lengthy periods of physical activity	<ul style="list-style-type: none"> • Move quickly and/or continuously • Tolerate long periods of standing and/or sitting

COMMUNICATION

Capability	Standard	Examples
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Communication	<p>Communicate in English with others in oral and written form</p> <p>Able to communicate with clients and members of the health care team in order to plan and deliver safe care</p>	<ul style="list-style-type: none"> • Utilize oral and written communication skills sufficiently for teaching/learning and for interaction with others • Read, understand, write, and speak English • Explain treatment procedures • Initiate and/or reinforce health teaching • Document client responses • Clarify communications received
Interpersonal Relationships	Interact with clients, families, staff, peers, instructors, and groups from a variety of social, emotional, cultural and intellectual backgrounds	<p>Establish rapport with clients, families, and colleagues</p> <ul style="list-style-type: none"> • Respond in a professional/therapeutic manner to a variety of client expressions and behaviors

SENSES

Capability	Standard	Examples
Hearing	Auditory ability sufficient to hear normal conversation and/or assess health needs	<ul style="list-style-type: none"> • Ability to monitor alarms, emergency signals, auscultatory sounds, e.g. B/P, heart, lung, and bowel sounds, cries for help, and telephone interactions/dictation • Communicates with clients, families and colleagues

Vision	Visual ability sufficient for observation, assessment, and performance of safe nursing care	<ul style="list-style-type: none"> • Observes client responses • Discriminates color changes • Accurately reads measurement on client-related equipment • Read medication label • Read syringe accurately • Evaluate for a safe environment
Tactile	Tactile ability sufficient for physical assessment, inclusive of size, shape, temperature and texture	<ul style="list-style-type: none"> • Performs palpation, e.g. pulse • Performs functions of physical examination and/or those related to therapeutic intervention, e.g. insertion of a catheter

PSYCHOSOCIAL

Capabilities	Standard	Examples
Psychosocial Behaviors	Possess the emotional health required for full use of intellectual abilities, the exercise of good judgment, and the prompt and safe completion of all responsibilities	<ul style="list-style-type: none"> • Demonstrate professional abilities of trustworthiness, empathy, integrity, and confidentiality • Be able to change and display flexibility
		<ul style="list-style-type: none"> • Learn to function in the face of uncertainties and stressful situations

ENVIRONMENTAL

Capabilities	Standard	Examples
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Environmental Adaptability	Ability to tolerate environmental stressors	<ul style="list-style-type: none"> • Work with chemicals and detergents • Tolerate exposure to odors • Work in close proximity to others • Work in areas of potential physical violence • Work with infectious agents and blood-borne pathogens • Work in environments that may have allergens, such as latex.
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Presented and revised by Minnesota Practical Nursing Education and Associate Degree Education Directors' Association on 1/29/11.

DRESS CODE FOR CLINICAL 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 experiences, simulation lab experiences, and laboratory testing. A student who does not adhere to this code may be asked to leave the clinical facility by the clinical instructor or the nurse in charge. This will result in an unexcused absence from 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 Riverland Associate Degree Nursing Program uniform consists of the following:

- Clean, wrinkle-free, white scrub top with royal blue bottoms. Pants must be full length and skirts knee length or longer. No material may touch the ground.
- No smoking in clinical uniforms White or royal blue long sleeved shirt is allowed under the white scrub top. Sleeves must be able to stay up on arms for hand hygiene and when required for infection control purposes. A plain white sweater may be worn; it must have the Riverland insignia, and be worn only in the clinical area.
- All students must wear socks. If students wear a skirt uniform, the stockings must be full length. No

anklets or bare legs are permitted. Hose and socks must be white.

- White, black, navy blue, gray athletic style shoes with a non-skid surface and flat heel 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.
- RCC insignia patch with the MANE nursing patch below it will be worn on the sleeve of the left upper arm. They must be firmly attached with no visible pins holding the patches in place. They must also be attached to a sweater if worn in the clinical area.
- RCC Photo ID will be worn on the front left side of the uniform above the waist in both the clinical and laboratory settings. No lab coats allowed in the clinical agencies.
- 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 instructor.
- Fingernails should be short in length. If polish is worn, it should be clear or light colored. No artificial nails.
- Maintain personal hygiene which eliminates body odor, including foul breath. Refrain from use of fragrances, perfume or cologne, etc. All wearing apparel at the clinical site must be free from any fragrance or odor of smoke.
- 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.
- 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.
- Make-up in moderation is allowed.
- Nursing uniforms can only be worn on campus when instructed.
- Uniforms are not to be worn at Riverland Community College or in other public places prior to, or following, clinical experiences unless completely covered by a clean, white sweater.
- 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, or during simulation or skills labs.

SIMULATION CENTER REQUIREMENTS

Students may be required to attend simulation events outside of their regular lecture, lab or clinical day, and may be required to attend simulation in Austin and/or Owatonna.

- A clinical uniform should be worn during simulation experiences, or clothing which allows unrestricted movement as specified by the instructor.
- Riverland picture ID badge will be worn on the front left side of the uniform above the waist in the laboratory setting.
- Hands must be washed before working with simulation mannequins and equipment.
- Students must sign a confidentiality agreement prior to participating in simulation

- experiences.
- Student jackets, bags, etc., should not be brought into the Center.

ATTENDANCE POLICY: CLINICAL, LAB, SIMULATION DAY

- Attendance at all laboratory, simulation, and clinical experiences is **mandatory** and is essential to ensure course outcomes are met.
- 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 instructor (or clinical area) must be notified before the scheduled laboratory, simulation, or clinical start time.
- In the event of 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 instructor.
- Absence from **one or more** of the following per semester: laboratory, simulation, and clinical could result in a **faculty progression review and possible termination from the program**.
- Lateness to clinical, lack of preparation or non-adherence to school or institutional policies could also result in a **faculty progression review and possible termination from the program**.
- Faculty reserves the right to request proof of illness or family emergency for any reported absence.
- The student's instructor will use the worksheet included in this handbook to clarify the **Evaluation of Progression Review Process**, review Nursing Program and College policies and help the student to prepare for the Evaluation of Progression Review.
- See Evaluation of Progression Review Process and Evaluation of Progression Review Worksheet and the appeals process as outlined in the Riverland Community College Student Handbook.

STUDENTS RESPONSIBILITIES FOR CLINICAL

1. Attend scheduled clinical sessions on or off campus.
2. **No cell phones are permitted at clinical.** If you have an emergency and need your cell phone, you are to report to your instructor prior to the start of clinical to discuss the situation. Violation of this policy could result in dismissal from the program. If a cell phone is found on your person at clinical, you will be sent home for the day and a follow-up appointment will be made with your instructor and the Director of Nursing before you can return to clinical. If you get sent home, you must make up that clinical day per the availability of the instructor(s).
3. Students are **not** to attend clinical if they are ill.
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 instructor 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.
7. Arrange with clinical instructor within the time frame designated in the syllabus and/or student handbook to make up missed clinical experience.
8. Plan care for client:
 - A. Verifies the patient's plan of care with the nurse prior to initiating patient care.

- B. Establishes a contract with and collects data from the client.
 - C. Gathers data from other appropriate resources, including the medical treatment plan.
 - D. Applies knowledge and principles from course content to plan the nursing care for the assigned client.
9. Show evidence of preparation for clinical **prior to** the clinical sessions at a level consistent with course objectives:
- A. Is able to state and demonstrate knowledge regarding assigned clients, such as:
 - i. diet and activity level of client
 - ii. medications (actions, dosage, side effects, time, and method of administration)
 - iii. delegated nursing interventions (e.g. procedures and treatment)
 - iv. special precautions for client
 - v. special needs of client
 - B. Provides written plan of care worksheet outlining the action(s) to be taken in caring for assigned clients as determined in the course syllabus or by the clinical instructor, and at what time the action(s) will be taken.
10. Provide physiological safety (e.g. practices principles of infection control, administers medications safely, uses side rails and restraints safely, attempts only care assigned and for which student has had preparation).
11. Provide psychological safety (e.g. is respectful, kind, uses therapeutic techniques in interactions and does not cause client anxiety).
12. Implement the nursing process, consistent with course objectives (e.g. observes and/or reports essential data; sets appropriate priorities, etc.)
13. Using the communication process appropriately, for example:
- A. Communicates effectively with peers, nursing staff, healthcare team members and instructor.
 - B. Utilizes the helping relationship in communicating with clients and families.
 - C. Communicates effectively in writing (e.g. charting is legible, accurately reflects the patient's condition, addresses all patient priorities, uses correct spelling, grammar and syntax, etc.)
 - D. Participates in small group discussions.
 - E. Is respectful and supportive of clients and hospital staff.
 - F. Recognizes boundaries which distinguish a professional/therapeutic relationship from a personal/social relationship. Maintains professional/therapeutic relationships with patients.
 - G. Uses touch in a way that is appropriate to the nursing task and a professional/therapeutic versus a personal/social relationship.
14. Accept legal responsibilities for providing safe nursing care (e.g. reports medication error, following institutional protocol).
15. Immediately report injuries sustained in the clinical laboratory to supervisor.
16. Show evidence of appropriate professional behavior, for example:
- A. Adheres to the American Nurses Association (ANA) Code of Ethics.
 - B. Adheres to confidentiality policy.
 - C. Follows institutional policies/protocols.
 - D. Demonstrates honesty and integrity in all communication and behavior.

17. Complete clinical assignments within designated time frame.
18. Maintain a respectful and cooperative relationship with instructor which facilitates learning.
19. Students may not phone or visit their assigned clinical site outside of assigned clinical experiences as outlined by the course faculty.

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 which may be used when acting in the capacity of a student in the Nursing Program, and the format for your 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.

UNSAFE CLINICAL PERFORMANCE

- Unsafe clinical performance, failure to meet clinical, simulation, or lab objectives, or inadequate preparation for clinical, simulation, or lab experiences may require faculty review and 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 instructor 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.

LEARNING LAB/SIMULATION POLICIES

The Nursing Learning 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.

In order to enhance active learning, RCC has established the following policies for all to follow:

- **NO EATING OR DRINKING** in the lab. This is an OSHA policy.
- 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.
- During open lab hours all students must sign in and out.
- No lab items leave 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 return to its container.
- Wipe up all spills on the floor.
- Straighten all bed linen and return to original state.
- Return all lab supplies in correct containers. All needles and sharps place in red sharp container boxes.
- Turn off all lights in simulated “patient rooms.”
- Replace manikins neatly where you found them.
- Confidentiality must be maintained after leaving the lab/simulation area. Sensitive information may be shared during this experience.
- All rules for handling bio-hazardous waste must be followed according to the document posted on the D2L nursing homepage as well as on the bulletin board in the Nursing Learning Resource Center.
- According to **MN Statutes SECTION 151.37**, students cannot have in possession any solutions or legend drug. Therefore, any of these products will directly monitored by a faculty or director 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 disposing them in the designated sharps containers provided in the labs.
- All unused needles and syringes must be returned to their designated locked location and not left unattended in the laboratory.
- Syringes, needles, and medications may not be removed from the laboratory for practice at any time by either instructors or students.
- 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 are meant to be used only on manikins in the lab, such as the Foley catheter 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.

ATTENDANCE

The student is expected to attend the nursing classes. In the event of absence, the student is responsible for content covered during the absence. The student is required to attend all lab/clinical/simulated learning experiences both on and off- campus. If, for any reason, a student must be absent, it is the student’s responsibility to notify the clinical instructor within a reasonable time before the beginning of the scheduled experience. The student will initiate a conference with the instructor within one week of the absence for the development of a plan for make-up.

Any absence without notification of the clinical instructor, and/or absences in excess of that which is specified in the course syllabus will result in the student being required **to participate in the Evaluation of Progression Review.**

The student's instructor will use the worksheet included in this handbook to clarify the Evaluation of Progression Review process, review Nursing Program and College policies and help the student to prepare for the Evaluation of Progression Review.

See Evaluation of Progression Review Process and Evaluation of Progression Review Worksheet (Appendix F) and the appeals process as outlined in the Riverland Community College Student Handbook.

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) 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

APPENDIX A

GLOSSARY OF TERMS:

TERM	DEFINITION
Organization of the Curriculum	
Essentials of Baccalaureate Education for Professional Nursing practice as defined by the American Association of Colleges of Nursing (AACN, 2008)	Nine essentials delineate the outcomes expected of graduates of baccalaureate nursing programs. The essentials emphasize patient-centered care, inter-professional teams, evidence-based practice, quality improvement, patient safety, informatics, clinical reasoning/critical thinking, genetics and genomics, cultural sensitivity, professionalism, and practice across the lifespan in an ever-changing and complex healthcare environment. The essentials have been adopted by MANE to define the <i>performance standards (measurable/observable knowledge, skills and attitudes)</i> of the baccalaureate graduate and leveled to define the benchmark <i>performance standards</i> at the completion of the AS degree.
Benchmark	The set of academic performance standards that a student must achieve as they progress through the curriculum. Benchmarks are met or assessed by the end of five semesters and at the end of 8 semesters in conjunction with course student learning outcomes. Achieving the overall set of benchmarks is the means for student progression. Benchmarks specify the context in which students will be expected to demonstrate competency.
Collaborative curriculum	The MANE curriculum is being co-developed among phase one faculty and practice partners. It is a collaborative curriculum among all partners and academic standards that include common prerequisites, criteria for co-admission status, and spiraled coursework facilitate a seamless progression from the AS degree to the BS degree.
Spiraled Curriculum	A spiraled curriculum revisits concepts at increasing levels of difficulty. New learning takes place by increasing the complexity and or adding new content to already mastered competencies. Mastery of defined nursing competencies increases the overall competence of the student in performing the role of the professional nurse. (MANE, 2014.)
Acute Care	Acute care focuses on the nursing care of patients experiencing acute disruptions of health. It is a pattern of health care in which a patient is treated for a brief but severe episode of illness. (MANE, 2014.)
Chronic Care	Chronic care is the holistic care of patients experiencing long-term illnesses and/or co-morbidities focusing on the ‘lived experience’ of patients and families while promoting advocacy, self-determination, and autonomy. (MANE, 2014.)

Complex Care	Complex care focuses on the nursing care of patients whose conditions require multidimensional, continuous care, and frequently require services from interprofessional teams. (MANE, 2014.)
Palliative Care	Palliative care optimizes the quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs and to facilitate autonomy, access to information, and choice. (The Hospice and Palliative Nurses Association- https://www.hpna.org/Display/Page.aspx?Title=Position)
Health Promotion	Dossey and Keegan (2013) describe <u>health promotion</u> as, “Activities and preventive measures to promote health, increase wellbeing, and actualize the human potential of people, families, communities, society”, and environment. (p.60) The World Health Organization (WHO) defines Health promotion as the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions. (World Health Organization, n.d. Health topics: health promotion. Retrieved from: http://www.who.int/topics/health_promotion/en/).
Wellness	A multidimensional state of being describing the existence of positive health in an individual as exemplified by quality of life and a sense of well-being. (MANE, 2014.)
Competence	Competence vs Competency <ul style="list-style-type: none"> • Though both having similar meanings, competence and competency are used in different contexts. • Competence refers to a person’s ability or skills and knowledge that he/she possesses upon graduation. • Competencies of a job refer to description of how things have to be done and at what level.
Competency	Competencies describe the knowledge; skills and attitudes expected upon graduation and are categorized according to the nine baccalaureate essentials. The competencies are leveled for the baccalaureate and associate degree completion points. A hallmark of the competency model is a spiral approach to teaching and learning. Competencies are revisited throughout the curriculum with increasing levels of difficulty and with new learning building on previous learning.
MANE Competence Statements	The ten (10) competence statements defining the ability of the MANE graduate. <ol style="list-style-type: none"> 1. A competent nurse develops insight through reflection, self-analysis, self-care and lifelong learning. 2. A competent nurse demonstrates leadership as part of a health care team. 3. A competent nurse effectively uses leadership principles, strategies and tools 4. A competent nurse locates, evaluates, and uses the best available evidence. 5. A competent nurse utilizes information technology systems including decision support systems to gather evidence to guide practice. 6. A competent nurse practices within, utilizes and contributes to the broader health care system. 7. A competent nurse practices relationship centered care. 8. A competent nurse communicates effectively. 9. A competent nurse’s personal and professional actions are based on a set of shared core nursing values. 10. A competent nurse makes sound clinical judgments.

Course Student Learning Outcome	A specific standard or intended outcome of learning at the successful completion of a course in the MANE curriculum. Course student learning outcomes reflect significant elements of the benchmarks to be achieved by the end each benchmark and contribute to the broad competencies expected at successful completion of the AD and BS completion points.
Core Nursing Values	Caring, Integrity/Open and responsive communication, Diversity, Excellence/Quality/Efficiency/Accountability (NLN core values, 2011, AACN Core Values, 2012). CARING: promoting health, healing, and hope in response to the human condition INTEGRITY: respecting the dignity and moral wholeness of every person without conditions or limitation DIVERSITY: affirming the uniqueness of and differences among persons, ideas, values, and ethnicities EXCELLENCE: creating and implementing transformative strategies with daring ingenuity
Health Care Environment	The health care environment encompasses the broad spectrum of settings in which professional nursing care occurs.
IOM (Institute of Medicine)	The IOM report, <i>The Future of Nursing: Leading Change, Advancing Health</i> , recommends that 50 -80% of the nursing workforce be prepared at the baccalaureate level or higher by 2020 to meet the demands of an evolving health care system and the changing needs of complex patient care.
Minnesota Alliance for Nursing Education (MANE)	An innovative nursing education consortium between a state university and 7 community colleges phase one adopters. This partnership includes Metropolitan State University, Anoka-Ramsey Community College, Inver Hills Community College, Normandale, North Hennepin Community College, Ridgewater Community College, Riverland Community College, and Century College. The consortium has evolved in response to the evidence and with a commitment to excellence and innovation to partner to expand the capacity for baccalaureate prepared nurses in Minnesota. The goal of MANE is to make baccalaureate nursing education available to students across the state, allowing qualified students to graduate with a baccalaureate degree within four years on every partner campus. The collaborative nursing curriculum, developed jointly with practice partners will prepare the nurse of the future to care for Minnesota's increasingly diverse and aging population.
Minnesota Transfer Curriculum (MnTC)	A means by which students transfer their lower division general education requirements taken at a two year college to any public university in Minnesota. The transfer curriculum is accepted as a package. An AA degree must meet all 10 goal areas in the transfer package and an AS degree must include a minimum of 30 semester credits in general education courses selected from least 6 of the 10 goal areas. The AS degree may include the entire MnTC (Minnesota State Policy 3.17) The AS degree is the degree awarded at the AD endpoint in the MANE curriculum.

Patient	<p>The recipient of nursing care or services. This term was selected for consistency and in recognition and support of the historically established tradition of the nurse-patient relationship. Patients may be individuals, families, groups, communities, or populations. Further, patients may function in independent, interdependent, or dependent roles, and may seek or receive nursing interventions related to disease prevention, health promotion, or health maintenance, as well as illness and end-of-life care. Depending on the context or setting, patients may, at times, be more appropriately be termed clients, consumers, or customers of nursing services (AACN, 1998, p.2); (The Essentials of Baccalaureate Education, 2008, p. 38)</p>
Performance Standards	<p>Expected levels of achievement for each benchmark.</p>
Rubric <ul style="list-style-type: none"> • Competency Rubric • Assignment Specific Rubric • Rubric Criteria • Rubric Indicators • Rubric Dimensions 	<p>A teaching and learning guide based on specific criteria that allows faculty to assess student performance and provides students the opportunity to self-assess their progress. A rubric clearly describes what the <i>performance standard</i> is, what it looks like, or what the qualities of meeting the standard are. Rubrics are presented as a scale or continuum of performance beginning with the highest standard and moving through progressively less acceptable levels of performance.</p> <ul style="list-style-type: none"> • Competency Rubric: The baccalaureate essentials are the competencies. They are translated into individual or benchmark rubrics that describe to students the standards or benchmarks that have to be met by the end of the AS degree and the BS degree. Benchmark rubrics are incorporated into clinical performance evaluations. • Assignment-specific Rubric: A rubric that is used for assigning points and grading performance. • Rubric Criteria: The quality markers or set of standards to be met. Criteria tell faculty what to look for in performance and tell students what the highest level of performance is. Rubric criteria are the basis of judging the quality of a student's work. • Rubric Indicators: Subcategories of rubric criteria but more specific elements that indicate what to look for in evaluating student work. • Rubric Dimensions: Major components of a competency or assignment which when combined constitute performance. The dimensions tell the student what concepts or skills are described or embedded in the competency or assignment to be performed. For example, the dimensions of clinical judgment are noticing, interpreting, responding and reflecting.

Program Student Learning Outcome	The broad performance indicator of learning at the successful completion of the curriculum. These outcomes relate to the knowledge, skills and attitudes needed of the baccalaureate and associate degree graduate.
Program Outcomes	Program indicators that reflect the extent to which the purposes of the nursing program are achieved and by which program effectiveness is documented. Program outcomes are measurable consumer-oriented indexes. They include: program completion rates, job placement rates, licensure pass rates, and program satisfaction.
Macro-Concepts	
Definition of Macro-concept: The term macro is used to assist in complex information processing and may be used globally to process topics or themes (van DIJK, 1977). The five macro-concepts of the MANE curriculum are broadly focused to reflect understanding of individuals across the lifespan and within multiple health situations as well as the role of the professional nurse within the evolving healthcare environment.	
Foci of Care	Acute, chronicity, health promotion and end of life/Palliative. The program competence statements recognize that a competent nurse provides quality and safe care across the lifespan directed toward the goals of helping the client (individual, family, community or global society) promote health/prevent illness, recover from acute illness and/or manage chronic illness and support a peaceful and comfortable death.
Professional Integrity	Professional integrity encompasses the desired behaviors or attributes of the nurse incorporated into each patient contact or role within health care delivery, including but not limited to, professionalism, clinical judgment, ethics, comportment, communication, accountability, leadership, respect, and self-awareness. The program competence statements recognize that a competent nurse develops a professional role and practices within, utilizes and contributes to the broader healthcare system.
Psychological Integrity	Psychological integrity is the overarching state of emotional, spiritual, cultural, economic and cognitive wellness and the implications for health risks and challenging or maladaptive behavior based on individual, family, community and population factors. The program competence statements recognize that a competent nurse practices relationship centered care, communicates effectively and makes sound clinical judgments.

Physiological Integrity	Physiological integrity as a macro-concept represents the health-wellness continuum across the lifespan in promotion of health, prevention of disease and treatment of illness. Assessment of risk factors, physiologic processes and treatment management focus on commonalities of conditions and pattern recognition. The program competence statements recognize that a competent nurse locates and evaluates and uses the best available evidence and makes sound clinical judgments.
Lifespan/Growth and Development	Lifespan growth and development refers to the sequence of development that takes place over the lifespan as evidenced by physical, cognitive and psychosocial changes. The program competence statements recognize that a competent nurse provides care across the lifespan based on sound clinical judgments and use of best available evidence.
Curricular Concepts	
Professional Development and Identity	Professional development “ensures that nurses and nursing students and faculty continue their education and engage in lifelong learning to gain the competencies needed to provide care for diverse populations across the lifespan.” (The Future of Nursing: Leading Change, Advancing Health IOM, 2011) Professional identity involves the internalization of core values and perspectives recognized as integral to the art and science of nursing (NLN, 2012) Caring, diversity, integrity, excellence.
Collaborative Practice	Defined by NCSBN (2013) collaboration is: “Forging solutions through respect, diversity, and the collective strength of all stakeholders”. Collaboration is one of the core values of the NCSBN (2013). Collaboration is “a process of joint decision making among independent parties involving joint ownership of decisions and collective responsibility for outcomes. The essence of collaboration involves working across professional boundaries” (QSEN, 2012)
Safety	“The condition of being free from harm or risk, as a result of prevention and mitigation strategies” (National Quality Forum, 2009). “Minimize risk of harm to patients and providers through both system effectiveness and individual performance” (QSEN, 2010).
Holism	Refers to individuals as being made up of the body, mind, spirit; living within and interacting with a specific environment and social structure. Within the concept of holism, health, health promotion and dis-ease, are defined as interrelated social, psychological, biological, and spiritual factors. Such factors represent the “whole person”, a total unit, as they influence/act together. This continuous interaction creates the basis for holism (Dossey, 2013). “Holistic nursing practice recognizes the totality of the human being, the interconnectedness of body mind, emotion, spirit, social/cultural, relationship, context, and environment” (AHNA, 2012).

Informatics	Nursing informatics “integrates nursing science, computer science, and information science to manage and communicate data, information, knowledge, and wisdom in nursing practice “ (ANA, 2008, p. 65). “A broad term encompassing information science and information technologies” (NLN, 2012, p.61). “Use information and technology to communicate, manage knowledge, mitigate error, and support decision making" (QSEN). “Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care” (AACN Essentials of Baccalaureate Education for Professional Nursing Practice, 2008).
Evidenced-Based Care & Quality	<p>Evidence-based practice: As defined by QSEN (2012), "Integrates best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care." Evidence-based practice also “involves the conscientious, explicit, and judicious use of theory-derived, research-based information in making decisions about care delivery to individuals or groups of patients, in consideration of individual needs and preferences” (NLN, 2012, p. 20).</p> <p>Quality: “The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge” (National Quality Forum, 2010; IOM 2010).</p>
Diversity and Culture	<p>Diversity: is an all-inclusive concept, which refers to differences among people and recognizes the value of everyone and every group. Diversity encompasses all the different characteristics that make one individual or group different from another. Diversity includes but it not limited to, race, ethnicity, gender, age, national origin, religion, disability, sexual orientation, socio-economic status, education, marital status, language, and physical appearance. It also includes different ideas, perspectives, and values (AACN Essentials of Baccalaureate Education for Professional Nursing Practice, 2008).</p> <p>Culture: Culture is a learned, patterned behavioral response acquired over time that includes implicit versus explicit beliefs, attitudes, values, customs, norms, taboos, arts, and life ways accepted by a community of individuals. Culture is primarily learned and transmitted in the family and other social organizations, is shared by the majority of the group, includes an individualized worldview, guides decision making, and facilitates self-worth and self-esteem (Giger et al., 2007).</p>

Clinical Education Model

Definitions used with permission from the Oregon Consortium for Nursing Education (OCNE).

Concept-based Experience	Concept-based Experience is designed to support student learning of pattern recognition. Through multiple encounters with clients experiencing the same problem, students learn pattern recognition associated with a specific concept, illness, disease or health problem.
Case-based Experience	Case-based Experience presents students with authentic clinical problems they will likely encounter in practice and provides opportunities for students to learn to think like a nurse through client case exemplars. It encompasses seminar discussion of faculty designed or computer-based cases, as well as a variety of simulations including use of high, mid and low fidelity environments using human patient simulators, standardized patients and role-playing.
Intervention Skill-based Experience	Intervention Skill-based Experience builds proficiency in the “know-how” and “know-why” of nursing practice. These experiences include psychomotor skills, as well as communication, teaching, advocacy, coaching, and interpersonal skills among others.
Focused Direct Client Care Experience	Focused Direct Client Care Experience enables the student to gain progressive experience in the actual delivery of nursing care and to build and understand the role of developing relationships with patients. The assigned focus for a care experience allows the student to apply a growing knowledge and skill base to client care. Students learn to establish and nurture the nurse/client relationship and integrate the ethics of caring for individuals.
Integrative Experience	Integrative Experience provides opportunity for the student to apply all elements of prior learning into an authentic clinical practice situation. The purpose is also to begin the transition into practice. Rather than the student being assigned to a particular client, the student is assigned to work with a registered nurse and provides client care with, and under the direction of, the registered nurse. The student practices integration of knowledge, clinical judgment and competencies while providing client care and studies the role of the registered nurse as it is expressed in a particular organizational environment.

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APPENDIX B

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APPENDIX C

MANE NURSING PROGRAM STUDENT ACCOUNTABILITY VERIFICATION FORM

Please read each section and initial the box for each section.

Sign your name at the end of the document and have another individual witness.

Statement of Student Responsibility/Confidentiality	Initial
<ul style="list-style-type: none">• I understand I have an obligation to conduct myself in a professional manner in all clinical areas, follow all facility policy and procedures, and hold confidential all information concerning the patients at clinical facilities.• I understand any carelessness or thoughtlessness or release of any confidential information is not only ethically wrong, but may involve the individual and the clinical facility legally. This results in a failure to meet standards of professional and academic integrity.• I agree to adhere to the professional standards of confidentiality while enrolled in the Nursing Program.• I understand the unique and personal nature of patient care that is involved in the education of nurses and fully intend to safeguard the privacy of all patients for whom I give care as well as their families.• I will not disclose information about my patients, their families or information about fellow students, and faculty that may be obtained during my studies in Nursing.• I understand that this confidentiality is essential in the profession of nursing.	
<p>Authorization for the Release of Background Information</p> <ul style="list-style-type: none">• I hereby authorize the MANE Representative Nursing Program to release information contained in its files (including but not limited to reports, records and letters or copies thereof) regarding a background study performed by the Department of Human Services, or a request to the Commissioner of Health for reconsideration of a disqualification, to determine my eligibility to participate in clinical placements to fulfill the requirements of the Nursing Program. This information may be released to any of the facilities used for clinical experience.• I understand that the facility will review this information to assess whether I may be permitted to participate in a clinical placement for the Nursing Program. If background clearance is denied/not received by the Department of Human Services, I understand that I will be removed from clinical courses until a background clearance is obtained.• I understand that I am not legally obligated to provide this information. However clinical sites require a background clearance prior to participation in clinical experiences involving direct patient care. If I do provide it, the data will be considered private data under state and federal law, and released only in accordance with those laws, or with my consent.• I provide this information voluntarily and understand that I may revoke this consent at any time. A photocopy of this authorization may be used in the same manner and with the same effect as the original documents. This authorization is valid for the entirety of my student experience in the Nursing Program.	Initial

Nursing Program Student Handbook		Initial
<ul style="list-style-type: none"> I verify that I have received the nursing programs Nursing Student Handbook and read it in its entirety. I agree that I am responsible for the content provided in the handbook, as well as updated program policies, throughout my enrollment in the Nursing Program. I understand that I am responsible for compliance with the statements and policies identified in the Student Handbook. 		
Release of Health Information		Initial
<ul style="list-style-type: none"> I understand that there are conditions for which accommodations may be appropriate under the Americans with Disabilities Act and that the Nursing Program will make all reasonable accommodations required by law for otherwise qualified individuals. To receive accommodations, I must contact disability services. Refer to student handbook for types of accommodations. I grant the MANE Representative Nursing Program permission to share information contained in the HEALTH IMMUNIZATION /EXAMINATION FORM with those clinical institutions with whom I affiliate in my student role, should the clinical institution request or require it. I understand failure to sign this form or to provide the information requested could mean a clinical site may refuse me placement at their facility. The Nursing Program does not guarantee an alternative facility placement. I also understand that if no alternative facility placement is available, I may be unable to progress in the Nursing Program. 		
Responsibility for Health Care Costs		Initial
<ul style="list-style-type: none"> Any health care costs incurred during the period of time I am a student in the Nursing Program will be my responsibility. 		
Workers' Compensation		Initial
<ul style="list-style-type: none"> It is the position of the clinical facilities and the College/University that, as a nursing student, I am not considered an employee of either the clinical facilities to which I am assigned or the College/University for purposes of Workers' Compensation insurance. 		
Student Printed Name	Student Signature	Date:
Witness Printed Name:	Witness Signature:	Date:

APPENDIX D

INTENT TO CONTINUE FORM

Student Name: _____ Student ID: _____
Please print

Date: _____

*Meet with Director to discuss intent to continue. Bring completed form with you.

Notes/comments regarding rationale to step-out of the program at the 5th semester benchmark.

Individual extenuating circumstances that contributed this decision:

Individual learning plan for promoting success upon re-entry to 6th semester.

Signature

Date

Forward this signed form to the Nursing Program Director.

Note: May return to 6th semester within 3 academic years .Must notify the university nursing program administrator a minimum of one semester prior to the desired return date to determine if space is available.

APPENDIX E

READMISSION APPLICATION



Readmission MANE Nursing Program Application for 4th or 5th semester only.

Applicants reapplying to join the 3rd semester must complete the **initial** MANE Nursing Program Application for the particular cohort and will be ranked with the entire pool of applicants.

Riverland Community College is an Equal Opportunity Employer/Educator

Riverland Community College is asking you to provide private information in order to process your nursing application form. This information will be used for preparation during the nursing application review. You are not legally required to provide this information; however, the college may not be able to effectively process your request if you do not provide sufficient information. Access to this information will be limited to school officials. Under certain circumstances, federal and state laws authorize release of private information without your consent to state and federal agencies or as otherwise permitted by other state and federal laws.

First Name: _____ Middle initial: _____ Last Name: _____

Last 4 digits of Social Security: ____ _ Riverland Student ID: _____

Address: _____ City: _____

State: _____ Zip: _____ Email address: _____

Telephone: including area code: (Home) _____ (Cell) _____

This Readmission Application pertains to the 4th or 5th semester only. If you fail 3rd semester you must reapply to the program. Applicants reapplying to join the 3rd semester must complete the initial MANE Nursing Program Application and will be ranked with the entire pool of applicants.

Circle the semester which you are applying for readmission: 4th semester 5th semester

List month/year leaving the program ____ / _____

Directions: Please fill out this form completely and attach a typewritten plan for success. Submit everything together by the date indicated above. The plan for success is a letter of explanation of the circumstances surrounding leaving the program and a plan of how you will be successful on readmission. It must contain the following information:

1. What caused you to be unsuccessful while you were in the program?

2. What has changed in your circumstances which will allow you to be successful?
3. Write a detailed plan for success; example: what will you do and how will you accomplish your goal?

Please mail application to:

Riverland Community College-Austin West Campus

Attn: Marlene Wipplinger, Nursing Program Department

1900 Eighth Avenue NW

Austin, MN 55912

APPENDIX F

EVALUATION OF PROGRESSION REVIEW NOTIFICATION FORM
Worksheet for Instructor/Student Use
Unsatisfactory Performance

Student Name: _____ Date: _____
Please print

Nursing Instructor: _____ Date: _____

Scheduled date and time for Faculty Review Process Evaluation: _____

What behaviors identified by the instructor brought the student to the Evaluation of Progression Review Process? (You may attach additional sheets)

Student's general response to the instructor's description of the behaviors:

Areas of agreement:

Areas of dispute:

Supporting evidence for areas of dispute:

_____, my instructor has reviewed and discussed his/her perception of the events leading to the Evaluation of Progression Review Process. Through either mail, phone, and/or meeting, he/she has outlined areas of concern, has reviewed the nursing program and/or college policies, and has given me guidance in how I may best participate in the Evaluation of Progress Review Process. I understand that I may select an advisor to be present at the review process. He/she has also provided me with an explanation of my options for the appeals process as outlined in the Nursing Program Student Handbook.

Student Signature

Date

EVALUATION OF PROGRESSION REVIEW STUDENT RESPONSE FORM

My version of the events described by the instructor:

How my version is alike and/or different from the instructor's:

My definition of the problem(s) identified:

Goals I have set to bring resolution to the problem:

Help I need from the faculty to bring about the desired change:

Things I need to change in myself/my environment to bring about the selected change:

Length of time I need to meet my goals:

How I will prioritize my goals:

How I will organized my day, week, year to accomplish my goals:

*Refer to table on next page in preparation of this form

Table to help prepare the student for the Evaluation of Progression Review Process

<p>What is my version of the event(s) described by the instructor?</p>	<p>How is this alike or different from the instructor's version? What evidence do I have to support areas that are in dispute?</p>
<p>What is my definition of the problem(s) identified? (What do I look like, act like, do, feel now? What skills are absent, what skills do I need to improve upon, where do I feel most frustrated--what do I think may be a root cause of the lack of proficiency? What brings about or contributes to the problem)?</p>	<p>What would I see as a reasonable goal(s) to set for myself to bring resolution or improve my lack of proficiency for the selected problem(s)? What will I look like, act like, do, feel like when I am successful? How will I know that I have reached my goal?</p>
<p>What help do I need from the faculty to bring about a change in my proficiency? What is reasonable to expect? How comfortable do I feel expressing that? How can I deal with that? Who/what are the resources in my environment? How can I tap into those resources? What strengths do I have that can be used to bring about this change?</p>	<p>What things do I need to change in myself/my environment to bring about the selected change? Do I need more time—how can I get that? Do I need more study or organizational skills -- how do I get that? Do I need more time with clients—how do I get that? Do I need more monitored practice—how do I get that? Please be as specific as possible</p>
<p>How much time do I need to meet my goals? What is a reasonable time frame to make this behavior change?</p>	<p>How will I organize my day, week, year to accomplish the changes I need to make? What are the most important elements of my plan? What are the first things to be accomplished?</p>

APPENDIX G
NON-DISCIPLINARY WORKSHEET

Worksheet for Instructor/Student to Use when Non Disciplinary Administrative Actions are Necessary

This type of action is based on practical need for the individual, class, or to maintain program integrity. It is unrelated to student performance. The following illustrations clarify this type of action.

1. One lab section is too large--one or more students will be asked to relocate to another section to equalize clinical group size and provide for more teacher-student interaction and supervision. Every effort will be made to make the moves voluntary.
2. Employment in a clinical agency as well as participating in clinical experiences there may bring about conflicts between the two roles of employee and student

Appeals Process:

If there is a dispute between the student and faculty concerning this action the student may

1. First speak to the clinical instructor to explain reasons the action in question is unreasonable and propose alternatives that might resolve the issue. If there is no resolution at this level the student may proceed to step two.
2. Appear before the nursing faculty and explain reasons the action in question is unreasonable and propose alternatives that may resolve the issue. A decision will be given within five (5) working days. If there is no resolution at this level the student may proceed to step three.
3. Speak with the appropriate Dean and explain the reasons the action in question is unreasonable and propose alternatives that may resolve the issue. The Dean may ask for more information from the student and faculty before making a decision. A decision will be given within five (5) working days. If there is no resolution at this level the student may proceed to step four.
4. If no resolution is secured in the preceding three steps, the student may begin the written grievance process as outlined in the Section on Grievance/Complaint Policy located in the Riverland Community College Student Handbook.

Name of Student _____

Date: _____

Description of the action being taken and the reasons it is needed:

I have read, discussed and understand the nature of this Non-disciplinary Administrative Action. I have had a chance to ask questions and clarify what is being asked of me.

If I do not agree with what I am being asked to do, I understand that I have several options for appeal.

I have been given a copy of the appeal process.

Student name

Signature of faculty explaining Non-disciplinary Administrative Action

Changed logo. 5/2016 LLB

Updated Readmission Application language. 8/2016 LLB

Updated cell phone policy under Students Responsibilities for Clinical. Current students notified 9/2016 LLB

Updated 5/26/17 with changes to the testing policy, clinical uniform policy, cell phone pictures at clinical. Current students notified. LLB

Updated 5-26-17 MANE progression policy. Current students notified. LLB

Updated 9-25-17 Learning Lab/Simulation Polices. Added use of solutions, sharps, syringes, and Foley Catheter. Current students notified 9/25/17. LLB

Updated 10-27-17 Attendance Policy: Clinical, Lab, Simulation Day: Missing more than **one** day per semester could result in faculty progression review. LLB

Updated 10-27-17 Exam Policy: Students who are unable to take an exam at the scheduled time must obtain the instructor's permission for a different date *prior to* the scheduled exam time. **Failure to do so could result in a zero for that exam.** LLB