

**STUDENT HANDBOOK**

**2022-2024**

All information contained herein is subject to change, deletion or modification. Approved modification, deletions or major changes will be published as they occur.

Table of Contents

[WELCOME! 4](#_bookmark0)

[Introduction and Overview of the Program 5](#_bookmark1)

[Mission Statement: 5](#_bookmark2)

[Philosophy 5](#_bookmark3)

[Conceptual Framework 5](#_bookmark4)

[Nursing 8](#_bookmark5)

[Nursing Roles 8](#_bookmark6)

[Nursing Program Evaluation 12](#_bookmark7)

[Legal Requirements for Licensure 14](#_bookmark8)

[Application 14](#_bookmark9)

[Declaratory Order Information 14](#_bookmark10)

[Fingerprints and Drug Testing 14](#_bookmark11)

[Curriculum Degree Plan 14](#_bookmark12)

[Student’s Rights and Responsibilities 16](#_bookmark13)

[Student’s Rights 16](#_bookmark14)

[Student responsibilities 16](#_bookmark15)

[Professional Student Liability Insurance 17](#_bookmark16)

[Academic Performance 17](#_bookmark17)

[Guidelines for Student Participation on Committees 18](#_bookmark18)

[Pinning 18](#_bookmark19)

[Evaluation of learning 19](#_bookmark20)

[Student Code of Conduct 20](#_bookmark21)

[Policies 20](#_bookmark22)

[Standards of Professional Conduct 20](#_bookmark23)

[Professional Boundaries 21](#_bookmark24)

[Academic Honesty 22](#_bookmark25)

[Confidentiality/HIPAA/Social Media 24](#_bookmark26)

[Communication 26](#_bookmark27)

[Professional Dress Code 27](#_bookmark28)

[Policies 27](#_bookmark29)

[Professional Dress Code 27](#_bookmark30)

[General Classroom Guidelines 30](#_bookmark31)

[General Expectations in the Classroom 30](#_bookmark32)

[Policies 32](#_bookmark33)

[Attendance 32](#_bookmark34)

[Grading 34](#_bookmark35)

[Exam Administration 36](#_bookmark36)

[Dosage Calculations Exam 37](#_bookmark37)

[Service Learning 38](#_bookmark38)

[Clinical Guidelines 39](#_bookmark39)

[General Expectations in the Clinical Setting 39](#_bookmark40)

[Policies 41](#_bookmark41)

[Clinical Expectations 41](#_bookmark42)

[Medication Administration 44](#_bookmark43)

[Unsafe Clinical Practice 46](#_bookmark44)

[Skills/Simulation Guidelines 49](#_bookmark45)

[General Expectations in the Skills/Simulation Lab 49](#_bookmark46)

[Policy 51](#_bookmark47)

[Skills Lab Use 51](#_bookmark48)

[Hazardous Waste 53](#_bookmark49)

[Simulation & Skills Check-offs 54](#_bookmark50)

[Students Practicing on Another Student 56](#_bookmark51)

[Health & Safety Guidelines 57](#_bookmark52)

[General Health & Safety Guidelines 57](#_bookmark53)

[Policies 59](#_bookmark54)

[Immunization Requirements 59](#_bookmark55)

[Drug Screening 60](#_bookmark56)

[Use of Mind-Altering Substances 61](#_bookmark57)

[Illness, Accidents or Injury Reporting 62](#_bookmark58)

[Infectious Disease Exposure, Evaluation and Follow-up 63](#_bookmark59)

[Cardiopulmonary Resuscitation (CPR) Certification 64](#_bookmark60)

[Retention, Remediation Readmission and Graduation Guidelines 65](#_bookmark61)

[Policies 65](#_bookmark62)

[Progression 65](#_bookmark63)

[Remediation/Success Plan 66](#_bookmark64)

[Disciplinary Action 67](#_bookmark65)

[Readmission 68](#_bookmark66)

[Voluntary withdrawal or Dismissal from the Program 70](#_bookmark67)

[Grade Appeal 71](#_bookmark68)

[Grievance 72](#_bookmark69)

[Forms 73](#_bookmark70)

[Release of Information 73](#_bookmark71)

[Photo and Voice Release 73](#_bookmark72)

[Incident Report 73](#_bookmark73)

[Consent for testing 73](#_bookmark74)

[HIPAA Form 73](#_bookmark75)

[Covid Document 73](#_bookmark76)

[Grade Appeal 73](#_bookmark77)

[Grievance 73](#_bookmark78)

# WELCOME!

This handbook provides information about structure, policies, procedures, guidelines, and regulations of the Dallas College Nursing Program. This information is accurate at the time of publication. The Dallas College Dean of Nursing reserves the right to make changes as necessary and appropriate. Students will be notified of these changes in a timely manner.

Each student is responsible for knowing, understanding, and adhering to the information and policies contained in the handbook. Please become very familiar with the handbook. Each semester you will be asked to submit an acknowledgement of receipt and understanding.

However, remember that it is not a substitute for the advising and counseling available through the School of Nursing.

In addition, you should read the College Regulations. This reference provides information for all nursing students on the structure, policy, regulations, and procedures of the school that governs their relationship to the College in both academic and personal progress toward their ultimate educational goal. Opportunities to learn with emerging professionals from other disciplines are important to your future role in healthcare.

The School of Nursing is committed to supporting your educational and professional development journey and join me in welcoming you to the School of Nursing.

Dr Becky Small RN

Dean of Nursing Academics



# Introduction and Overview of the Program

## Mission Statement:

To prepare educated, competent, ethical, and professional nurses who provide scientifically based, compassionate nursing care for the physical, emotional, and spiritual needs of diverse individuals. The Nursing program supports the general vision, values, and mission of Dallas College by preparing licensure-ready graduates who will positively impact the community.

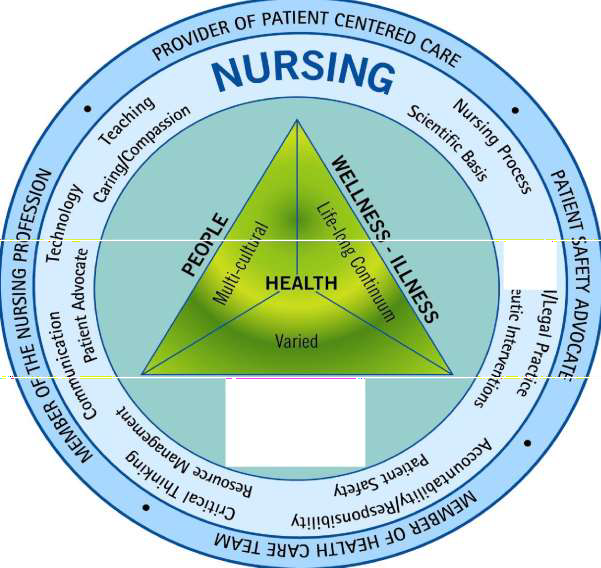
## Philosophy

Nursing is both an art and a science, focused on helping the individual, family and/or community achieve and sustain maximum functional abilities throughout life. Nursing is a vibrant, dynamic, interactive, and proactive profession. The patient, family and community are viewed as an integrated, holistic body that is unique, has dignity and deserves thoughtful communication, concern, and respect. The community that nursing serves is diverse in age, culture, religion, and ethnicity. Furthermore, nursing incorporates scientific knowledge, critical thinking, ethical-legal decision making and high-level technical skills to promote health, disease prevention and disease management.

## Conceptual Framework

The purpose of a conceptual framework is to provide faculty and students with a meaningful representation of the nursing program design. The framework is symbolically depicted as a compass. It provides direction to both students and faculty as partners in the teaching-learning process as they navigate through the curriculum. In the center of the compass is an adult learner with a core body of knowledge in the humanity and science disciplines and in a teaching learning environment. Three factors are primary in health: people, environment, and the wellness-illness continuum.

Professional nurses utilize major nursing concepts and skills in order to influence or ameliorate untoward factors in order to promote the health of a diverse population throughout the life span. These nursing concepts include caring and compassion, the nursing process, ethical/legal practice, accountability/responsibility of the individual practitioner, critical thinking, communication, and teaching, the use of scientific principles and research, therapeutic nursing interventions, principles of safety, resource management, patient advocacy, and technology.



NURSING CONCEPTUAL FRAMEWORK

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **CONCEPTUAL FRAMEWORK MAJOR CONCEPTS & THREADS** | | | | | |
|  | | | | | |
| **People are Multicultural.** | | | **Environments are varied.** | | **Wellness - Illness is a life**  **long continuum.** |
| Safety | | | Safety | | Safety |
| Critical Thinking | | | Critical Thinking | | Critical Thinking |
| Ethical/Legal  Accountabilities and Responsibilities | | | Ethical/Legal  Accountabilities and Responsibilities | | Ethical/Legal Accountabilities and  Responsibilities |
| Communication | | | Resource Management | | Nursing Process |
| Caring / Compassion | | | Technology | | Therapeutic Nursing  Interventions |
| Cultural Diversity | | | Scientific principles/ research | | High level technical skills |
| Advocacy | | |  | | Outcomes |
| **NCLEX –RN**  **Blue Print** | **Psychosocial integrity** | | **Safe & Effective Care**  **Environment** | | **Physiological adaptation** |
| **Health Promotion &**  **Maintenance** | | **Safety & Infection Control** | | **Physiological integrity** |
| **Patient Advocate** | | **Risk Reduction** | | **Pharmacological**  **Parenteral therapy** |
|  | | | | | |
| **TBON –DEC** | **Member of Profession** | **Patient Safety Advocate** | | **Member of Health Care**  **Team** | **Provider of Patient Centered Care** |

# Nursing

The nursing faculty of Dallas College believes that professional nursing is a vibrant, dynamic, interactive and intentional process, which views the patient, family and community holistically. The faculty believes that nursing is an art and a science, which is patient, centered and designed to assist the individual to achieve and maintain maximum functioning throughout the life span. This is accomplished by utilizing the nursing process, assuming designated nursing roles, and applying theoretical knowledge to the practice setting. Nursing cares for patients and families within ethical/legal guidelines and

provides an environment that supports individuality, cultural diversity, mutual respect, and dignity. Nursing incorporates the roles of provider of patient-centered care, patient-safety advocate, member of the health care team, and member of a profession. (Dec, 2013)

# Nursing Roles

#### Member of the Health Care Team

Members of the health care team include all health care workers including licensed nurses (LVN or RN) providing patient-centered care by collaborating, coordinating, and/ or facilitating comprehensive care with an interdisciplinary/multidisciplinary health care team to determine and implement best practices for the patients and their families. The BSN-educated RN is also prepared to become a leader of the health care team as well as to provide care to populations and communities.

#### Member of the Profession

A licensed nurse who exhibits behaviors that reflect commitment to the growth and development of the role and function of nursing consistent with state and national regulations and with ethical and professional standards; aspires to improve the discipline of nursing and its contribution to society; and values self-assessment and the need for lifelong learning.

#### Provider of Patient-Centered Care

A licensed nurse who, based on educational preparation and scope of practice, accepts responsibility for the quality of nursing care and provides safe, compassionate nursing care using a systematic process of assessment, analysis, planning, intervention, and evaluation that focuses on the needs and preferences of patients and their families. The nurse incorporates professional values and ethical principles into nursing practice. The patients for include individual patients and their families.

#### Patient Safety Advocate

A licensed nurse who promotes safety in the patient and family by: following scope and standards of nursing practice, practicing within the parameters of individual knowledge, skills, and abilities, identifying and reporting actual and potential unsafe practices; and implementing measures to prevent harm.

#### Nursing Concepts Caring/compassion

Caring is a universal phenomenon, the expression of which varies among cultures and individuals. Caring is a way of relating that supports physical and emotional security and genuine connectedness with

another person or group of people. It is central to the practice of professional nursing. To provide therapeutic nursing care, the student utilizes practices that are respectful, support communication, promote adaptation, reduce stress, and address the needs of the patient and family.

Compassion is a feeling of deep sympathy or tenderness for another person accompanied by a desire to alleviate the suffering or problems of that person.

#### Collaboration

Collaboration is a collegial, working relationship with another healthcare provider in the provision of patient and family care. It can be directed or prescribed by the health care provider but requires nursing judgment to perform.

#### Nursing Process

Nursing process is a clinical decision-making framework that includes critical thinking, diagnostic reasoning, and clinical judgment. The process has five steps: assessment, diagnosis, planning, implementation and evaluation. Students utilize the nursing process as a base for decision-making and competent care for individuals and their families.

#### Ethical and Legal Practice

Ethical and legal roles of the nurse refer to the boundaries of acceptable nursing behavior. The National League of Nursing (NLN) guidelines, the American Nurses’ Association Code of Ethics, the Texas Board of Nursing Nurse Practice Act, and federal, state and local laws outline these.

#### Accountability/responsibility

With increased autonomy, the nurse acquires greater accountability and responsibility. The nurse is responsible, professionally and legally, for the type and quality of nursing care provided. The nurse has a responsibility to remain current and competent in nursing and scientific knowledge and technical skills and to practice within the scope and standards of practice.

#### Critical Thinking

Critical thinking is a pattern of thinking based on knowledge and experience. Critical thinking involves organizing information, selecting relevant information, relating, analyzing, conceptualizing, and making judgments. It is a discriminating endeavor that involves logical reasoning, making meaningful connections and predicting and transforming knowledge that ultimately promotes optimal clinical reasoning as a base for professional activity.

#### Communication

Communication is a dynamic process utilized in the profession of nursing in which there is an exchange of information that is clear, accurate, concise and complete. This exchange of information may occur verbally, non-verbally, in writing, or through information technology, with individuals or groups. This is an essential component of the nurse/patient and collegial relationships that promotes an intellectual and emotional bond between participants. Barriers exist that may inhibit the process.

#### Therapeutic Nursing Interventions

Nursing care is composed of hundreds of actions and therapeutic approaches within all types of specialties and settings. It includes therapeutic approaches for the following categories: psychosocial, physiological, treatment of illness, prevention of illness, and promotion of health, with both direct and indirect interventions and actions. (NIC, adapted) Nursing interventions are aimed at improving patient/family health status according to individual need.

#### Patient Teaching

As a patient educator, the nurse explains concepts and facts about health, demonstrates procedures, reinforces learning or behaviors and evaluates the patient/family progress on learning. Teaching may be planned and formal or unplanned and casual and should match the patient’s needs and capabilities.

Nurses also act as educators for peers and other professional staff members.

#### Scientific principles and research

Nurses practice in an age of accountability and extreme complexity. Safe nursing practice must be based on scientific and evidence-based principles. The scientific knowledge and practice evidence are

constantly evolving, so the nurse must stay current in knowledge and practice. The nurse must constantly evaluate the outcomes of nursing practice and seek valid evidence in order to solve problems or plan refinements and improvements to provide care, which achieves the best possible patient/family outcomes.

#### Resource Management

Resource management revolves around thoughtful budgeting of personnel, equipment and materials including preventative maintenance. By utilizing each resource frugally, cost containment is achieved. Resource management demands planning, flexibility and adaptability to meet the known, unknown and unforeseen. Nurses provide adequate resources for patient care within the context of availability.

#### Patient Advocacy

Nurses both advocate for and are advocates of the rights of patients when they are unable to speak for themselves. Nurses ensure continuity of care by communicating with appropriate sources or agencies and follow up on the patient’s designated needs. Advocacy may involve providing information to a patient for decision-making.

#### Technology

Technology involves rapidly changing methods for collecting and communicating data and for the testing and treating of disease. The Dallas Nursing Program attempts to introduce the student to the constant changes in technology and information management systems.

#### Definitions People

Human beings are unique, holistic individuals with physiological, psychological, socio-cultural, developmental, and spiritual needs. They possess inherent dignity and worth and have the right to make decisions about their own health care. Their basic needs must be met in order to maintain life and promote growth and development across the life span.

#### Wellness-illness Continuum

Human health exists on and moves along a wellness-illness continuum, aspects of which may coexist with each other. Nurses care for human beings at any point on the wellness/illness continuum.

Wellness involves engaging in attitudes and behaviors within the environment that enhance the quality of life and maximize personal potential.

#### Environment

The environment consists of internal and external elements that are in constant interaction with the individual. The internal environment is made up of all forces or influences entirely within the individual. The external environment is made up of all forces or influences that exist outside the individual.

#### Diversity (Multicultural)

Diversity refers to the various norms and practices for fulfilling the same universal needs, that are

learned and shared, and which ultimately guide one’s thinking, actions and decisions. Nurses provide

appropriate care to diverse populations, incorporating cultural values, beliefs and practices.

#### Leadership/Management

Leadership occurs when one person attempts to influence the behavior of an individual or group towards goal achievement. It is viewed as being a more fundamental and creative coordinating process than management, which only selects actions that use resources effectively and efficiently.

Management is a concept and a process of authority that uses resources (human, technical, financial, time and so on) to meet specific goals efficiently and effectively.

#### Scope of Nursing Practice

According to the ANA Scope and Standards of Practice, the scope of nursing practice encompasses the full range of nursing practice and is dependent upon education, experience, role, and the population served. Nursing’s scope of practice “has a flexible boundary that is responsive to the changing needs of society and the expanding knowledge base of its theoretical and scientific domains.” (ANA, Nursing’s Social Policy Statement). A registered nurse may perform duties as specified by the Texas Nurse Practice Act, federal, state, and local laws, and agency policies and procedures.

#### Nursing Education

The function of the Dallas College Associate Degree Nursing Program is to prepare an entry level registered nurse who is able to practice in diverse settings with a diverse population across the life span. The curriculum design moves from simple to complex. Teaching methodologies are continuously revised based on student needs and evidence-based practice. Education is guided by the use of the nursing process and critical thinking. The foundation for curriculum is derived from scientific, natural, social, and behavioral sciences and humanities. Major theoretical concepts utilized include but are not limited to those developed by Maslow, Erikson, Orem, Bloom, and Benner. Nursing education consists of

experiences, both didactic and practicum, that develop the individual’s ability to provide quality care.

Learning is the continuous acquisition of knowledge, skills and attitudes that results in measurable achievement of learning outcomes. The learning process evolves from simple to complex, unknown to known, and is based upon past experiences, learning styles, and principles of adult learning. The faculty facilitates learning opportunities that provide the student exposure to knowledge, skills, technology, and belief systems necessary for professional nursing practice in diverse settings.

Teaching and learning is an interactive process. The teacher functions as a professional role model in the classroom and clinical settings and maintains expertise by engaging in professional growth activities. Students are responsible and accountable for being adult, self-directed learners, who are mature,

capable, prepared, and eager to meet the program’s learning objectives.

# Nursing Program Evaluation

The Dallas College Associate Degree Nursing program graduate’s success in the program will be

measured as outlined below:

1. Performance on licensure exam: The pass rate of first-time exam takers on NCLEX-RN will equal or surpass the average Texas state nursing program.
2. Program completion: The percentage of students who complete the nursing program within 6 semesters will meet or exceed the state college nursing rates.
3. Job Placement: Success in placement and time it takes to gain employment will be measured by an 80% or greater rate in 1 year (as measured by the Graduate Nurse Survey). Additionally, the Employer Satisfaction Survey will show an 80% or higher satisfaction with the performance of the DC graduates.

Positive behaviors or attitudes for the DC Nursing Student include:

1. Displaying a commitment to the value of caring by delivering patient and family- centered care.
2. Using the nursing process as a basis for critical thinking by integrating natural science and social science principles and concepts.
3. Collaborating with diverse patients, families, and other health team members in providing quality patient care that will achieve an optimal level of health and wellness, or when this is not possible, support the experience of loss and death.
4. Practicing as a coordinator of care in variety of settings using current technology and informatics.
5. Communicating effectively with diverse patients, families, and other health team members in the performance of professional roles.
6. Practicing within the ethical and legal framework of nursing and be accountable for ensuring high standards of nursing practice.
7. Utilizing leadership and management principles in providing nursing care.
8. Functioning in a resource-driven health-care system that demands flexibility and adaptability to meet the unknown and unforeseen.
9. Contributing to the profession of nursing.
10. Maintaining accountability and responsibility for one’s own professional nursing values,

behaviors, growth, and continued nursing education.

1. Demonstrating behaviors that promote the image and integrity of the nursing profession.

|  |  |
| --- | --- |
| **Dallas College Nursing**  **Student Learning Outcomes** | **Nursing Program Outcomes Evaluation** |
| Analyze comprehensive assessment data  to identify problems, formulate goals/outcomes, and develop plans of care for patients and their families using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.  (DEC’s 2021)  **Provider of Patient Centered Care** | Pass the National Council of Licensure Examination for Registered Nurses (NCLEX-RN) pass rates ≥80%. |
| Coordinate, collaborate, and communicate in a timely manner with patients, their families, and the interdisciplinary health care team to plan, deliver, and evaluate patient-centered care. (DECs2021)  **Member of the Healthcare Team** | Complete the Nursing Program within 6 semesters.  Program completion rate ≥50%. |
| Function within the nurse’s legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice. just. (DECs2021)  **Member of the Profession** | Find employment in nursing within 6 months of graduation.  Job placement rate ≥ 75%. |
| Implement measures to promote quality and a safe environment for patients, self, and others. (DECs2021)  **Patient Safety Advocate** |  |
| Integrate the teaching learning process to restore individual, family, and global health and/or provide end of life care for individuals and their families.  (Member of the Profession, Patient Safety Advocate**)** |  |

# Legal Requirements for Licensure

## Application

In order to become licensed as a Registered Nurse in the state of Texas, graduating students must follow guidelines published in Texas Administrative Code, Title 22, Part 11, Chapter 217, Rule § 217.2. The application for licensure can be found and downloaded from the Texas Board of Nursing website. For questions about eligibility, licensure and documents required showing eligibility, contact the website.

Texas Board of Nursing. Licensing fees and requirements are determined by, and are the sole responsibility of, the Texas state Board of Nursing.

## Declaratory Order Information

Students must answer questions on the application regarding convictions, mental illness, and chemical dependency by seeking a declaratory order from the Board of Nursing (under section “Candidates for Licensure”). This order permits the Board to make decisions regarding an applicant's eligibility for licensure.

All NCLEX applicants with outstanding eligibility issues that could prevent them from taking the NCLEX examination upon completion of a nursing program are urged to complete a Declaratory Order application prior to entering the nursing program. It is recommended that the student starts the declaratory process early. If a student waits until graduation to do this, the NCLEX exam eligibility may be delayed until the Board of Nursing has ruled on the graduate’s eligibility for licensure. The Declaratory Order process sometimes takes six months to one year to process.

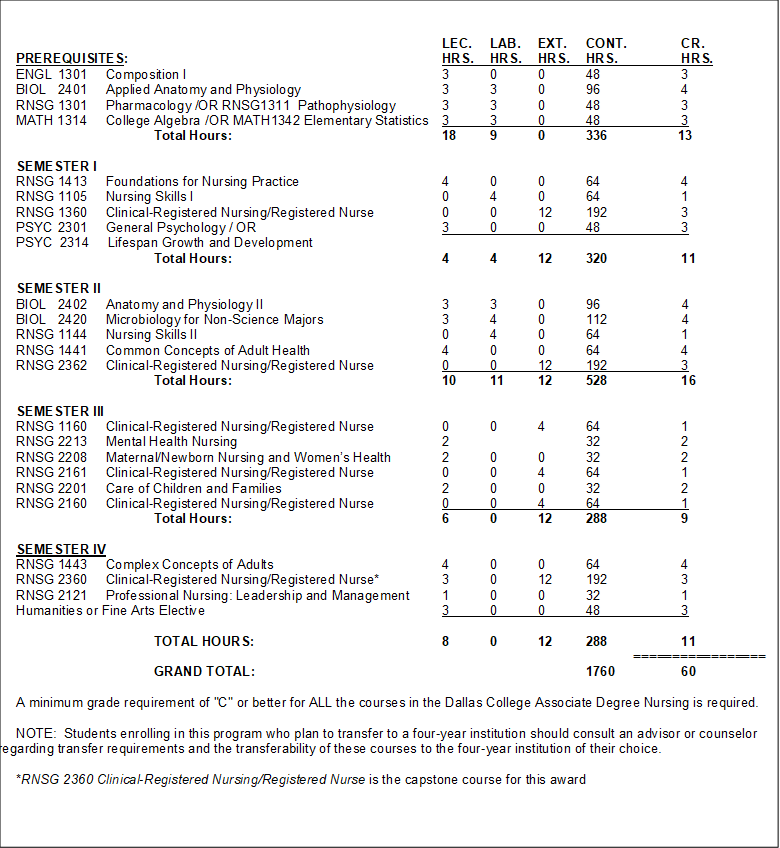
## Fingerprints and Drug Testing

Student applicants for NCLEX are required to submit a complete and legible set of fingerprints on a form prescribed by the board for the purpose of obtaining a criminal history from the Texas Department of Public Safety and the Federal Bureau of Investigations. (Section 301.252 (b) and Section 301.252 (e) of the Texas Occupations Code). All students must pass an illegal drug screening prior to admission to the program. See Policy for Drug Screening.

# Curriculum Degree Plan

The Dallas College Associate Degree Nursing Program is a four semester, 60 credit hour program leading to the Associate in Applied Sciences Degree. Dallas College’s program prepares graduates to be eligible to take the NCLEX-RN Examination to become licensed as a Registered Nurse (R.N.) in Texas. The program combines classroom and skills laboratory experience with hospital clinical experience and is accredited by the Board of Nursing for the State of Texas (333 Guadalupe, Suite 3- 460, Austin, Texas 78701, telephone number 512-305-7400). Information related to Board requirements is found online at Texas Board of Nursing Website. See Curriculum degree plan which follows.

**Curriculum Degree Plan**



# Student’s Rights and Responsibilities

Education is a cooperative effort between the expertise of the faculty to teach and the willingness of the student to learn. The nursing faculty believes that students have certain rights and responsibilities when enrolled in the nursing program.

## Student’s Rights

#### The student has a right to:

1. Accurate, organized, relevant, and cohesive, nursing education and educational materials.
2. Faculty who are knowledgeable, clinically experienced, up-to-date, and able to communicate information effectively.
3. Classroom instruction that is punctual, clearly communicated, and presented in a positive learning environment free of bias and/or hazards.
4. Diverse clinical experiences that are safe, supervised, provide a variety of experiences, and guide the student toward effective nursing practice.
5. Fair, impartial, and prompt evaluation of student performance in the theory, laboratory, and clinical areas.
6. Support services and resources that facilitate student participation and progression in the learning process.
7. Availability of the faculty members for advice and assistance with academic or clinical matters.

## Student responsibilities

A student in the Dallas College Nursing Program must assume responsibility for individual learning and be a self-directed adult learner. The student must:

1. Arrive well-prepared and rested to all classroom, lab, and clinical activities.
   1. Stay awake in class and actively participate. Stand up in the back of the room if you need to move without disturbing your classmates.
2. Complete all exams, including Specialized Testing, at the time assigned. Complete all remediation plans / activities as assigned and on time.
3. Demonstrate mastery of dosage calculations every semester.
4. Communicate appropriately
   1. Utilize appropriate channels of communication for any problems or grievances
   2. Make appointments with faculty when discussion of grades, issues, or other concerns is needed.
   3. Notify the faculty member in advance if unable to attend a clinical experience or an examination prior to the exam or experience.
   4. Inform clinical instructor of relevant health issues.
5. Utilize professional behaviors, respect, ethical conduct and courtesy when interacting with faculty, peers, agency staff, patients, and families.
   1. Follow accepted standards of behavior, both on and off campus.
   2. Be on time and prepared for assignments and activities.
   3. Allow sufficient time for faculty to grade assignments and activities.
   4. Demonstrate sensitivity to the values, attitudes, and feelings of self and others.
   5. Respond to frustration and stress appropriately.
   6. Accept constructive criticism and adjust behaviors accordingly.
   7. Be flexible and respond positively to adjustments in changing circumstances.
   8. Continuously reevaluate behavior, performance, and goals.
   9. Adhere to all policies and procedures specified within this handbook and all Dallas College policies.
6. Employment while enrolled in the MVC Nursing program is discouraged.
   1. The Dallas College Nursing Program is a rigorous, full-time job. Working too many hours will jeopardize the student’s ability to be successful and/or complete the program.
   2. If employed the following guidelines apply:
      1. The nursing student must identify self as an employee of the agency and not as a student of the MVC nursing program and recognize that legal liability exists for individual actions.
      2. The student must not accept responsibility for or perform nursing actions beyond what is allowed for the job title as defined in the Nursing Practice Act and the policies of the employing agency.
      3. Dallas College uniforms and identification may not be worn during employment.
      4. The student may not attend clinical activities after working the night before; this also includes driving to and from clinical preparation activities without sleep.
      5. The student is responsible for maintaining the required grade point average and should consider the demands of employment upon time and energy.

## Professional Student Liability Insurance

1. All Dallas College Associate Degree nursing students are required to carry professional liability insurance. The college includes enrollment in a student professional liability policy with a major insurance carrier as part of each semester’s registration process. This policy provides $1,000,000 limits of liability for each medical incident and $3,000,000 aggregate. The cost to the student is less than enrolling in an individual professional liability policy with comparable coverage.
2. Students are not permitted to enroll in any clinical nursing course until proof of insurance coverage payment is given. The student professional liability policy covers students only while they are participating in clinical activities which are a part of the curriculum. It does not cover students when employed in the hospital in a student technician capacity, nor does it cover a Licensed Vocational Nurse when he/she is employed as an LVN while enrolled in the Dallas College Nursing Program.
3. The student liability insurance policy expires upon date of graduation. Students who receive a temporary permit at graduation and work prior to licensure are not covered by the student liability policy.

## Academic Performance

Students are responsible for their own academic performance, which includes but is not limited to successful completion of nursing course requirements (no lower than a C) and nursing clinical

requirements. The faculty believes that students "earn" their academic grade rather than faculty "giving" grades to students. All policies as stated in the Student Handbook are binding and students are encouraged to review these regulations on a regular basis.

## Guidelines for Student Participation on Committees

Student input is highly valued by the faculty. Program improvement is evident when students provide honest appraisal of their learning experiences. The faculty values assertive communication. Certain committees require student representation (i.e. Curriculum and Systematic Plan of Evaluation.). The Society for Nursing Students’ members will vote on committee representatives and alternates. Those who accept this responsibility must agree to attend and participate in these meetings. If unable to attend, the alternate would be notified as well as the chairman of the committee. Representatives or alternates are considered non-voting members.

1. Verify time and date of meeting with the faculty chairperson.
2. Be prepared for the discussion, including concerns verbalized by the majority of the class. Be prepared to respond to faculty concerns.
3. Make note of any questions or announcements the faculty may wish for you to present to the class.
4. Student representatives will be asked to leave before the faculty discusses any confidential student issues, progressions or problems.

Other Committee Involvement

Student representatives are also requested from each class for the nursing program advisory board meeting, faculty, textbook and pinning committee meetings. The advisory board is made up of representatives from clinical agencies, former graduates and community members. This committee meets at least annually. Student volunteers will be solicited each year.

Faculty committee meets on a regular basis each semester. Meeting dates change depending upon class schedules. Students are invited to provide input into policies pertaining to students. Textbook committee meets biannually to evaluate textbook selection and/or consider different resources.

Pinning committee is student driven with faculty guidance and meets at the beginning of the final semester

## Pinning

The pinning ceremony is the culmination of long hours of studying, homework and endurance and is the initial entry into professional nursing. It is a bridge from nursing's past to nursing's future. The ceremony signifies program completion and is held at the end of the 4th semester. The pin itself dates back 1,000 years and began with a Maltese cross. Over the years, the pin became a coat of arms and eventually has morphed into a design that signifies MVC. Funds for the ceremony are earned by the senior class. There are usually six parts of the ceremony:

1. Processional: Usually held in the MVC Performance Hall, the student nurses march in to pre-determined music chosen by the graduating class.
2. Invocation is given by a volunteer from the community or a student.
3. The Master of Ceremonies introduces the speakers. Speeches are given by faculty, guest speakers, nursing director and a select student.
4. Presentation of Pins: As each student's name is called, information about where the student will be working and a personal note is read. Faculty pin the students. A picture is taken and the student shakes hands with the other faculty and important visitors.
5. Farewell address, simulated lighting of candles and Florence Nightingale pledge represent the "passing of the flame" from Nightingale to each nurse.
6. Benediction and Recessional: students file out. A reception is usually held.

## Evaluation of learning

1. At the end of each course students have an opportunity to evaluate the course. Information is returned to the department in an anonymous format. Student suggestions for improving the course are considered throughout the systematic evaluation plan. This is not the time for airing personal problems with the teacher. These should be done in an adult manner, face to face with the faculty member or through the Grievance Procedure.
2. At the end of each year students have the opportunity and responsibility to evaluate their learning experience in the overall program. This information is also used for program changes through the systematic evaluation.

# Student Code of Conduct

## Policies

Standards of Professional Conduct Creation Date: 06/07/22 Revision Date:

Policy Description: The nursing faculty believes that standards of professional conduct are an inherent part of professional socialization and expect students enrolled in the nursing program to adhere to the standards. Students practice within the boundaries of the Texas state Board of Nursing Practice Act, the ANA Code of Ethics for Nurses, the guidelines of the Dallas County Community College Nursing Student Handbook and the policies and regulations of the healthcare agency where they are assigned for clinical learning. (Nursing scope and standards of practice, American Nurses Association Publications, ANA Code of Ethics)

Procedure: These conduct standards are from the Dallas College Student Handbook and include:

1. Confidentiality: Respect the privacy of patients and privileged information.
2. Accountability: Be answerable for one’s actions; answer to self, the patient, the profession

and the institution.

1. Responsibility: Execute duties associated with the nurse’s particular role.
2. Adherence to Agency’s Policies and Procedures: Read and adhere to the agency policies and

procedures.

1. Honesty: Practice fairness and straight forwardness in conduct; display moral excellence and truthfulness.
2. Punctuality and promptness: Be on time for all classroom and clinical assignments.
3. Dependability: Be trustworthy and reliable.
4. Respect: Treat others with consideration and courtesy.
5. Professional appearance: Adhere to established dress code in all clinical and professional activities.
6. Ethical behavior: Adhere to the Code of Ethics for Nurses.
7. Legal: Operate within the standards of care related to the student nurse role.
8. Safety: Prevent or minimize risks for physical, psychological or emotional jeopardy, injury or damage.
9. Civility: Contribute to a positive learning environment. Be reflective, courteous, respectful, and empathetic to classmates, instructors and other college or hospital staff assisting you in your learning.

Professional Boundaries Creation Date: 06/07/22 Revision Date:

Policy Description: Students enrolled in a program of study in nursing must learn the importance of establishing and maintaining professional boundaries. In a student role, professional boundaries exist between the student and the instructor and between the student and the patient or the patient’s family.

#### Policy:

* 1. Faculty and students will maintain a professional relationship:
     1. Students should not expect an instructor to act as a personal counselor or therapist. Students should seek assistance from academic advisors and counselors at the college or privately.
     2. Students should not ask or expect the instructor to join an individual, group or class in any social situations while the course is in progress.
     3. Students should not offer the instructor lavish gifts or money as gratitude for instruction. Small tokens are acceptable.
  2. Students will maintain a professional nurse-client relationship:
     1. Professional boundaries: Students providing nursing care strive to inspire the confidence of patients. Students must treat all patients and other health care providers professionally. Patients can expect those providing nursing care to act in their best interests and respect their dignity. The student should abstain from obtaining personal gain at the patient’s expense and refrain from inappropriate involvement in the patient’s personal relationships.
     2. Boundary violations can result when there is confusion between the needs of the student and those of the patient. Such violations are characterized by excessive personal disclosure by the student nurse, secrecy or even a reversal of roles. Boundary violations can cause delayed distress for the patient, which may not be recognized or felt by the patient until harmful consequences occur.

*NCSBN (2018). A nurse’s guide to the importance of appropriate professional boundaries. Retrieved from* [*National Council of State Boards of Nursing website*](https://www.ncsbn.org/ProfessionalBoundaries_Complete.pdf)[*appropriate boundaries document*](https://www.ncsbn.org/ProfessionalBoundaries_Complete.pdf)

Academic Honesty Creation Date: 06/07/22 Revision Date:

Policy Description: Accountability begins as a student. Student nurses are individually responsible for their own actions. Academic dishonesty (cheating) is willful and intentional fraud and deception to improve a grade or obtain a course credit. It includes all student behavior intended to gain unearned academic advantage by fraudulent and/or deceptive means. Any student involved in academic dishonesty is in direct violation of the stated program objective, placing the student in jeopardy regarding the successful completion of the nursing program and subsequent licensure recommendation to the Board of Nursing. (See Disciplinary Action Policy)

Policy:

|  |  |  |  |
| --- | --- | --- | --- |
| **Taking Information** | **Providing Information** | **Plagiarism** | **Other** |
| Copying graded homework assignments from another student. | Giving one’s work to another to be copied or used in an oral presentation. | Copying homework answers for a grade without permission. | Lying or other falsifications. |
| Working together on assignmentsexam when not specifically permitted by the instructor. | Giving answers to another student on an assignment or during an examination. | Failing to give credit for ideas, statements of facts, or conclusions derived by another author, i.e., use quotation marks when quoting directly a paragraph, a sentence, or a part thereof. | Altering a graded work after it has been returned, then submitting the work for re- grading. |
| Looking at another student’s paper during an examination. | After taking an exam, informing another person about questions appearing on that exam. | Submitting a paper or presentation purchased from a “research” or term paper service, substantially written by another person, or downloaded from the internet. | Removing exams from the classroom without the approval of the instructor, or stealing exams. |
| Looking at text or notes during an examination when not specifically permitted by the instructor | Providing a term paper or care plan to another student. | Presenting another’s work as one’s own  .\*See types of plagiarism below. | Planning with one or more fellow students to commit any form of academic dishonesty and/or carying it out. |
| Accessing another student’s computer and using the information as one’s own | Taking an exam, writing a paper, or creating a computer program for another. |  |  |

#### Common Types of Plagiarism

There are different types of plagiarism and all are serious violations of academic honesty. We have defined the most common types below:

**Direct Plagiarism** Direct plagiarism is the word-for-word transcription of a section of someone else’s work, without attribution and without quotation marks. The deliberate plagiarism of someone else's work is unethical, academically dishonest, and grounds for disciplinary actions, including expulsion.

**Self-Plagiarism** Self-plagiarism occurs when a student submits his or her own previous work, or mixes parts of previous works, without permission from all professors involved. For example, it would be unacceptable to incorporate part of a term paper you wrote in high school into a paper assigned in a college course. Self-plagiarism also applies to submitting the same piece of work for assignments in different classes without previous permission from both professors.

**Mosaic Plagiarism** Mosaic Plagiarism occurs when a student borrows phrases from a source without using quotation marks or finds synonyms for the author’s language while keeping to the same general structure and meaning of the original. Sometimes called “patch writing,” this kind of paraphrasing, whether intentional or not, is academically dishonest and punishable – even if you footnote your source!

**Accidental Plagiarism** Accidental plagiarism occurs when a person neglects to cite their sources, or misquotes their sources, or unintentionally paraphrases a source by using similar words, groups of words, and/or sentence structure without attribution. (See example for mosaic plagiarism.) Students must learn how to cite their sources

Confidentiality/HIPAA/Social Media Creation Date: 06/07/22 Revision Date:

Policy Description: The rights of patients and fellow students must be respected at all times. Students are legally responsible for their own acts of commission or omission as it relates to the Texas Nurse Practice Act, HIPAA, and Dallas College Student Code of Conduct.

Students are expected to exercise extreme caution in keeping all information confidential, to include verbal comments, details or thoughts expressed through social networking. Information regarding patients is also governed by the federal HIPAA laws. Logs, care plans, and other clinical assignments or notes should not contain names or other identifying information. Students will take precautions not to fax, misplace, or lose notes that could be read by others. Patient records must not be photocopied.

The clinical experience is likely to be the first time that students come into contact at a professional level with actual patients in the clinical setting. The faculty expects the student to remember that each person has inherent worth as a human being. The student is expected to honor each person's dignity, and to respect their rights to privacy, religious and political beliefs, and observations.

**Policy:** Each clinical rotation/hospital will have a statement of patient rights and nursing responsibilities. The student should study these policies and comply with them at all times. These are the basic rules to follow:

1. All patient information must be kept confidential. All written, electronic, and verbal communication must be protected.
2. Patient information will be accessed only for need to know, direct patient care responsibilities.
3. Do not talk about patient in public areas such as the cafeteria, the elevator, or in the halls.
4. Do no leave reports or other records unattended.
5. Do not leave computer screens unattended. Log off when leaving.
6. Written authorization from a patient or legally authorized representative must be obtained before disclosure of any health care information, except in need to know for direct care.
7. No patient information should be given out over the telephone except to those directly

involved in the patient’s care and only with the appropriate identification.

1. Patient consent must be obtained before sharing patient information with family and friends.
2. Assure that anyone looking at a patient’s chart or inquiring about patient information has

valid and appropriate identification and a need to know (is part of the healthcare team).

1. Discard confidential papers in secured bins provided.

Social Media may be defined as web-based and mobile platforms for user-generated content that create interactive and highly accessible, and often public, dialogues. Student nurses have a responsibility to be cognizant of the benefits and consequences of participating in social media.

Student nurses all carry the responsibility of adhering to privacy and confidentiality standards and should be familiar with the Health Care Portability and Accountability Act (HIPAA), including, but not limited to,

the HIPAA Privacy Rule. HIPAA regulations protect patient privacy by establishing how individually identifiable information may be used, including any information relating to the physical or mental health of an individual, or any information that may be used to identify an individual.

The following guidelines adapted from National Council of State Boards of Nursing (NCSBN) “A Nurse’s Guide to the Use of Social Media” (2018).

<https://www.ncsbn.org/347.htm>

Dallas College Dallas [Institutional Policies](https://www.dallascollege.edu/about/legal/policies-for-syllabi/pages/default.aspx) Institutional Policies include information about tutoring, Accessibility Services, class drop and repeat options, Title IX, and more.

### Communication

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Timely and professional communications are expected of all students in the Dallas

College nursing program. Good communication will assist in student’s success.

#### Policy:

1. All students will be required to use their Dallas County Community College email (e.g. [e12345678@student.dcccd.edu](mailto:e12345678@student.dcccd.edu)) for all correspondence throughout their tenure with the program.
2. All communication must be through Outlook and/or Blackboard. There are some instances (e.g. clinical site) where faculty may require you to text via cellphone.
3. All use of email will be consistent with other Dallas College policies and local, state and federal law, including the Dallas College policy on the Responsible Use of Information Technology.
4. Email is a tool provided by the college to complement traditional methods of communications and to improve education and administrative efficiency. All email users have a responsibility to use this resource in an efficient, effective, ethical professional and lawful manner.
5. Use of the college’s e-mail system is confirmation that the user agrees to be bound by this policy. Violations of the policy may result in restriction of access to the College’s email system and/or other appropriate disciplinary action.
6. This policy applies to all students, faculty, and staff of the College and to all other users of information technology resources at Dallas College. These users are responsible for reading, understanding, and complying with this policy.

# Professional Dress Code

## Policies

Professional Dress Code Creation Date: 06/07/22 Revision Date:

**Policy Description:** Student’s must adhere to a dress code in the classroom, skills lab and clinical settings. This policy outlines those guidelines that must be strictly followed. Many of these are related to infection control.

#### Policy:

**Classroom:** In the classroom, and for other DC activities, appropriate street clothes that limit skin exposure may be worn. No short shorts, no visible cleavage (low cut blouses), exposed midriffs, “hanging” pants, tank tops, baseball caps, or otherwise revealing attire. A campus may require students to wear uniforms while in the classroom, subject to Nursing Chair approval.

Clinical/Skills Lab: Professional attire is required both in the clinical setting and the Skills Lab. The Skills Lab is considered a clinical setting.

1. Professional Appearance
   1. Uniform must be clean and wrinkle free.
   2. The uniform consists of navy-blue pants, a navy-blue tunic top with the Dallas College nursing emblem embroidered on the left upper chest area. The student can purchase a scrub jacket to accompany the uniform. The uniform should be well-fitting, meaning it should fit loosely and that no skin is exposed at the waist and the chest is appropriately covered when the student bends at the waist. It is strongly suggested that the student stand in front of a mirror and

raise hands over one’s head. If the abdomen is exposed by this movement, then the attire is inappropriate – the pants are hanging too low and/or the top is too short.

* 1. As specified by OSHA standards, personnel providing direct patient care should wear closed-toe shoes. All shoes should be white nursing shoes or solid white leather athletic shoes with minimal symbols (e.g., logos) or writing on them. They are to be in good repair and clean. No open-back “clogs”, mules, or shoes with multiple holes (e.g., Croc style) may be worn in the clinical area. Due to the long hours of being on one’s feet, comfort should be a strong consideration when purchasing appropriate nursing shoes.
  2. Hosiery/Stockings/Socks: Wear white socks/anklets with pant uniform; white or flesh colored pantyhose without snags or runs are also acceptable.
  3. Undergarments for men and women are to wear appropriate undergarments (bra, panties, jockey or boxer shorts, and undershirt) with uniform. Undergarments must not be visible

above or through the uniform. T-shirts must be white.

* 1. The Dallas College student ID tag must be worn at all times and visible at all times while on campus and in the clinical settings.
  2. The uniform is to be worn when in the Dallas College Nursing Skills Lab, and at the clinical facility. The uniform is not for general use or any employment. It may be worn to nursing classes or exams on campus if clean.
  3. When going to the clinical area for non-patient care assignments, the student uniform must be worn.
  4. No T-shirts hanging out of the pants. They must be tuck in the pants. No long sleeves shirts are allowed under the uniform shirt.

1. Personal hygiene and oral care:
   1. No offensive body odors.
   2. Smokers must refresh their breath and clothing before entering the clinical area. Smoking is not allowed on most hospital campuses; don’t bring cigarettes or other smoking items such as smokeless tobacco or electronic cigarettes to any clinical assignment.
2. c. Cologne, aftershave and perfume are not allowed in patient care areas as some scents act as allergens and/or are offensive to patients. No chewing gum in the Skills Lab or clinical areas.
   1. No eating or drinking in clinical area and skills lab.
   2. Hair should be clean, neat, and off the collar, or down and neatly pulled back in such a way that it does not come in contact with the patient and patient care items, this applies to males and females.
   3. Mustaches, beards, and sideburns, if worn, must be short, clean, and well-trimmed.
   4. Hair color should be a natural shade
   5. Makeup: None to moderate and modest.
   6. Jewelry (In Skills Lab/clinical setting):
      1. Rings: Only a plain wedding band is acceptable. It is recommended that any jewelry with stones either be left at home or placed on a chain around the neck as these can catch on beds, patient skin, and equipment or lost or damaged.
      2. A wristwatch with a second hand is mandatory.
      3. Earrings: One small earring per lobe. No hanging earrings.
      4. No necklaces, decorative pins, or other jewelry other than a wedding band.
      5. No visible piercings other than ears. No tongue or any facial jewelry.
   7. Nails (including for skills lab experiences)
      1. Must be clean.
      2. Length: No longer than ¼ inch from fingertip.
      3. No polish, French manicures, artificial nails, nail wraps, or extenders.
3. Valuables
   1. Purses and wallets are not securable and NOT to be taken into the clinical area. Lunch money can be carried in the pocket with the driver’s license.
   2. Leave valuables at home or place them in the trunk of your car or a non-visible area BEFORE you leave home, not in the parking lot.
   3. One backpack or bag with a limited number of books is allowed in the clinical area. These must be placed in an area designated by the facility.
   4. The student’s cell phone must be in a secure pocket of the uniform and set to “vibrate”. Cell phone use is limited to professional use only while in the clinical area and should not be used in the patient’s room. Personal calls are limited to breaks only.
4. Other required clinical equipment: The nursing supplies used in the skills lab must be purchased. It is not optional. Other equipment needed for specified activities may include:
   1. Stethoscope
   2. Penlight
   3. Ink pen (These are not allowed in the Skills Lab; a pencil is used)
   4. Bandage scissors

General Classroom Guidelines General Expectations in the Classroom **Classroom Expectations**

Nursing faculty have carefully scheduled and constructed lecture content. Make every effort to be on time to class in order not to disrupt the learning of other students. It is not appropriate to leave repeatedly during class, eat nosily or bring children to class. Both subject matter and lecture delivery may be of a sensitive nature. Confidentiality is of key importance and must absolutely be honored. If it is necessary to miss class, the student retains the responsibility for all content discussed. Tape recorders may be used in class with individual faculty permission. If the faculty person elects not to allow taping, that request must be followed.

#### Disruptive Behavior

Disruptive behavior is defined as behavior which interrupts, obstructs, or inhibits the teaching/learning process. The faculty member determines what is disruptive and has a duty to terminate it. The faculty member shall give at least one verbal warning to a student to cease disruptive behavior. In cases of abusive behavior, this requirement may be waived. Examples of abusive behavior might include profanity, physical disruption of the classroom, or threatening behavior.

If the in-class disruption does not cease, an attempt shall be made to resolve the problem in a conference between the faculty member and the student. If disruption occurs after these two measures are taken, the instructor may file a complaint with the Department Chair to initiate campus disciplinary action.

#### File Submission/Attachment Standards

Courses may require students to submit work electronically. Because the faculty receive many of the same assignments a file naming format is established for all student submissions. The file naming standard is as follows:

#### File naming standard:

Student’s Last Name and First Initial\_Class Number\_Assignment Name\_date. Why?

* Because the instructor receives many of the same assignments. If assignments are named the same, it is confusing.
* Files with the same name can cause overwriting (deleting) of existing files. This could result

in one student’s assignment being overwritten by another student's work.

* Example: DoeJ\_RNSG1140\_CarePlan\_7-21-17

#### File format standard:

Word files are saved in DOCX format. Why?

All Microsoft Word files are saved in DOCX format. All students and faculty are required to use the most current version of Microsoft Office, which can natively read and write this format.

Using a DOCX file format removes the burden of having to manually save the file in a readable format and fully supports all formatting, notations and embedding of the Office Suite.

Scanned documents should be saved in a PDF format. Why?

All scanned documents should be saved in a PDF format. This will allow the document to be viewed with basic program readers. Pictures, gif, tif files, for example, can be difficult to view because of the picture quality or the required viewer.

## Policies

### Attendance

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Students are expected to attend all classes (clinical, class, and skills lab) and scheduled activities in order to meet course objectives. Attendance will be monitored by the instructor. Students must consult with the instructor when an absence occurs. The Instructor will initiate drop action if a student is absent more than ten percent (10%) of total lecture class hours.

#### Policy:

#### Absence policy

There are no provisions for excused absences other than the following:

1. Subpoenas. A copy of the subpoena must be presented.
2. Death of immediate family members. A copy of the obituary or funeral program must be presented to the instructor. (Parents, Grandparents, Siblings, Children or at the discretion of the Department Chair)
3. Religious holidays. Student must provide a written statement including:
   1. Date of the holiday and the reason why class attendance is impossible.
   2. An alternative assignment will be given and must be completed in a timely manner.
4. Military obligations. A copy of the orders must be presented.
5. Emergency situation deemed appropriate by the Department Chair. (ex. Student in Emergency Room, car accident)

If an excused absence occurs in the class or lab, the student is responsible to obtain class notes and assignments.

The definition of a clinical absence is non-attendance for one clinical day or two tardies. Due to clinical hour requirements from the Texas State Board of Nursing, all clinical hours missed must be made up, regardless of the reason missed. The first absence must be made up with activity/activities as assigned by the coordinator/clinical faculty and determined by the campus Chair of Nursing in conjunction with the coordinator/clinical faculty. These activities may include but are not limited to a day in the clinical area, simulation, case studies, and self-directed activities. A second absence will result in inadequate time to meet course objectives, outcomes, and evaluation of performance and results in clinical failure

If in the event the instructor must send a student off of the unit, including but not limited to illness, inappropriate dress, inappropriate behavior, lack of preparation for the clinical experience, lateness, use of any tobacco product while in uniform and/or business casual for any clinical experience, or for compliance issues, the absence will be counted as a clinical absence for that day. An unexcused clinical absence or failure to make up clinical hours will result in withdrawal from the program.

#### Tardiness

Tardiness is an unprofessional behavior, distracts other students, and reduces all students’ ability to learn. If a student is tardy 15 minutes or more for two different times, this will count as a clinical absence and will result in a written final warning. A third tardy will be considered a second absence. If a student is tardy more than 1 hour to any clinical session (hospital or on-campus), this will be counted as 1 absence.

In non-clinical nursing courses (lecture and skills), tardiness is still considered unprofessional behavior and unacceptable. The classroom door will be locked at 10 minutes after class start time and the student will not be permitted to enter class until the next break time (Faculty Discretion).

In most situations, the student will receive a written warning the first time. The second time, a written final warning will be completed, signed by the student, and placed in the student's file. The third time, the student will be dismissed from the program.

NOTE: If for some reason the student must leave class early, the student should inform the instructor prior to the start of class with the reason for leaving early.

#### Inclement Weather

In case of inclement weather, the Dallas College inclement weather policy will be followed. If the student is tardy to Clinical/Lab, the student must notify the instructor at least thirty minutes prior to the scheduled arrival time. This communication must be directly from the student to the instructor. Upon arrival to the clinical/lab setting, the student must report to the instructor.

Students are expected to exercise sound judgment in determining whether or not to attend class or clinical during inclement weather. Students not in attendance when the campus is opened will be considered absent and the absence policy will be followed.

### Grading

Creation Date: 06/07/22 Revision Date:

**Policy Description:** A syllabus is provided for each nursing course and clearly delineates required graded activities. This syllabus serves as a contract between the students in the class and the faculty. The syllabus is the final authority for each individual course. Summative and formative methods of evaluation are utilized.

Depending on the course and the purpose of the exam, evaluation of the students may include paper- and-pencil exams, computer generated exams, take-home assignments, clinical evaluations, evaluations of presentations and projects, and specialized, which may occur at the end of the semester and/or the end of the program.

An item analysis is conducted on all exams and items are revised based on the results of the item analysis. A grading rubric is used for all major written assignments. In the skills lab, students are required to meet all critical elements indicated on each skills lab competency for successful completion of each skill

#### Policy:

The Dallas College Nursing Program has determined that a grade of "C" is the minimum acceptable grade for enabling a student to proceed to the next nursing course. The student must earn a grade of "C" or higher in every course required for a given semester or group of concurrent courses in order to progress to the next semester. The student must earn a passing grade for clinical performance in addition to any other graded assignments, and complete all non-graded course expectations in order to pass a clinical course.

Nursing courses, the requirements for a particular letter grade are listed below.

|  |  |
| --- | --- |
| **Score** | **Letter Grade** |
| 92-100 | A |
| 84-91 | B |
| 78-83 | C |
| 65-77 | D |
| 0-64 | F |

Throughout the nursing program, absolutely no grades including the final course grade will be rounded up to the next grade. Grades will not be curved in the nursing program. In computing any grade, a “D” grade will not be rounded to a “C”. For example, if the student’s grade is 77.99, this equates to a grade of “D” or if the student received an 83.9, this equates to “C”.

If a student fails or withdraws from a course, the student will also be removed from all related concurrent courses. For example, student fails or withdraws from RNSG 1441 (Med-Surg), the student must also withdraw from or be removed from RNSG 2362 and RNSG 1144. If you are readmitted into the program, these are related concurrent courses and you would have to re-take all courses for the semester you are re-entering.

In compliance with the Family Educational Rights and Privacy Act of 1974, no grade will be given over the telephone to a student or any other person under any circumstances. Grades will be available via E- campus.

#### Procedures for students who are unsuccessful

Any student earning a grade of below 78% on any exam must make an appointment with faculty to analyze the exam results and develop a plan for improvement. This appointment is the student’s responsibility. Students may be referred to the remediation specialist.

#### Student Review of Exams

At the discretion of the instructor, a student may review an exam on an individual basis and by appointment only or the exam may be reviewed at the time of testing or the faculty may review the exam with a class. At no time will a student be alone to review a previous exam or permitted to take notes. Previous exams may be reviewed before the next exam is administered. There is no review of the final exam.

#### See Syllabus for Final Exam Policy See Grade Appeal Policy

Exam Administration Creation Date: 06/07/22 Revision Date:

**Policy Description:** Some final exams and other select exams will be given in the classroom. Other exams requiring use of computers will be given in selected areas. All exams will be proctored for security reasons

#### Policy:

1. The instructor(s) controls the testing environment, including, but not limited to the seating arrangement.
2. All books, papers, notebooks, electronic devices and personal belongings will be placed at a designated area before entering a testing situation. This includes phones and smart watches.
3. Any incriminating information found on or in the immediate vicinity of the individual during a testing situation will be grounds for termination of the exam. A grade of zero will be recorded and averaged into the final grade and the student may be dismissed from the program for academic dishonesty.
4. Any verbal or nonverbal communication between students during a testing situation will be grounds for the termination of the exam. A grade of zero will be recorded and averaged into the final grade and student(s) may be dismissed from the program for academic dishonesty.
5. Should a student need to communicate with the instructor, he/she should remain seated and raise his/her hand.
6. Infractions of the honesty policy will be grounds for a grade of “0” or possible withdrawal from the program.
7. Students should arrive on time. When it is time for the exam to be completed, it is complete regardless of the time the student arrived.
8. If a student arrives after the exam has started, it is at the instructor’s discretion as to whether the student will be allowed to take the exam or take the exam at that time.
9. If there is a legitimate problem which causes the student to be unable to attend, the instructor must be notified at least 2 hours PRIOR to the exam or at the time the problem occurs.

### Dosage Calculations Exam

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Medication administration by any route is a serious responsibility. By law, students are held to the same safety standards as registered nurses. Math skills play an essential role in the preparation and dispensing of all medications. It is essential that the student respect the gravity of the responsibility they have undertaken when they administer medications to patients.

Students will be tested throughout the nursing program to ensure adequate preparation prior to the administration of medications. Dosage exams will be given at the beginning of each clinical experience prior to administering medications. One such area is the safe administration of medications from all routes (PO, SQ, IV, etc.). A score of 90% or higher must be achieved.

#### Policy:

1. Every semester in the clinical course of the nursing program, the student will be tested for math ability and knowledge of drugs.
2. The student will take a drug calculation exam with three attempts to pass the exam.
3. The student must make a minimum score of 90% to pass the exam.
4. If the student is unsuccessful on the third attempt, the student will fail the clinical portion and may withdraw or will be dismissed from the nursing program.

### Service Learning

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Nursing as a profession is a service-oriented role. The Service Learning Program provides students the opportunity of earning classroom credit by engaging in a timely and organized way with local nonprofits to offer high-quality community service.

The Service Learning Program offers a variety of ways in which students can participate in social, environmental, humanitarian, and other causes while tying those valuable efforts into classroom learning and curricula. It enhances student learning by connecting academic content with hands-on experiences, developing leadership skills, and learning from community-based professionals.

Service Learning develops the 21st-century skills (4 C’s) that employers are looking for in college

graduates: Creativity - Critical Thinking - Collaboration - Communication

#### Policy:

1. The student will access the [Service Learning](https://dcccd.sharepoint.com/sites/Service-Learning-Program) SharePoint page to complete this process.
2. The student will review the APPROVED “Health Science Nursing Clinical Projects” and choose their preference. These are the only sites and projects that may be used by a student to satisfy the hours required.
3. The student will complete the online application on the Service Learning SharePoint site.
4. A completed Liability Waiver will be submitted to their clinical faculty per their instructions
5. The student will schedule their service learning hours with the site chosen.
6. While at the site, the student will have their Evaluation completed and signed by the site coordinator/leader.
7. The Review portion of the document will be completed by the student and submitted to their clinical faculty per their instructions.
8. A nursing student may not provide any form of direct nursing care without an instructor present. For example, blood pressures in a blood pressure clinic may not be taken, but greeting people, keeping records as directed by the nurses, entertaining or providing treats for children accompanying their parents or grandparents, etc., is permitted. Even if agency personnel offer to supervise while tasks are performed, these are not allowed.
9. A name badge and appropriate professional attire as stipulated by the organization (but not your uniform) must be worn. Failure to comply with the above stipulations may place you and others at risk.

# Clinical Guidelines

## General Expectations in the Clinical Setting

1. The student is expected to be prepared, arrive on time, have all necessary equipment, and be healthy and well rested for all clinical experiences.
   1. Lack of rest and alertness interferes with the student's ability to be a safe practitioner.
   2. If the instructor determines that a student is not able to function safely the student will be asked to leave the clinical area and will be counted as absent.
   3. The student may be sent home if the clinical instructor believes the student is ill.
2. No smoking or gum chewing is allowed except during a break in a designated area.
3. Breaks are limited to 15 minutes. Report to the instructor and primary nurse when leaving and upon returning to the unit.
4. Cell phones are allowed in clinical if given approval by the clinical instructor. Personal calls should not be initiated and/or received in patient care areas, public service areas, or within the view of patients or visitors. Ring tones and alerts should be set to vibrate or silent mode. Wireless headsets may not be used. Other devices such as DVD players, personal laptops, and/or iPad are not allowed on patient care areas, public service areas, or within view of patients or visitors. Devices must not produce electromagnetic interference with biomedical equipment. Students must not record still or moving images or voices of students or the teacher without permission from both parties.
5. In case of an emergency, the student should inform family members to call the instructor who will then notify the student. Give a family member your clinical and class schedules with course and room numbers for class or designated areas of the hospital clinical rotation(s).
6. A student is not to go to any units other than the one assigned unless it involves a patient transfer, obtaining supplies or equipment or assignment to a different area.
7. It is the student's responsibility to follow hospital policy and procedures. A policy and procedure manual is available on every unit or online.
8. The student may do only those procedures in which he/she has had classroom instruction, has practiced, and has been checked off in Skills Lab. The student may not perform any invasive procedure unless observed by their clinical instructor or unit licensed nurse.
9. The student is not permitted to give information over the phone concerning a patient's condition.
10. The student is not permitted to take a doctor's verbal order. Instruct the doctor he/she is not permitted to do so and locate a qualified person to take the order. The student is not permitted to give information over the phone concerning a patient's condition. Violations will result in a dismissal from the program
11. The student is required to be prepared in advance for clinical experiences. If the student is not prepared for patient care or dressed appropriately, the student will not be allowed to
12. participate in the clinical experience and will receive a negative progress report with a possibility of being dismissed from the nursing program.
13. The student may not work the night before (7P-7A or 11P-7A) his/her clinical rotation. This will result in a clinical absence.
14. Upon completion of patient care assignments, maximize the time available by working on nursing care plans or looking up drugs; spend extra time sitting and talking with (or listening to) your patients; assist other students on the unit who need help with their patients; and/or do research about the assigned patient or topic for the clinical objective of the day.
15. Students may not print or obtain printed patient documentation of any kind and remove it from the patient unit.
16. Students will not contact any clinical affiliate regarding Dallas College.

## Policies

### Clinical Expectations

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Students may be required to attend clinical rotations or activities on days, evenings, weekends, or nights and in a variety of clinical agencies. Rotations are scheduled by the nursing faculty/Department Chair and are subject to change. Due to restrictions on timing of rotations, situational student requests may only be accommodated with the campus Chair of Nursing’s approval. Students will be notified of changes in a timely manner. Students must stay flexible as to day, time, and place of clinical assignments. For special needs, students should inform the faculty or the campus Chair of Nursing as early as possible prior to the semester schedule being finalized because attempts to accommodate even reasonable student requests are not always possible. After the schedule is finalized, students do not have the option of changing times or locations.

#### Policy:

1. Students cannot provide any care unless the instructor or designated preceptor is on site.
2. Students are expected to be prepared and attend all clinical sessions and activities necessary in order to meet the objectives and hour requirements of the course.
3. Students are expected to bring all necessary equipment each day. “Make-up” clinical hours are not available. Alternative assignments may be given in special circumstances as determined by faculty, only with the Chair of Nursing approval.
4. Required clinical activities include pre-clinical laboratory practice, clinical preparation time, pre- and post-conferences, scheduled clinical days, and alternative clinical activities and simulations.
5. Unless otherwise stated in the course syllabus, students must adhere to the following guidelines for successful completion of the clinical component:
   1. Activities must not interfere with the ongoing work of the agency staff.
   2. Children or visitors may not go to any agency, DC, or any other required student activity.
6. Students must attend all scheduled agency specific orientations.
7. Students are not permitted to arrive late or leave early during clinical or other required student experiences.
8. Students who have unavoidable personal delays must contact the instructor as quickly as possible and make other arrangements.
9. In case of serious illness, fever of 101° F or higher, or an emergency situation, a student may find an absence unavoidable. If an absence does occur, the student must notify the clinical instructor as early as possible.
   1. See page 37 for tardy and absence policy
      * A physician’s written excuse for illness will be required in order to return to the clinical activity.
10. The student cannot leave the clinical area without informing the instructor and primary nurse. This constitutes abandonment and can result in possible termination from the program.
11. Since there are no make-up days for clinical, any unexcused absence will result in withdrawal from the DC nursing program.

Activities Not Allowed in the Clinical Setting

During the clinical assignment, the student may be assigned to care for patients who are receiving highly potent and dangerous medications or be very fragile.

1. Medications: a student CAN NOT
   * Administer medications by a particular route or perform skills on which they have not been checked off in skills lab.
   * Be unsupervised while giving medications at any time without RN supervision.
   * Administer heparin or insulin without co-signing by a nurse.
   * Regulate or titrate antihypertensive, vasoactive or antiarrhythmic medications or give medications during a cardiac arrest. Administer intravenous paralyzing agents, drugs for conscious sedation, IV sedative agents, or IV chemotherapeutic agents.
   * Administer IV fibrinolytic therapy,
   * Hang or regulate blood or blood products.
   * Administer IV push medications without direct RN supervision.
   * Administer or regulate PCA or epidural medications.
   * Waste narcotics without the direct involvement of 2 RNs. The student may administer non-PCA narcotics when they are signed out and supervised by the RN.
   * Hang TPN without RN supervision

\*Please see related policy

1. Other activities not allowed: the student CAN NOT
   * Delegate RN medication duties to agency staff.
   * Take or follow verbal orders. They must be written and signed at least by

the RN who took the verbal orders.

* + Witness consents.
  + Take any photos of the area, patients, etc.
  + Leave the unit without notifying the instructor or patient’s nurse.

### Medication Administration

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Medication administration by any route is a serious responsibility. By law, students are held to the same safety standards as registered nurses. It is essential that the student respect the gravity of the responsibility they have undertaken when they administer medications to patients.

Students will be taught skills throughout the nursing program. One such area is the safe administration of medications by all routes. Medication administration will follow all procedures and protocols of the nursing program and of the institution for that particular drug

#### Policy:

1. Prior to administering any medication, the student must have successfully completed the skills check-off drug administration for that route.
   1. The student must demonstrate satisfactory knowledge of the drug (desired effects and potential adverse effects, any necessary monitoring, and any particular information related to how it is administered).
   2. The student will verify the order, any critical information such as laboratory values, and clarify these as needed.
   3. Documentation must be complete, correct and timely.
2. The 6 Rights of medication administration will be followed for each drug administered.
3. All medication administration will follow the policies and procedures of the clinical partner.

#### Medications: a student CAN NOT

* Administer medications by a particular route or perform skills on which they have not been checked off in skills lab.
* Be unsupervised while giving medications at any time without RN supervision.
* Administer heparin or insulin without co-signing by a nurse (or according to clinical partners policies and procedures).
* Regulate or titrate antihypertensive, vasoactive or antiarrhythmic medications or give medications during a cardiac arrest.
* Administer intravenous paralyzing agents, drugs for conscious sedation, IV sedative agents, or IV chemotherapeutic agents.
* Administer IV fibrinolytic therapy,
* Hang or regulate blood or blood products.
* Administer IV push medications without direct RN supervision.
* Administer or regulate PCA or epidural medications.
* Waste narcotics without the direct involvement of 2 RNs. The student may administer non-PCA narcotics when they are signed out and supervised by the RN.
* Hang TPN without RN supervision

#### Procedure for Illness, Accidents or Injury

All clinical facilities by contractual agreement must provide access to acute emergency care in the event of accident or injury to a student. A student who is injured and requires medical attention in the clinical setting should immediately notify his/her instructor. Verbal notification to the floor’s charge nurse to reassign patient care and a written summary of the injury and care rendered will be submitted by the instructor/student.

A student is responsible for all expenses charged by the clinical facility in rendering medical care. The college and the clinical facility are not responsible for any claims for expenses that result from an action of a student in the clinical setting. Students are required to have proof of personal health insurance available.

### Unsafe Clinical Practice

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Faculty are responsible to make appropriate student assignments as well as responsible for proper supervision of students and availability to them. Students are legally responsible for their own acts of commission or omission.

**Policy:** The action taken by the clinical instructor and/or Department Chair of Nursing is contingent upon the severity of the incident(s), the number of incidents, or the type of unsafe practice. In ALL instances of unsafe clinical practice, verbal and written counseling will be initiated by the instructor.

Some examples of actions that could lead to clinical failure include, but are not limited to:

1. Refusing an assignment based on patient race, culture, religious preference or medical diagnoses.
2. Failing to respect patient’s rights and dignity.
3. Failure to satisfactorily complete the required clinical objectives and assignments.
4. Performance of a skill or behavior that causes physical injury or emotional distress to the patient.
5. Falsification or misrepresenting any information concerning patients, staff, and peers.
6. Failure to report dishonest or unethical behavior in others.
7. Performing nursing care in the clinical setting while under the influence of alcohol or drugs (causing

a detrimental effect on student’s behavior or ability to reason).

1. Practicing skills without appropriate supervision or outside the academic environment.
2. Interacting inappropriately with agency staff, co-workers, peers, patients/families, and or faculty resulting in miscommunication, disruption of the learning and/or patient care environment.
3. Violating principles of confidentiality.
4. Being unprepared for clinical practice.
5. Soliciting, borrowing or removing property or money from a patient or patient’s family.
6. Assuming patient care for which the student lacks the education or competence to perform.
7. Abandonment: leaving clinical agency or patient assignment without notification.
8. Failure to complete all skills satisfactorily in the skills laboratory.
9. Any form of plagiarism or falsification of data on clinical care plans and/or required paperwork.

#### Failure of the clinical course:

A failure in the clinical course will cause the student to be removed from the program. The clinical evaluation must be passed in each clinical course to pass the course regardless of the overall grade in the course.

The student must complete the process for readmission which is described in the nursing program Student Handbook. Students who have failed a course due to documented incidents of unsafe practice may not be eligible for readmission, regardless of the level of the course. Any negative consequence of unsafe practice for the student may be appealed using the outlined appeal process.

Definitions of Unsafe Practice:

#### Physical Jeopardy

Physical jeopardy is defined as any action or inaction on the part of the student which threatens the patient’s physical well-being. The following examples include, but are not limited to, situations that would place the client in physical jeopardy:

Category of Unsafe Practice and Examples of Physical Jeopardy

* 1. Violates or threatens the patient’s physical safety.
     1. Fails to use safety measures such as side rails, restraints and/or call bells when appropriate or as required.
     2. Unprepared for safe patient care.
     3. Fails to recognize, report, or document deviations from normal including assessment changes, patient or family report of problems, abnormal vital signs or diagnostic s (e.g. lab data x-rays).
     4. Fails to use equipment properly and safely or to recognize or report malfunction of equipment.
     5. Fails to consult with staff member or instructor for assistance as needed.
     6. Fails to carry out skills correctly and safely.
     7. Unable to verbalize principles and rationale of skill(s) to instructor.
     8. Performs skills or competencies not yet permitted.
     9. Continually requires assistance or guidance in areas which should have been previously mastered.
  2. Violates or threatens the microbiological safety of the patient.
     1. Fails to recognize and remediate violation of aseptic technique.
     2. Fails to notify instructor of illness or attends clinical when ill or possibly contagious.
  3. Violates or threatens the chemical safety of the patient.
     1. Fails to administer medications safely.
     2. Violates any of the 6 Rights of administering medication or fails to calculate appropriate dosage of medication.
     3. fails to recognize and state critical drug information.
     4. Fails to monitor patient for therapeutic effects, and/or recognize and report adverse effects of medications.
  4. Violates or threatens the comfort of a patient.
     1. Fails to recognize, adequately assess, report, or provide comfort, both pharmacologically and non- pharmacologically.
     2. Fails to monitor the relief measures provided.
  5. Inadequately and/or inaccurately utilizes the nursing process.
     1. Unable to provide an appropriate plan of care including, but not limited to assessment findings, goal statements, nursing actions, and rationale.
     2. Makes repeated faulty judgments and/or decisions in nursing.
     3. Fails to recognize, adequately assess, report, or provide comfort, both pharmacologically and non- pharmacologically.
     4. Fails to monitor the relief measures provided.
  6. Inadequately and/or inaccurately utilizes the nursing process.
     1. Unable to provide an appropriate plan of care including, but not limited to assessment findings, goal statements, nursing actions, and rationale.
     2. Makes repeated faulty judgments and/or decisions in nursing.

#### Emotional Jeopardy

Emotional jeopardy is defined as any action or inaction on the part of the student which threatens the patient’s or family’s emotional well-being. The following examples include, but are not limited to situations that would place the patient or family in emotional jeopardy.

Category of Unsafe Practice and Examples of Emotional Jeopardy

1. Violates or threatens the psychological safety of the client.
   1. Repeatedly uses non-therapeutic techniques in interactions.
   2. Attacks or demeans individuals’ beliefs or values.
   3. Fails to explain a procedure correctly to the patient and/or family.
   4. Fails to include the patient and the family in discussions when in the patient’s room.
   5. Fails to communicate at the appropriate level for the patient and/or family.
   6. Fails to obtain/provide translation for the patient as appropriate.
   7. Fails to respect and support patient/ family cultural and spiritual values.

#### Abusive criticism or bullying

Respect and professional behavior are expected at all times. Abusive criticism or problems through the use of language or disruptive behavior directed toward faculty, staff, clinical agency personnel, patients, families, or peers will not be tolerated. Such behavior is inconsistent with professional standards and is inappropriate for students aspiring to a career in nursing. Processes are in place to allow for grade appeals and/or grievances. Faculty and staff are open to receiving and responding to constructive feedback.

#### See Disciplinary Action Policy for unsafe clinical practice.

# Skills/Simulation Guidelines

## General Expectations in the Skills/Simulation Lab

The Skills Lab is where you will be introduced to new skills, be expected to practice, and be evaluated on your skills. Simulation activities will be integrated throughout your curriculum. As you travel through your nursing program, you will spend time in the Nursing Skills Lab each semester, whether you are learning new skills, reviewing previously learned skills, or being evaluated in preparation of clinical. Simulation activities will be a key component of all these elements, whether it is using a simple task trainer, a complex full-bodied manikin or a peer.

Critical thinking is encouraged by incorporating the rationale for what you are learning as well as understanding the nursing assessments and responsibilities that accompany these skills. Evaluation is a continuous process utilizing peer evaluations, course skills competencies and clinical experiences. The Nursing Skills Lab faculty and staff collaborate with the course faculty to coordinate nursing theory and clinical labs.

You have the opportunity to practice independently, with your peers, with student lab assistants, and with faculty to develop your skills. How much time you dedicate to practice is dictated by how quickly you learn and by the difficulty level of the skills. You all have your own style and pace of learning; therefore, plan your time and needs accordingly. Practice is completed on your own time and testing may either be on your own time or during scheduled class/clinical time (course dependent). Currently there is no mandatory time requirement for practice. Therefore, it would be beneficial to include lab practice time into your weekly schedules.

The nursing skills lab is an integral part of your nursing education where you have the opportunity to overcome your own fears and insecurities while working with a variety of task trainers, simulators, and actual hospital equipment. By using the provided equipment and supplies, you are able to simulate a clinical environment where you have the ability to learn and practice safely without causing harm to your patients. The clinical setting is not a practice setting.

The primary goal of the nursing skills lab is to provide an environment for you to become competent with your nursing skills and thereby becoming a safe practitioner while working towards excellence in nursing.

**Definition of Skills** – an inclusive term for psychomotor skills that includes rationale, critical thinking, physical assessment, and drugs and solutions.

#### Guidelines

The following guidelines are important and consistent with the student transitioning to a professional nursing role. Students are expected to:

1. Schedule and practice clinical skills during open lab hours (on own time).
2. Prepare in advance for the scheduled skill lab session.
3. Perform two peer evaluation check offs (done by other students) before seeking final check-off by the instructor.
4. Schedule with your instructor in advance any make up skills missed or make up check- offs missed within one week of the skill missed. Missing this time-line may be cause for failure to pass the course.
5. Read bulletin board periodically. Important information for the students is posted there.

#### Preparatory Assignments

All clinical pre-assignments must be completed prior to the scheduled clinical lab time. Preparation is necessary for the student to be successful in the acquisition of psychomotor skills. Students must bring the appropriate assignments and/or skills competency forms with their full name noted on each page to the appropriate skills session identified.

#### Cell Phones

All cell phones and/or pagers must be on silent mode in all classrooms, clinical skills labs, and hospital settings. Pagers and cell phones may be checked and answered on scheduled breaks outside the classroom/lab.

## Policy

### Skills Lab Use

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Proper use of the Skills Lab will ensure the student’s safety and longevity of the manikins

used. This setting should be considered a clinical setting.

#### Policy:

#### Safety

1. No guns are allowed to be carried or stored in any of the nursing areas based on the locations, equipment and chemicals in the area.
2. No Snacks/drinks will be allowed in the labs. However, bottled water with a cap is allowed in the lab but not at the beds.
3. No loud talking in lab, hallways, or during check-offs.
4. All bag packs must be kept out of traffic areas. Please place all belongings in cubicles to prevent accidents.
5. Make sure you sign in on the sign-in sheet for open lab. Write legibly and include the date, course and section number.
6. If a question should arise during skills practice, please notify the Lab Coordinator/Faculty and they will address your questions and concerns.
7. When utilizing manikins do NOT leave them expose. Cover manikins and leave area clean and straight. No pens or markers are to be used on the manikins. Pencils will be provided if needed.
8. DO NOT pull manikin by the extremities. DO NOT make any marks; any use of ink should be away

from manikin. If any manikin’s part becomes loose, please notify Lab Coordinator immediately.

1. Bring supplies from Nurse Kit to all scheduled lab and open lab for practicing.
2. Lab sections continually meet in the lab so every section must be responsible for keeping the lab clean and orderly. Return supplies to original location after use. After Practicing straighten beds (Never put shoes on beds). Put trash in appropriate containers.
3. No major equipment can be checked out from lab. Any skills lab materials needed for clinical presentations/ projects need to be reserved prior to the date needed. You must be prepared to tell the Lab Coordinator what items you would need. You are responsible for returning any equipment borrowed for a presentation.
4. Courteous behavior is always expected from the student. This includes maintaining an appropriate sound level (conducive to verbal communication and learning) and exhibiting respectful behavior towards peers, faculty, and staff during regular scheduled lab as well as during check-offs.
5. Students are required to wash their hands upon entering the lab, when transitioning to new activities and at other designated or appropriate intervals throughout the lab session with either soap or running water or alcohol based instant hand-sanitizers. Students may use the sanitizer after touching objects and/or engaging in student contact.

The personal safety of the student in the skills lab is essential. It is the student’s responsibility to be familiar with the operation and function of the beds and over-bed tables. Leaning on or supporting self on bedrails, over-bed tables or a chair back is prohibited. The student must report broken or unsafe equipment or any lab injury immediately to the lab coordinator or faculty. In the case of injury, complete appropriate forms and follow

necessary policies. Procedures that involve body fluids or blood collection are not allowed in the lab. In accordance with the Centers for Disease Control (CDC) all sharps are to be handled safely and disposed of properly. In the event of a “clean” needle stick, these guidelines are to be followed:

* 1. Inform the faculty member immediately; render first aid as needed.
  2. Wash hands with soap and water.
  3. Complete Incident Report.

As with any invasive procedure, a clean needle stick may result in complications. Potential complications include tenderness, minor bleeding and/or bruising at the puncture site; and infection.

#### Cleaning the Skills Lab

Prior to leaving the area, the students are required to clean their work space, put designated equipment away, lower the bed to low position, and place the over-bed table at the end of the bed. All non- disposable equipment used during the lab session will be cleaned by the student at the end of the session using bleach wipes. These include lab surfaces, tables and chair backs. Adequate supplies for cleaning the lab will be provided. Mannequins are to be left clean; mild soap and water may be used to clean them. The student will place all other cleaned equipment on rolling shelf cart in lab for personnel to place in proper storage area.

#### Visitors

It is not appropriate to bring unattended visitors to the lab. The lab contains educational equipment that could harm small children. Safety is critical. Visitors, especially children, are subjected to an unfamiliar environment with unfamiliar equipment elevating the potential for injury.

#### Equipment

The mannequins are to be returned to the bed after use and never left on the floor or in a wheel chair. Mannequins are to be used respectfully and treated as if they were live patients. Do not use newspaper, betadine and ink pens and safety pins near the mannequins. All IVs should be 22 gauge or smaller.

The lab is equipped with computer access and a supply of videos, DVDs and CDs as well as other media, which cannot be removed from the lab. All lab equipment and supply questions should be directed to the lab coordinator. Do not request faculty to replace disposable equipment you “borrowed”– bring appropriate supplies with you every time. The student who fails to abide by the lab guidelines may be directed to leave, which may be considered an absence. An absence may cause the student to jeopardize their standing as a student. (See your course Syllabus for specific grading policies that apply).

### Hazardous Waste

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Hazardous Waste is defined as any toxic byproduct which presents a potential threat to people and/or the environment. Students and Faculty deal with hazardous wastes in the care of patients.

#### Policy:

The Dallas College Nursing faculty, staff and students will follow the Dallas College District Policy for safety on the campus and in off campus clinical experiences. When faculty, staff or students are in off-campus educational experiences (clinical) they will follow the prevailing safety policies of the health care facility.

#### Education and Training:

1. Faculty, staff & students will be educated in the safe practice of working with chemical, radiological, electrical or biological hazards or equipment with potential hazards.
2. Each semester students will complete or review the Hazardous Materials Training and/or Policy.
3. Each semester faculty & students will review the Safety Orientation of the clinical facility where they will be assigned for that semester or course.

#### Workplace Chemical List/ MSDS

1. A record of Material Safety Data Sheets will be kept in the Nursing Skills Lab and the Nursing Department Office for reference for any exposure.
2. Any hazardous material used in the educational work place will be accurately labeled according to the DC policies.

#### Sharps

1. Safe disposal of sharps will be available in the Nursing Skills Lab beside each patient bed and at the medication preparation area.
2. Disposal of the sharps will be completed as needed by the Director of the Nursing Skills Lab using a biohazard disposal contractor approved by the DCCCD.

#### Protective Equipment:

* 1. Faculty, staff and students have access to personal protective equipment in the Nursing Skills Lab, and in the clinical settings.

### Simulation & Skills Check-offs

Creation Date: 06/07/22 Revision Date:

**Policy Description:** The simulation lab is a learning environment. The students involved in the scenario should have everyone’s respect and attention. Situations simulated in the lab are to be used as a learning tool, and no discussion of the actions of fellow students should take place outside the lab. A debriefing session will be provided for all simulation sessions, after which the students will submit an evaluation form.

#### Policy:

Minimum expectations for simulations include but are not limited to:

1. Introduction of self to the “patient”.
2. Use of standard identification procedures.
3. Use of standard precautions before, during, and after all simulation experiences.
4. Demonstration of initial primary assessment and data collection skills.
5. Active participation in case scenario-simulation-debriefing.
6. Effective communication with interdisciplinary members, patient, family, and peers
7. Use of all of the six rights of medication administration.

#### Simulation Debriefing

Debriefing is immediate feedback and is a reflective critical thinking analysis and communication tool for participants in the simulation exercise. The purpose of the debriefing assessment is to provide an intensive and active evaluative process driven by peers and instructors; focus is to be on positive aspects of the scenario which allow for critical thinking. After the debriefing, students participate in reflective analysis of how they performed, and answer critical thinking questions. Sample questions could be:

1. Explain the rationale behind the action.
2. Was it appropriate? Effective?
3. What would change if you were to perform this simulation over?
4. What, if any, obstacles did you encounter?

#### Check-off/Competency

The grading of the skill competency validations are as follows: If a competency validation is passed on the first attempt, the grade will be 100%. If passed on the second attempt, the grade will be 90% B. If passed on the third attempt, the grade will be 80% C. If the competency validation is not passed on the third attempt, the student will receive a grade of 0% for that skill. If the student fails to complete a competency validation successfully in 3 attempts, the student will not be able to attend hospital clinicals and will be dismissed from the nursing program.

If the student does not pass the competency validation on the first attempt, they are required to spend a minimum of 1-hour practice in the nursing skills lab before they are allowed to complete their second attempt. An appointment must be made with the instructor in order to complete the second attempt at the competency validation within one week of an unsuccessful attempt. If the student arrives for the second attempt without completing the minimum 1-hour practice time in the nursing skills lab, they will forfeit their second attempt. If a student does not pass the competency validation on the second attempt, the student is required to make an appointment with the nursing skills lab Instructional Specialist/Clinical Professor/Student Mentor for one-on-one

tutoring on the skill. The student will be eligible for their third attempt only after meeting with the Instructional Specialist/Clinical Professor/Student Mentor and making an appointment to complete the third attempt.

There are some additional rules that apply during skills competencies:

1. Students will not be allowed to enter the skills room until the instructor is ready to start and has gone over the materials and instructions prepared for check-off.
2. Bring all supplies, checklists etc. assigned for check-off. See objectives
3. During skills competencies, only the instructor and student being evaluated will be allowed in the room.
4. All other students must wait outside the room quietly until his or her time.
5. Counseling records and contracts are used for students having trouble with specific skills or clinical performance.
6. 2nd and 3rd skills competency attempts may be videotaped.

### Students Practicing on Another Student

Creation Date: 06/07/22 Revision Date:

**Policy Description:** In the course of learning new nursing skills, it is often useful for students to take the patient role. This enhances the learning experience by creating realistic learning experiences and allows the student time to master the skill.

Certain procedures are deemed by the faculty to be unsuitable or potentially dangerous for students to practice on each other. These procedures are invasive and include urinary catheterization, genitourinary assessment, nasal/oral suctioning, nasogastric tube insertion, intravenous insertion, and injections.

Students will practice non-invasive skills learned in the lab to increase speed and accuracy before using these skills in the clinical setting.

#### Policy:

1. As skills are introduced in the learning process, students will have scheduled time both during and after the classroom instruction to practice. When the skill is mastered, the student will then be checked off before being able to use the skill in the clinical setting.
2. The student's right to privacy and right to refuse will be honored. Faculty will make every effort to protect privacy and avoid exposure using the same guidelines used on patients in clinical agencies. If a student declines to be a student “patient" for a particular skill, the faculty will attempt to arrange a simulated experience, unless another student is willing to participate.
3. Any student(s) that violate this policy, to include practicing invasive procedures on each other, will be dismissed from the program

Health & Safety Guidelines General Health & Safety Guidelines **Medical/Accident Insurance**

Students and their insurance companies will be held responsible for any medical and/or personal expenses that

they may incur as a result of an injury, accident, or a condition of infirmity acquired as a result of being a student in the Dallas College Nursing Program.

#### COVID-19 Information

* + Information and resources regarding the COVID-19 (coronavirus) pandemic and the Dallas College response can be found at [www.dcccd.edu/coronavirus.](http://www.dcccd.edu/coronavirus)

#### Illness, accidents, or pregnancy

* + For students who become ill or are hospitalized due to an illness or accident, faculty will attempt to develop a reasonable plan for course/clinical completion. Students may be required to withdraw from the course and/or program. In all cases, a physician’s documentation will be required for the student’s return to class and or clinical. All students must follow agency guidelines and safety precautions in order to protect themselves from potential hazards.
  + Students who do not meet the standards of good physical and mental health, as required by clinical facilities for safe patient care may not be able to continue in the nursing program.
  + Students must notify the Dallas College Nursing Faculty of any ongoing or new health issues.
  + Pregnancy: A clinical agency’s policy/protocol must be adhered to by all students and faculty members.
  + Students who are pregnant during clinical portions of their program must have written documentation from their primary health care provider to remain in clinical without restrictions during the course of their pregnancy.
  + Physician directed limitations must be clearly delineated and may require student withdrawal from the course if clinical objectives cannot be met.
  + Disability Services will be notified of all pregnancies by the Nursing Department

#### Exposure Control Plan

Students enrolled in the Nursing Program are required to use standard precautions when providing patient care. The standard precautions to be used for preventing transmission of blood-borne pathogens in health care settings are those recommended by the Centers for Disease Control (CDC), available on the CDC website

* + To minimize the risk of transmission of blood-borne pathogens, nursing students will:
  + Be provided instruction related to blood-borne pathogen cause, treatment, modes of transmission, and prevention.
  + Be taught basic skills in isolation techniques, injections, venipuncture, arterial puncture, and handling of body fluids in the skills laboratory before actual clinical practice of these skills on a patient.
  + Receive hospital orientation on specific policies for blood and body fluid precautions.
  + Students are to utilize the following Standard Precautions consistently on all patients:
  + Practice proper hand hygiene per the CDC guidelines as described under Skills Lab section.
  + Refrain from all direct patient care and handling of patient care equipment when the caregiver has exudative lesions or an open wound.
  + Wear masks and protective eyewear for invasive procedures and for any procedures which are likely to generate droplet of blood or body fluids.
  + Wear gowns or plastic aprons for procedures likely to cause splashes of blood or body fluids.
  + Needles, syringes and other sharps:
  + Never purposely bend or break needles, attempt to remove them from disposable syringes, or manipulate them by hand.
  + Place disposable needles, syringes, scalpel blades, and other sharp items in puncture-resistant containers for disposal immediately after use.
  + Handle soiled linen should be handled as little as possible with minimum agitation. All soiled linen should be bagged and tied closed at the location where it was used.
  + Wear gloves are to be worn for post-delivery care of the umbilical cord and until all blood and amniotic fluid has been cleaned from the infant's skin.
  + Place Specimens of blood and body fluids in a leak-proof container. When collecting the specimen, care should be taken to prevent contamination of the outside of the container. All containers (except blood tubes) should be paced in a zip-lock bag.
  + Use mouthpieces and resuscitation bags instead of mouth-to-mouth resuscitation.
  + Other related policies
  + Upon death, state law requires that a tag be affixed to the body of any individual who is known to have been infected by a pathogen.
  + Hospital policy may require special precautions and equipment for patients in respiratory isolation. Students will be assigned to care for these patients at the discretions of the clinical instructor and/or the agency.

## Policies

### Immunization Requirements

Creation Date: 06/07/22 Revision Date:

**Policy Description:** The immunization requirements on this form are REQUIRED of all individuals applying to the School of Health Sciences program.

All Vaccine/Immunization records must include full dates i.e. month/day/year & health care providers’ signatures. Health care provider initials may be considered sufficient if the document is on a health care provider’s letterhead including the name & address of the practice.

Immunization records should include date administered, vaccine administered, injection site, specific dose, route, vaccine manufacturer, lot number, and expiration along with provider and student information. Lab reports required on all titers. Based on clinical placement requirements, a titer may be required after an initial equivocal or negative result and repeat series of vaccinations.

#### Policy:

1. MMR
   1. Documentation of 2 vaccines or positive Immunoglobulin G (IgG) antibody titers to Measles (Rubeola), Mumps and Rubella.
   2. If titer is negative or equivocal, series must be repeated.
2. Varicella
   1. Documentation of 2 vaccines or positive Immunoglobulin G (IgG) antibody titers to Varicella
   2. If titer is negative or equivocal, series must be repeated.
3. TDap
   1. Documentation of vaccine within the past 10 years
4. Influenza Vaccine (Seasonal Flu)
   1. Documentation of current seasonal flu vaccine by October 1st
5. Hep B (Students involved in Direct Patient Care)
   1. Hepatitis B series (2 or 3 dose) (Hepatitis A/B combo series accepted) AND
   2. Positive Hepatitis B Surface Antibody titer. If Hep B vaccine documentation cannot be found, a positive titer will be sufficient.
   3. If titer is negative or equivocal, series must be repeated and a 2nd titer is drawn; upload results of both titers and vaccination proof.
6. TB Testing
   1. TB skin test, QuantiFeron Gold (blood test) or T-Spot is accepted.
   2. If screen results are positive (+), those results and documentation of a chest x-ray is required and must be negative for active disease.
   3. TB screening must be within 12 months of program application and must be updated every year

### Drug Screening

Creation Date: 06/07/22 Revision Date:

**Policy Description:** All students will be tested for illegal drugs prior to admission to the Nursing Program. The student with a positive drug screen is required to withdraw from the clinical course and all concurrent health, nursing courses. Positive results may also affect re- admission to the program. Discharge from the program requires reapplication (including re-testing), and acceptance is not guaranteed. Proof of current negative drug screen with satisfactory documentation must be provided to the college along with successful drug counseling and treatment documentation, all at the student’s expense. If accepted back into the program, the student will be subjected to unannounced random drug screening at the student’s expense.

* Positive Drug Screen: A positive drug screen means a medically acceptable drug test approved by Dallas College, the results of which indicate the use of illegal drugs.
* Illegal Drugs: Illegal drugs include those drugs made illegal to possess, consume, or sell by the State of Texas and federal statutes. An illegal drug also includes those drugs taken by an individual which exceed the prescribed limits of a lawful prescription or the taking of a prescription drug without a valid prescription.

#### Policy:

1. Drug screening is conducted on all nursing student applicants accepted into the program. A confirmed POSITIVE result will be reported to the campus Chair of Nursing. The student will not be eligible for re-admission to the program for a minimum of twelve months.
   1. The results of the admission drug screen are generally accepted for the duration of the student’s uninterrupted enrollment in the program unless allegations are made to support reasonable cause that the student is not free of illegal drug use; with reasonable cause the student may be required to submit to further screening at his/her own expense.
   2. Dallas College Nursing Program is responsible for designating and approving the drug screen procedures and laboratory. The student must complete drug screening within the scheduled time. All drug screens will result in an additional expense to the student. Any student who refuses drug screening will not be allowed to begin or continue in the nursing program.
2. The student is required to complete a release directing the company/agency conducting the drug screen test to send the results directly to the program director.
3. The result reported by the company/agency conducting the drug screen is final unless the student with a positive drug screen, within 10 days of learning of the positive screen, requests review of the results from the company/agency who originally administered the drug screen. Once the company/agency reports their results, these results are final and cannot be appealed.

### Use of Mind-Altering Substances

Creation Date: 06/07/22 Revision Date:

**Policy Description:** The nursing program prepares individuals for state licensure as professional nurses who are held to rigorous standards of personal and professional conduct by the Nursing Practice Act and the Board of Nursing. Therefore, the nursing program has a broader range of concern regarding the use of mind- altering substances. Affiliating clinical agencies have strict policies regarding substance use and abuse. When students are assigned to an agency for clinical experiences, students must also comply with the agency's requirements.

A mind-altering substance is a medication or beverage that affects one's ability to think clearly, make rational judgments, solve problems, and to demonstrate safe behavior.

Possession, use, or distribution of illicit drugs or alcohol while in class or on campus is prohibited.

#### Policy:

#### The student must:

1. Notify the faculty of a medical condition that may mimic signs of confusion, disorientation or other impaired mental functioning. For example, hypoglycemia that occurs with diabetes will cause these signs.
2. Report to the faculty if taking a mind-altering prescription or non-prescription. Medications that may impair thinking and reasoning include antihistamines or narcotic analgesics, among others.
3. DC may require urine and sometimes a blood test of the student at student expense if substance abuse is suspected.
4. The student will be dismissed immediately and not allowed to return until test results are available. If a student tests positive for illegal drugs or alcohol, the student is subject to immediate disciplinary dismissal from the nursing program.
5. Options include mandatory counseling, course failure, probation, or dismissal from the program. If positive for illegal drugs or alcohol, the nursing faculty is bound by professional ethics and licensure laws to report the student to the Board of Nursing and DC Disability Services Office.

#### Consequences:

If a student is suspected of using a mind-altering drug (legal or illegal) or alcohol while on campus, the student is also subject to the college policies. If the instructor, agency staff nurses, clients, or other students suspect that a student is under the influence of a mind-altering drug (legal or illegal) or alcohol while in a clinical agency, the student is subject to the policies of that agency as well as the college. (Refer to the DC Catalog and/or DCCCD catalog for the Rules on Campus Conduct.)

### Illness, Accidents or Injury Reporting

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Students must use good judgment when illness occurs. In order to protect patients, staff, and peers, students with fever and/or symptoms of infectious disease must not report to the clinical setting. If in doubt, the student should consult with the clinical instructor prior to the start of the clinical day. The clinical instructor may dismiss a student from the clinical setting if in his/her judgment the student poses a risk of infecting others.

When a student experiences a serious illness, injury, or a pregnancy which may hinder his/her ability to perform in the clinical setting, the nursing program reserves the right to require a physician's statement authorizing that the student can safely continue to give patient care to required competency levels. Each case will be considered on an individual basis. Specific release guidelines may be required in the physician's statement for situations involving back injury, surgery, communicable diseases, etc. Students must notify their instructor immediately.

#### Policy:

All clinical facilities by contractual agreement must provide access to acute emergency care in the event of accident or injury to a student.

1. A student who is injured and requires medical attention in the clinical setting should immediately notify his/her instructor and preceptor.
2. Verbal notification to the floor’s charge nurse. Next steps will depend on the incident.
3. A written summary of the injury/accident and care rendered will be submitted by the instructor/student using the Dallas College nursing program Incident Report.

A student is responsible for all expenses charged by the clinical facility in rendering medical care. The college and the clinical facility are not responsible for any claims for expenses that result from an action of a student in the clinical setting. Students are required to have proof of personal health insurance available.

#### See also Infectious Disease Exposure Policy

### Infectious Disease Exposure, Evaluation and Follow-up

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Due to the invasive nature of nursing, students may need to be evaluated and/or blood and body fluids checked after certain illness or injury, especially if an incident has occurred in which the student may have been exposed to an infectious disease. The release of the test results may also be necessary in incident reporting.

All students and faculty will appropriately report incidents and injuries, be treated and obtain follow- up care as necessary according to Dallas College Nursing Program Infectious Disease Exposure Control Plan.

#### Policy:

#### The student will:

* 1. Notify the instructor of the incident immediately. If instructor is not available on site, report to charge nurse and telephone the instructor in a timely manner.
  2. The instructor will report the incident to the Charge Nurse and employee health nurse at the clinical facility and follow the clinical facility’s policy and procedures on exposure to infectious diseases.
  3. Receive emergency treatment and follow-up screening at the student’s expense and by his/her personal physician or health care provider. If the student does not have insurance, he/she will be referred to an appropriate facility for care.
  4. The student may be required to submit to mandatory testing to determine his/her communicable disease status; any such testing will protect the student's confidentiality to the extent possible; the test results and identifying information will be destroyed after the person exposed has been notified of the test results.
  5. With the instructor and/or the charge nurse, complete both the agency and Dallas College Incident Report.
  6. Contact personal health care provider for any additional evaluation, testing, counseling, treatment, and follow-up for exposure incident.
  7. Submit copies of occurrence forms (see appendix B) and outcome of treatment to the Nursing Program Chair at Dallas College in a timely manner.

#### The instructor will:

1. Direct student to emergency care in accordance with agency policies and procedures.
2. Notify agency and nursing program chair of occurrence.
3. Assist in completing both agency and Dallas College occurrence forms (see appendix B).
4. Review with student the college's procedures for post-exposure evaluation and testing, i.e., the student will follow up with a private healthcare provider at the student’s own expense.
5. Obtain and maintain any and all documents relating to health care services offered and/or received.

### Cardiopulmonary Resuscitation (CPR) Certification

Creation Date: 06/07/22 Revision Date:

**Policy Description:** CPR certification from the American Heart Association (AHA), Red Cross or Military approved mechanism is the only approved CPR course and must be face to face or hybrid training. Completely online courses are not accepted.

A current Basic Life Support (BLS for Healthcare Providers, CPR & AED) is required prior to beginning the nursing program and must be renewed bi-yearly prior to clinical practice.

When documentation of CPR certification is not current, the student is NOT permitted in clinical areas, resulting in failure to meet course objectives. This will necessitate an immediate withdrawal from the course and constitute a clinical failure.

#### Policy:

Bi-annual recertification is required.

1. CPR certification and recertification are completed at the student’s expense and at a time scheduled

by the student.

1. Documentation must be current and filed in the online tracking database

# Retention, Remediation Readmission and Graduation Guidelines

## Policies

### Progression

Creation Date: 06/07/22 Revision Date:

#### Policy Description: This policy provides the requirements for each student to progress each semester through their degree being conferred.

#### Policy:

#### In order to progress in the nursing program to completion, the student must:

* 1. Maintain attendance
  2. Achieve a grade of C or better in all required general education and nursing courses.
  3. Meet the requirements of each clinical agency in order to participate in clinical experience.
  4. Maintain ability to meet essential functions as outlined in the program requirements or nursing with or without reasonable accommodations including attendance.
  5. Maintain renewal of CPR at the health care provider level.
  6. Maintain current immunizations as specified by the college and/or health care facilities.
  7. Maintain Health Insurance
  8. Maintain legal requirements for licensure as specified by the Texas Board of Nursing.
  9. Maintain payment of student expenses during the program including but not limited to
     1. Tuition
     2. Books and skills lab packs
     3. Uniforms and supplies
     4. Student liability insurance
     5. Specialized exams
     6. Graduation & Board fees
     7. Jurisprudence exam

Dallas College will confer an Associate of Science Degree in Nursing on those students who have successfully fulfilled the credit requirements.

Students are advised to refer to the Dallas College Undergraduate Catalog or the web site regarding requirements for participation in Commencement activities.

### Remediation/Success Plan

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Nursing school is difficult and takes long hours of studying, homework and endurance. The path to successful achievement of RN status begins with identification and discussion of learning styles, practices and obstacles. As problems or weak areas arise, efforts to remediate are then attempted. Such activities may include but are not limited to:

1. Individual counseling and assistance as appropriate, mentoring, group help sessions or referral to the Learning Skills Center or other sources as appropriate.
2. Educational resources such as computer assisted instruction modules, tutorials, practice

The goal of the DC nursing program is passing all nursing courses, standardized exams and the successful completion of the program. Remediation may be necessary if a student does not meet required minimum standards. This policy provides a uniform statement for faculty and students regarding the remediation process, exams and additional instructional materials.

**Policy:** Students are expected to make every effort to ensure their own success and to focus on nursing school as their personal priority. Students are expected to follow through with remediation plan suggestions and complete remediation/contract requirements to ensure success.

1. Areas of weakness are identified by the student or faculty through testing, in skills lab or in clinical areas.
2. A Remediation/Success Plan is completed, signed by both parties and maintained in the student file.
3. Counseling or remediation for areas identified in the Plan is identified with time tables for completion.
4. Successive testing or observation will assess progress.

### Disciplinary Action

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Improvement of skills and behaviors necessary to nursing must be practiced. Being unaware of any problems or not taking the time to practice/correct those behaviors, impacts on the student’s clinical performance and safety. Proceeding to written counseling or program dismissal imparts the seriousness with which the instructors believe change is necessary. This policy outlines the instances in which a student may have disciplinary action taken against them and the possible actions that may be taken.

#### Policy:

Students are legally responsible for their own acts of commission or omission. Instances when disciplinary action may be taken (not inclusive list):

* 1. Academic dishonesty
  2. Abusive behavior (emotional, verbal or physical)
  3. Unprofessional Behavior
  4. Failure to follow policies outlined by Dallas College or Dallas College Nursing Program
  5. Failure to follow policies outlined by a clinical affiliate
  6. Academic failure

#### Actions

1. Be verbally counseled
2. Receive written counseling
3. Be dismissed from clinical with an unexcused absence
4. Be immediately removed from the course with a failing grade
5. Be immediately removed from the nursing program.

Anytime a student needs counseling for perceived violations of classroom, clinical or skills lab behavior, a written warning will be issued; written documentation of this encounter will be maintained in the student file. Causing harm to a patient or illegal behavior is grounds for immediate withdrawal from the Nursing program.

The action taken by the faculty, Coordinator and/or Department Chair of Nursing is contingent upon the severity of the incident(s), the number of incidents, or the type of unsafe practice.

In ALL instances of unsafe clinical practice, written counseling will be initiated by the instructor. The counseling

form(s) and recommendations will be maintained in the student’s record throughout enrollment in the program.

### Readmission

Creation Date: 06/07/22 Revision Date:

**Policy Description:** A student’s readmission to the Dallas College Associates Degree Nursing Program is a privilege, not an entitlement.

**Policy:** A student may be approved for one readmission to the DC Nursing Program. Students who have previously been in the nursing program, but whose studies are interrupted, may reapply to the program. The Nursing Admission Committee consists of the DC Nursing faculty in collaboration with the campus Department Chair of Nursing. Readmission is not guaranteed and is contingent upon the following:

* Student's past academic performance in the program
* Student’s past professional behaviors in the program
* Student’s attendance history
* Reason(s) for interruption of the student's progress
* Judgment of the nursing faculty as to how well the student can benefit from readmission
* Meeting the minimum requirements that may have changed since prior admission
* Available vacancy

Those approved for readmission will be ranked after the completion of each semester for available spaces according to the following priority order. The Admission Committee will use this information to recommend for approval or denial the student’s readmission into the program. If the student is not enrolled in nursing courses for a year or more, the student is not eligible for readmission, but is allowed to reapply as a new student to the nursing program. It is highly recommended that he/she work at least part time as a health care provider to maintain some nursing skills.

* First priority: students who withdraw from an DC nursing course for personal or health reasons and are in good academic standing (passing didactic (lecture), skills and clinical). This includes, but is not limited to family crisis, pregnancy, illness, or financial difficulties.
* Second priority: students who withdraw prior to the drop date or fail an DC nursing didactic (lecture) course or support course for academic reasons.
* Third priority, students who withdraw from an DC clinical or skills lab course for poor performance, specific problems, or who failed the course.

Process for Readmission:

To be considered for readmission to the nursing program the student must submit all documents by May 25 for the Fall and December 20 for the Spring semester. The request should contain:

* A letter of intent to the Chair of Admission Committee. This letter should include the following:
  + Date and signature
  + Preferred semester of reentry
  + Dallas College Identification number
  + Current phone number(s)
  + Reasons for seeking readmission that includes an explanation of any extenuating circumstances related to previous dismissal or withdrawal
* Applicant’s plan for correcting past problems or behaviors
* Submit a copy of Advising Report
* Submit a copy of Exit Form

#### Additional Information

There are no application or reapplication fees.

A drug screen, criminal history and physical and (mental examination if applicable) must be repeated prior to readmission if a nursing student has been out of school for a semester or more. Students must have a negative drug screen, negative criminal history and a physical and (mental exam if applicable) signed by a MD, PA or NP that indicates that the student is physically and mentally fit to attend nursing school.

The Admissions Committee will convene after the end of each semester to review and recommend students for readmission. The Department Chair of Nursing will notify students in writing of approval or denial or readmission.

Students who are readmitted are accountable for the degree requirements in force at the time of readmission. A student will be admitted under the current College Catalog and the readmission criteria for the School of Nursing.

Readmission can be denied due to, but not limited to, any of the following circumstances:

* Above outlined criteria not met
* Lack of class space
* Refusal by clinical agencies to accept the student for clinical experiences;
* Too much time having elapsed since the student enrollment in a nursing course.

#### Internal Transfers

If there are no vacancies at the applicant’s current campus, a transfer to another campus can be considered

using the following process:

* Transferring campus will request availability from other campuses at end of semester
* Recommendation of Admission Committee to receiving campus
* Approval from receiving campus Admission Committee

#### External Transfers

Currently, we do not accept external transfer students from other nursing programs. Students may apply as a new student and if previously in a nursing program, a letter of good academic standing must be requested from the previous Dean/Chair. The letter must be sent from the previous Dean/Chair directly to the DC Nursing Dean/Chair.

#### First Semester Students

First semester students who wish to be readmitted to the Dallas College Nursing Program will apply for admission to the nursing program as a new first semester student with the general application pool.

### Voluntary withdrawal or Dismissal from the Program

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Achieving satisfactory scores is the student’s responsibility. The high standards and physical demands of the nursing profession make meeting academic and/or non-academic criteria, including behavioral, attitudinal, ethical, and/or clinical standards, mandatory.

A student may withdraw or be dismissed from the program for class or clinical failures, personal reasons, or serious infraction.

#### Policy:

1. Students who present with physical or emotional health problems that interfere with progress or the ability to complete required activities and which do not respond to appropriate treatment and/or counseling within a reasonable period of time may be dismissed from the program.
2. Students will also be dismissed if they demonstrate unprofessional or unsafe behavior.
3. Dismissal may occur at any point in any course in the program and may involve individual faculty members or the entire faculty.

A student who withdraws from any course required in the nursing curriculum or is dismissed for academic, skills or clinical failure is withdrawing from the program. The must student completes an exit interview and meet with the appropriate faculty member(s).

Upon withdrawal, all related concurrent courses must be dropped. It is the student’s responsibility to follow through with the registrar by the appropriate drop dates and to reapply in order to be readmitted. Faculty will notify the Nursing Department Chair of all withdrawals. The decision to dismiss a student from the nursing program will be up to the Nursing Department Chair with input from the faculty/Course Coordinator.

### Grade Appeal

Creation Date: 06/07/22 Revision Date:

**Policy Description:** This policy outlines the process for a student to follow when there is a grade dispute.

#### Policy:

1. Make an appointment immediately with your instructor to discuss your performance and the grade you received.
2. If the student is not satisfied with the response from the instructor, then the student must submit their complaint/appeal formally in writing to the instructor. The written statement must include the nature of the complaint/appeal, giving specific details and the outcome sought by the student. If you are still dissatisfied, you may request an appointment with the Nursing Department Chair.
3. Students may also discuss the situation with the Dallas College Faculty, especially the nursing coordinators, but this does not take the place of formal appeals via the chain of command as listed above.
4. In addition, the Academic Complaints and Grievances process for Dallas College can be utilized. <https://www.dallascollege.edu/contact/pages/complaint.aspx>

### Grievance

Creation Date: 06/07/22 Revision Date:

**Policy Description:** Student success is very important in the Nursing program. Instructors try very hard to be fair and impartial in dealing with each student. However, sometimes a student may feel that they have not been accurately heard. In this situation the Grievance Process exists.

If a student feels they have been treated unfairly in academic matters, the appeal process is available. This process expires one semester after the date of the problem.

**Policy:** If a student has a complaint or feels unfairly treated, the chain of command is to be followed:

1. The first contact with the instructor involved must be made immediately but no later than 5 days after the problem or incident occurred. The faculty will communicate their decision within 7 days of appointment.
2. If there is no resolution, the student must contact the Nursing Department Chair for an appointment within 5 days and discuss the problem. The Nursing Department Chair will communicate their decision within 7 days of appointment.
3. If it is not resolved at this level, an appeal must be presented in writing to the Dean of Nursing at DC within 5 days and discuss the problem. The Dean of Nursing will communicate their decision within 7 days of appointment.
4. If this does not resolve the problem, the student must appeal in writing to the Dallas College Health Sciences Vice-Provost, whose decision is final.
5. If you have concerns or complaints about programs and services at Dallas College, please use the contact information and forms below. Under federal law, Dallas College must publish this information for use by students and other people who want to share a concern or complaint [Dallas](https://www.dallascollege.edu/contact/pages/complaint.aspx%23academic-complaints) [College Grievance Process](https://www.dallascollege.edu/contact/pages/complaint.aspx%23academic-complaints)

# Forms

## Release of Information Photo and Voice Release Incident Report

Consent for testing HIPAA Form

Covid Document Grade Appeal Grievance