

2024-2026



Note: All policies and procedures as stated in this handbook are subject to change at any time at the discretion of the college with due notice of the student.

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Introduction

This Nursing Handbook has been prepared to assist students who are enrolled in the Associate of Science, Nursing Degree Program at Keweenaw Bay Ojibwa Community College (KBOCC). This nursing program affords the student the opportunity to apply for the registered nurse licensure upon successful completion. The handbook is to assist you, the student, with information necessary in your role as a student nurse and assist you in your learning experiences. Understanding the curricula, policies, philosophy, goals, and outcomes of the program will further assist you in the successful completion of the nursing program. **It is the responsibility of students to know and follow the guidelines in this handbook. Students are also responsible for information pertinent to the nursing programs found in the KBOCC Catalog and on the KBOCC College website at www.kbocc.edu.**

Boozhoo and Welcome to KBOCC Nursing!

The faculty and staff of the nursing department would like to welcome you to our Nursing Program here at KBOCC. The Associate of Applied Science in Nursing degree includes both general education and nursing courses. The general education courses meet college requirements for graduation and provide a foundation to prepare you for nursing courses. Successful completion of the nursing program prepares you to work as a Graduate Nurse and sit for the NCLEX-RN examination. Upon successfully passing the NCLEX_RN you will be eligible to become a Registered Nurse (RN).

The organizing framework, philosophy and safe practice criteria found in this handbook serve as the foundation for the nursing curriculum. Expectations of student learning outcomes are leveled throughout the program and based on best practice guidelines of Quality and Safety Education for Nurses Association (QSEN), National League for Nursing (NLN) and student program learning outcomes (PLOs). Carefully read each of these areas of the nursing handbook as they describe the behaviors expected from nursing students as they progress through the program.

To be a successful student prioritization is a key factor in meeting the program and student learning outcomes. *Assuming responsibility for your actions, attendance, and participation is paramount to success as a student and later as a professional nurse.*

Nursing courses provide classroom, laboratory, and clinical experiences. These courses are leveled from introductory to advance. In the classroom concepts of nursing are presented and discussed. These concepts are practiced in the laboratory and ultimately applied in clinical area hospitals as well as other healthcare settings. Student progress is continuously evaluated in each of these settings.

The nursing program at KBOCC is rigorous, and admission does not guarantee successful completion of the program. Because of the complexity of the program additional resources are provided to assist you. These resources include Tutoring Services, nursing faculty, the Nursing and Health Science Department Chair and advisors. Nursing tutors are available free of charge. Your nursing faculty advisor, as well as other faculty members, are available for consultation during office hours or by appointment.

The information incorporated in the Nursing Handbook is provided in addition to the information found in the KBOCC Student Handbook. You are required to read and understand both the KBOCC Student and Nursing Student Handbooks. You must also inform the Nursing Department of any changes in your contact information. We wish you well as you embark on this journey.

Migwech,
Nursing Faculty, Staff and Nursing and Health Science Department Chair

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Program Overview and Purpose

The faculty of the Associate of Science, Nursing Degree Program at Keweenaw Bay Ojibwa Community College believes that the educational program in nursing exists within the larger framework of the college's philosophy, mission, and goals.

The registered nurse program provides nursing education to prepare the graduate at the Associate Degree level with the skills and knowledge necessary to function in the role of the Registered Nurse. Graduates are prepared to function as the provider of care, manager of care and member within the discipline of nursing. The graduate is prepared to provide evidenced based, holistic client - centered nursing care to a diverse population in a variety of settings. Students develop competency and confidence in client assessment, clinical decision-making skills, and use of advanced technology. Knowledge of teaching learning principles are acquired and integrated into all aspects of care. The ADN nursing program at KBOCC prepares the graduate to organize care, delegate appropriate aspects of care, as well as communicate, collaborate, and coordinate client care with other healthcare providers. Graduates are prepared to succeed in employment in structured healthcare settings and manage care environments while delivering care to a client/family with complex health care needs. The graduate will be eligible to apply for the National Council Licensing Examination (NCLEX-RN) for the Registered Nurse.

The Nursing faculty provides and implements a nursing curriculum that is based on the nursing process and is regulated by law, ethics, and standards of practice. Upon completion of the Nursing program, the graduate will have achieved the following End of Program Student Learning Outcomes:

1. Provide care that is patient-centered, culturally sensitive, evidence-based, and holistic based on the needs of the clients and families, with an emphasis on Native American culture.
2. Utilize sound nursing judgement and critical thinking in the provision of safe, quality care.
3. Practice professional nursing in an ethical and legal manner that integrates integrity, accountability, leadership, and organizational skills.
4. Function effectively as individuals within the interdisciplinary team with open communication, mutual respect, and shared decision-making.
5. Execute the registered nurse's responsibilities for continuing personal, affective, and professional growth through life-long learning experiences and professional identity and affiliation.

Program Philosophy

The philosophy of KBOCC Nursing Program flows from the mission of the College and supports the concepts of Patient Centered Care, Safety and Quality, Teamwork and Collaboration, Informatics and Technology, Nursing Judgement and Evidence Based Practice, and Professionalism.

The Keweenaw Bay Ojibwa Community College Nursing Program believes:

- It is important to prepare graduates that deliver care based on diversity, excellence, integrity, ethical, holistic, and patient centered values. This will be accomplished through current evidence-based practice, interdisciplinary collaboration, teamwork, nursing informatics and knowledge of quality and safety in the health care system.
- That the learning theory is best suited to guide the instruction of nursing students in this program.
- The program will utilize a concept-based nursing program that fosters and encourages professional development, the spirit of inquiry and promotes the value of life-long learning as nurses.
- The program will encourage and promote that health and well-being are the products of a balance between the four quadrants: spiritual, emotional, physical, and mental. This will promote the concept of *Mino-bimaadiziwn*, “the good life.”

This philosophy incorporates the conceptual framework that was developed by the Nursing Advisory Committee to provide direction for the selection and organization of learning experiences to achieve Program Outcomes. The Nursing Advisory Committee believes that Nursing is the art and applied science of providing patient centered care to diverse individuals, families, and populations across all practice settings. Nursing incorporates and is supported by the effective use of technology, informatics and intra/interprofessional collaboration to provide quality outcomes and safe evidenced based practice. Furthermore, they believe the core of nursing is comprised of the individual nurse’s embodiment of professionalism and compassion with a personal commitment to developing and utilizing sound nursing judgment.

We believe nursing education is a dynamic leveled teaching/learning process. All members of the Nursing and Health Science Department, along with program participants are expected to conduct themselves in a manner that does not infringe upon the rights of others and supports the goals of the College and this program. Keweenaw Bay Ojibwa Community College maintains a zero tolerance for acts of discrimination, harassment, and sexual misconduct. KBOCC does not discriminate based on sex and will not treat any student differently on the basis of sex with respect to any rule concerning a student’s actual or potential parental, family, or marital status in our educational programs or activities. (Copies of KBOCC’s full Non-Discrimination Policy can

be found at <https://www.kbocc.edu>. KBOCC Campus Sexual Misconduct and Harassment Policy can be visited at <https://www.kbocc.edu/about-us/title-ix>.

Each student and faculty come to the nursing program with diverse backgrounds. The *teaching/learning process*, as guided by the faculty, *moves from the simple to complex* and utilizes selected learning experiences and a competency-based evaluation system. Learning takes place through the students' active participation in the educational process. The program is responsive to the needs of students in our community, the nursing profession, and society.

The Nursing Education Unit supports the mission statement of KBOCC and functions within this framework to prepare students for career entry in nursing.

Mission Statement

The mission of the Associate of Science Degree, Nursing Program is to provide the education that is necessary for entry level nurses to deliver high quality and culturally sensitive care to our rural community while focusing on the health needs of the Keweenaw Bay Indian Community. In alignment with the mission of the College, and the program, graduates will then be eligible to sit for the licensure exam.

Program Outcomes

Upon successful completion of the Associate of Science, Nursing Degree Program, the student will:

- Graduates from each cohort will meet or exceed a licensure first-time pass rate of or above the national average or at least 80%.
- 75% of all students admitted to the Nursing Program will complete the required four semester nursing coursework in two successive academic years.
- A graduate and employer satisfaction rate of >75% in areas measured.
- 85% of graduates actively seeking employment will be employed as an RN within 3 months of RN licensure.
- 70% of graduates are employed in local and regional healthcare organizations that serve the tribal members of the Keweenaw Bay Indian Community.

Conceptual Framework

The conceptual framework of the nursing program at KBOCC will provide the structure and competencies for graduates of the Associate of Science Degree, Nursing program. These will allow the students to meet learning outcomes of the program. The conceptual framework will be based on the understanding that nurses must utilize critical thinking skills to provide care

that meets client needs in a manner that is professional and responsible. The following definitions were utilized to create the concepts from which the framework was structured.

Concept Definitions:

- **Patient-Centered Care:** Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs.
- **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.
- **Evidence-Based Practice (EBP):** Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.
- **Quality Improvement:** Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.
- **Safety:** Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.
- **Informatics:** Use information and technology to communicate, manage knowledge, mitigate errors, and support decision making.

Competency Based Education

Teaching and learning are the interactive processes and occur via multiple strategies. The goal of education is to instill a belief in the imperative for lifelong learning and spirit of inquiry as a member of the profession of nursing.

Upon completion of the Keweenaw Bay Ojibwa Community College Associate of Science in Nursing Degree, graduates will be skilled critical thinkers who utilize the nursing process and the concept definitions listed above as a framework for clinical decision making. As entry level nurses, graduates will be responsive to changes in society, health care delivery, and the profession of nursing and therefore, prepared to deliver safe, high-quality nursing care.

Progression and success in the nursing program are identified in relation to stated terminal program outcomes, course, and outcome criteria.

Related clinical experiences and clinical skills lab hours are provided concurrently with, or immediately after, the didactic presentation of the course content when available and are consistent with program outcomes.

The overall nursing program student learning outcomes are relevant and reflect current nursing education and nursing practice.

The curriculum reflects standards of nursing practice, education, and instruction principles. It will also include all concepts identified in the Nursing Education Michigan Board of Nursing Administrative Rules

1. Course syllabi address instructional and educational strategies for students and faculty.
2. Student Handbook addresses nursing ethics, standards of nursing practice and KBOCC nursing policies.
3. A variety of instructional techniques are used to enhance learning styles.

There will be provided course syllabi/outlines for each course which identify faculty and learner outcomes which include the criteria for successful completion of the course.

Student evaluation tools will reflect course and clinical outcomes, utilizing measurable criteria in the evaluation of students.

Faculty and Student Rights/Code of Conduct

Faculty Rights

The faculty at KBOCC has the right to maintain a high standard of nursing practice. They have the right to suspend, provide a written warning, place on probation, or dismiss a student nurse from the class, clinical, skills lab, and/or program who exhibits unsafe practice, unethical behavior, dishonesty, student misconduct, or perform below the standard of client care in the skills lab or clinical practice area.

The faculty has the right for input and participation in policy development dealing with student concerns and/or academic program.

Student Rights

1. Nursing students have a right to quality education, review of formative evaluation and due process.
2. They have the right to fair academic and clinical evaluations of their performance.
3. They have the right to confidentiality of information concerning grades and performance.
4. They have the right to participate in course and faculty evaluations.
5. They have the right to facilitate awareness of self as an individual with varying physical, emotional and developmental needs.
6. They have the right to an education in a school approved by the Michigan State Board of Nursing
7. Students have a right to appeal a dismissal from the nursing program (See Student Due Process)
- 8.

Program Requirements

The nursing faculty at KBOCC believes that students are **responsible adult learners**. Therefore, the student has the responsibility to be an **active participant** in the learning process. By accepting the responsibility for her/his own learning, the student will become independent, self-evaluative, and self-directing. The following program requirements are mandatory and taken into consideration on evaluations, suspension, and dismissals.

Personal Appearance Requirements

- a. Dress Code: A neat, clean, odor free, and scent free professional appearance in the classroom, clinical skills lab, and clinical area is of utmost importance. Instructors will enforce this standard dress code. Students not appropriately dressed will be required to leave the classroom, skills lab, or clinical area. The purpose of a standard dress code is:
 1. To limit the transfer of microorganisms from student to clients and vice versa
 2. To provide for safety and limit injury
 3. To identify the wearer as a KBOCC nursing student
 4. To appear as a professional health care provider
 5. The dress code of the specific agency (if stricter) will take precedence and will be adhered to.
- b. Student Uniform and Name Pin: When in complete uniform, the KBOCC nursing student should have; red scrub top and red pants. Red lab coats are optional. The uniform is to be worn to and from clinical and for special college functions only. KBOCC ID badge is to be worn on the left and is the only item to be pinned on the uniform. A KBOCC nursing patch is adhered to the left upper arm on the uniform and on lab coats. Scissors, stethoscope, watch with a second hand are required.
- c. Shoes: Colored shoes (tennis shoes or nursing shoes) are allowed in the clinical setting but must be always kept clean. Clogs are not acceptable. Open toed shoes are not allowed in the clinical setting or in the nursing skills lab.
- d. Hair and Beards: For both male and female students' hair must be clean, well groomed, and neat. Hair must be fastened to prevent falling in front of shoulders and face. Males are expected to keep facial hair clean and neatly trimmed.
- e. Cosmetics and Fingernails: Cosmetics should be worn in moderation. Fingernails are to be clean and fingertip length. Only natural fingernails are allowed in the clinical sites. Acrylic, artificial, gel, shellac, or nail polish are not allowed. Due to client allergies, perfume and aftershave are forbidden. Use light scented deodorant. Absence of body odor is essential.
- f. Jewelry: Jewelry should be kept to a minimum. Most jewelry harbor micro-organisms (specifically rings with large stones) and are inappropriate in the clinical area. It may be necessary to remove all jewelry for specific client care. One small post-style earring may be worn per ear. No additional adornments of jewelry (internally or externally) are allowed.

Visible body piercing jewelry is not allowed in the clinical area. (This policy includes tongue studs). No pins or insignias with LPN or RN may be worn. This is a violation of the Michigan Nurse Practice Act.

- g. **Tattoos: Must not be visible (must be covered) while in the clinical setting.**
- h. Gum and tobacco chewing: This is not allowed in clinical or laboratory practice.
- i. Profane language: Cursing is unprofessional, unacceptable and disrespectful on campus, in skills lab, and in the clinical setting. Profane language will be addressed on evaluations.

Criminal Background Checks

Criminal background checks are required of all students admitted to the ADN program. This requirement is a result of state legislation (Michigan Public Acts 26, 27, 28 & 29 of 2006) which mandates that criminal background checks be completed by health care providers working in or for healthcare institutions. Student placement in clinical site/agency assumes that the applicant possesses a good moral character and the ability to successfully pass the rigors of background investigation and criminal background check. In addition, the Board of Nursing requires a criminal background check prior to taking the licensure exam. All students, once accepted to the nursing program, must complete a criminal background check prior to enrolling in the first clinical nursing course. Students are required to notify the Nursing and Health Science Department Chair as soon as possible if after the initial criminal background check, they are subject to a Misdemeanor or Felony conviction. Students who do not complete a criminal background check or fail to notify the Department Chair of subsequent Misdemeanor or Felony conviction are ineligible for placement in most clinical agencies and therefore, may result in the student being unable to progress in the nursing program.

It is the student's responsibility to know whether he or she is eligible for licensure. If you have been convicted of a crime, it is your responsibility to find out if your background will prohibit you from being licensed and to be employed in the health care industry. The Nursing Program faculty and staff are NOT able to provide legal advice. If you have any questions about your existing criminal background, you may wish to discuss this with legal counsel before applying to the nursing program.

If you have a felony or misdemeanor record you may wish to go to the following website for additional information: <http://legislature.mi.gov/doc.aspx?mcl-333-20173a>.

Specific crimes are listed. Convictions are detailed by viewing the Legal Guide at: <https://miltcpartnership.org/Documents/LegalGuide.pdf>.

Students who are pursuing a nursing career must submit to a criminal background check once they receive a letter of provisional acceptance to the nursing program. Failure to submit the criminal background check will delay the student's admission to the program.

The purpose of performing a criminal background check is:

1. To identify students who will not be allowed to practice in a clinical site due to a felony conviction or misdemeanor.
2. To identify students who will not be allowed to handle medications and controlled substances in a clinical site.
3. To identify students who are unable to drive self to field experiences required by the clinical rotations in the nursing program.

The above will prevent a student from remaining in the nursing program since they will not be allowed to progress in the program. In summary, if a student's criminal background does not permit him/her to have clinical experiences in our clinical agencies then the student will be withdrawn from the nursing program. Again, please seek legal advice for any questions you may have.

Disclaimer: KBOCC is not responsible if an applicant is denied a license from any State Board of Nursing.

Health Requirements

Students should be in good physical and emotional condition to meet the demands of the profession. Students must provide the Nursing and Health Science Department a medical history. Forms will be provided when you return your letter of acceptance and need to be completed by a physician or primary care provider. A file will be created for each individual student.

File will include:

1. Health Physical
2. Immunization Records
3. Professional Healthcare Provider BLS card
4. Proof of Urine Drug Screen
5. Proof of completed criminal background check

The purpose of the required physical exam is to assess the student's ability to meet the essential functions of the occupation of nursing. **These functional abilities include, but are not limited to:**

- Speak clearly to communicate with clients, families, health care team members, peers, and faculty.
- Stand and walk for six to eight hours/day.
- Bend, squat, and kneel.
- Assist in lifting or moving clients of all age groups and weights.

- Perform CPR, i.e., move above the client to compress the chest and manually ventilate the client.
- Work with arms fully extended overhead.
- Use hands for grasping, pushing, pulling, and other fine manipulation.
- Demonstrate eye/hand coordination for manipulation of equipment, i.e., syringes, procedures, etc.
- Possess tactile ability to differentiate changes in sensation.
- Possess auditory acuity to note slight changes in the client's condition, i.e., lung sounds, bowel sounds, etc.
- Possess auditory acuity to hear the client's calls for assistance without facing the client.
- Possess auditory acuity to interpret various equipment signals and use the telephone.
- Possess visual acuity to read and distinguish colors, to read handwritten orders and other handwritten/printed data.
- Possess visual acuity to clearly view electronic monitors and scales to correctly interpret data.

Proof of Immunization

The immunizations required are consistent with the recommendations of the Center for Disease Control and Prevention (CDC) for health care providers and exist to protect both patients and students.

- Proof of Varicella (Chicken Pox) immunization or titer
 - Proof of Hepatitis B immunization or titer
 - Proof of Measles-Mumps-Rubella immunization or titer
 - Proof of Tetanus-Diphtheria-Pertussis (Td/Tdap/P) vaccination within the last 10 years
 - Proof of 2-step negative TB test or negative chest x-ray in the case of a positive skin test; TB test must be repeated annually.
 - Influenza Vaccines repeated annually.
 - Covid-19 vaccine status will be assessed, and compliance will be determined on clinical site policies

It is the responsibility of the student to keep all health records and immunizations up to date and provide copies to the nursing department.

Temporary Health Conditions

Temporary health which a student may experience during the clinical courses requires that the student inform the faculty whenever such conditions may exist. The student must inform the faculty whenever a temporary condition may impact their attendance or ability to meet course outcomes in clinical. A student will require physician clearance to return to the clinical setting.

Students not receiving medical clearance from their physician will be required to take a withdrawal from the nursing program and follow the readmit policy. (refer to Appendix 13).

Incident Report: A student who suspects that he/she may have been exposed to blood and other body fluids or contaminated materials or other hazardous substances i.e. radiation or chemicals, must immediately notify his/her clinical instructor or other clinical supervisor as well as immediately notifying the nursing department at KBOCC so prompt and appropriate treatment or protective measure can be instituted. A clinical agency incident report must be completed and submitted to the nursing department along with a KBOCC Incident Report form. The cost of treatment is the responsibility of the student.

Standard Precautions: KBOCC will follow the Standards for Standard Precautions as a guide found in Appendix 3. These may be applied throughout the program as a standard in any of the agencies the college uses for clinical experience. Students should be familiar with the specific standards at their assigned clinical sites.

Non-Discrimination for Medical Conditions

The Nursing program requires all students that have any changes in their medical condition, requiring the attention of a physician, to submit medical clearance for academic and clinical participation. KBOCC and the Nursing program are not liable for injuries or damages if a student does not disclose a change in their medical condition. Refer to Appendix 13 for the Medical Clearance Form.

KBOCC will not discriminate against any student or exclude any student from its educational program or activity (including any class or extracurricular activity) on the basis of such individual's actual or potential parental, family, marital status, pregnancy, childbirth, false pregnancy, termination of pregnancy or recovery therefrom, unless the individual voluntarily requests to participate in a separate portion of the program or activity of the College. KBOCC will not deny such an individual access to or participation in classes, extracurricular programs, athletics, honor societies, opportunities for student leadership, or other activities.

The Nursing program will treat pregnancy, childbirth, false pregnancy, termination of pregnancy and recovery therefrom as justification for a leave of absence for so long a period of time as is deemed medically necessary by the person's physician; at the conclusion of which the person shall be reinstated to the status that was held when the leave commenced. Further, the student will be afforded the opportunity to make up any missed work in a manner selected by the student, which is reasonably equivalent to the work missed and within a reasonable timeframe. The Nursing

program will require a pregnant student or a student who has given birth to obtain a certification from a physician stating that the student is physically and emotionally able to continue participation in the normal education program or activity. (See Non-Discrimination For Medical Conditions above) Refer to Appendix 13 for Medical Clearance Form.

Clinical Overview

Students are assigned to various facilities. Due to contractual limitations, students must accept the clinical assignment that is assigned to them. It is recommended that the student rotate to different facilities, faculty, and shifts. This will enhance their education and clinical skill opportunities. It is highly recommended that students avoid their place of employment when choosing a clinical assignment.

Assignments to clinical facilities will be made by the Associate Director of Nursing: Clinicals, under the direction of the Nursing and Health Science Department Chair. Every effort is made to accommodate students in their choices of clinical site but under different circumstances, it may be necessary to change the clinical site the student has been assigned to. Students will be notified if their clinical site has been changed just prior to the start of the semester. The Nursing and Health Sciences Department Chair reserves the right to change a clinical assignment at any time.

Students are responsible for providing their own transportation to and from clinical sites. The student needs to understand that he/she may travel over an hour to get to a clinical site. Carpooling to clinical sites is encouraged.

Clinical facilities may request that student identification pictures be provided for the purpose of creating facility security badges. The Associate Director of Nursing: Clinicals or designee will provide the requested identification pictures to the facilities.

Nursing Program Curriculum Requirements and Course Descriptions

Scholastic Requirements

Grading Scale

Grades will be assigned according to the grading scale listed in the Student Handbook. Successful completion of this course is met with a grade of 80% or above.

A = 93 - 100	B - = 80 – 82.99	D + = 67 – 69.99
A - = 90 – 92.99	C + = 77 – 79.99	D = 63 – 66.99
B + = 87 – 89.99	C = 73 – 76.99	D - = 60 – 62.99
B = 83 – 86.99	C - = 70 – 72.99	F = 0 – 59.99

The curriculum plan is arranged to build on previous learning. Knowledge and skills are presented throughout the curriculum and progress from the simple to the complex. The admission criteria are intended to provide a common starting point for all students.

NR101 – Fundamentals of Nursing Practice (6)

This course is an introduction to the role of the professional nurse using a systematic approach to foundational, evidence-based nursing concepts. The nursing process is used to develop critical thinking and judgement to safely meet the basic needs of the patients the student nurse will be providing care. Emphasis is placed on fundamental nursing skills, professional practice and concepts that are relevant to patient-centered nursing care across the lifespan to include health promotion and disease prevention. This course includes lecture, laboratory, and clinical components. Nursing leadership will be taught throughout the course. The student must maintain a grade of “B-“or better in general education and program courses.

Course Learning Outcomes:

1. Identify basic needs of patients and their families.
2. Utilize the nursing process to plan care for the whole person that is culturally sensitive, holistic, and patient-centered, with emphasis on Native American Culture.
3. Understand the role of the professional nurse.
4. Describe how nursing standards affect nursing care.
5. Demonstrate the ability to perform fundamental nursing skills competently and safely.

NR150 – Nursing Assessment and Pathophysiology (3)

This course is designed as an interactive lecture and lab experience to introduce the student to the knowledge and skills needed to perform a systematic physical assessment of a patient and record the findings appropriately. The course emphasizes a holistic approach to assessment and the identification of underlying health conditions, health promotion and disease prevention while encompassing the adult patient. This course will also provide the student with the ability to communicate their findings with other members of the healthcare team. This course is interactive with a hands-on approach, utilizing manikins and simulation. Nursing leadership will be taught throughout the course. The student must maintain a grade of “B-“or better in general education and program courses.

Course Learning Outcomes:

1. Document findings from a complete health assessment accurately, using appropriate terminology.
2. Utilize effective communication techniques and cultural sensitivity when gathering data during patient interviews and physical exam.

3. Recognize the need to alter the approach to data gathering as necessary in response to characteristics or needs of the patient.
4. Evaluate physical assessment data against expected findings in relation to the patient's current and underlying health conditions.
5. Describe and demonstrate appropriate techniques for conducting a physical assessment and health interview.

NR151 – Pharmacology and Dosage Calculations (3)

This course is an introduction to the nurse's role in the safe preparation and administration of a variety of medications, including dosage calculations. It will provide the student nurse with the foundational and governing principles of pharmacology in nursing across the lifespan. They will be provided with the concepts of pharmacodynamics and pharmacokinetics, along with major drug classes and their prototypes. Students will also gain an understanding of the importance of safe medication administration and providing patient education. Nursing leadership will be taught throughout the course. The student must maintain a grade of "B-" or better in general education and program courses.

Course Learning Outcomes:

1. Describe terms, concepts and pharmacodynamic processes associated with physiologic effects of medication therapy.
2. Understand basic physiologic processes involved with pharmacokinetics of the medication process.
3. Demonstrate the ability to convert between metric, apothecary, and household systems while correctly calculating drug dosages.
4. Describe the nursing role in drug therapy as it relates to documentation, legal and ethical aspects, application of the nursing process, major issues or concerns with medication therapy across the lifespan including cultural and age-related considerations and proper application of the nursing process, with emphasis on Native American Culture.
5. Describe the principles for health teaching related to drug therapy.

NR102 – Adult Health I (6)

This course is an introduction to common acute and chronic conditions in adult patients. The course includes assessment and identification of clinical problems, prioritization, patient-centered and evidence-based nursing interventions, outcome development, and evaluation, and recognition of the usual course of medical treatments. Nursing leadership will be taught throughout the course. There is a clinical component to this course. The student must maintain a grade of "B-" or better in general education and program courses.

Course Learning Outcomes:

1. Use evidence-based practice, critical thinking, scientific rationales and cultural sensitivity to plan safe care for adults who are experiencing alterations in health, with emphasis on Native American Culture.
2. Understand the prioritization of nursing diagnoses and interventions with the application of theoretical content.
3. Demonstrate individual learning activities and accountability to meet own learning and professional development needs.
4. Respect patients' unique responses to health and illness based on socio-cultural and physical environments.
5. Utilize knowledge and concepts from the arts, sciences, and humanities to plan nursing care to enhance individual patient's health outcomes and quality of life.

NR103 – Mental Health Nursing (3)

This course focuses on mental health concepts, understanding the dynamics of human behavior and therapeutic communication with an emphasis on safe nursing care for the patient. This student will gain knowledge about the concepts of mood and affect, stress and coping, advocacy, safety, therapeutic communication and managing care. Nursing leadership will be taught throughout the course. There is a clinical component to this course. The student must maintain a grade of "B- "or better in general education and program courses.

Course Learning Outcomes:

1. Create a comprehensive health status assessment based on the needs of the client with mental health and substance abuse issues.
2. Apply principles of ethics, client safety, health promotion, cultural sensitivity, and the nursing process to nursing care of the client with mental health and substance abuse issues, with emphasis on Native American Culture.
3. Create and implement an individual plan of care considering unique cultural and spiritual preferences, applicable standards of nursing care, and legal and ethical implications.
4. Assist clients with mental health and substance abuse issues to promote healthy behaviors, cope with health problems and adapt and/or recover from the effects of disease or injury.
5. Understand individual and team accountability for abiding by all applicable jurisdiction statutes related to psychiatric nursing practice.

NR202 – Adult Health II (6)

This course focuses on care of adult patients with increasingly complex acute and chronic conditions. The course includes the development of professional nursing skills such as delegation, collaboration, and prioritization. Nursing leadership will be taught throughout the course. There is a clinical component to this course. The student must maintain a grade of “B-“or better in general education and program courses.

Course Learning Outcomes:

1. Demonstrate accountability by evaluating the quality and safety of care provided.
2. Administer nursing care that is culturally sensitive and reflects professional values and standards, with emphasis on Native American Culture.
3. Collaborate with other health professionals to improve quality of care, promote health and reduce risk.
4. Integrate patient care technology and informatics to provide, communicate and evaluate nursing care.
5. Provide quality, safe nursing care to acutely ill adults with complex health problems.

NR203 – Family Centered Nursing (4)

This course will focus on concepts of family and child development from conception through adolescence. The course includes participation in patient-centered care of maternal/child and pediatric clients through the application nursing judgment. There is a focus on the family and significant others, identifying diverse cultural backgrounds, patterns of knowing and situational crisis of family health. Both observational as well as hands on activities will be provided, including community nursing and resources that can be identified in various healthcare settings and agencies. Nursing leadership will be taught throughout the course. There is a clinical component to this course. The student must maintain a grade of “B-“or better in general education and program courses.

Course Learning Outcomes:

1. Apply the nursing process to the expanding family and/or the pediatric patient experiencing an illness.
2. Explain the holistic changes occurring during the perinatal period to women and their families.
3. Demonstrate knowledge and skill in the safe administration of pharmacologic agents in the pediatric population.
4. Apply the principles of health promotion, health maintenance and cultural sensitivity in the care of families and children, with emphasis on Native American Culture.
5. Integrate normal growth and development stages in the care of families and children.

NR 204 – Adult Health III (6)

This course will focus on delivering patient-centered care to adult clients with emergent and multi-system problems. The course will include an introduction to critical care and emergency care nursing while applying critical thinking and judgment, evidence-based practice, and collaboration with the interprofessional healthcare team. Nursing leadership will be taught throughout the course. There is a clinical component to this course. The student must maintain a grade of “B-“or better in general education and program courses.

Course Learning Outcomes:

1. Describe reliable sources for locating evidence reports and clinical practice guidelines related to critical medical situations.
2. Implement individualized evidence-based practice nursing care plan that reflects an understanding of disease process and management among the adult patient population with complex disease process.
3. Provide patient-centered care with cultural sensitivity that is respectful of the diversity of human experiences, with emphasis on Native American Culture.
4. Incorporate physiological, psychological, and spiritual assessment data into patient care.
5. Provide appropriate education related to health conditions, medications, health promotion and maintenance.

NR 297 – Capstone (1)

The purpose of this course is to facilitate the safe role transition from student nurse to graduate nurse while applying theory to practice in a supervised clinical setting. This will allow the student to synthesize previous knowledge and skills, develop new knowledge and skills for the management of patients across the healthcare continuum, reflect on their learning achievements throughout their nursing education and to increase their nursing knowledge and skills to adequately prepare for successful passage of the NCLEX-RN.

Course Learning Outcomes:

1. Fully realize program learning outcomes.
2. Provide care that considers the whole person, including being culturally sensitive to their needs and the needs of their family members, with emphasis on Native American Culture.
3. Demonstrate appropriate knowledge of established professional nursing standards, guidelines, and competencies.
4. Deliver safe, effective, evidence-based, quality care to patients across the lifespan and healthcare continuum.

- Educate patients regarding health promotion, disease prevention, medical illnesses and medications.

Additional Courses

NR105 – Clinical Transitions (1)

Clinical Transitions is a self-directed course designed for students who have been out of the nursing program sequence for more than one semester. This is an independent study, technical skills testing, and patient-centered care experiences based on the last semester of attendance. Activities are planned to review and evaluate a student's readiness to re-enter the nursing sequence. This course will be offered as needed and will require approval of the Nursing and Health Sciences Department Chair. Prerequisite: Must be enrolled in the Nursing major.

Learning Outcomes:

- Assess the student's current abilities based on the last semester of attendance in the nursing program.
- Develop assignments, skills testing and patient-centered care activities that will assess students learning and enhance their ability to successfully complete the nursing program.
- Apply nursing concepts to provide safe, quality, evidence-based patient-centered care that is culturally sensitive across the lifespan.
- Demonstrate ability to accurately calculate dosages of medication and provide safe medication administration.
- Utilize the nursing process to plan care for the whole person that is culturally sensitive, holistic, and patient-centered, with emphasis on Native American Culture.

Required Nursing Program Sequencing Schedule

Fall – Year 1 NR 101: Nursing Fundamentals (6) (3-3-9) NR150: Assessment and Pathophysiology (3) (1-3-0) NR151: Pharmacology (3) (3-0-0)	Spring – Year 1 NR102: Adult Health I (6) (3-3-9) NR103: Mental Health Nursing (3) (3-0-6)
Fall – Year 2 NR202: Adult Health II (6) (3-3-9) NR203: Family Centered Nursing (5) (4-2-3)	Spring – Year 2 NR204: Adult Health III (6) (3-3-9) NR297: Capstone (1) (0-0-3)

Please Note: All pre-requisite courses **MUST** be completed prior to application to the Program.

Employment

It is strongly recommended that students limit outside employment while enrolled in the nursing program due to the rigorous demands of the curriculum. No consideration will be made for class, skills lab or clinical schedules to accommodate employment commitments. Should employment interfere with progress, students will be counseled to re-evaluate their choices.

Graduation

To be awarded the Associate Degree in Nursing, a student must have achieved:

- a. An overall GPA of 2.0 or better.
- b. The grade of "C+" or better in all nursing courses
- c. Meet all general education requirements.
- d. Complete Graduation application procedure.

Caps and gowns are provided by KBOCC at no charge. Participating in commencement is a wonderful experience to share with friends and family and a meaningful ending to your nursing school career. You should experience it to the fullest.

Pinning

The nurse pinning ceremony is a time-honored tradition and a very important celebration in your honor. Nurse pinning happens in May after final exams. All successful graduates should participate in the pinning ceremony. Pinning takes place on the evening before commencement exercises. A reception for family and friends of graduate nurses is held after pinning. There is a dress code for nursing graduates who participate in the pinning ceremony. You will be required to wear black dress slacks, a white dress shirt, and dark colored closed toe shoes. Each student is pinned by one person of their choice and receives a nursing stole to wear in commencement exercises the following day.

Study Habits

In order to be successful in the program, you need to be committed. There are several factors that can either hinder or promote your ability to succeed.

Blocks to Learning:

- Failure to attend lecture
- Failure to learn information initially
- Inability to organize for recall
- Failure to be prepared for lab/clinical experiences
- Trying to work at a job while in school

Four Important Aids:

- Association
 - Organization
 - Intent to memorize
 - Rehearsal Student Tips
- There are **NO** shortcuts. Using other student's notes, missing classes and omitting reading will be reflected in your grades.
 - Use your textbooks – annotate! Highlight, underline, make notes in the margins and draw a picture or a diagram if this helps you.
 - Learn what works for you – if you are very visual, use different colors, draw pictures, or watch videos. If you are auditory, read out loud to yourself-devise rhymes, acronyms or word associations.
 - Plan study time in the library or somewhere you will not be disturbed. Scheduling gaps between classes are helpful and a “forced” study time which could be very productive if spent in the library. *For every hour of class or clinical time, it is expected that you will spend two hours studying.*
 - Plan time off. Look forward to a day or evening scheduled off from studying. You need to take care of yourself by eating, sleeping, and exercising regularly.
 - Remember that your instructors are dedicated to your success. Go to them with questions and concerns as they arise.
 - Consider a study group and tutoring if necessary.
 - Look into books on “successful test taking.”
 - Use available resources, especially test remediation, videos and outlines.
 - Utilize faculty approved practice tests, open lab hours and resources.
 - Utilize library resources on campus and online.

American Psychological Association (APA) Format

All formal written reports and papers will be written using APA format. The following links are recommended for APA formatting information, guidelines and resources:

<https://apastyle.apa.org/products/mastering-apa-style>.

The KBOCC library also has APA resources available to help you.

Health Insurance Portability and Accountability Act (HIPPA)

HIPPA is a federal law, which secures protected health information (PHI) so that only those people or facilities that have a real need for protected health information have access to it. In essence, it provides protection to the security and privacy of all medical records or other health information which is used or shared in any form, including paper, electronically or orally by health care entities or their associates.

Furthermore, it is the expectation of KBOCC and all associated health care agencies that students make every effort to prevent the inappropriate sharing of health information.

The following actions are forbidden:

With respect to information received while in the professional role as a student nurse, you may not disclose any personal health information of any individual. Simply removing the name of an individual does not constitute proper de-identification of protected health information. Inclusion of such data such as age, gender, race, diagnosis, clinical agency, date of evaluation, type of treatment used, or the use of a highly specified diagnosis may still allow the reader to recognize the identity of the individual. This is a HIPPA violation.

Students violating these guidelines will be subject to actions ranging from a critical incident, learning contract, to dismissal from the nursing program.

In addition, students must be aware that HIPPA violations can include civil and criminal liability. Punishment for such actions can include fines and imprisonment
<https://www.hhs.gov/hippa/for-professionals/privacy/index.html>.

Class and Clinical Attendance Guidelines

Absenteeism and tardiness may result in termination from the nursing program; therefore, students are expected to adhere to the attendance policy as written in the student handbook.

The clinical experience is critical to prepare students for professional responsibilities. Missed clinical represents a missed opportunity to meet clinical outcomes. All clinical outcomes **MUST** be met for successful completion of the nursing program. If a student is absent, they are at risk of not meeting the clinical course outcomes and therefore failure of the clinical course.

A dismissal from clinical due to disease (Appendix 1) or due to being unprepared for a clinical day (Warning Notice pg. 22) will count as an absence.

Two episodes of tardiness of greater than 15 minutes will equate to and count as one absence. In addition, more than two hours tardy or released early will equate to and count as one absence.

A Written Warning will be issued when the student is absent for a second occurrence during any given semester. For example: If the student has more than one absence in the clinical course for any given semester, the student will receive a Written Warning Notice from their clinical instructor. If the student has more than one absence in the clinical skills lab for any given semester, the student will receive a Written Warning Notice from the CSC Coordinator, and this will be counted toward the clinical course.

If a student is absent from clinicals, the instructor has the right to pull the student from any outside clinical experiences and/or may require a substitute assignment either in the simulation skills lab or a clinical case study equal to the missed clinical time. This is determined by the lead faculty from each course. Students will not receive anecdotal credit for absent days which may affect their ability to meet the course outcomes. **Failure to meet course outcomes is a failure of the clinical.**

Nursing clinical skills lab (CSC) is considered part of the clinical hours. Clinical skills lab absences **MUST** be made up and **cannot** be made up during open lab time. It is the responsibility of the student to contact, and schedule make - up time with the skills lab coordinator. All skills lab absences **MUST** be made up within one week or the student will receive a failing grade and will not be allowed to progress to the next semester.

In the event the student will be late or absent in the clinical/skills lab, it is the responsibility of the student to notify the clinical site and faculty prior to the start of the clinical or skills lab. This may include notifying the nursing office at (906) 524-8304. A student that is a “no show, no call” for clinicals may be subjected to dismissal from the nursing program at the discretion of the Nursing and Health Science Department Chair.

Student Illness

If a student is ill and cannot attend the clinical or laboratory experience, they must notify the clinical instructor and clinical agency at least 2 hours prior to the scheduled session. You must speak to your clinical instructor and the clinical agency directly by phone (sending a text or email is not acceptable). Failure to do so will cause the absence to be considered a no-call/no-show and trigger the initiation of a learning contract or withdrawal from the program if it is the third absence in a semester.

- Students who are a no-call/no-show for a clinical will be withdrawn from the program unless a valid excuse is presented. This type of behavior is considered a severe problem with accountability and responsibility.
- Three clinical absences per semester, for reasons other than COVID or other infectious disease management to the extent practicable, will result in a withdrawal from the program.

- Nursing students are frequently exposed to a variety of conditions which may include but are not limited to standing for a length of time, lifting, pushing/pulling, blood and body fluids, and infectious processes. To ensure either student and patient safety, if a student is absent due to a medical or surgical condition, documentation of a release by the primary care provider may be required to return to the nursing program.
- The Nursing and Health Science Department Chair and/or instructor reserves the right to remove a student from a classroom, laboratory, or clinical site for any reason if they do not feel confident of the student's ability to participate in class and or render patient care safely. Reasons may include (but not limited to) illness, excessive fatigue, emotional instability, behaviors suggestive of intoxication or drug use/abuse, or inadequate preparation. A dismissal from the laboratory or clinical experience by the instructor or Department Chair counts as a clinical absence.
- Nurse fatigue causes errors and puts patients, students, faculty and staff at risk of harm. Students are expected to work no more than 12 hours in a 24-hour period including their clinical shift or 8 hours before the start of their clinical shift. A clinical instructor reserves the right to send a student home who show any sign of excessive fatigue or exhibits behaviors suggestive of performance enhancing medications not prescribed by a physician. In the event a student is sent home for this reason it will count as a clinical absence.
- **Students are not permitted to work a night shift prior to their clinical experience.**

Clinical Procedures and Skills Lab Requirements

Strategies for Successful Completion in the Clinical/Skills Lab environment are meant to prepare you for clinical experience. To be successful the student is to:

- Come prepared for clinical as directed by faculty. This is for the client's protection as well as the student. See specific clinical requirements for details. Unsafe practice will result in a written warning. Severity of breach in practice and any behaviors which interfere with safe client care may result in immediate dismissal from the program.
- ON the clinical days, the nursing student is to report to their assigned clinical site on time. Students are to present themselves to the clinical facility in their KBOCC student uniform as defined under dress code.
- Before beginning client care you must update yourself to current status of client by: listening to reports, verbally or taped, check the Kardex, check the electronic medical record (EMR) for updates and orders, receive special instructions from the primary or team leader, and check the medication sheets.
- **NEVER** take verbal orders. Phone orders from the physician may be taken with the faculty or RN listening on an extension, who co-signs the orders.
- Follow agency policies about witnessing surgical permits, wills, etc.

- Complete a hospital employee incident report if injured in the clinical area. Any treatment necessary will be at the student's cost or covered by his/her own insurance.
- Assume responsibility for listening to the local radio station and checking the KBOCC website for cancelled classes due to inclement weather. Students in clinical will be notified by the faculty by email or text message. However, students are expected to use good judgement about safe traveling during inclement weather. If the clinical has not been cancelled and you miss the class, it will be considered an absence.
- Practice self-evaluation continually.

Students May Not:

- Be in the clinical area without an instructor in the agency except for outside rotations and/or capstone.
- Leave the facility or assigned clinical area during their assigned clinical time for any reason without faculty approval. Students leaving the facility or their assigned clinical area without faculty approval will result in a written warning.

Safe Practice Criteria

I. Professionalism

a. Ethics

- i. Adheres to accepted standards of professional ethics
- ii. Practices with integrity
- iii. Reports errors promptly

II. Accountability

a. General Attitude

- i. Ability to recognize errors and assume responsibility for own actions and mistakes
- ii. Able to maintain composure during nursing care
- iii. Able to separate professional and personal responsibilities and set client's/patient's need above those of self while in the clinical setting.
- iv. Attend clinical in a state of optimal mental and physical health.
- v. Seeks assistance and supervision when performing procedures for the first time or when in doubt.
- vi. Collaborates regularly with instructor, agency staff, and peers regarding client/patient information and nursing care.
- vii. Follows through on instructions from the clinical instructor, hospital staff, and health care providers.
- viii. Turns in all assignments, written and electronic, on time, fully completed and accurate.
- ix. Complies with dress code during clinical and laboratory assignments.

b. Clinical Preparation

- i. Uses sufficient time to assess client/patient before the assigned clinical time, whereby assigned paperwork is complete.

- ii. Able to answer pertinent questions regarding client/patient's medical condition posed by the instructor on repeated occasions.

III. Communication

- a. Able to communicate essential information to other staff or instructor verbally
- b. Report significant changes in client/patient's physical and psychological condition in a timely manner.
- c. Recognizes the effect of one's behavior on clients/patients and how client's/patients' behavior might affect students' responses.
- d. Able to relay pertinent client/patient information

IV. Documentation

- a. Always communicates professionally including classroom, laboratory and clinical settings. Is not disruptive or rude during instruction, conferences or advising.
- b. Students will uphold respect and consideration for instructors and staff for their time. We ask that students do not call or text their instructors between the hours of 12:00 A.M. and 4:00 A.M. unless agreed upon by the individual instructors themselves.

V. Application of Theory

- a. Demonstrates in written assignments and verbal discussion with instructor adequate knowledge of:
 - i. Individual disease conditions and related pathophysiology
 - ii. Diagnostic tests
 - iii. Medications (considerations):
 - 1. Related to diagnosis
 - 2. Precautions to take with giving
 - 3. Evaluation of therapeutic effect
 - 4. Side effect and adverse reactions
 - 5. Usual dose
 - 6. Ability to compute dosages accurately
 - iv. Treatments and procedures:
 - 1. Relate to diagnosis and pathology
 - 2. Able to determine priority areas of nursing care, including an appropriate plan of action with rationales.

VI. Clinical Procedure and Practice

- a. Able to use appropriate nursing judgement when carrying out nursing interventions.
- b. Consistently performs nursing treatments or procedures correctly and accurately.
- c. Able to recognize and implement independent nursing functions, i.e., turning and positioning bedridden clients/patients every two hours, hand washing, etc.
- d. Able to identify or provide appropriate client teaching.
- e. Able to initiate appropriate nursing interventions.
- f. Administer medications following the "6 rights."
- g. Does not function beyond level of preparation.

- h. Performs dependent functions only with a doctor's orders.
- i. Consistently able to manage client/patient care assignments within the constraints of the assigned clinical time.
- j. Consistently provides complete and thorough nursing care. An instructor (or RN designated by the instructor) will supervise all procedures performed by the student until the student is evaluated as a competent and independent in that particular procedure. Before performing procedures, it is the responsibility of the student to check the original doctor's orders. Students will be supervised by clinical faculty rather than staff whenever possible.

Clinical Assignments

Students are assigned to various facilities. Due to contractual limitations, students must accept the clinical assignment that is assigned to them. It is recommended that the student rotate to different facilities, faculty, and shifts. This will enhance their education and clinical skill opportunities. It is highly recommended that students avoid their place of employment when choosing a clinical assignment, however this may not always be possible.

Assignments to clinical facilities will be made by the Associate Director of Nursing: Clinicals, under the direction of the Dean of Nursing and Health Sciences, and students during pre-enrollment. Every effort is made to leave students in their assigned clinical site but under different circumstances, it may be necessary to change the clinical site the student has been assigned. Students will be notified if their clinical site has been changed just prior to the start of the semester. The Dean of Nursing and Health Sciences reserves the right to change a clinical assignment at any time.

Students are responsible for providing their own transportation to and from clinical sites. The student needs to understand that he/she may travel over an hour to get to a clinical site. Carpooling to clinical sites is encouraged and transportation may be able to be arranged through KBOCC dependent on the situation.

All students are required to wear their student identification cards at all clinical facilities designating you as a student nurse. Clinical facilities may also require that students have badges created at the facility for security purposes. The Nursing and Health Science Department Chair or designee will provide the requested identification pictures to the facilities if this is required.

Facilities which **may** be used during the nursing program, but not limited to include:

Acute Care	Extended/Long-term Care Facilities	Outside Rotations
<ul style="list-style-type: none">• Baraga County Memorial Hospital• UP Health System Portage• UP Health System Marquette	<ul style="list-style-type: none">• Bayside Village	<ul style="list-style-type: none">• Western UP Health Department• Baraga County Home Care and Hospice• Copper Country Mental Health Facilities

Agency Policies

Students and faculty must conform to the policies of the affiliating agency (facility). The facility has the right to request the student or the clinical instructor to be removed if they are not conforming to facility policy. The facility is to immediately inform the Nursing and Health Science Department Chair if a need exists to remove a student or an instructor from the clinical facility.

Disciplinary Process for Failure to Meet Clinical Performance Guidelines

Verbal Warning

Step 1: VERBAL WARNING is an interaction between the faculty and the student regarding unsatisfactory performance in the CSC or clinical area. The unsatisfactory behavior needs to be corrected by the student to succeed in the course. If a verbal warning is issued in the CSC, the CSC Coordinator (or designee) will notify the clinical instructor and a verbal warning will be documented on the student's weekly clinical evaluation form.

The verbal counseling will be documented by the faculty on the student's weekly clinical evaluation form. Verbal counseling can be given for any behavior that hinders growth in the nursing courses. This verbal exchange should be used as a learning experience and an opportunity to improve.

Written Warning

Step 2: WRITTEN WARNING. This notice may be given, with or without a verbal warning if the student is identified as displaying any of the following behaviors, but not limited to:

- a. Unsatisfactory performance at any time or repeated behavior for which a verbal warning has been issued.
- b. Unsafe clinical practice or pattern of behaviors. Examples of unsafe practices include, but are not limited to:
 1. near miss or errors in medication preparation and/or administration
 2. lack of knowledge of purpose and side effects of drugs administered to clients

3. incorrect calculation of drugs
 4. leaving client unattended in an unsafe vulnerable position
- c. Unsafe nursing practice resulting in actual or potential harm to clients.
 - d. Failure to safely adapt nursing skills to actual client care according to level of course.
 - e. Being unprepared for a clinical or clinical skills lab. Students will receive a written warning in the clinical or clinical skills lab if unprepared.
 - f. Lack of knowledge of disease process, medications, nursing interventions, procedures, etc.
 - g. Failure to demonstrate sound nursing judgment, incompetency, or failure to handle assignment according to level of course. It is an expectation that students will be held accountable for and appropriately utilize previously learned content.
 - h. Failure to give faculty or nursing staff current accurate information about a situation, assignment, or client care either by intent or omission.
 - i. Disruptive behaviors which are disturbing other students and faculty in clinical skills lab, class or clinical. Any behavior identified to interfere with safe client care or disruptive behaviors will result in the student receiving a written warning.
 - j. No Call/No Show for clinical or clinical skills lab.
 - k. Failure to establish effective working relationships and communication with KBOCC Nursing Department, members of the health care team, other students, or clients.
 - l. Incomplete or inaccurate clinical paperwork that does not improve with feedback.
 - m. Excessive absenteeism and/or tardiness. (See Attendance, page 17).
 - n. Inappropriate personal appearance or clinical behavior. (See Personal Appearance Requirements, p. 11).
 - o. Unethical or immoral behavior.
 - p. Academic dishonesty. (See Academic Honesty, p. 19).
 - q. Failure to meet guidelines for clinical paperwork as defined in course syllabus.

Clinical faculty have the authority and will make the decision of whether a student is competent to be in the clinical setting on a given day. Clinical faculty may dismiss a student from the clinical setting on any given day if, in their judgment, a student is not competent.

A dismissal from the clinical setting for the day will count as an absence.

The written warning notice will include reasons why it is given, suggestions for improvement, faculty recommendations, criteria for resolution of the warning notice and follow up.

The student may be dismissed without the use of a warning notice procedure, for serious violations. Each situation will be evaluated individually on its own merit.

The written warning notice will remain as a permanent part of the student's file. Any or all written warnings will be considered in determining ongoing discipline.

Student Responsibilities When Receiving a Written Warning:

- a. The student will be informed by the faculty, so the student is aware of the unsatisfactory

clinical performance. The student will have a conference with the faculty by the next clinical day.

- b. After receiving a written warning notice from the faculty, the student will make an appointment to meet with the Dean of Health Sciences & Director of Nursing within one week of the notice.
- c. The student must write a perception of the problem and formulate outcomes and a plan to correct the unsatisfactory performance/behavior and bring this to the conference with the Nursing and Health Science Department Chair.
- d. After meeting with the Nursing and Health Science Department Chair and reviewing their outcomes and improvement plan, the student will then meet with their clinical instructor on or by the next clinical day and review their outcomes and improvement plan.
- e. If the student fails to improve clinical performance as indicated on the improvement plan, the student will then be placed on probation by the faculty.
- f. Students may not be assigned to a clinical area where the identified problem cannot be evaluated. This may mean not going to an outside experience.

Failure to follow above procedures will result in a probationary notice.

Two written warning notices during the same semester will result in lowering of the student's overall clinical grade and may result in the student earning a "Fail" in clinical.

Probation Notice

Step 3: PROBATION NOTICE: This notice will be given if a student continues to exhibit unsatisfactory behavior, fails to follow the submitted improvement plan or fails to progress in any of the areas listed under Written Warning.

A student may receive a Probation Notice instead of a written warning if the unsatisfactory behavior is of a serious nature and compromises client care and or safety. Placing a student on Probation will be at the discretion of the faculty member. The Probation Notice will be completed by the faculty member, reviewed with, and signed by the student then forwarded to the Nursing and Health Science Department Chair.

The length of probation will be determined by the faculty member and the Nursing and Health Science Department Chair. After receiving the notice, the student will have a conference with both the faculty member and the Nursing and Health Science Department Chair. The notice will include identification of the problem and recommendations of the faculty. One copy will be kept in the student file, one given to the faculty, and another given to the student.

The following outcomes will be reviewed with the clinical faculty member during the probationary period:

- If a faculty member requires an alternate assignment for clinical absences, they **MUST** be made up before the probation is complete.
- All terms of probation must be completed to exit the program.

- At the end of the probationary period, the student's record will be reviewed by the nursing faculty member and Nursing and Health Science Department Chair. The student will either be removed from probation as a result of adequate progress or will receive a failure for the course. Failure of the nursing course would be the result of the student failing to meet the clinical outcomes.
- Receiving another Warning Notice during probation warrants a "Failure" in the course and immediate dismissal from the nursing program.
- Further probationary behavior will result in immediate dismissal from the nursing program.

Student Responsibilities When Receiving a Probation Notice:

1. The student will be informed by the faculty, so the student is aware of the unsatisfactory clinical performance. The student will have a conference with the faculty member by the next clinical day.
2. After receiving a Probation Notice from the faculty member, the student will make an appointment and meet with the Dean of Health Sciences & Director of Nursing and the faculty member before the next scheduled clinical day.
3. The student must write a perception of the problem and formulate outcomes and an improvement plan to correct the unsatisfactory performance/behavior. The student will complete and bring this to the conference with the Dean of Health Sciences & Director of Nursing and faculty member. The improvement plan will be reviewed in its entirety and agreed upon by the student, Dean of Health Sciences & Director of Nursing and the faculty member.
4. If the student fails to improve clinical performance as indicated on the improvement plan, the student will then be assigned a "Failure" for the course and will be dismissed from the nursing program.

Failure to follow the above procedures may result in a dismissal from the program.

Dismissal from the Nursing Program

The KBOCC nursing program prepares students to practice within the Scope of Practice as defined by the American Nurses Association (ANA) (Appendix 7) and the Standards of Nursing Practice (Appendix 8). Failure to progress toward mastery of the standards and scope of practice may result in disciplinary action including dismissal from the nursing program.

All students must adhere to legal practice of nursing as found in the Michigan Public Health Code (Appendix 11). Students are held accountable to the level of a registered nurse for those skills already taught. Failure to meet legal requirements will result in immediate dismissal from the nursing program.

Students are required to keep client information confidential. This is both a State of Michigan law and a federal statute. **Failure of client confidentiality will result in IMMEDIATE**

dismissal from the nursing program. Students may only reproduce parts of a client record with permission of the clinical instructor and then ALL client identifying factors MUST be removed from the record. Students will practice in keeping with the federally mandated Health Insurance Portability and Accountability Act (HIPAA).

A student who is found to be dishonest in clinical will be subject to dismissal. Examples of dishonesty include obtaining clinical data from fellow students without their permission, falsifying clinical records, breach of client confidentiality, etc.

Possession, use, or distribution of alcohol and controlled substances in the clinical area will result in immediate dismissal from the Nursing program. A suspicion of alcohol or drug use may require immediate testing. Testing positive for alcohol or other drugs, or declining to be tested, will subject the student to immediate dismissal from the Nursing program (See: College Catalogue, Drug Abuse Policy and Regulations). In addition, if a drug or alcohol test is required while in the Nursing program, the student grants permission to KBOCC to obtain and review the results so that an informed decision can be made based on those results.

Nursing as a profession maintains a standard of practice which involves integrity regarding the administration of medications clients entrusted to your care. Substance abuse can often occur in a profession which involves the use of narcotics and other drugs that are often abused. Therefore, it is imperative that caregivers not have a substance abuse problem.

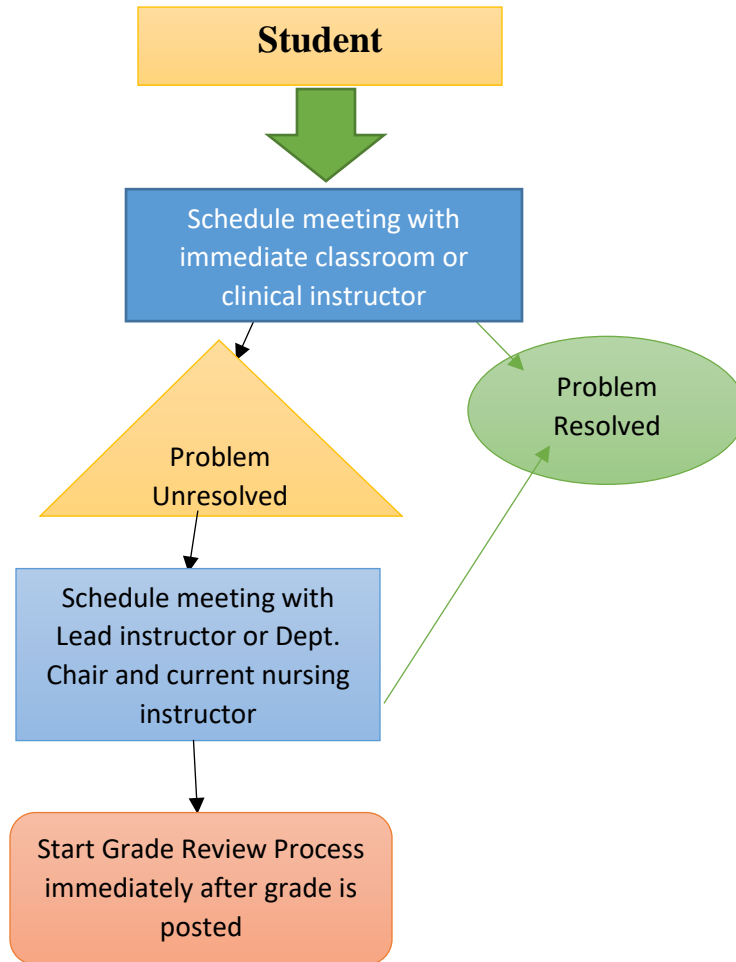
Student Due Process Concerning Dismissal from the Nursing Program for Unsatisfactory Clinical Performance or a Classroom Failure

The instructor shall:

- Make weekly entries in the student's weekly clinical evaluation form.
- Inform students of any clinical deficits and make recommendations for corrective action.
- Notify the Nursing and Health Sciences Department Chair if the student fails to adhere to recommendations for clinical improvement.
- Assist the student as needed, monitor the student's clinical progress, and keep the Nursing and Health Sciences Department Chair informed.
- Inform the student of unmet clinical outcomes and record a failing grade.

Conflict Resolution

In professional conflict resolution it is important to follow a specific course of action and begin with the person with whom you have the conflict.



CLASSROOM:

Step 1: Schedule a meeting with faculty member

Step 2: Schedule Meeting with Dean of Health Sciences & Director of Nursing: come prepared with written and signed concerns*

CLINICAL SETTING:

Step 1: Schedule a meeting with clinical faculty outside of clinical time

Step 2: Schedule meeting with lead faculty for that specific course

Step 3: Schedule meeting with Dean of Health Sciences & Director of Nursing: come prepared with written and signed concerns*

*Another step may be added to include a meeting with the Dean of Health Sciences & Director of Nursing and faculty member.

Readmission

Students who receive a grade less than a "B-" in any nursing course (this includes the didactic portion and a "fail" in clinical) will not progress to the next semester. They must apply for readmission to the nursing program. The student will be required to complete an application which includes a letter of academic preparedness. If a period of more than two years lapses before the course is retaken, remediation may be required at the discretion of the Nursing and Health Science Department Chair. Student re-entry is not guaranteed and is based on availability of seats and the student's preparedness to return.

Student's detailed plan of academic preparedness to reenter the nursing program: The plan of academic readiness **MUST** address, in detail, why the student wasn't successful the previous attempt and how the student plans to be successful if readmitted to the nursing program. The plan must be signed and becomes a contract that the student will follow throughout the remainder of the nursing program. If at any time the student fails to follow their plan of academic readiness, they may be dismissed from the nursing program. Readmission requests **WILL NOT** be considered if a student doesn't submit a detailed plan of academic readiness.

All requests for re-admission must be accompanied by a program application. Each request for readmission will be evaluated on an individual basis by the nursing faculty and will be based upon the selective admission criteria along with plans of academic readiness. ***The Nursing Department DOES NOT GUARANTEE re-admission to the nursing program unless there is a statutory requirement to do so;*** when a student returns from a medical leave, they will be assigned to the original location and semester they withdrew from.

Timelines for Readmission

	FALL	SPRING
Student Failed/Withdrew from Nursing Program	Fall (August-December)	Spring (January-May)
Submit Applications	December-February	June-August
Entrance Testing	March, April, May	July
Applications and Plan of Academic Readiness Due	March	August
Student presents at faculty meeting	April	August or September
Semester applying for begins	August	January

- a. Students withdrawing from the nursing program or completing with less than a “B-“ in a nursing course may be readmitted to the program a *maximum of one* (1) time. Students must follow the readmission request guidelines outlined above.
- b. Students that are readmitted to the nursing program will be required to successfully complete a NR105 prior to readmission.
- c. Every attempt will be made to assign readmitted students to their clinical rotations with a full time KBOCC nursing faculty member if available.
- d. Readmission must take place within a two-year time span or all prior nursing courses may have to be repeated.
- e. Readmitted students will be required to follow the curriculum in place when accepted back into the nursing program.
- f. Readmitted students are required to purchase current required textbooks and academic supplies for the course which is being repeated.
- g. Students who do not receive an offer of readmission and wish to reapply to the nursing program in subsequent years, must complete a new application in its entirety and fulfill any new pre-nursing or admission requirements that apply.
- h. Students that are dismissed from the nursing program while on probation are not entitled to readmission to the nursing program.

Readmission to the Nursing Program is based on availability of seats.

Critical Incident Reports

A critical incident formally documents a concern related to a student’s safe practice and/or critical clinical elements. Critical incident reports are assigned by faculty and must be complete by the assigned date. Failure to do so may result in dismissal from the clinical unit until it is complete, and the instructor has had time to evaluate the student’s ability to deliver safe care.

Learning Contract

Students must, without exception, consistently provide safe and appropriate care to clients throughout their clinical experience. Failure to do so may result in the receipt of a Learning contract or dismissal.

A student will receive a learning contract if they fail the achievement of a Critical Behavior as defined in each course and/or does not meet Criteria for Safe Practice. Students will be assigned a learning contract and/or dismissal from the program at any time during the program if academic progress is faltering or if the care provided in the clinical setting jeopardizes patient safety.

The student will meet with the instructor of the course, their advisor and the Nursing and Health Science Department Chair to develop the initial Learning Contract, set goals and timelines for

academic improvement and/or demonstrate improved clinical skill development. Meetings will be held weekly to monitor the students' progress and to adjust as needed. If the goals are not met within the timeline set forth, the student will be dismissed from the program.

The original Learning contract will be kept in the student's file and copies will be provided to the student, faculty, Nursing and Health Science Department Chair and Dean of Academic Affairs.

When the student achieves the goals stated in the learning contract at 100% compliance by the determined timeline, the student will be officially removed from the learning contract. The plan of improvement addressing the student's failure must be met by the end of the semester. Failure to resolve the student's unsatisfactory performance will result in dismissal from the program.

NCLEX

The Michigan State Board of Nursing requests that all applicants for the NCLEX must indicate if they have been convicted of a crime and/or treatment for substance abuse. ***The Board of Nursing may deny the right to take the NCLEX to anyone convicted of either.*** If this information applies to you, contact the Michigan Board of Nursing at (517) 335-0918. All candidates for licensure by the Michigan Board of Nursing are required to have an FBI fingerprint and criminal background check completed prior to being deemed eligible to sit for the NCLEX. **Disclaimer: KBOCC is not responsible if an applicant is denied a license from the Michigan State Board of Nursing.**

APPENDIX A-Infection Control GuidelinesRecommendations for Clinical Experience Restrictions*

Disease/Problem	Relieve from Direct Client Contact	Partial Work Restrictions	Duration
Conjunctivitis	Yes		Until discharge ceases or until 24 hours after antibiotic is initiated
Diarrhea, acute (with fever, cramps or bloody stools, or lasting more than 24 hours)	Yes		Until symptoms resolve
Herpes simplex: Genitalia	No	Do not take care of high risk clients	Until lesions heal
Herpes simplex: Orofacial	No	Do not take care of high risk clients	Until lesions heal
Herpes Zoster (Shingles)	No	Do not take care of high risk clients	Until lesions dry & crust
Pediculosis	Yes		Until 24 hours after treatment
Staphylococcus Aureus (skin lesions)	Yes		Until lesions have resolved
URI with temp. elevations above 99.6 (0)	Yes	Do not do client care	Until acute symptoms resolve
Skin/Soft Tissue Infection	No	Gloves	Until healing is complete
Pregnancy	Special conditions may be required	Do not care for clients with: Herpes Zoster, Chemotherapy drugs (1 st trimester); actual administration of Chemotherapy drugs (1 st trimester); no x-ray or radiation therapy	Physician's statement specifying level of activity and any other restrictions will be requested

For more complete information, see the CDC's Guideline for Infection Control in Hospital Personnel, particularly Table 2 at the end of the document, available at the following link:
http://wonder.cdc.gov/wonder/prevguid/p0000446/P0000446.asp#Table_2

APPENDIX B - Michigan Right to Know Law

Michigan Right to Know Law

The Michigan Right to Know Law is designed to provide safety information to employers and employees exposed to hazardous chemicals and other safety concerns of the workplace. Contracted clinical agencies have provided this information for their employees and our students have access to this information.

For more information regarding the Michigan Right to Know Law, visit the following website, and open the "MIOSHA" button on the left-hand panel button; there you will find links for workplace safety information of all kinds:

<http://www.michigan.gov/cis>

For further assistance or answers to questions, you may also call or visit:

Michigan Department of Labor
Safety Education and Training Division
P.O. Box 30015
Lansing, MI 48909
(517) 322-1809

Michigan Department of Public Health
Division of Occupation Health
P.O. Box 30035
Lansing, MI 48909
(517) 335-8250

APPENDIX C-Infection Prevention Policy
KEWEENAW BAY OJIBWA COMMUNITY COLLEGE
HEALTH EDUCATION PROGRAMS
INFECTION PREVENTION POLICY
ON CAMPUS AND IN CLINICAL AGENCIES

POLICY:

A standard precautions system emphasizes direct and indirect contact transmission of infectious agents in moist body substances via the hands of personnel. Standard Precautions include a combination of handwashing, the appropriate use of protective barriers and the careful and proper disposal of sharps without unnecessary manipulations.

Formerly, Blood/Body Fluid Precautions were applied to clients identified as belonging to a "high risk group." Identifying individuals who have unrecognized infections or who engage in "high risk" activities is impossible. "*Standard Blood/Body Fluid Precautions*" are used in the care of all clients, especially those in emergency care settings in which the risk of blood exposure is increased, and the infectious status of the client is usually unknown.

PROCEDURE:

GENERAL PRECAUTIONS FOR CAMPUS AND CLINICAL EXPERIENCES:

Barrier Precautions:

Gloves are worn in the following circumstances:

- Touching human blood and other moist body fluids, mucous membrane, or non-intact skin of all persons.
- Handling items or surfaces soiled with blood or body fluids.
- Performing venipuncture and other vascular access procedures.
- Gloves are changed and hands washed after each human contact.

Masks and protective eyewear or face shields are worn:

During procedures likely to generate droplets of blood or other body fluids to protect mucous membranes of the eyes, nose and mouth from the risk of exposure.

Gowns or aprons are worn:

During procedures that are likely to generate splashes of blood or other body fluids.

Barrier precautions do not take the place of handwashing; therefore, handwashing is carried out according to prescribed policy and in addition:

- Immediately and thoroughly if contaminated with blood or other body fluids.
- Immediately after gloves are removed.

Disposal of sharps (needles, scalpels, vials, etc.) according to policy to prevent injury:

- Needles are not:
 - recapped, purposely bent or broken by hand, removed from disposable syringes or otherwise contaminated by hand.
- After use, disposable needles, syringes, scalpel blades and other sharp items are placed in a puncture resistant container for disposal.
- Sharps disposal units are located in laboratory classrooms and as close as possible to the work unit in the clinical facility.

Oral Secretions: (has not been associated with HIV transmission):

- Routine suctioning does not require the use of a mask or eye coverings. However, if aerosolization is likely to occur: masks, goggles, or face shields will be used.
- CPR - To date no HIV transmission has been reported:
 - Disposable resuscitation masks are located in all client care areas and are suggested to prevent transmission of TB, meningitis, herpes and Hepatitis B. (If blood exposure occurs when a mask was not used, the student should consider this a mucous membrane exposure and seek follow-up according to policy).
 - CPR mannequins should be cleaned with 70% alcohol or bleach (1:10 dilution).

Dermatitis - weeping dermatitis or exudative lesions:

- Students should refrain from all direct client care or handling client care equipment until the condition resolves. (See Handbook)
- Exceptions may be made if gloves can be worn comfortably.

Pregnancy:

- Pregnant students are at no greater risk of HIV infection than other students.
- Because of potential risk to the infant, pregnant students should be especially familiar with and strictly adhere to precautions.

Isolation:

- Students are required to follow Standard Precautions and agencies protocol and policies for specific situations.

CLINICAL AREA SPECIFICS:

Maternal and Child Health:

- General precautions as mentioned earlier and specific precautions noted under "Precautions for Invasive Procedures."
- Precautions are observed for both mother and infant pre and post-delivery, including cord care, newborns' first bath and management of blood dressings and pads.
- Separation of mother and newborn is not necessary. Rooming in is acceptable.
- Diapers may be changed without using gloves, unless there is a gross soiling, if there are not openings in the skin on hands of health care workers. Handwashing is practiced after each diaper change.

APPENDIX D-Bloodborne Pathogen

KEWEENAW BAY OJIBWA COMMUNITY COLLEGE

BLOODBORNE PATHOGEN

POST-EXPOSURE EVALUATION, CARE, AND FOLLOW-UP

If a KBOCC student or employee is involved in an incident where exposure to bloodborne pathogens may have occurred, there are two things that we immediately focus our efforts on:

- ☐ Making sure that this person receives medical consultation and treatment (if required) as expeditiously as possible
- ☐ Investigating the circumstances surrounding the exposure incident

EXPOSURE INCIDENT:

Accidents in which blood, blood-contaminated body fluid or tissue to which universal

precautions apply are introduced into the eye, mouth, other mucous membrane, or into non-intact skin via a needlestick, skin cut or direct splash which result in the laboratory setting.

Exposure incidents can result in serious nosocomial disease, including Hepatitis B, Hepatitis C and Human Immunodeficiency Virus (HIV) infection. It is essential that standards are defined which assure prompt identification of the person prompt intervention with appropriate prophylaxis, education, and treatment. Any individual who sustains an exposure incident will proceed as indicated in the following guidelines:

STEP 1: Wash the exposed area immediately

STEP 2: Inform his/her instructor/supervisor of the incident

STEP 3: Report to the healthcare provider of choice

STEP 4: Exposed person is responsible for cost of care

STEP 5: The Safety Officer or designee will investigate every exposure incident that occurs in our facilities. This investigation is initiated within 24 hours after the incident occurs and includes the following information:

- a. When the incident occurred
 - i. Date and time
- b. Where the incident occurred
 - i. Location within the facility
- c. What potentially infectious materials were involved in the incident?
 - i. Type of material (blood, urine, etc)
- d. Source of material
- e. Under what circumstances the incident occurred
- f. How the incident was caused
 - i. Accident
 - ii. Unusual circumstances (e.g., equipment malfunction).

- g. Personal protective equipment being used at the time of the incident
- h. Actions taken because of the incident
 - i. Care of injury
 - ii. Cleanup
 - iii. Notifications made

STEP 6: Follow up procedures

- i. The exposed individual will provide KBOCC with written documentation from the selected health care provider
 - i. Healthcare provider name
 - ii. Date of visit
 - iii. If HIV/HBV education was provided if needed (Michigan Department of Public Health guidelines attached)

Much of the information involved in this process must remain confidential, and we will do everything possible to protect the privacy of the people involved.

APPENDIX E-American Nurses' Association Code for Nurses

American Nurses' Association *Code for Nurses*

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

From:

Lachman, V.D., Swanson, E.O., & Windland-Brown, J. (2015). The new 'code of ethics for nurses with interpretive statements' (2015): Practical clinical application, part I and II. *MEDSURG Nursing*, 24 (5).

APPENDIX F-Scope of Nursing Practice

Scope of Nursing Practice

There is one scope of clinical nursing practice. The core, or essence, of that practice is the nursing diagnosis and treatment of human responses to health and to illness. This core of the clinical practice of nursing is dynamic, and evolves as patterns of human response, amenable to nursing intervention are identified, nursing diagnoses are formulated and classified, nursing skills and patterns of interventions are made more explicit, and client outcomes responsive to nursing intervention are evaluated.

American Nurses Association. (1987). The scope of nursing practice (p. 2). Kansas City, MO: Author.

Student Nurse Scope of Practice

- Each student is responsible for his or her own actions or failure to act and is liable for any adverse result. Clients have a right to have safe, competent, and professional care and students are obligated to provide that level of care at all times.
- Students will be assigned tasks and procedures within expected capability based on the course and program outcomes. Students are under the supervision of a licensed nurse and are not allowed to do tasks, skills or activities without the instructor's knowledge and approval. The student is held to the same standard in the clinical settings in relationship to the level of the student's current education. The student is obligated to provide safe competent and professional care to all clients.
- Students should expect to be assigned skills, tasks and procedures which have been covered either in assigned textbook readings, lecture or presentations either in the classroom, online or in the nursing skills lab.
- Students should NOT do any tasks which have not been covered in the course reading, lecture or nursing skills lab except when directly supervised by the faculty.
- If the student is asked to do a skill or procedure he or she does not feel competent in doing, the student should discuss this with the faculty.
- Students must comply with all policies and procedures of the agency used for the clinical rotation along with the Mid Michigan College Nursing Department policies and procedures.

APPENDIX G-American Nurses' Association Standards of Practice

- **Standard 1. Assessment**
The registered nurse collects client health data.
- **Standard 2. Diagnosis**
The registered nurse analyzes the assessment data in determining a diagnosis.
- **Standard 3. Outcome Identification**
The registered nurse identifies expected outcomes individualized to the client.
- **Standard 4. Planning**
The registered nurse develops a plan of care that prescribes interventions to attain expected outcomes.
- **Standard 5. Implementation**
The registered nurse implements the interventions identified in the plan of care.
- **Standard 6. Evaluation**
The registered nurse evaluates the client's progress toward attainment of outcomes.
- **Standard 7. Quality of Practice**
The registered nurse systematically enhances the quality and effectiveness of nursing practice.
- **Standard 8. Education**
The registered nurse attains knowledge and competency that reflects current nursing practice
- **Standard 9. Professional Practice Evaluation**
The registered nurse evaluates one's own nursing practice in relation to professional practice standards and guidelines, statutes, rules, and regulations.
- **Standard 10. Collegiality**
The registered nurse interacts with and contributes to the professional development of peers and colleagues.
- **Standard 11. Collaboration**
The registered nurse collaborates with client, family, and others in the conduct of nursing practice.
- **Standard 12. Ethics**
The registered nurse integrates ethical provisions in all areas of practice.
- **Standard 13. Research**
The registered nurse integrates research findings into practice.
- **Standard 14. Resource Utilization**
The registered nurse considers factors related to safety, effectiveness, cost, and impact on practice in the planning and delivery of nursing services.
- **Standard 15. Leadership**
The registered nurse provides leadership in the professional practice setting and the profession.

Source: American Nurses Association. (2004). Nursing Scope and Standards of Practice. Washington, DC:

APPENDIX H-NLN Standards

PROFESSIONAL BEHAVIORS

Indicators

1. Practice within the ethical, legal, and regulatory frameworks of nursing and standards of professional nursing practice.
2. Report unsafe practices of healthcare providers using appropriate channels of communication.
3. Demonstrate accountability for nursing care given by self and/or delegated to others.
4. Use standards of nursing practice to perform and evaluate client care.
5. Advocate for client rights.
6. Maintain organizational and client confidentiality.
7. Practice within the parameters of individual knowledge and experience.
8. Describe political processes as they affect agency specific healthcare.
9. Participate as a member of professional organizations.
10. Serve as a positive role model within healthcare settings and the community at large.
11. Recognize the impact of economic, political, social, and demographic forces on the delivery of healthcare.
12. Participate in lifelong learning.
13. Develop and implement a plan to meet self-learning needs.
14. Delineate and maintain appropriate professional boundaries in the nursing relationship.

COMMUNICATION

Indicators

1. Utilize therapeutic communication skills when interacting with clients and significant support person(s).
2. Communicate relevant, accurate, and complete information in a concise and clear manner.
3. Report and document assessments, interventions, and progress toward client outcomes.
4. Protect confidential information.
5. Utilize information technology to support and communicate the planning and provision of client care.

ASSESSMENT

Indicators

1. Assess the interaction patterns of the individual client or significant support person(s).
2. Assess the impact of development, emotional, cultural, religious, and spiritual influences on the client's health status.
3. Assess the client's health status by completing health history and performing a physical, cognitive, psychosocial, and functional assessment.

4. Assess client and significant support person(s) for learning, strengths, capabilities, barriers, and educational needs.
5. Assess the client's response to actual or potential health problems.
6. Assess the client's response to interventions.
7. Assess the client for changes in health status and identified needs.
8. Assess the client's ability to access available community resources.
9. Assess the environment for facts that may impact the client's health status.
10. Assess the strengths, resources, and needs of clients within the context of their community.

CLINICAL DECISION MAKING

Indicators

1. Make clinical judgments and management decisions to ensure accurate and safe care.
2. Analyze and utilize assessment and reassessment data to plan care.
3. Evaluate the effectiveness of care provided in meeting client outcomes.
4. Modify client care as indicated by the evaluation of outcomes.
5. Participate in problem identification and data collection for research, quality continuous improvement processes to meet client outcomes.
6. Use evidence-based information, collected electronically or through other means to support clinical decision-making.

CARING INTERVENTIONS

Indicators

1. Protect and promote the client's dignity.
2. Identify and honor the emotional, cultural, religious, and spiritual influences on a client's health.
3. Demonstrate caring behavior towards the client, significant support person(s), and other members of the healthcare team.
4. Provide accurate and safe nursing care in diverse settings.
5. Implement the prescribed care regimen within the legal, ethical, and regulatory framework of nursing practice.
6. Perform nursing skills competently.
7. Provide a safe physical and psychosocial environment for the client.
8. Assist the client and significant support person(s) to cope with and adapt to stressful events and changes in health status.
9. Assist the client to achieve optimum comfort and functioning.
10. Prepare the client and significant support person(s) for intervention, treatment modalities, and self-care.
11. Support the client and significant support person(s) when making healthcare and end-of-life decisions.

12. Adapt care in consideration of the client's values, customs, culture, and/or habits.

TEACHING AND LEARNING

Indicators

1. Develop an individualized teaching plan based on assessed needs.
2. Provide the client and significant support person(s) with the information to make choices regarding health.
3. Teach the client and significant support person(s) the information and skills needed to achieve desired learning outcomes
4. Evaluate the progress of the client and significant support person(s) toward achievement of identified learning outcomes
5. Modify the teaching plan based on evaluation of progress toward meeting identified learning outcomes.
6. Provide assistive personnel with relevant instruction to support achievement of client outcomes.

COLLABORATION

Indicators

1. Coordinate the decision making process with the client, significant support person(s), and other members of the healthcare team.
2. Work cooperatively with others to achieve client and organizational outcomes.
3. Collaborate with the client, significant support person(s), and other members of the healthcare team to evaluate progress toward achievement of outcomes.
4. Interact creatively and openly with others to solve problems to achieve client goals and outcomes.
5. Collaborate to bring about fair solutions that balance differing needs, values, and motivations for the purpose of achieving positive client outcomes.

MANAGING CARE

Indicators

1. Prioritize client care.
2. Coordinate the implementation of an individualized plan of care for clients and significant support person(s).
3. Facilitate the continuity of care within and across healthcare settings.
4. Delegate aspects of client care to qualified assistive personnel.
5. Supervise and evaluate the activities of assistive personnel.
6. Adapt the provision of client care to changing healthcare settings and management systems.
7. Assist the client and significant support person(s) to access available resources and services.
8. Implement nursing strategies to provide cost efficient care.
9. Demonstrate competence with current technologies.

APPENDIX I-QSEN Competencies

The overall goal for the Quality and Safety Education for Nurses (QSEN) project is to meet the challenge of preparing future nurses who will have the knowledge, skills and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work.

Using the Institute of Medicine competencies, QSEN faculty and a National Advisory Board have defined quality and safety competencies for nursing and proposed targets for the knowledge, skills, and attitudes to be developed in nursing pre-licensure programs for each competency. <http://qsen.org>

PATIENT – CENTERED CARE
<u>Definition:</u> Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs.
TEAMWORK AND COLLABORATION
<u>Definition:</u> Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.
EVIDENCE-BASED PRACTICE (EBP)
<u>Definition:</u> Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.
QUALITY IMPROVEMENT (QI)
<u>Definition:</u> Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.
SAFETY
<u>Definition:</u> Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.
INFORMATICS
<u>Definition:</u> Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.

APPENDIX J-Definitions

Part 172. Nursing

333.17201 Definitions; principles of construction.

Sec. 17201. (1) As used in this part:

(a) “Practice of nursing” means the systematic application of substantial specialized knowledge and skill, derived from the biological, physical, and behavioral sciences, to the care, treatment, counsel, and health teaching of individuals who are experiencing changes in the normal health processes or who require assistance in the maintenance of health and the prevention or management of illness, injury, or disability.

(b) “Practice of nursing as a licensed practical nurse” or “l.p.n.” means the practice of nursing based on less comprehensive knowledge and skill than that required of a registered professional nurse and performed under the supervision of a registered professional nurse, physician, or dentist.

(c) “Registered professional nurse” or “r.n.” means an individual licensed under this article to engage in the practice of nursing which scope of practice includes the teaching, direction, and supervision of less skilled personnel in the performance of delegated nursing activities.

(2) In addition to the definitions in this part, article 1 contains general definitions and principles of construction applicable to all articles in the code and part 161 contains definitions applicable to this part.

Occupational Regulation Sections of the Michigan Public Health Code. Michigan Department of Consumer & Industry Services, Office of Health Services.

APPENDIX K-Professional Organizations

The following are professional groups that are available to you either as a student (*) or as a graduate of your respective program.

- *1. National League for Nursing (NLN) – RN and LPN
www.nln.org
- *2. Michigan League for Nursing (MLN) – RN and LPN
<http://www.michleaguenursing.org/>
- *3. American Nurses Association (ANA) – RN
www.nursingworld.org
- *4. Michigan Nurses Association (MNA) – RN
<http://www.minurses.org/>
- *5. Michigan Student Nurse Association (MSNA) – RN
<http://www.minurses.org/mnsa/links.shtml>
- *6. Organization for the Associate Degree Nursing (OADN) – RN
www.oadn.org
- 7. National Association of Practical Nurse Education (NAPNE) - LPN
www.napnes.org
- *8. Michigan Licensed Practical Nurse Association (MLPNA) – LPN
<http://www.mlpna.org/>
- *9. National Student Nurses' Association
www.nсна.org
- *10. QSEN Institute
<http://qsen.org>

The agency of the State of Michigan for regulation of nursing practice is:

State of Michigan Board of Nursing

www.michigan.gov/cis/0,1607,7-154-10568_17671_17682-59003--,00.html

Department of Consumer and Industry Services

Bureau of Health Services

611 W. Ottawa 4th Floor P.O. Box 30018

Lansing, MI 48909

For other links, see: <http://www.minurses.org/links.shtml>

Keweenaw Bay Ojibwa Community College
Nursing and Health Science Department
Learning Contract

Student Name:_____ Course:_____ Date:_____

You are in jeopardy of failing the (clinical and/or theory) component of your nursing course due to:

_____1. Failure to maintain an 80% in the indicated course. Current percentage is _____

_____2. Failure to meet the following critical elements:

Patient-Centered Care_____

Safe Patient Care_____

Multidisciplinary Care and Teamwork_____

Patient Teaching_____

Accessing Information and Evaluating Outcomes_____

Accountability and Responsibility_____

_____3. Unsafe patient care (See Criteria for Unsafe Practice)

_____4. Unprofessional Conduct (including non-compliance with dress code)

Objectives/Goals/Outcomes:

The above objectives, goals and outcomes must be met by _____ to continue in the nursing program. Please refer to the Nursing Student Handbook Learning Contract Guidelines.

Student Signature_____ Date:_____

Faculty Signature_____ Date:_____

Original to Student File_____ Copies: Student_____ Faculty_____ Chair_____ Dean_____

**Keweenaw Bay Ojibwa Community College
Nursing and Health Science Department
Reply to Learning Contract**

Student Name:_____ Course:_____ Date:_____

Perceptions of the reason for the learning contract:

Plan of improvement for behavior, practice or academic performance changes to meet expected objectives/goals/outcomes.

Instructor_____ Date_____

Student_____ Date_____

Original to Student File_____

Copies: Student_____ Instructor_____ Chair_____ Dean_____

**Keweenaw Bay Ojibwa Community College
Nursing and Health Science Department
Resolution of Learning Contract**

Student Name_____ Course_____ Date_____

Deadline for meeting objectives/goals/outcomes_____

General statement regarding student's ability to meet the terms of the contract – address each are of deficiency as identified on the contract and summarize the required student outcome(s).

Recommendations:

_____ End learning contract, advance to_____

_____ Program dismissal

Conditions for Readmission:

Upon readmission, student is considered in learning contract status. Failure to meet clinical and course objectives a second time will result in final dismissal from the program.

Instructor_____ Date_____

Student_____ Date_____

Original to student file_____

Copies: Student_____ Instructor _____ Chair _____ Dean _____

Keweenaw Bay Ojibwa Community College



Keweenaw Bay Ojibwa Community College Nursing and Health Science Department Handbook Acknowledgement

Please read, sign and submit this acknowledgement to the Nursing and Health Science Department.

I hereby acknowledge that I have received a copy of KBOCC's 2024-2025 Nursing Student Handbook. I accept that I am responsible for reading the handbook in its entirety and complying with the policies contained within the Nursing Handbook as well as KBOCC's Student Handbook.

I have also received the Standards and Functional Abilities and understand in order to participate in clinical experiences; I must meet the abilities in their entirety.

Printed Name_____

Student Signature_____

Date_____

Keweenaw Bay Ojibwa Community College



Receipt of Nursing Student Lab Skills Bag

Students in the KBOCC nursing program are issued a skills bag that is utilized for practice of nursing skills throughout the program. Items in this bag are intended for nursing practice only. Use of these items on humans is strictly prohibited.

_____ Students nursing skills bag contain items that may be hazardous to small children and pets. I agree to store this bag in a place that is not accessible to them.

_____ Students are responsible for the nursing skills bag and agree to purchase another bag at their own expense if the bag is lost, damaged or stolen.

Student Signature_____ Date_____

**Keweenaw Bay Ojibwa Community College
Nursing and Health Science Department
Critical Incident Report**

Student Name_____ Date_____ Time_____

Course_____ Lecture or Clinical Area_____

Critical Element(s)_____

Instructor Comments:

Plan for Improvement

Instructor_____ Date_____

Student_____ Date_____

Original to Student file_____

Copies: Student_____ Instructor_____ Chair_____ Dean_____

Keweenaw Bay Ojibwa Community College
Nursing and Health Science Department
Latex Allergy Release

Latex sensitivity and allergy have grown as a health care concern in recent years. Since a number of products used in health care are made of latex (gloves, syringes, tubing, etc.), it is imperative that all applicants to a health care program be made aware of this concern. Individuals with latex sensitivity may not be able to meet the objectives required to complete a given program or successfully find employment in health care. Researchers suggest that early recognition and diagnosis of latex sensitivity may prevent the evolution of more severe symptoms.

There are several high-risk groups who are more likely to become sensitized to latex. The enclosed questionnaire can help you determine if you may be allergic to latex.

I understand that, should KBOCC suspect that I am latex sensitive, it is **MY RESPONSIBILITY** to pay the cost of any test to confirm the latex sensitivity. I also understand that if I suspect or know that I may be or that I am allergic to latex, that it is my responsibility to inform the faculty and director. Again, it would be my responsibility to pay the cost of any test to confirm the latex sensitivity. I also understand that such sensitivity may prohibit me from continuing as a student in the nursing program.

I hereby release KBOCC, its employees, teaching affiliates, and members of its Board of Regents from any and all liability which may be incurred as a result of participating in educational experiences in the nursing program.

Printed Student Name_____

Student Signature_____

Date_____