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Revised 01/03/18
WSCC DNE 2017-2018 Nursing Handbook
Introduction

The purpose of this handbook is to acquaint you with the Wallace State Community College (WSCC) Department of Nursing Education (DNE). It outlines the policies, standards, and regulations by which you must abide as a nursing student. It defines your rights and responsibilities as a student as well as those of the faculty and staff.

The student handbook supports the policies of WSCC as stated in the college catalog in addition to informing students of policies specific to the DNE. Students in the DNE are responsible for observing all rules and regulations as stated in this handbook.

It is the official policy of WSCC that no person shall, on the basis of race, color, handicap, sex, religion, creed, national origin, or age be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program activity or employment.

The faculty believes that students should receive consistent and equitable treatment throughout the nursing program. This handbook seeks to ensure such treatment.

Any revisions or addendums to this handbook will be publicized for students and will become effective at the time of posting.

Accrediting and Governing Agencies

The Associate Degree Nursing Program and Practical Nursing Programs at Wallace State Community College are accredited by the Accreditation Commission for Education in Nursing (ACEN):

Accreditation Commission for Education in Nursing
3343 Peachtree Road NE, Suite 850
Atlanta, Georgia 30326
www.acenursing.org
1-404-975-5000

The Associate Degree and Practical Nursing Programs at Wallace State Community College are approved by the Alabama Board of Nursing (ABN):

Alabama Board of Nursing
P. O. Box 303900
Montgomery, AL 36130-3900
www.abn.alabama.gov
1-800-656-5318
WSCC Department of Nursing Education Mission Statement

The mission of the Wallace State Department of Nursing is to promote standards of excellence in nursing education through student-centered learning while emphasizing integrity, compassion, resourcefulness, and diversity. The Department of Nursing Education will inspire a culture of possibility and produce graduates who are dedicated and exceptional healthcare providers committed to transforming the lives of patients, families, and the community.

WSCC Department of Nursing Education Vision Statement

The Wallace State Community College Department of Nursing Education will be an internationally recognized center of excellence in nursing education. The Wallace State Community College Department of Nursing Education will produce the next generation of nurses empowered and focused on innovative responses to address the challenges of a rapidly changing and culturally diverse healthcare environment.
Alabama Community College System  
Nursing Program Mission/Philosophy  
2016

**Mission** - The mission of the nursing programs of the Alabama Community College System is to prepare graduates to practice safe, competent, patient-centered care in an increasingly complex and rapidly changing health care system. We seek to provide full and equal access to opportunities for educational success to meet the community needs.

**Philosophy** - We believe that nursing is a dynamic profession, blending science with the use of evidence based practice and clinical reasoning and the art of caring and compassion to provide quality, patient-centered care.

We believe learning is an interactive process in which faculty and students share responsibility to meet program outcomes. We believe in using educational methods that are current and supportive of students in the teaching and learning environment, with the presentation of information from simple to complex.

Nursing is guided by standards of practice and standards of professional performance. Standards reflect the values and priorities of the nursing profession. Therefore, we have integrated competencies from the Quality and Safety Education for Nurses (QSEN) and National League of Nursing (NLN) into our philosophy as part of our core values.

**Competencies** – NLN competencies for nursing are central to the conceptual framework. The related QSEN competencies for graduate nurses define the knowledge, skills and attitudes that the graduate nurse should possess to continuously improve the quality and safety of the healthcare systems within which they work. (QSEN)

**Human Flourishing:** Advocate for patients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings. (NLN def)

  **Patient-Centered Care** – Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs. (QSEN def)

**Nursing Judgment** - Make judgments in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and that promote the health of patient within the family and community context. (NLN def)

  **Safety** – Minimizes risk of harm to patients and providers through both system effectiveness and individual performance. (QSEN def)

  **Informatics** – Use information and technology to communicate, manage knowledge, mitigate error, and support decision making. (QSEN def)

**Professional Identity** - Implement one’s role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context. (NLN def)

  **Teamwork and Collaboration** – Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care. (QSEN def)

**Spirit of Inquiry** - Examine the evidence that underlies clinical nursing practice to challenge the status quo, questions underlying assumptions, and offer new insights to improve the quality of care for patients, families, and communities. (NLN def)

  **Evidence-based practice** – Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care. (QSEN def)

  **Quality Improvement** – Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems. (QSEN def)

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WSCC DNE 2017-2018 Nursing Handbook
The conceptual framework derived from the philosophy forms a basis for the organization and structure of the nursing curriculum. This framework serves as a guide for nursing instruction in the attainment of student learning outcomes.

The framework consists of concepts that encompass the qualities of a successful graduate nurse. NLN competencies were chosen because they specifically define the competencies of the graduate Associate Degree Nurse. QSEN competencies reflect current contemporary practice. Concepts interlace NLN and QSEN competencies to achieve the goal of providing graduate nurses with the tools needed to provide holistic care to an ever changing health care delivery system. Each competency includes knowledge, skills and attitudes to serve as a basis for consistent performance expectations across academic and practice settings.
ACCS Concept Based Curriculum
End-of-Program Student Learning Outcomes/Graduate Competencies

Practical Nursing End-of-Program Student Learning Outcomes/Graduate Competencies

Human Flourishing
Promote the human dignity, integrity, self-determination, and personal growth of patients, oneself, and members of the health care team (NLN, 2010).

Patient-Centered Care
Advocate for the patient and family in the provision of compassionate and coordinated care to support the health, safety, and well-being of patients and families (QSEN, 2012).

Nursing Judgement
Provide a rationale for judgments used in the provision of safe, quality care and for decisions that promote the health of patients within a family context (NLN, 2010).

Informatics
Incorporate information and technology within own scope of practice to support safe processes of care (QSEN, 2012).

Safety
Demonstrate the effective use of strategies to reduce risk of harm to self or others (QSEN, 2012).

Professional identity
Demonstrate awareness of good practice, boundaries of practice, and professional identity formation including knowledge and attitudes derived from self-understanding and empathy, ethical questions and choices that are gleaned from a situation, awareness of patient needs, and other contextual knowing (NLN, 2014).

Teamwork and Collaboration
Function competently within own scope of practice as a member of the health care team (QSEN, 2012).

Spirit of Inquiry
By collaborating with health care team members, utilize evidence, tradition, and patient preferences in predictable patient care situations to promote optimal health status (NLN, 2014).

Quality Improvement
Utilize various sources of information to review outcomes of care identifying potential areas for improvement of the quality and safety of care (QSEN, 2012).

Evidence-Based Practice
Implement evidence-based practice in the provision of individualized health care (QSEN, 2012).
ACCS Concept Based Curriculum
End-of-Program Student Learning Outcomes/Graduate Competencies
(continued)

**Human Flourishing**
Advocate for patients and families in ways that promote their self-determination, integrity and ongoing growth as human beings (NLN, 2010).

**Patient-Centered Care**
Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs (QSEN, 2012).

**Nursing Judgement**
Make judgments in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and promote the health of patients within a family and community context (NLN, 2010).

**Informatics**
Use information and technology to communicate, manage knowledge, mitigate error, and support decision making (QSEN, 2012).

**Safety**
Minimize risk of harm to patients and providers through both system effectiveness and individual performance (QSEN, 2012).

**Professional Identity**
Implement one’s role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context (NLN, 2010).

**Teamwork and Collaboration**
Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care (QSEN, 2012).

**Spirit of Inquiry**
Examine the evidence that underlies clinical nursing practice to challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for patients, families and communities (NLN, 2010).

**Quality Improvement**
Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems (QSEN, 2012).

**Evidence-Based Practice**
Integrate best evidence-based practice with clinical expertise, patient/family preferences, and values for delivery of optimal health care (QSEN, 2012).
Alabama Community College System - Nursing Program Outcomes

1. Performance on Licensure Exam

   The most recent annual licensure examination pass rate will be at least 80% for all first-time test-takers during the same 12-month period.

2. Program Completion

   Each program will determine program completion rate based on characteristics of the program’s student demographics which will be 50% for WSCC. (Previously the outcome stated that at least 60% of students admitted would graduate within 150% of the time of the stated program length beginning with the first required nursing course as delineated below:

   AAS in Nursing – seven semesters (eight semesters for part-time tract)
   PN Certificate – four semesters (five semesters for part-time tract)

3. Job Placement

   At least 80% of the graduates seeking employment will be employed within one-year after graduation in a position for which the program prepared them.
<table>
<thead>
<tr>
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<th>Contact</th>
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**Students exempt from enrolling in ORI 110 are transfer students who have completed 12 transferable semester hours, personal enrichment students. Students who enrolled prior to Fall 2004 are exempt from ORI 110. All students in the divisions are expected to register for ORI 110 during their first semester on campus.**

**Students are permitted to split NUR 114 and NUR 115 over two semesters.**

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<td><strong>4</strong></td>
<td><strong>10</strong></td>
<td><strong>18</strong></td>
</tr>
</tbody>
</table>

**Applicant must also meet the following admission criteria:**
- Be unconditionally admitted to the college.
- Student must be in good standing with the college.
- Receipt of complete nursing application by posted deadline.
- Minimum of 18 ACT composite score National or Residual.
- Maintain a grade of "C" or better in ALL general education and nursing courses. A minimum grade of 75 constitutes a "C" in nursing courses.
- A minimum of 2.0 GPA Cumulative at current native institution or cumulative 2.0 in institution from which student is transferring to be eligible to apply for a nursing program.
- A minimum of 2.5 GPA for nursing required academic core courses.
- A minimum of 2.5 GPA cumulative high school GPA for students without prior college courses (GED will be used if applicable).
- Meet the essential functions for nursing.
- Eligible for ENG 101 and MTH 100.
Alabama Board of Nursing (ABN) Requirements

The Alabama Nurse Practice Act is the legislation which governs the practice of nursing. There are certain ethical standards which cannot be breached by either students or practicing nurses. The following excerpt is from the Nurse Practice Act and provides the foundation for certain professional objectives to which students and practitioners of nursing are held accountable.

The nursing student shall comply with legal, moral, and legislative standards which determine acceptable behavior of the nurse. Failure to comply may be cause for permanent dismissal from the program in nursing or denial of license to practice as a nurse, in accordance with the Alabama Law Regulating Practice of Registered and Practical Nursing as stated below:

The Alabama Board of Nursing may deem any of the following to be grounds for denial or revocation of a license to practice nursing: (a) False representation of facts on the application for licensure (b) the use of drugs or substances to the extent that the nurse is in need of medical/psychiatric care (c) is guilty of unprofessional conduct which may defraud, deceive or injure the public, including but not limited to performing acts beyond the nursing scope of practice, misappropriating drugs, supplies, or equipment of the patient or employer, practicing under the influence of narcotic drugs, alcohol or other judgment impairing substances, gross negligence in nursing practice, willful harassment or abandonment of a patient, having a nursing license denied, revoked, suspended or put on probation from another state or having been court-marshaled by any branch of the United States Military, or having been convicted of a federal or state law relating to controlled substances.

Adapted from the Alabama Board of Nursing Administrative Code, 2010.

Students must be aware of the regulatory functions of the Alabama Board of Nursing (ABN). Graduation from an approved school of nursing such as WSCC allows the student to apply to write the licensure examination (NCLEX-RN/PN). Approval to write the examination is conferred or denied by the ABN after review of the graduate’s application. This application includes the following questions:

1. Have you ever been arrested for, been charged with, been convicted of, entered a plea of guilty to, entered a plea of nolo contendere or no contest for, received deferred prosecution or adjudication for, had judgment withheld for, received pretrial diversion for, or pleaded not guilty by reason of insanity or mental defect to any crime other than a minor traffic violation in any state, territory, or country? A crime related to driving while impaired or while under the influence of any substance is not a “minor traffic violation.”

2. In the past five years, have you abused alcohol, drugs (whether legal or illegal, prescribed or unauthorized), and/or other chemical substances or received treatment or been recommended for treatment for dependency to alcohol, drugs (whether legal or illegal, prescribed or unauthorized), and/or other chemical substances?

3. Have you ever been arrested or convicted for driving under the influence of drugs/alcohol?

4. In the past five years, have you had, or do you now have, a physical or mental health problem that may impair your ability to provide safe nursing care?

5. Has the licensing authority of any state, territory, or country denied, revoked, suspended, reprimanded, fined, accepted your surrender of, restricted, limited, placed on probation, or in any other way disciplined your nursing and/or any other occupational license, registration, certification, or approval?

6. Is the Board of Nursing or other licensing authority of any state, territory, or country, including but not limited to the Alabama Board of Nursing, currently investigating you?

7. Is disciplinary action pending against you with the Board of Nursing or other licensing authority of any state, territory, or country, including but not limited to the Alabama Board of Nursing?

8. Have you ever been placed on a state and/or federal abuse registry?

9. Has any branch of the armed services ever administratively discharged you with any characterization of service besides “Honorable” and/or court-martialed you?
A “yes” answer will not necessarily prevent you from eligibility but will require submission of an explanation accompanied by certified documents.

Students are required to acknowledge to the Director of the Nursing Education Department any circumstances which will require a “YES” answer to any of the above listed questions. If the incident occurred prior to admission to the program, it must be acknowledged at the time of admission. Any additional incidents should be reported immediately but are required to be reported within 72 hours of occurrence. Failure to do so may be deemed to be a breach of academic integrity. All disclosures are held in confidence between the director and the student.

Omnibus Reconciliation Act

The Omnibus Reconciliation Act is legislation which pertains to any health care agency which receives Medicare/Medicaid funding. As part of this legislation, the Abusive Caregiver List is maintained by the State Department of Public Health in order to preserve the safety of patients in health care agencies. If your name is in the Abusive Caregiver List then you are ineligible to provide care in any of these agencies. This may severely limit your assignment as a student, which can result in an inability to meet course objectives and/or a decision by the ABN that the graduate is ineligible to write the NCLEX-RN or NCLEX-PN.

Infected Health Care Worker Act

The Infected Health Care Worker Act (Public Law 102-141) requires any health care worker infected with HIV (human immunodeficiency virus) or HBV (hepatitis) to acknowledge this status to the State Public Health Officer, or his designee.
Department of Nursing Education Requirements

Physical Examination/Immunizations

A. An annual physical examination is required for all students in the DNE. These will be uploaded and maintained by the student through his/her immunization tracker account. All documentation will be reviewed by a clinical supervisor within the DNE.

B. All students are required to submit proof of required immunizations or screening tests. These include, but may not be limited to: a two-step TB skin test (Mantoux type) is required initially unless student provides proof of a skin test within previous 12 months (if official documentation is presented, a one-step is sufficient; if TB screening is positive, a chest x-ray will be required (only 1 chest x-ray will be needed for initial admission, healthcare provider can then sign off that the student is free of infectious disease); Chicken Pox; Measles, Mumps, Rubella (MMR – requires documentation of two doses or a titer establishing immunity); Tetanus; Hepatitis Series (or waiver signed). If a student has not had a pertussis booster, it is required that they receive a TDAP. An annual flu vaccination is required in the fall or early spring.

C. Students WILL NOT BE permitted in the clinical facility without a current physical examination and proof of immunizations uploaded to the student's Immunization tracker account prior to the start of clinical.

D. In the event of, but not limited to such circumstances as pregnancy and delivery, hospitalization, prolonged illness, injury, or surgery, the student will be required to submit a release form from the approved health care provider that he/she is fit for duty prior to a return to the clinical area. Pregnant students must submit the release for clinical at the beginning of each academic semester during the pregnancy and following delivery. These releases are to be submitted into the student's Immunization tracker account and the coordinator of clinical learning needs to be notified of any release that has been submitted.

E. The DNE reserves the right to request that any student submit to reexamination by an approved health care provider if deemed appropriate. Students must immediately notify the DNE of any changes to his/her essential function status.

F. The DNE complies with the Americans with Disabilities Act as adopted March 28, 1994, as well as Public Law 102-141 (the Infected Health Care Worker Act).

Insurance

A. Students enrolled in nursing are required to have liability (malpractice) and accident insurance each semester. The insurance cost is paid with semester registration fees.

B. Students are required to have medical insurance. Most healthcare agencies require students to have medical insurance in order to participate with that agency. Student must have proof of health insurance uploaded to his/her Immunization tracker account prior to beginning any nursing course.

C. Health care facilities agree to provide emergency health care with the cost of all such care being the responsibility of the student. The required school accident insurance policy WILL NOT cover all of this expense. Students are responsible for any costs not covered by this policy.

D. Students are required to immediately notify the DNE of any changes in insurance status.

CPR

All students must provide documentation of CPR certification by uploading to his/her immunization tracker account (BLS for the Healthcare Professional from AHA or the American Red Cross) annually until the program is completed; no online certifications accepted. Appropriate documentation of certification from an acute care agency in which the student is employed is accepted. Wallace State Community College may also provide the opportunity for certification through enrollment in EMS 100. Dates and deadlines will be available at the initial nursing orientation.

Revised 01/03/18
WSCC DNE 2017-2018 Nursing Handbook
Drug Testing

All students in the nursing program are required to submit to annual, random, and/or for-cause drug testing. Drug testing is at the student’s expense (fee is attached to tuition each semester). Refusal to submit to testing as required will be considered cause for dismissal from the program. *Please refer to the full Drug Testing Policy in Addendum A.

Background Checks

A. All nursing students are required to complete a background check prior to the first semester of enrollment.
B. Result other than Clear will void nursing acceptance.
C. Students in the program are required to submit a background check update annually; must be completed on or prior to date of previous year’s background check.
D. Mobility (LPN to ADN) must submit a background check prior to enrollment in NUR 209.
E. Background checks must be done through the college approved vendor.
F. All background checks or updates are at the student’s expense.
G. Clinical agencies have the right to refuse placement of clinical students based on background check results.

Please refer to the full Background Check Policy in Addendum B.

Photo Identification

A. All students are required to have a photo identification badge to utilize clinical agencies.
B. Photo IDs will be taken on the WSCC campus.
C. The student may be responsible for the cost of the photo ID and any replacement.
D. Students may be dismissed for the day from the clinical experience and sustain a “U” (Unsatisfactory) on the clinical evaluation tool if he/she does not have the ID badge in full site while in the clinical agency.
E. Students are encouraged to wear WSCC Nursing ID badge to all classes/labs and college activities.
F. Students are required to wear WSCC Nursing ID badge to all testing locations.
G. WSCC Nursing ID badge must be returned to DNE upon graduation, non-progression, or withdrawal from the nursing program.

Standardized Testing Fees

Completion and passage of standardized exams are a requirement for progression within specified nursing courses. These exams are at the student’s expense (fee is attached with tuition payment each semester).

Sexual Harassment

A. No form of sexual harassment will be tolerated.
B. Sexual harassment detracts from and interferes with the maintenance and enhancement of a favorable learning environment. As a result, sexual harassment unreasonably interferes with the victim’s educational process by producing an intimidating, hostile or offensive educational environment.
C. Students are encouraged to discuss any concerns about sexual harassment with the faculty.
D. All claims of possible sexual harassment will be investigated as required by law.
E. Appropriate corrective action will be taken in accordance with Wallace State Community College and/or agency policy.

Learning Environment

The College assumes that its students are adults with mature behaviors and conduct. Behaviors and/or attire which interfere with the learning environment for other students will not be tolerated. This includes but is not limited to talking during class presentations, lecture, and/or videos to the extent that it interferes with others’ ability to hear the content; habitual tardiness or leaving class during class time; or other behaviors which detract from, disrupt, or obstruct learning. Offenders will be counseled and may be asked to leave class or report to the Vice-President of Students if behaviors persist. Students who arrive after the beginning of class may be required to wait for admittance until the instructor calls for a break in class presentation.
Wallace State Community College policy states: “Cell phones and other electronic communication devices are prohibited during testing. An emergency situation should be approved by the instructor before testing begins. Violators will be subject to disciplinary action.” Any electronic device brought into the testing environment may result in dismissal from the exam immediately and forfeiture of the grade.

Additionally, any form of violence whether verbal and/or physical, will not be tolerated. Campus security will be notified immediately and violator(s) will be removed from premises. Violators may be subject to legal action as well as suspension/expulsion from Wallace State according to campus policy.

**Professional Appearance**

A. The Wallace State Community College official school uniform consists of:
   1. Royal blue scrub uniforms and a white lab coat.
   2. Students must purchase uniforms through the official WSCC vendor.
   3. Any shirt worn under the scrubs must be white and without logos.
   4. School patch must be on left sleeve of lab coat and on the upper left side of scrub top.
   5. Plain white, brown, or black leather duty shoes are required (no mesh, no clogs, clog-like shoes, open-toed or shoes without a back). Sock color must coordinate with shoe color.
   6. Photo ID name badge (worn on front of scrub top) with picture visible.
   7. Items required for every clinical: Stethoscope, black ink pen, pen light, bandage scissors, calculator, and wrist watch that records time in seconds — no Internet watches allowed.

B. The only exception to the approved school uniform is for pregnancy. The student must have the maternity uniform approved by the DNE prior to wearing it during clinical experiences. WSCC patch must be worn on left chest of maternity uniform.

C. Students will not be permitted in the clinical area unless they are in complete uniform. Any exceptions are at the discretion of the instructor, i.e. special experiences, psych clinical, at agency to obtain assignment.

D. School uniforms are worn only when functioning in the role of a WSCC student nurse. Uniforms will be worn when on campus for nursing classes or exams as well as lab, simulation and clinical experiences. School uniforms may NOT be worn for any employment situation or after class / clinical hours. For classroom only, the uniform may be modified to include an approved WSCC Nursing t-shirt instead of scrub top and mesh shoes if desired.

E. Personal Appearance for Class and Clinical Attendance (All Students)
   1. Good personal hygiene is required.
   2. Nails must be short and clean.
   3. Perfumes, colognes, perfumed body lotions, or after shave may NOT be worn while in uniform/scrubs.
   4. Uniform/scrubs must be neat, clean, in good repair without stains or wrinkles. Shoes and shoe strings must also be clean.
   5. When permitted to wear street clothes, students are expected to utilize good taste. Clothing such as T-shirts with logos, jeans, tight, low-cut, or revealing clothing, athletic shoes or high heels are all considered inappropriate and unacceptable in the professional role. When in doubt, contact the clinical instructor prior to attendance.
   6. Jewelry is restricted while in uniform/scrubs to a watch with a second hand, wedding ring, and one small pair of stud earrings (one in each ear only). No decorative necklaces, bracelets, program insignia (i.e., EMT or LPN) or other pins are allowed to be worn while representing the school. Smart/computer watches are not permitted. Medic Alert jewelry may be worn if necessary.
   7. Absolutely no pierced objects, including but not limited to tongue rings, nose rings, or eyebrow rings, are allowed while on clinical duty as a WSCC student nurse, either in uniform/scrubs or private clothes.
   8. Hair is to be neat, clean and worn in a simple off-the-collar style (back from the face and not obscuring vision). No extreme hair color; only naturally occurring hair color.
   9. Use of any tobacco products during clinical is prohibited on the agency campus including but not limited to the smoking area provided for staff. Electronic cigarettes are not permitted.
   10. Visible tattoos must be covered with Band-Aids, makeup, or a long-sleeved white tee shirt without logos under the uniform top.
   11. Chewing gum is prohibited during clinical, labs, simulation, and testing.
12. Only clear nail polish is allowed unless prohibited by agency policy. Use of any type of artificial nails is strictly prohibited. Clinical students may only use hand lotion that is provided by the agency.

13. Conservative make-up may be worn.

14. No hair ribbons, bows or ornaments are permitted. Long hair must be worn up or tied back away from the face.

15. Males must wear white shirt under scrubs. White is the only color permitted to wear with scrubs. A plain white undershirt without logos or decoration can be worn under the uniform/scrub top.

16. Neatly trimmed and groomed mustache or beard is permitted and must be short enough for a face mask to fit face.
Clinical Electronic Device Policy

Students may bring an electronic device (phone, tablet, laptop) to clinical. Devices should be kept on silent, do not disturb, airplane mode, or turned off while in patient care areas, as well as the cafeteria. Students may use their devices in the designated areas to document in DocuCare, look up drugs, disease processes, etc. as needed for taking care of patients during the clinical day. Students must maintain HIPAA regulations at all times.

Devices are only to be used in designated non-patient care areas (such as the conference room). Students who have a device out in other areas will receive a “U” and be sent home from clinical.

The device is not intended for personal use during the clinical day. Students found texting, accessing social media, making phone calls, or other activities not related to patient care will receive a “U” and be sent home from clinical. Additionally, if the device rings/vibrates during the clinical day, the student will receive a “U” and be sent home from clinical.

Wallace State Community College Department of Nursing Education faculty and staff are not responsible for lost/stolen devices.
Admission, Progression, and Reinstatement Policies

Admission

Students are admitted to the nursing program in accordance with college admission requirements. LPNs may be eligible for admission in advanced standing to the Associate Degree Nursing Mobility program according to criteria published in the college catalog. Please note: requirements are subject to change without notice.

Progression

In order to progress in the Associate Degree Nursing Program, the student is expected to meet the following requirements:

1. Maintain a grade of "C" or better in ALL general education and nursing courses and an "S" (Satisfactory) in the clinical component, when appropriate. A minimum grade of 75 constitutes a "C" in nursing courses.
2. Students with a grade of less than "C" and/or an unsatisfactory clinical evaluation in any nursing course will be required to repeat the entire course before continuing in the program. Repeat must occur within one year of failure or withdrawal.
3. Students with a grade of "D" or "F" in a required academic course may be allowed to progress provided the GPA on nursing required courses, including academics, does not fall below 2.0. Should the GPA fall below 2.0, the student will be required to step out of the nursing curriculum until the GPA is at least 2.0 then reapply for admission. The academic course must be repeated and passed successfully in either case.
4. Demonstrate competence in pharmacology theory, calculating drugs, and dosages.
5. Complete required national achievement exams throughout the program of study. Exams are at the student's expense.
6. Maintain legal, moral, and legislative standards which determine acceptable behaviors of a registered nurse.
7. The nursing faculty as a whole reserves the right to determine behaviors that are inappropriate or that may cause harm to a client. The Department of Nursing Education reserves the right to permanently dismiss from the program any student who is refused the use of the facilities by a clinical agency.
8. Maintain major medical health insurance for the duration of enrollment in the program. Documentation of current health insurance must be uploaded to the student Immunization tracker account before a student can begin any clinical rotation.
9. Upload a completed DNE physical exam to the student Immunization tracker account no later than the designated date of the second year of study.

The faculty reserves the right to review a student’s progress at any time. Because of the nature of nursing, there are certain behaviors, interpersonal relationships, and affective standards that must be maintained. Failure of a student to meet these standards is cause for termination from the Nursing program.

Program Dismissal

Nursing non-progression or failure is defined as failure of one or more nursing courses in a single semester or withdrawal for any reason from one or more nursing courses in a single semester. Two instances of non-progression will result in dismissal from the program. A student who has been dismissed from the nursing program is eligible to apply for admission as a new student to any nursing program within the Alabama Community College System, provided:

1. The student meets current entry requirements;
2. The student was not dismissed from the previous program for disciplinary reasons or for unsafe/unsatisfactory client care in the clinical area.
Admission, Progression, and Reinstatement Policies (Continued)

Reinstatement to Program

If a student withdraws or makes a “D” or an “F” in a nursing course, the student cannot progress in the nursing course sequence until the course is repeated successfully. Course repetition will be based on instructor availability and program resources. In order to re-enter the nursing program, the student must:
1. Have a 2.0 GPA on nursing required coursework including academics.
2. Maintain ability to meet essential functions for nursing with or without reasonable accommodations.
3. Maintain current CPR at the health care provider level.

Students whose progression through the nursing program is interrupted and who desire to re-enter the program must notify the DNE of the desire to re-enter. In order to be reinstated, a student must:
1. Apply for reinstatement to the college if not currently enrolled;
2. Apply for reinstatement to the nursing program according to published application deadlines (April 15, July 15, or November 15). Students are only eligible for reinstatement within one year from the term of withdrawal or failure.
3. Demonstrate competency in previous nursing courses successfully completed including but not limited to dosage calculation proficiency. Failure to achieve a 90% on the math proficiency exam will result in denial of reinstatement.
4. Adhere to nursing curriculum or program policies and procedures effective at the point of reinstatement.
5. Submit updated physical form and CPR validation by deadline.
6. Submit a new background check. (The only exception is if a background check has been submitted and returned as clear within 30 days.)

Reinstatement to the nursing program is not guaranteed. Reinstatement may be denied due to, but not limited to, any of the following circumstances:
1. Space unavailability in a course in which the student wishes to be reinstated. (Students in regular progression have enrollment priorities for clinical sites.)
2. Grade point average is less than 2.0 on nursing required courses including academics.
3. Refusal by clinical agencies to accept the student for clinical experiences.
4. Failure to demonstrate competency in all previous nursing courses successfully completed.
5. Over twelve months have elapsed since the student was enrolled in a nursing course.
6. Student has been dismissed from the program for disciplinary reasons or unsafe clinical care.
7. Failure to achieve a clear drug screen.
8. Failure to achieve a clear background screen.
9. Failure to benchmark on math validation and/or skills validation exam.
10. Failure to submit required physical exam and immunization documentation.

Nursing Progression Policy Effective for Students Admitted Fall Semester, 2013

The Alabama Community College System (ACCS) adopted the following changes starting with the fall semester 2013 admission cycle. In order to progress in the nursing program the following policy should be followed:
1. A total of two unsuccessful attempts in two separate semesters (D, F, or W) in the nursing program will result in dismissal from the program.
2. A student may be reinstated to the nursing program one time only. The reinstatement is not guaranteed due to limitations in clinical spaces. All nursing program admission standards must be met.
3. A student must have a GPA of 2.0 on nursing required courses including academics for reinstatement.
4. If the student has documented extenuating circumstance that should be considered related to a withdrawal or failure, then this student may request a hearing before the appropriate college committee for a decision on repeating a course or readmission to the program.

Reinstatement
Students who have a withdrawal or failure in a nursing course and are eligible to return to that course will be considered for reinstatement to the program.

Readmission
Students not eligible for program reinstatement may apply for program admission as a new student. If accepted as a new student, the student must take or retake all nursing program courses.
Health Division Professional Code of Conduct and Clinical Policies

The following policies are applicable to all Health Division programs at Wallace State Community College. Any breach of these policies may lead to failure of the course in which the student is registered; dismissal from the program; dismissal and/or expulsion from the Health Division or college based on the severity of the breach.

1. All Health Division students are held to the professional, legal, and ethical parameters of the Health Information Privacy and Accountability Act (HIPAA). Breaches of confidentiality of patient information of any kind will not be tolerated (conversation with unauthorized others about a patient, photocopy of chart or protected documentation, taking pictures with a camera of any kind, sharing information with another clinical facility).

2. Falsification of any documentation by a Health Division student (i.e. application, submission of transcripts, drug testing results, physical exam findings, background check, CPR certification, other) will not be tolerated.

3. Falsification of any patient documentation by a Health Division student (ex: charts, flow sheets, medication administration records, others) will not be tolerated.

4. Thievery from the patient or family, the agency, professional colleagues, fellow students by a Health Division student will not be tolerated.

5. Students who are deemed clinically incompetent will be removed from the clinical area. Repercussions are dependent on review of the allegations, demonstration by the student of the skills at the expected level of performance, and evaluation of the student’s progress in the program. Repercussions are at the discretion of the reviewer(s).

6. All Health Division students are expected to behave professionally and ethically. Disruptive behavior or language toward patients/family, professional staff or other students (profanity, sexually explicit language or innuendoes, threats to physical or mental safety) will not be condoned.

7. Students must be aware that the clinical agency has the contractual right to prohibit a Health Division student from being placed at the agency. If the program is unable to place the student for completion of course or program requirements, the student will be required to withdraw (or will be administratively withdrawn) from the course/program.

8. Students are required to reveal any personal issues which would prohibit their placement at a particular agency. These issues may include but are not limited to previous dismissal from employment at the specific agency, legal issues involving the student or his/her significant others which are outstanding against an agency or practitioner of the agency, or monetary issues involving the agency (garnishments, law suits, etc.).

9. Students are prohibited from attending clinical unless or until medical clearance required by the program has been submitted. This includes but may not be limited to physical exam, drug testing, and validation of immunity by acceptable documentation of immunization or titer levels, and hepatitis B immunization or waiver. Clinical agencies have the right to deny access to the facility based on refusal of immunization by the student.

10. All Health Division students must submit to initial and continuing drug testing at specified intervals, for cause, or at random. Should the student refuse to abide by agency/WSCC policy he/she will be administratively withdrawn from the course and may be denied readmission to the same or any other Health Division program.
11. All Health Division students must have submitted the initial background and yearly (if required) background check. Should a legal incident occur in which the student is involved, the student has 48 hours to disclose the incident to the program director, course coordinator or Dean of Health Sciences in the absence of the instructor or program director.

12. All Health Division students must be CPR certified at the Health Provider level and must maintain such certification while enrolled in the program. Failure to do so may prohibit the student from completing the clinical assignment and therefore failure in the course.

13. All Health Division students must attend assigned clinical agency orientation appropriate to the clinical assignment. Failure to do so may prohibit the student from completing the clinical assignment and therefore failure in the course.

14. All students are required to have a photo identification badge to utilize clinical agencies. Photo IDs will be scheduled by the faculty during the first program course. The student may be responsible for the cost of the photo ID and any replacement. Students may be dismissed for the day from the clinical experience if he/she does not have the ID badge in full sight while in the clinical agency.

15. Wearing the WSCC program uniform or badge is prohibited except for assigned clinical experiences in assigned clinical agencies. Breaches such as wearing the uniform for employment or any nefarious, illegal or unethical purpose will not be condoned.

16. Students are assigned to clinical agencies by the program director, clinical coordinator or designee. Students are not permitted to make individual contacts with agencies for clinical arrangements unless expressly directed to do so by the program director, et. al.

17. In the event of, but not limited to, such circumstances as pregnancy and delivery, hospitalization, prolonged illness or injury or surgery the student will be required to submit verification from the approved health care provider that he/she is fit for duty prior to a return to the clinical area. Pregnant students must submit this verification at the beginning of each academic semester during the pregnancy and following delivery. Failure to do so may result in withdrawal from the clinical area.

18. The program director reserves the right to request that any student submit to reexamination by an approved health care provider if deemed appropriate.

19. Health care agencies may require students to have medical insurance in order to affiliate with the agency. Students must submit proof of health insurance prior to beginning clinical rotations. Students are required to notify the program or clinical coordinator of any changes in insurance status. Students who do not have the appropriate insurance coverage will be required to withdraw or be administratively withdrawn from the course.

20. Health care facilities agree to provide emergency health care with the cost of all such care being the responsibility of the student. The required school accident insurance policy WILL NOT cover all of this expense. Students are responsible for any costs not covered by this policy.

21. No alcoholic beverages or drugs which may cause cognitive impairment will be consumed during clinical rotations or up to 12 hours prior to rotations. Any evidence of alcohol or drug use while on rotations or evidence of impairment due to drugs/alcohol prior to starting the clinical assignment will result in sending the student for a drug test for cause and if positive, immediate suspension from the rotation site. The impaired student will only be allowed to leave with a designated driver.
Health Division Professional Code of Conduct and Clinical Policies (Continued)

21. The student will not communicate unprofessionally (argue, solicit professional advice for an illness or disability, other) with any physician, nurse, fellow student, staff member, or preceptor during rotations.

22. The ultimate responsibility for patient care lies with the staff of the rotation site. If a conflict arises between the student and anyone at the rotation site the student will immediately retire from the conflict and notify the Clinical Coordinator or Clinical Instructor as soon as possible or no later than at the completion of the shift.

23. Students will practice universal precautions during all patient care and handling of patient care equipment regardless of the situation.

24. Cell phones and any other electronic devices must not be utilized or visible while in the clinical facility. The clinical supervisor (instructor, preceptor) or the clinical contact identified by the program director is the emergency contact for the student’s family or significant other. Breach of this policy will result in the student being dismissed from the site for the rest of the clinical day and the student will be considered absent under the program absence policy.

25. Students should be cognizant of potential danger associated with clinical sites in urban or remote locations and exercise caution when transitioning at the facility.

Revised June 6, 2014
Health Science Division Academic Integrity Policy

This Health Science Division Academic Integrity Policy is supplementary to the “Student Code of Conduct.” All Health Science Division students are expected to abide by the Honor Code. Behavior which compromises the integrity of the assignment or examination process for oneself or others is unacceptable. Academic dishonesty is a form of misconduct that is subject to disciplinary action under the Student Code of Conduct.

This behavior will result in a failing grade for the course in which the student is enrolled and ultimately the inability to progress in the program of study. Students who have been found guilty of academic misconduct will not be allowed to reapply to the program.

Behavior which is considered to compromise academic integrity includes but is not limited to:

Prior to examinations
- Seeking and/or obtaining access to examination materials prior to test administration.
- Unauthorized reproduction and/or dissemination of test materials.

During examinations
- Sharing information about any of the test materials including sharing of material with use of electronic devices, computers, cell phones, etc.
- Leaving test area without authorization.
- Possessing and/or using cell phones or other electronic devices which include I-Watches.
- Giving or receiving information during the examination.
- Sharing information, resources or reasoning on problems meant to be solved by individuals.
- Disruptive behaviors which affect other examinees, all communication devices must be off.
- Unauthorized reproduction and/or dissemination of test materials.

After examinations
- Sharing information about any of the test materials including sharing of material with use of electronic devices, computers, cell phones, etc.
- Altering or misrepresenting examination scores.
- Unauthorized reproduction and/or dissemination of test material.

Academic Advisement
A. Each student will be assigned a nursing faculty as his/her advisor upon acceptance to the nursing program.

B. Students must notify the Department of Nursing Education before any change in schedule including withdrawal from nursing courses and/or general academic courses. It is the student’s responsibility to ensure all general and program requirements are met in the designated sequence to ensure graduation in a timely manner. Please seek advice from a nursing faculty advisor to assure compliance.

Classroom Attendance

Students are expected to attend classes. Excessive absences may interfere with the student’s ability to achieve course objectives and therefore prevent student progression.

Specific attendance and exam make-up polices are outlined in each course syllabus.
Exam Policy

Students should arrive to the testing site as instructed in complete uniform with appropriate identification. The student may be dismissed from the testing area if uniform policy is not followed. Absolutely no cell phones, pagers or other electronic devices including Internet watches, headgear (caps/hats/sunglasses), books, notes, or purses are allowed in the testing area (All the aforementioned items must be left in the vehicle). The student will be asked to leave the testing site should a cell phone or pager ring or vibrate during an exam. In that case, the student will be required to complete a make-up exam at the end of the semester.

Tests will be administered electronically in Respondus Lock-down Browser. Students will not be allowed to click outside the exam. A password will be given at the beginning of the exam. Students who arrive late (after the password has been given) will not be allowed in the testing area and will be subject to a make-up exam at the end of the semester. Questions will be delivered one at a time; students will not be able to backtrack to previous questions or skip ahead to future questions. Skipped questions will be counted as incorrect answers. ANY technical difficulties must be reported immediately by raising your hand and informing the faculty member(s) proctoring the test. ANY alleged technical difficulties reported at a later time or after grades have been released will not be taken into consideration in determining the student’s exam outcome.

Exams must be taken as scheduled. Students must take their exams on their scheduled class day unless a clinical conflict occurs. Students who do not take their exam on their scheduled day may receive a "0" for the exam. Exam absences are excused for cases of illness (self or dependent child/elder), death in the family, jury duty, mandatory court appearances, or military duty. Students should contact instructor within 24 hours of absence and complete a Documentation of Exam Absence form. All eligible exams are made up at the end of the semester as scheduled by the instructor. Instructors have the right to modify the form of the exam. Students are accountable for any and all content derived from previous courses in the current nursing course of study. Test items may incorporate knowledge obtained from previous modules. Course content is subject to change as updates become available. This includes but is not limited to PowerPoint outlines and recorded material via Tegrity.

Exam grades will not be posted sooner than 48 hours after the administration of the exam. Exam review may be conducted immediately following individual exam submission. After exam submission, while still in the Lockdown Browser, students will have the opportunity to go through their exam to review missed items. Students must follow WSCC Nursing Exam Policy (refer to Syllabus “Exams” section) while remaining in the testing room. Any unprofessional behavior will be documented in the student’s file and the student may be asked to leave the exam review. Grades will be subject to change pending instructor review of the item analysis. Additional exam review will be at the instructor’s discretion. No individual exam review will be conducted. Exam review will not be conducted for make-up exams or the final course exam.

Grading Policy

A. The grading system used to determine the student’s level of achievement in the nursing program is approved by The Alabama Community College System of the Department of Post-Secondary Education. Refer to the college catalog.

B. Final grades will be determined by achievement of a minimum average of 75% on all graded portions of each course, and a satisfactory evaluation of all ungraded requirements as specified in each course evaluation blueprint. See course syllabi for further explanation.

C. Grades are rounded only when the final course average is calculated. All decimal fractions 0.5 or greater round to the next whole number (ex: 74.5 = 75). Decimal fractions less than 0.5 are dropped (ex: 74.4 = 74). Grades are calculated to the tenth place.

D. Failure to complete all course requirements or achieve a satisfactory level of progress as stated in the evaluation blueprint for each course will result in a failing grade in the course.

E. Any course not completed or passed satisfactorily must be retaken and successfully completed in its entirety before progression is allowed in the nursing curriculum.
Grade Appeal Process

It is the policy of Wallace State Community College (WSCC) that students should have the opportunity to appeal any grade which a student has reason to believe does not accurately and fairly represent the work that was completed. See the current WSCC Catalog for additional information regarding grade appeals.

Step One:
Obtain Grade Appeal Form packet from the office of the Vice-President for Students or from the WSCC website (http://www.wallacestate.edu/student-services/forms). A student must make the initial grade inquiry within seven calendar days after the student receives notice of the grade in question, except in the case of a punitive grade issued for academic misconduct, which must be appealed by the end of the class day following the date on which the sanction was imposed. For grades on final exams or grades that represent the final grade, the seven day period shall begin on the first class day of the next academic term.

Step Two:

The student must complete Section A of the Grade Appeal Form packet, sign, and submit it to the instructor to initiate the grade appeal process.

Step Three:

If the instructor upholds the initial grade it will then be sent for a decision to the Program Director (if the instructor is the Program Director, it will go to the Dean of Health Sciences). Section B of the Grade Appeal Form packet will be completed. If the Program Director upholds the initial grade, the student will be informed of the decision and should then submit a Grade Appeal – Notice of Appeal Form to the Vice President for Students to continue the appeal process (if desired).

Step Four:

The Vice President for Students may meet with the student appealing the grade and a decision will be sent to the student in the form of a certified letter. Section C will be completed by the Vice President for Students. After these three stages of appeal, the decision is final as stated in the WSCC Catalog.
Standards for Written Work

A. All written assignments are expected to demonstrate scholarly research and presentation. This includes but is not limited to:

1. Work presented should be the original work of the student with appropriate works cited.
2. Clear, direct expression of the English language.
3. Correct grammar, sentence structure, punctuation, and spelling.
4. Legibly written in blue or black ink on one side of the paper only or typed.

B. Assignments which do not meet the criteria stated above may not be accepted for grading or may have points deducted.

C. Clinical assignments that are submitted late may result in the student receiving an unsatisfactory on the clinical evaluation tool as “taking responsibility for personal action.”

D. Some assignments may not be accepted late. If this is the case, the student will be so informed at the time of the assignment.

E. The nursing department utilizes the American Psychological Association (APA) form of documentation for all written papers. A complete reference to this documentation style can be found at http://www.apastyle.org/ or in the Publication Manual of the American Psychological Association (6th Edition). It’s always best to consult the Publication Manual for specific APA questions. The general format for manuscripts written in APA style is covered in Chapter Two of the Publication Manual, Page 21. The following are basic guidelines:

General Format for the APA Paper

Content of written papers normally contain a title page, an abstract, the text, and a reference list. Your paper should be typed, double-spaced, on standard-sized paper (8.5 X 11 inches) with margins of one (1) inch on all sides. Each page should have the running head at the upper left and the page number on the upper right. The pages should be numbered consecutively, beginning with the title page. The reference list should begin on a separate page following the text of the paper. This page should have the title “References” centered on the top of the page.

Chapter Seven in the Publication Manual covers a wide variety of proper citing for sources utilized. Such as:

1. Book:
   
   Author, A. A. (Year of publication). Title of work: Capital letter also for subtitle. Location: Publisher. If you are using an electronic book, you should add the URL of the e-book provider.

2. Article in an Internet periodical:
   

3. Non-periodical Internet document (e.g., a Web page or report):
   
Clinical Requirements

A. Students are required to complete the number of clinical hours assigned to each clinical course.

B. Students may not leave the assigned clinical area without permission from the instructor.

C. Students are expected to demonstrate clinical behaviors as taught in the nursing lab. Agency policy supersedes WSCC policy when procedures or policies related to clinical care of patients differ.

D. Students may not exchange money or accept gifts from clients or personnel. Students are discouraged from giving gifts to clinical faculty; cards are preferred.

E. Students are not allowed to wear Internet watches or personal beepers while participating in clinical experiences. If a student is found to be in possession of either item, he/she may be sent home for the day which may also result in a Clinical Warning or Unsatisfactory being issued. If the student must be contacted during clinical hours for an emergency situation, the contact must be initiated through the clinical instructor who will notify the student. Refer to Electronic Device Policy regarding cell phones.

F. Students who are going to be absent from clinical are to notify the clinical instructor personally within 15 minutes of the clinical arrival time. Students are also to notify the Clinical Coordinator on campus by email the day that the absence occurs. Students arriving more than one hour late are ineligible to attend their clinical for that day.

G. Students are required to provide a contact phone number and email address to the clinical instructor in the event he/she needs to reach the student in an emergency.

H. Students must comply with all agency policies including but not limited to use of drugs, confidentiality, and professional dress. Use of alcohol or tobacco products or narcotics are prohibited in the clinical setting.

Medication Administration

A. An instructor or Registered Nurse designee ALWAYS observes the preparation of each medication.

B. Students must demonstrate knowledge of the medication’s desired effects, side effects and nursing implications when administering each medication.

C. **Clients must be identified prior to administering medication.** Two identifiers as determined by The Joint Commission Standards and agency policy are mandatory.

D. Instructors may use direct or indirect supervision of the actual administration of non-parenteral medications to adult clients.

E. **All medications administered to pediatric clients are to be supervised directly by instructor or RN designee.**

F. **All parenteral medications administered are to be supervised directly by instructor or RN designee.**

G. Prior to administering medications in the clinical setting, the student must have satisfactorily completed the medication skills check-off in the campus laboratory and have passed any required drug calculation competency test.

H. Students are required to demonstrate accuracy in dosage calculations in all nursing courses.

I. Students will be referred to the campus laboratory to revalidate medication skills if unable to safely demonstrate medication skills in the clinical laboratory.

J. Failure to abide by the Medication Administration policies may result in a clinical warning, unsatisfactory or failure of the course, depending on the situation.
Intravenous Infusion Policy

A. Students must review written guidelines for administering intravenous solutions/medications in the clinical setting prior to administering IV medication/fluids.

B. Prior to administering intravenous medications in the clinical setting, students must demonstrate skill in intravenous medication safety and precautions according to established criteria.

C. Prior to starting an intravenous infusion in the clinical setting, students must successfully demonstrate skill in intravenous infusion in the campus laboratory setting according to established criteria.

D. In the clinical setting and only under direct supervision by WSCC Instructor or Registered Nursing designee, students may:

1. Begin an intravenous infusion through a peripheral site, within two attempts.
2. Administer IV medication through a saline-lock (direct push or piggy-back tubing).
3. Administer medications through a primary/secondary or soluset set-up.
4. Flush saline through a saline lock.
6. Change intravenous tubing and dressings.
7. Flush central venous lines per agency policy. May not initiate access of central line.

E. Nursing students may not initiate or add blood or blood products to an intravenous infusion or perform arterial sticks of any kind (ex: ABG;s)

*Individual agencies may vary as to the intravenous medication administration. When this occurs, agency policy will supersede institutional policy.
Clinical Evaluation

The clinical evaluation is an educational tool as well as an evaluative process. Various objective methods are used to evaluate satisfactory achievement of the clinical objectives for each nursing course.

A. Students are expected to meet pre-determined objectives in each clinical nursing course. Progress in meeting these objectives is assessed by process and outcome evaluations. Students are encouraged to discuss all clinical concerns with the assigned clinical instructor as the first step in clarifying clinical issues or concerns.

B. The clinical coordinator assumes the responsibility to schedule a conference with the student at any time deemed appropriate during the semester. The student may also request student-faculty conferences during the semester.

C. Students are expected to meet the clinical objectives in order to progress in the program of studies. Three unsatisfactory demonstrations of required clinical skills (either a single, repeated behavior or a combination of behaviors) will result in a grade of “F” in the nursing course regardless of other course grades. The grade will be assigned at the time of the third occurrence, and the student will not continue in the course.

D. All unsatisfactory incidents will be discussed with the student within an appropriate time frame. The Clinical Coordinator may wish to seek feedback from other DNE faculty members or the director prior to discussing the incident with the student. The discussion may be held with another faculty member or agency staff member present. All incidents will be documented in writing in the evaluation along with a plan of action and time frame for improvement of performance.

E. Students are encouraged to discuss all clinical concerns initially with the assigned clinical instructor. A student who receives a (0) or Unsatisfactory may request a faculty conference.

F. Competency of clinical behaviors is expected to be demonstrated in the initial course in which the behavior is taught as well as in successive courses. Failure to demonstrate and validate continued competency of clinical behaviors could result in failure to progress in the nursing sequence.
Agency Assignments

A. Students will be assigned to clinical agencies by the Clinical Coordinator. Expenses incurred for travel and while attending clinical is the responsibility of the student.

B. Faculty cannot guarantee students their preference in clinical agency assignment. Contacting clinical agencies for placement of students is the sole responsibility of the faculty of the DNE. Any breach of this policy by students making independent contacts with agencies will result in negative consequences, including but not limited to clinical warning, unsatisfactory evaluation, or dismissal from the program.

C. All student clinical experiences must be supervised by a WSCC clinical instructor unless specified prior to the experience and approved by the agency.

Campus Laboratory

The campus laboratory is provided for simulated practice and testing of skills, reading, viewing of films and other educational endeavors.

A. Each student enrolled in a clinical nursing course must validate skills as specified in the course syllabus. Time to practice these skills with supervision and feedback is provided in the campus laboratory. Criteria that must be met to demonstrate satisfactory performance are in the course packets. Validation will be supervised by a WSCC faculty member. Refer to course syllabi for evaluation blueprint.

B. Before a critical clinical skill can be performed with clients, the student must successfully demonstrate the skill in the laboratory simulation.

Computer Laboratory

Computer laboratories are provided for students to obtain experience with various clinical models through simulation programs, listening to Tegrity presentations, and vendor supplied tests. In addition, students become familiar with computer testing in preparation for the NCLEX-RN or NCLEX-PN licensure exam.

A. Absolutely no cell phones or Internet watches are allowed in computer/simulation labs.

B. Computer programs must be completed in the computer lab. No programs may be copied. Only those parts of the computer program that the author allows to be printed may be printed (i.e., scores, work sheets).

C. Equipment is to be handled gently. Students are responsible for following all computer lab policies.

D. Any student caught mishandling equipment, violating copyright materials, or removing programs from the lab will be subject to disciplinary action. (See college catalog for rules on disciplinary action).

E. Computerized manikins (Sim-Man, Noelle with Baby Hal) are to be used under direct supervision for exposure to and practice of nursing skills, problem solving, and critical thinking. Mishandling of simulation equipment may result in disciplinary action.
Wallace State Community College
Department of Nursing Education

Release to Return to Clinical Responsibilities

_________________________________, Wallace State nursing student has been evaluated at this time and can safely return to direct patient care by ________________.

This includes participation in the clinical/hospital setting which may include working 8-12 hours and assisting with turning and/or lifting patients with assistance.

Signature of MD or Nurse Practitioner                  Date

Printed Name of MD or Nurse Practitioner

Name of office or facility where student was evaluated: __________________________________________

                                          Street Address __________________________________________

                                          City, State, Zip Code __________________________________________

                                          Phone Number (include area code) _________________________________
Lab Attendance

1. Attendance at all laboratories is mandatory. Students are required to notify the lab instructor or the Department of Nursing Education (DNE) prior to an unavoidable absence.

2. Lab absences are calculated as a percentage of the required lab time per semester and therefore may vary slightly with the school calendar. All absences up to 10% of required lab time must be made up. Assignments are at the discretion of the faculty and will be consistent with missed work. These may include but are not limited to computer simulation, written work and/or attendance at lab.

Absences in excess of 10% of the required lab experience for the semester may result in inability to achieve lab objectives with subsequent failure to progress in the nursing program. Students who exceed the lab absence policy in any nursing course must meet with the DNE program director for a decision regarding continuation in the course. All courses with the NUR prefix are affected by this policy.

3. Students are expected to arrive at lab on time. In case of tardiness, it is the student’s responsibility to ensure that attendance is recorded. Two tardy events constitute an absence.

4. A student participating in college extracurricular activities may be granted permission to be absent from lab provided the student notifies the instructor in advance of the event. Students are responsible for any missed material. Lab make-up may be required.

5. Any limitation to the Essential Functions may prohibit lab attendance and progression.

6. Students who are pregnant or have been hospitalized are required to submit a written release from the physician.

Extended Absence

Students who anticipate several days of absence due to military obligation or jury duty must contact the course faculty as soon as this is known to make special arrangements for meeting required classroom/clinical objectives.
Miscellaneous Information

Standards of Personal Behavior

A. Caution is advised when interacting on any social networking site. Comments concerning clinical agencies, clinical and/or classroom experiences, fellow students, nursing faculty, WSCC, etc. are strictly prohibited.

B. Eating and drinking are not permitted in the classrooms, nursing laboratory, or computer laboratory. Eating and drinking are allowed only in the student lounge area. (Water with a screw on top is allowed in the classroom.)

C. Smoking is not permitted on the campus of Wallace State Community College. Smoking in other areas may result in disciplinary action.

D. The use of alcohol and/or controlled substance drugs including physician’s prescriptions is not permitted in the classroom or clinical area. If a nursing faculty member or agency staff suspects substance use (drugs or alcohol) in the classroom or clinical area, the student will be dismissed and may be subjected to a drug screen; if in clinical, the agency policy will be followed. Following a review, the student may be subject to dismissal from the nursing program. (See college catalog).

E. Each student is required to read the written Standards of Conduct set forth by the Alabama Board of Nursing Administration Code, 1982 (P. 35). Written confirmation that the student has read and understood the Standards of Conduct will be on file in the nursing department (P. 76).

F. Children are not permitted in the classroom, laboratory, break areas or computer areas or at any agency used for clinical education.

G. Cell phones are not permitted to be on during class unless specifically allowed for classroom activities. All electronic devices including Internet watches are prohibited in testing, test review, or the computer lab as well as in all clinical settings.

Notification of School Closings

A. “Lion Alert” is our emergency alert and notification system. Lion Alert delivers rapid, multi-platform messages in the event of an emergency. This will be your best source for timely information and instructions on what to do in the event of any campus emergency such as severe weather, power outages, criminal activity, threats, or other emergency situations.

To log-in and access your Lion Alert Dashboard account, go to the following secure web-site: https://www.myschoolcast.com/go/ws. Your myWallaceID account is used in order for you to access your private Lion Alert Dashboard page. If you have not set-up your myWallaceID account, please visit https://mywallaceid.wallacestate.edu to do so prior to visiting the Lion Alert Dashboard. Additionally, college closing announcements may also be posted on the Wallace State web site, Facebook page, and on area television and radio stations.

B. Personal safety is always a priority during severe weather. If students are unable to attend class or clinical due to severe weather conditions in their area, they must notify the instructor or nursing office by telephone at the earliest possible time.
Scholarships

Allied Health and Nursing Scholarships

Wallace State Community College seeks to provide the opportunity for needy and deserving students to continue to pursue the goal of a college education regardless of their financial circumstances. Financial aid is available through such sources as federal and state grants, Veteran Administration benefits for students who qualify, and special programs for displaced workers. Students are encouraged to contact the Office of Financial Aid for assistance.

Department of Nursing Education Scholarships

Other available assistance to nursing students may be offered through local service clubs, District 1 of the ANS, hospitals, or agencies.

Awards

Nightingale Award

Purpose

The Nightingale Award is an award presented to a graduating nursing student. The graduate is chosen by the faculty and is a student nurse who best represents the characteristics of scholarship, compassion for patients and commitment to nursing as exemplified by Florence Nightingale.

Selection Criteria

The student selected best meets the following guidelines:

A. Has demonstrated personal integrity, good moral character, responsibility, trustworthiness, and professional personal appearance.
B. Demonstrates professionalism and commitment to nursing.
C. Is assertive and utilizes administrative structures for problem solving.
D. Has a high level of clinical proficiency and organization.
E. Demonstrates personal motivation and desire for excellence; achieves excellence against adversity.

Student Activities

Students are encouraged to participate in student activities on campus. The activities range from an academic focus (scholars bowl in the fall) to extracurricular (Miss Wallace State pageant and Homecoming Queen). Students may participate in intramural sports which include softball, basketball, and volleyball.

Students are also eligible to be selected for Who’s Who in American Junior Colleges and Outstanding Student Awards. (See college catalog and newsletters for details). Each year in the spring semester a student is nominated by faculty for the Program Award and the President’s Cup Award.
Substantive Change Policy

Wallace State Community College Department of Nursing Education nursing students will be notified of any changes in policies, procedures, and program information in a timely manner. Identified changes are communicated to students in an array of methods including but not limited to: posting on Blackboard course shell, posting on Blackboard communication shell, written notifications, and/or addendums to current nursing or Health Science Division policies, procedures or literature. Depending on the nature, time, and implementation of recommended changes the student may be required to sign an acknowledgement form of such changes which will then be placed in the student's file. Any faculty recommendation for a change in policies or procedures must be presented to the DNE Program Chair and the nursing faculty for a majority vote for enactment of proposed change(s). The Lead Course Instructor with the acknowledgement of the Program Chair, Level Coordinator, and Coordinator of Clinical Learning have the authority to make minor changes such as, but not limited to, changes in course calendar, clinical placement, and/or clinical schedules as deemed necessary for the success of the student.

Protocol for Issues and Concerns

The faculty encourages students to make suggestions and voice any concerns that may enhance or interfere with the attainment of quality education. Students may make suggestions or voice concerns through course and clinical evaluations and discussions with individual instructors. If the student is not satisfied he/she should consult with the lead course instructor and/or appropriate level coordinator. If a student has not reached a satisfactory resolution at this time, he/she may consult with the Chair of the Department of Nursing Education.

The class president or designee of each level shall be invited to attend selected faculty meetings dealing with curriculum and policies. Student input for faculty consideration can be submitted to the Chair of the DNE at any time. In the case of a student who has made a good faith effort to resolve a problem and who has been unable to resolve the matter informally, WSCC offers a grievance procedure which is outlined in the college catalog.

The student code of conduct is defined in the WSCC college catalog. Misconduct may result in charges being filed against the student per the procedures noted in the catalog.
Election Criteria for Class Officers

Election of class officers and class representatives is held in the third semester for nursing students. Officer positions include: President, Vice-President, Secretary/Treasurer, and Representative(s). Students must have a 3.0 GPA to be eligible to serve as a class officer.

Selected faculty serve as advisors to each class. Any monies collected as a class will be coordinated through the Business office through accounts established for each class.

Association of Nursing Students

The faculty encourages each nursing student to participate in the Alabama Association of Nursing Students by joining the Wallace State Community College Student Nurses’ Association (WSCC ANS). The faculty believes this organization aids in preparing the nursing student for the assumption of professional responsibilities. It is the responsibility of this organization to keep nursing students informed of any changes affecting nursing practice.

A. Membership is encouraged, but not required.
B. ANS officers are elected annually according to the ANS bylaws.
C. A faculty advisor to the ANS is appointed by the department chairperson.
D. ANS members participate in many activities such as: Global Health, Image of Nursing, disaster preparedness, community health, and Legislative professional development.
E. ANS members may receive summer scholarships through the association.
F. ANS members may attend state and/or national meetings.

For further information on the ANS, contact any officer or the faculty advisor.
Wallace State Community College
Health Science Division

Policy on Drug and Alcohol Testing of Students Enrolled in Health Programs

Wallace State Community College supports the concept of a Drug Free Workplace and prohibits the unlawful manufacture, distribution, possession or use of a controlled substance on any property owned, leased, or controlled by the college or during any activity conducted, sponsored, authorized by or on behalf of Wallace State Community College. The college prohibits any form of on-campus (or campus affiliated) use and/or possession of illegal drugs, drug paraphernalia, or alcoholic beverage by students, which is in direct violation of local, state, and federal law. Students found to be involved in any of these activities are subject to disciplinary action including program dismissal.

Education of health profession students at Wallace State Community College requires collaboration between the college and clinical agencies. Education of these students cannot be complete without a quality clinical education component. The College shares an obligation with the clinical agency to protect, to the extent reasonably possible, the agency’s patient due to students who are under the influence of illegal drugs or alcohol while in the clinical agency.

The College wishes to ensure that the health and safety of students and patients are not compromised, and that clinical affiliation agreements exist to provide students with quality clinical education experiences. Therefore, it is the policy of Wallace State Community College-Hanceville that students enrolling in health profession programs submit to drug testing. This testing can be announced or unannounced and will occur upon admission and annually thereafter, for cause or at random intervals. This policy authorizes drug testing of students who voluntarily choose to enroll in health profession programs at the college. Any student enrolling in a health profession program will be required to submit to such testing.

Guidelines for Drug Testing of Health Profession Students

I. Persons to be Tested

Any student who is accepted into any health program at Wallace State Community College-Hanceville will be required to submit to annual drug testing.

II. Types of Tests to be Performed

A. Drug testing will occur prior to clinical placement and annually thereafter. Only drug tests conducted by college-authorized agencies will be accepted. Cost of drug testing will be paid from student fees collected each semester.

B. In addition to annual drug testing, further testing may be required of the student for reasonable suspicion or at random intervals and may be either announced or unannounced. This testing will be required at the discretion of the college or the clinical agency. Cost of drug testing will be paid from student fees collected each semester. For the safety and protection of patients, faculty, staff, and students, the health science program will require a student to submit to a screening for drugs and alcohol, which will be conducted at the college’s expense when there is reasonable suspicion to believe that a student is abusing substances. Reasonable suspicion is defined as, but not limited to, the following:

- Observable changes in performance, behavior, appearance, and speech.
- Direct observation by a fellow student, instructor, or other faculty or staff of the college or clinical site of drug and/or alcohol use and/or the physical symptoms or manifestations of being under the influence of a drug and/or alcohol, such as, but not limited to, unusual slurred or rapid speech; noticeable change in appearance and hygiene; impaired physical coordination; inappropriate comments, behaviors, or responses; trembling hands; persistent rhinorrhea; flushed face; red eyes; unsteady gait; declining health; irritability; mood swings; isolation; decreased alertness; and/or pupillary changes.
Guidelines for Drug Testing of Health Profession Students (continued)

- Conduct inconsistent with the student’s normal behavior, or erratic behavior, absenteeism, tardiness, dishonesty, or fluctuations and/or deterioration in performance.

- A report of drug and/or alcohol use provided by reliable and credible sources which has been independently corroborated.

- Evidence of tampering with a drug and/or alcohol screening which has been verified and substantiated by the administering laboratory.

- Odor of alcohol.

- Possession of illegal or illicit drugs or alcohol.

- Suspected theft of medication.

- Information that the individual has caused or contributed to an alcohol- or drug-related incident/accident.

- Evidence of involvement in the possession, consumption, sale, theft, manufacturing, use, solicitation, or transfer of drugs and/or alcohol while in the educational setting and/or any set of facts or conditions that would lead one to reasonably suspect that a student was under the influence of drugs and alcohol.

If a clinical agency staff member, student, or college faculty member observes such behavior, it should be immediately reported to the department chair/program director/designee in order to immediately assess the situation. Such a report of an observation of this nature should be in writing. The report should be immediately verified by another student, faculty, or staff member. Upon such immediate verification, the student shall be informed of and instructed to leave the educational or clinical setting immediately. Such measures will be taken in such a manner as to ensure the privacy of both the reporting individual and the affected student. However, precautions will be taken to ensure the safety of both the student and others, including advising the student not to drive a motor vehicle. The program director, Dean of Health Sciences, Vice President of Students, or designee of the President will then make an immediate determination if there is reasonable suspicion to screen the student. If the decision is made to screen the student, the Dean of Health Sciences or a designee of the President will direct the student to make arrangements to have the screening performed immediately. The student will be requested to sign an informed consent to be tested before a specimen is collected. A student’s failure to consent to the screening will result in immediate termination from the Health Science program.

III. Drugs to be Tested

All students will be tested for alcohol and the following ten (10) drugs: amphetamines, barbiturates, benzodiazepines, cocaine metabolites, marijuana metabolites, methadone metabolites, oxycodone, opiates, methamphetamines, and propoxyphene. Testing for additional substances may occur based on clinical affiliation agreement requirements.

IV. Consent to Drug Testing

A. The student must provide written consent to provide specimens for the purpose of analysis. If the student is under eighteen (18) years of age, the student's parent or legal guardian must sign the drug testing consent form in addition to the student. The signed consent must be returned to the program director of the health program.

B. The signed consent form will be maintained in the student permanent record. A copy of the consent form will be maintained with the program director.

C. Students have the right to refuse to consent to drug testing. However, students who decline will be refused access to clinical education facilities and will be unable to achieve the required clinical experiences and objectives of the program. Refusal to submit to drug testing will result in dismissal from the health program and will cause the student to be ineligible for admission to any program in the Health Science Division offered at Wallace State Community College.
Guidelines for Drug Testing of Health Profession Students (continued)

V. Specimen Collection

1. The collector shall be a licensed medical professional or technician who has been trained and certified for collection in accordance with chain of custody and control procedures. This person cannot be a college employee.

2. The designated collection site and specimen collection procedures must be secured in accordance with chain of custody and control procedures. Security during collection may be maintained by effective restriction of access to the collection materials and specimens.

3. When the student arrives at the collection site, the collector shall ensure that the student is positively identified as the individual selected for testing. This identification will be done through the presentation of photo identification (ex: driver’s license with picture). If the student’s identity cannot be established, the collector shall not proceed with the collection until such identification can be made.

4. The student will complete and sign the vendor-provided chain of custody/consent form for the collection.

5. If the student is unable to provide an adequate specimen during the collection process, another collection time will be scheduled. Students will not be allowed into the clinical setting until negative results are received by the program director.

6. Students absent from announced or unannounced drug testing will be excused under only the most extreme circumstances (e.g. illness, family emergency). The student will be required to provide written verification for such absences. Approval of a verifiable absence is the responsibility of the program director. Students will have to complete the drug testing process within 48 hours of the originally scheduled time. Failure to complete the drug screening as required by Wallace State Community College will prohibit the student from continuing in the program in which they are enrolled or to be admitted to any other program in the Health Science Division at Wallace State Community College. The College reserves the right but has no duty to lift the prohibition against reenrollment upon its consideration of written application for readmission evidencing that the student has demonstrated an ability and readiness to comply with all College health division regulations. The College will not consider such a request until at least two years from the date of dismissal. Requests should be directed to the Vice President for Students Office.

VI. Drug Testing Laboratory

Drug testing for Wallace State Community College Health Science Division students can only be conducted by the college-approved vendor. Only laboratories certified by the U.S. Department of Health and Human Services (HHS) can be used to perform drug testing analysis.

Students enrolled in programs offered totally online or through other distance modalities and who live more than 75 miles from the college campus will contact their respective program director to identify approved alternate drug testing laboratories. Alternate drug testing laboratories will be required to meet the standards set forth in the college’s guidelines. Costs of testing at alternate sites above the college’s fee structure will be the responsibility of the student. Approval of any alternate drug testing sites must be received prior to testing. Failure to receive approval will result in having to submit to additional testing at an approved site. Student fees will only be used for payment to approved testing sites.

VII. Medical Review of Positive Drug Test Results

A. All specimens identified as positive on the initial test shall be confirmed by the testing laboratory. Any positive test result will be reviewed by the Medical Review Officer.

B. A Medical Review Officer (MRO), who shall be a licensed physician with knowledge of substance abuse disorders, shall review and interpret positive test results. The MRO shall examine alternate medical explanations for any positive test results. The MRO or designee shall contact the student directly to discuss the test results.
Guidelines for Drug Testing of Health Profession Students (continued)

VIII. Reporting of Drug Test Results

A. Written notification indicating either a positive or negative drug screen shall be provided to the Dean of Health Sciences or health program director. Test results will not be released to any individual who has not been authorized to receive such results. Students shall not be allowed to hand deliver any test results to college representatives. Notification of drug screening results can only be delivered in a manner that insures the integrity, accuracy, and confidentiality of the information. Wallace State Community College refuses to accept any test result that does not meet the requirements of the policy and guidelines.

B. Whenever possible, report of drug screening to clinical affiliates will be handled by aggregate data reporting. The clinical agency will be notified of individual student drug screening results or provided with copies of drug screening results only when required by clinical affiliation agreement.

C. Negative test results must be kept on file for one year after the student's last date of attendance at the college. Positive test results must be maintained on file for five years after the student's last date of attendance at the college.

IX. Penalties for a Confirmed Positive Drug Test or Refusal to be Tested

A. Positive Test

A student with a positive drug test will be dismissed from the health program. A grade of "F" will be recorded if the student does not officially withdraw. The appeal process is outlined in the college catalog in the health science programs of study section. The College reserves the right but has no duty to lift the prohibition against reenrollment upon consideration of written application for readmission evidencing that the student has demonstrated an ability and readiness to comply with all College health division regulations. The College will not consider such a request until at least two years from the date of dismissal. Requests should be directed to the Vice President of Students Office. If a readmitted student has a subsequent positive drug screen, the student will be ineligible for admission to any Health Science program at Wallace State Community College.

B. Refusal to Test

A student's refusal at any point to be tested for drugs will result in dismissal from the health program and forfeiture of any health scholarship. A grade of "F" will be recorded if the student does not officially withdraw. The program director shall be notified of any refusal to be tested. The College reserves the right but has no duty to lift the prohibition against reenrollment upon its consideration of written application for readmission evidencing that the student has demonstrated an ability and readiness to comply with all College health division regulations. The College will not consider such a request until at least two years from the date of dismissal. Requests should be directed to the Vice President for Students Office. If a readmitted student has a subsequent positive drug screen, the student will be ineligible for admission to any Health Science program at Wallace State Community College.

X. Publication of Policy

The college shall include the policy and procedure for Drug Testing of Health Profession Students in the college catalog, on the college's website, in the student handbook for each program, and other appropriate college publications to ensure adequate notice and distribution. As stated in the disclaimer in the Wallace State Catalog, college policies are subject to change.

Revised (12/7/10)
Wallace State Community College Health Science Division Background Check Policy

Education of Health Science Division students at Wallace State Community College requires collaboration between the college and clinical affiliates. Education of these students cannot be complete without a quality clinical education component. The college shares an obligation with the clinical affiliates to protect the affiliate’s patients to the extent reasonably possible from harm. The college wishes to ensure that the health and safety of students and patients are not compromised and that clinical affiliation agreements exist to provide students with quality clinical education experiences.

In establishing clinical affiliation agreements, healthcare educational programs are contractually obligated to comply with the requirements set forth by clinical affiliates. Student enrolled in health care educational program must conform to the rules, policies and procedures of the clinical affiliate in order to participate in clinical learning experiences. It is therefore the policy of Wallace State Community College Health Science Division that students enrolling in health profession programs submit to background checks.

Guidelines for Background Check On Health Profession Students

I. Persons to be Tested

Any student who is accepted into any Health Program at Wallace State Community College will be required to undergo a background check annually.

II. Types of Background Checks

Students shall receive notification of the requirement for the background check prior to admission and upon admission to a health care program.

The background check may include, but is not limited, to searches, histories, and verifications as indicated below:

- **Positive Identification**
- **Maiden/AKA Name Search**
- **Social Security Number Trace** which is a verification that the number provided by the individual was issued by the Social Security Administration and is not listed in the files of the deceased. The SSN trace is also used to locate additional names and addresses.
- **Residency History**
- **Education Verification**
- **Employment Verification** which may include the reason for separation and eligibility for re-employment for each employer. The last seven years may be searched if the student is 21 years of age or older.
- **Healthcare Employment Verification Network Search**
- **Nurse Aide Registry**
- **Professional License/Certification Verification**
- **Personal References/Interviews**
- **Seven Year Criminal Search** reveals felony and misdemeanor convictions, and pending criminal cases usually including the date, nature of the offense, sentencing date, disposition, and current status. The seven-year criminal background check may occur in current and previous counties of residence and employment through a search of court records. City, state, and/or federal records may also be searched. Federal criminal cases may reveal tax evasion, fraud, drug offenses, etc.
- **Most Wanted List**
- **National Criminal Database Searches**, which includes a compilation of historical data, collected from multiple sources in multiple states by background check companies.
- **Adult and Child Abuse/Neglect Registries**
- **National Sex Offender/Predator Registry Search** which includes a search of the state or county repository for known sexual offenders.
- **Misconduct Registry Search**
- **Office of the Inspector General (OIG) List of Excluded Individuals/Entities** which identifies those individuals who have committed offenses deeming them ineligible to care for patients receiving Medicare, Medicaid and other Federal health care benefits.

Revised 01/03/18
II Types of Background Checks (continued)

- **General Services Administration (GSA) Excluded Parties List Service** identifies the List of Parties Excluded (EPLS) which identifies those excluded throughout the US Government from receiving Federal contracts and certain types of Federal financial/non-financial assistance/benefits.
- **Executive Order 13224 Terrorism Sanctions Regulations**
- **Government Suspect /Watch List**
- **Office of Foreign Assets Control (OFAC) list of Specially Designated Nationals (SDN)** which includes individuals associated with terrorism and Narcotics Trafficking.
- **FACIS Database Searches** includes OIG, GSA, OFAC and other sources.
- **National Healthcare Data Bank Search and Sanction Report** may include Medicare/Medicaid Sanction Search, OIG, GSA, and FDA Debarment Check.
- **Fingerprinting and the National Criminal Information Center** which may reveal National Wants and Warrants information
- **International Criminal**
- **Applicable State Exclusion List**
- **Any Other Public Record**

III. Consent

Students must sign the appropriate consent(s) for a background check at the time of admission to a health care program. A copy of the signed consent(s) will be maintained in the permanent student record. The student will provide applicable consent(s) to the vendor conducting the background check. If the student is under eighteen (18) years of age, the student’s parent or guardian must sign the consent form in addition to the student.

IV. Background Check Procedure

The background checks will be conducted by a college-designated vendor according to program specific deadlines. **Background checks or Background check Updates performed by any other vendor or agency will not be accepted.** Students reinstated to a program after an absence from program coursework of one semester or more, will have to repeat background testing.

Students with completed background checks transferring to or starting another healthcare program with uninterrupted time may be allowed to conduct a **background check update**.

Students enrolled in programs which last longer than one calendar year must maintain a current background check through the WSCC approved vendor.

The student will be responsible for the cost of the background check. Any student failing to pay the fee in effect at the time of the background check by the published deadline and/or refusing to sign the consent form(s) will not undergo a background check and will be prohibited from attending clinical learning experiences. The student in this situation will be dismissed from the program. A grade of “F” will be recorded for the course(s) if the student does not officially withdraw.

If a student is experiencing extenuating circumstances that prohibit completion of the background check by the deadline, they should contact the healthcare program director who will determine if the student will be allowed to proceed without the background check. No student will be allowed to attend the clinical experience until the full background check process is completed.

Some clinical affiliates may require an additional background check to fulfill requirements above those required by this procedure. If required, the expense of additional background checks will be the responsibility of the student.
V. Results

Results of the background check will be sent to the health care program director. Designees at the clinical affiliate will be provided with a copy, if requested, of negative results for students assigned to that agency.

The student with a positive background check will be informed of the results by the healthcare program designee and/or background check vendor. The student will be provided with a copy of the background check if the results are positive. No copy will be provided to the student if results are negative.

Students with a positive background check will be denied assignment to a clinical facility pending resolution of the background check finding. Students will be advised to contact the background check vendor to dispute any information reported and to clear any findings of the background check. Background checks which could render a student ineligible to obtain clinical learning experiences include, but are not limited to, certain convictions or criminal charges which could jeopardize the health and safety of patients and sanctions or debarment. Felony or repeated misdemeanor activity within the past seven (7) years and Office of the Inspector General violations will normally prohibit the obtainment of clinical learning experiences with clinical affiliate(s). Positive findings on background checks can have licensure implications upon graduation from a health program.

Students who are unable to resolve a positive background check will be dismissed from the health care program. A grade of “F” will be recorded for the course(s) if the student does not officially withdraw. The student will be advised by a program advisor as to their eligibility for program re-entry and the mechanisms for reapplication to the program.

Results will be securely filed in the office of the health program. The healthcare program designee will have access to the results of the background check.

Results of any student’s background screen will be shared only on a need to know basis with the exception of legal, disciplinary or appeal actions which require access to the results.

Any offenses resulting in an arrest which occurs after an initial background check must be reported to the program director within 72 hours of the arrest and a background check update will be necessary for continuation in a health program.
<table>
<thead>
<tr>
<th>Clinical Facility Sites and Addresses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bradford Health Services</strong></td>
</tr>
<tr>
<td>Street Address: 1189 Allbritton Road</td>
</tr>
<tr>
<td>Warrior, AL 35180</td>
</tr>
<tr>
<td>Phone: 1-800-333-1865</td>
</tr>
<tr>
<td>Website: <a href="http://www.bradfordhealth.com">www.bradfordhealth.com</a></td>
</tr>
<tr>
<td>County: Jefferson</td>
</tr>
</tbody>
</table>

| **Decatur Morgan Hospital** |
| Street Address: 1201 Seventh Street, S.E. |
| Decatur, AL 35609-2239 |
| Hospital Phone: 256-341-2000 |
| Website: www.decaturgeneral.org |
| County: Morgan |

| **Brookwood Baptist Medical Center** |
| Street Address: 2010 Brookwood Medical Center Drive |
| Birmingham, AL 35209 |
| Hospital Phone: 205-877-1000 |
| Website: www.bwmc.com |
| County: Jefferson |

| **Decatur Morgan Hospital** |
| **Parkway Campus** |
| Street Address: 1874 Beltline Road, SW |
| Decatur, AL 35601 |
| Hospital Phone: 256-350-2211 |
| Website: www.decaturgeneral.org |
| County: Morgan |

| **Children's of Alabama** |
| Street Address: 1600 Seventh Avenue South |
| Birmingham, AL 35233 |
| Hospital Phone: 205-939-9100 |
| Website: www.childrensala.org |
| County: Jefferson |

| **Decatur Morgan West** |
| Street Address: 2205 Beltline Road |
| Decatur, AL 35601 |
| Hospital Phone: 256-306-4000 |
| Website: www.decaturgeneral.org |
| County: Morgan |

| **Covenant Woods of Gardendale** |
| **Specialty Assisted Living** |
| Street Address: 1411 Thompson Circle |
| Gardendale, AL 35071 |
| County: Jefferson |

| **Gadsden Regional Medical Center** |
| Street Address: 1007 Goodyear Avenue |
| Gadsden, AL 35903-1195 |
| Phone: 256-494-4000 |
| Website: www.gadsdenregional.com |
| County: Etowah |

| **Crestwood Medical Center** |
| Street Address: One Hospital Drive, |
| Huntsville, AL 35801 |
| Hospital Phone: 256-429-4000 |
| Website: www.crestwoodmedcenter.com |
| County: Madison |

| **Good Samaritan Health Clinic** |
| Street Address: 401 Arnold St. NE |
| Cullman, AL 35055 |
| Facility Phone: 256-775-1389 |
| County: Cullman |

| **Cullman County Center for the Developmentally Disabled** |
| Street Address: 1807 Beech Avenue, SE |
| Cullman, AL 35055 |
| Phone: 256-734-3253 |
| Website: www.cccdd.com |
| County: Cullman |

| **Grandview Medical Center –** |
| Street Address: 3690 Grandview Parkway |
| Birmingham, AL 35243 |
| Hospital Phone: 205-971-1000 |
| Website: www.grandviewhealth.com |
| County: Jefferson |

| **Cullman Regional Medical Center** |
| Street Address: 1912 Highway 157 |
| Cullman, AL 35058 |
| Hospital Phone: 256-737-2000 |
| County: Cullman |

| **Huntsville Hospital** |
| Street Address: 101 Sivley Road, |
| Huntsville, AL 35801 |
| Hospital Phone: 256-265-1000 |
| Website: www.hhsys.org |
| County: Madison |
Wallace State Community College  
Department of Nursing Education  
Clinical Facility Sites and Addresses (Continued)

<table>
<thead>
<tr>
<th>Marshall Medical Center North</th>
<th>St. Vincent Blount</th>
</tr>
</thead>
</table>
| Street Address: 8000 Alabama Highway 69  
Guntersville, AL 35976  
Hospital Phone: 256-571-8000  
Website: [www.mmcenters.com](http://www.mmcenters.com)  
County: Marshall | Street Address: 150 Gilbreath Drive  
Oneonta, AL 35121  
Hospital Phone: 205-274-3000  
Website: [www.medicalblount.com](http://www.medicalblount.com)  
County: Blount |

<table>
<thead>
<tr>
<th>Marshall Medical Center South</th>
<th>St. Vincent East</th>
</tr>
</thead>
</table>
| Street Address: Highway 431 North  
Boaz, AL 35957-0758  
Hospital Phone: 256-593-8310  
Website: [www.mmcenters.com](http://www.mmcenters.com)  
County: Marshall | Street Address: 50 Medical Park East Drive  
Birmingham, AL 35235  
Hospital Phone: 205-838-3000  
Website: [www.medicalcentereast.com](http://www.medicalcentereast.com)  
County: Jefferson |

<table>
<thead>
<tr>
<th>Princeton Baptist Medical Center</th>
<th>The Sanctuary at the Woodlands</th>
</tr>
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</table>
| Street Address: 701 Princeton Avenue  
Birmingham, AL 35211  
Hospital Phone: 205-783-3000  
Website: [www.mmcenters.com](http://www.mmcenters.com)  
County: Marshall | Street Address: 1910 Cherokee Ave  
Cullman, AL 35056  
Hospital Phone: 256-255-0820  
County: Cullman |

<table>
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<tr>
<th>Reid House (Cullman Area Mental Health)</th>
<th>University of Alabama Hospital (UAB)</th>
</tr>
</thead>
</table>
| Street Address: 70 Mitchell Road, NE  
Cullman, AL 35055  
Phone: 256-734-4688  
County: Cullman | Street Address: 619 19th Street South  
Birmingham, AL 35249-6505  
Hospital Phone: 205-934-3411  
Website: [www.uabmedicine.org](http://www.uabmedicine.org)  
County: Jefferson |

<table>
<thead>
<tr>
<th>Riverview Regional Medical Center</th>
<th>UAB Highlands</th>
</tr>
</thead>
</table>
| Street Address: 600 South 3rd Street  
Gadsden, AL 35999-0268  
Hospital Phone: 265-543-5200  
Website: [www.riverviewregional.com](http://www.riverviewregional.com)  
County Etowah | Street Address: 1201 11th Avenue South  
Birmingham, AL 35205  
Hospital Phone: 205-930-7000  
Website: [www.uabmedicine.org](http://www.uabmedicine.org)  
County: Jefferson |

<table>
<thead>
<tr>
<th>Shelby Baptist Medical Center</th>
<th>Walker Baptist Medical Center</th>
</tr>
</thead>
</table>
| 1000 1st St N  
Alabaster, AL 35007  
Hospital Phone: 205-620-8100  
Website: [www.bhsala.com](http://www.bhsala.com)  
County: Shelby | Street Address: 3400 Highway 78 Bypass  
Jasper, AL 35502  
Hospital Phone: 205-387-4000  
Website: [www.bhsala.com](http://www.bhsala.com)  
County: Walker |

Rev Sum. 17/SC
Additional Agencies Used*

- Day Care Centers / Blount County Schools / Various Doctor’s Offices
- Alabama Public County Health Departments
- Prepared Childbirth Classes
- Cullman County Nutritional Centers
- Alabama Dialysis Center
- TOUCH
- Cullman County Commission on Aging / North Alabama Mental Health Center / Engle Day Treatment-UAB

* This is not an inclusive list and is subject to change.

The faculty reserves the right to make changes or alterations to the health care agencies or facilities used to meet course objectives.
ADDENDUM D

Policy Regarding Barrier Precautions

The Wallace State Community College Nursing Department supports the CDC recommendations that health care workers take blood and body fluid precautions with ALL patients.

OSHA guidelines and updates are posted on the bulletin board in the nursing laboratory. The following policies are set forth. ALL STUDENTS WILL:

A. Wash hands before and after contact with patients (even if gloves are worn).

B. Wear gloves when touching blood and body fluids, mucus membranes, or broken skin of all patients (e.g. newborn infant, oral care, catheter management, injections, perineal care).

C. Wear gloves when handling items or surfaces soiled with blood or body fluids (e.g. soiled bed lines, specimen collection, and bed pans).

D. Wear gloves when performing an injection, venipuncture or discontinuing an intravenous infusion.

E. Wear masks, protective eye wear or glasses and protective clothing during procedures that may cause splattering of blood or other body fluids.

F. Wear gowns, gloves, and protective eye wear while assisting in vaginal or caesarean deliveries and while handling the placenta or the infant until the blood and amniotic fluid have been washed from the skin. Also, wear gloves during post-delivery care of the umbilical cord and post-partum care of the mother.

G. Wash hands IMMEDIATELY AND THOROUGHLY if they become contaminated with blood or other body fluids (includes, but is not limited to hemovacs, urine, body drainage, N-G tubes).

H. Place used disposable syringes and needles and other sharp items in puncture-resistant containers for disposal. DO NOT RECAP OR BREAK DISPOSABLE NEEDLES OR SYRINGES. IF RECAPPING IS UNAVOIDABLE, USE THE ONE-HAND SCOOP METHOD.

I. NEVER breach the integrity of a sharps container by opening it or attempting to retrieve an item placed in it. Immediately following any exposure, cleanse area first then notify faculty. Faculty will follow agency andWSCC policy.

K. Document knowledge of barrier precautions and OSHA guidelines by signing appropriate form.
Purpose: The purpose of this policy is to delineate the procedure to be followed when a student or faculty member in any Health Division Program sponsored by Wallace State Community College has an accidental exposure to tuberculosis, bloodborne pathogens (including but not limited to HIV and HBV), or other harmful agents including but not limited to chemicals, infectious agents, or radiation. These policies are not intended to supersede the student/faculty's responsibility to use standard precautions and/or appropriate safety measures or equipment while on campus or in clinical lab.

Protocol

1. Determine the type of exposure (tuberculosis, bloodborne, other).
2. Initiate appropriate immediate/emergent exposure protocol.
3. Complete concurrent protocol for follow-up care.
5. Forward all appropriate documentation to program director or Dean of the Health Sciences.

**It is the responsibility of the program director to ensure that the policy is followed, that the Dean for the Health Sciences is notified, and that appropriate documentation is completed.**
Health Division
Post-Exposure Management Protocol Glossary of Terms

1. **HDS**–a health division student currently enrolled in any of the health division programs at Wallace State Community College in which learning activities routinely include contact with patients and/or blood and other body fluids from these patients in a health care or laboratory setting.

2. **PEP**–post-exposure prophylaxis.

3. **Bloodborne pathogen**–pathogenic organisms that are present in blood and blood products and body fluids that may cause disease in humans. May include but is not limited to HBV or HIV.

4. **HBV**–Hepatitis B virus.

5. **HIV**–human immunodeficiency virus.

6. **HCV**–Hepatitis C virus.

7. **Exposure**–any contact with a harmful agent that requires consideration of PEP.
   a. **Percutaneous**–needle stick or cut with a sharp object.
   b. **Contact**–with mucus membrane or non-intact skin (chapped, abraded or afflicted with dermatitis).

Exposures are further categorized as to route of exposure, extent of exposure, and duration of exposure as defined below:

a. **Route** – percutaneous
b. **Route** – contact
c. **Route** - inhalation - exposure to an airborne, gas or aerosolized agent by breathing.
d. **Extent** - less severe - small amounts of harmful substance involved with a small area of exposure with no penetration of the skin.
e. **Extent** - more severe - moderate amounts of harmful substance involved; can include a penetrating injury if no injection of agent occurs.
f. **Extent** - extensive - large amounts of potentially harmful substance and/or an exposure over a wide area of the body surface or via a deep penetration of the skin.
g. **Duration**: short - exposure for less than one minute.
h. **Duration**: moderate - exposure for 1 - 4 minutes.
i. **Duration**: prolonged - exposure for greater than five minutes.

8. **Blood**–human blood or components (i.e., platelets, packed red cells, etc.) or products made from blood.

9. **Body fluids**:
   a. Semen or vaginal secretions, or any other body fluid contaminated with visible blood that have been implicated in the transmission of HIV.
   b. Cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluid which have an undetermined risk for transmitting HIV.

10. **Contaminated**–the presence or reasonable anticipated presence of blood or other infectious material on an item or surface.

11. **Contaminated material**–any laundry, linens, dressings, breakage, paper, equipment or other items which have been or may have been exposed to infectious material and which require disposal according to hazardous waste guidelines.

12. **Direct contact**–contact with blood or body fluids during which barrier protection was either not used or was ineffective in protecting skin or mucus membranes.

13. **Harmful agent**–includes but is not limited to any chemical, infectious material, or radiation which has the potential to result in immediate and/or long-term harmful effects to the exposed individual.

14. **Other potentially contaminated or infectious material**–all human body fluids, especially saliva when oral trauma has or is suspected to have occurred, that is visibly contaminated with blood; all body fluids in situations where differentiation between body fluids is difficult or impossible.

15. **Parenteral**–a route which allows organisms or substances to enter the bloodstream; includes but is not limited to pierced mucus membranes or skin which is no longer intact due to needle stick, human or animal bites, insect stings, cuts or abrasions.

16. **Sharps**–any object which can penetrate the skin including but not limited to needles, scalpels, broken glass, torn metal, weapons, exposed ends of wires, blades, or scissors.

17. **Source individual**–any individual whose blood or potentially infectious materials may be the source of exposure for the HDS.

18. **Standard Precautions**–the procedures which delineate the way the HDS/health care worker treats human blood, blood components, blood products, or body fluids as if they are known to be infectious.

19. **Tuberculosis**–a chronic infection, most often respiratory, generally transmitted by inhalation or ingestion of infected droplets.
Post-Exposure Management Protocol for Bloodborne Pathogens

Purpose: The purpose of this protocol is to delineate the procedures to be followed when a student or faculty member in any Health Division program at Wallace State Community College has an accidental exposure to a bloodborne pathogen while participating in any college activity. At all times, it is the student/faculty’s responsibility to use standard precautions.

Immediate/Emergent Procedures

1. Immediately cleanse the affected area with soap and water.
2. If the skin has been punctured, bleeding should be encouraged if not excessive.
3. If the mucus membrane has been splashed, irrigate copiously with water. Do not use caustic agents such as bleach to flush the skin or mucus membranes.
4. Provide applicable first aid.
5. Immediately report exposure to faculty and/or preceptor.
6. Faculty/preceptor will fill out the appropriate risk management report (clinical agency and college) and institute the agency procedure for exposure.
7. Refer the exposed individual to the agency emergency room, private physician, or local Public Health Department for PEP advisement within 2 hours of exposure.

***All expenses related to testing and PEP are the sole responsibility of the student.

Concurrent Procedures for Faculty/Preceptor

1. Document the exposure on the appropriate risk management forms for the agency and college.
2. Identify and document the source individual, unless not feasible or prohibited by state or local law.
3. Test the source blood after consent is obtained to ascertain HBV, HCV or HIV infectivity.
4. If consent is unobtainable, document that legally required consent cannot be obtained.
5. If consent is not needed, then test the source blood as soon as possible.
6. If source status for HBV, HCV and/or HIV is known to be positive, then source testing is not necessary. However, collect information about the source’s stage of infection (e.g., asymptomatic or AIDS), CD4+, T-cell count, viral load testing, and current and previous antiretroviral therapy. Send information with the exposed individual for evaluation for PEP. If information is unavailable, do not delay PEP. The regimen, if instituted, can be adjusted if information is available at a later time.
7. Collect a blood sample for baseline testing from the exposed individual and send for testing if consent is obtained. If consent for HIV serologic testing is not obtained at this time, have the agency preserve the sample for 90 days.
8. Inform the exposed individual of the outcome of source testing.
Wallace State Community College
Bloodborne Pathogen Exposure Report Form

Student’s Printed Name: __________________________________________ Student #:  W

Date of Exposure: ______________________ Time of Exposure: ______________________

Exposed Student’s Program of Study: __________________________________________

Agency where exposure occurred: __________________________________________

Brief description of the exposure:
(Circumstances related to the exposure, blood/body fluids to which the student was exposed; contributing factors such as sharp devices.)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Details of the exposure:
Type/amount of fluid; severity of exposure; volume of fluid injected, if any, volume and duration of contact for skin/mucus membrane exposure.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Personal protective equipment in use at time of exposure: (gloves, mask, gown)

Source Description
A. HIV status specifically HIV positive: stage of disease, history of antiretroviral therapy, viral load if known.
B. HBV status - include results of appropriate testing.
C. HCV status - include results of appropriate testing.
D. Description of any other potentially infectious diseases from source.

Follow-up: WSCC accident/incident report, testing, PEP recommendations, Public Health Department report, agency follow-up.

Student Signature ____________________________________ Date _________________

Student Printed Name ___________________________ Student W# __________________

WSCC Faculty Signature _________________________ Date _____________________
Post-Exposure Management Protocol for Harmful Agents

**Purpose:** The purpose of this protocol is to delineate the procedures to be followed when a student or faculty member at Wallace State Community College has an accidental exposure to a harmful agent while participating in any college sponsored activity. At all times, it is the student/faculty’s responsibility to use standard precautions, safety equipment for safety procedures.

Immediate/Emergent

1. See immediate assistance from supervisory personnel.
2. Institute agent-specific first aid if appropriate (i.e., flushing copiously for chemical splashes, etc.).
3. Refer student/faculty **immediately** to the ER for follow-up care as indicated.

   All expenses related to transport and care are the sole responsibility of the student.

Concurrent Procedures for Faculty/Preceptor

1. Document exposure on the appropriate risk management forms for the agency and college.
2. Forward copy of agency risk management form and college form to appropriate faculty or program director.
3. Faculty/program director will immediately institute appropriate follow-up if indicated such as notification of the Public Health Department.
<table>
<thead>
<tr>
<th><strong>Wallace State Community College</strong></th>
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<tr>
<td><strong>Harmful Agent Exposure Documentation Form</strong></td>
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<tr>
<th><strong>Student’s Printed Name</strong></th>
<th><strong>Student W#</strong></th>
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<tr>
<th><strong>Date of Exposure</strong></th>
<th><strong>Time of Exposure</strong></th>
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<tr>
<th><strong>Exposed Student’s Program of Study</strong></th>
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<table>
<thead>
<tr>
<th><strong>Agency where exposure occurred</strong></th>
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**Brief description of the exposure:** Type and source of exposure; circumstances related to the exposure; contributing factors.

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**Details of the exposure:** Extent, severity, and duration of exposure.

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**Personal protective equipment in use at time of exposure:** (gloves, mask, gown, lead apron)

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**Source Description:** Disease state and extent if exposure to infectious agent; MSDS classification if chemical; type of radiation if appropriate.

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**Description of exposed student/faculty:** Baseline testing; any symptoms demonstrated.

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**PEP:** Treatment if indicated:

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**Reporting:** WSCC accident/incident report, Public Health Department if required, personal physician if seen.

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<tr>
<th><strong>Student Signature</strong></th>
<th><strong>Date</strong></th>
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<tr>
<th><strong>Student Printed Name</strong></th>
<th><strong>Student W#</strong></th>
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<tr>
<th><strong>WSCC Faculty Signature</strong></th>
<th><strong>Date</strong></th>
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Post-Exposure Management Protocol for Tuberculosis

**Purpose:** The purpose of this protocol is to delineate the procedures to be followed when a student or faculty member at Wallace State Community College has an accidental exposure to tuberculosis while participating in any college sponsored activity. At all times, it is the student/faculty’s responsibility to use standard precautions, safety equipment or safety procedures.

**Emergent**

1. Document the exposure per agency and college policy.

2. Upon notification or discovery of exposure to TB, the student/faculty member must report to the local Public Health Department. Reporting **must** be within 1 week of notification or discovery.

3. Complete the initial post-exposure PPD per Public Health Department policy. **If the exposed individual has a positive baseline PPD, then Public Health Department policy must be followed.**

4. Return a copy of the initial PPD results to the appropriate program director.

5. Complete the post-exposure checklist.

**Follow-up Protocol**

1. Complete the follow-up PPD at **12 weeks** according to Public Health Department policy.

2. Return 12-week PPD results to appropriate program director.

3. Follow all recommendations of the Public Health Department for PEP.

4. Ensure that the program director is provided with the results of any and all testing and recommendations for PEP.

*The Public Health Department provides testing free of charge in exposure situations. Should the individual choose to be seen by any other health professional / agency, all expenses are the sole responsibility of the student.
Wallace State Community College
Tuberculosis Exposure Documentation Form

Student’s Printed Name ___________________________ Student W# __________

Date of Exposure ___________________________ Time of Exposure __________

Exposed Student’s Program of Study ____________________________________________

Agency where exposure occurred ________________________________________________

Brief description of the exposure: Source of exposure; circumstances related to the exposure; contributing factors.

_________________________________________________________________________

_________________________________________________________________________

Details of the exposure: Extent, severity, and duration of exposure.

_________________________________________________________________________

_________________________________________________________________________

Personal protective equipment in use at time of exposure: (gloves, mask, gown)

_________________________________________________________________________

_________________________________________________________________________

Source Description: Disease state and extent of exposure.

_________________________________________________________________________

_________________________________________________________________________

Description of exposed student/faculty: Baseline testing; any symptoms demonstrated.

_________________________________________________________________________

_________________________________________________________________________

PEP: Treatment if indicated:

_________________________________________________________________________

_________________________________________________________________________

Reporting: WSCC accident/incident report, Public Health Department if required, personal physician if seen.

_________________________________________________________________________

_________________________________________________________________________

Student Signature ___________________________ Date ________________________

Student Printed Name ___________________________ Student W# __________

WSCC Faculty Signature ___________________________ Date ________________________

Revised 01/03/18

WSCC DNE 2017-2018 Nursing Handbook
Wallace State Community College
Post Exposure Checklist

Date ______________________

Student’s Printed Name ___________________________    Student W# ______________________

Exposed Student’s Program of Study ____________________________

Reported to: ____________________________

Type of Exposure (check or list)

☐ Bloodborne Pathogen    ☐ Tuberculosis    ☐ Other Harmful Agent ____________________________

1. Post-exposure management protocol initiated.
2. Student/faculty PEP evaluation initiated according to protocol
3. Risk management form completed (college)
4. Risk management form completed (agency)
5. Source specimen(s) collected if indicated
6. Student/faculty specimen(s) collected if indicated
7. Student/faculty provided results of source blood test OR
   • Consent from source unobtainable OR
   • Testing unnecessary due to previously positive status
8. Documentation forwarded to Public Health Department if indicated
   a. Baseline PPD for TB exposure
   b. 12 week PPD for TB exposure
   c. Chest x-ray, if indicated
   d. Appropriate prophylaxis for TB if indicated.
9. Documentation on file in Program Director’s Office.

Student Signature ___________________________    Date ______________________

Student Printed Name ___________________________    Student W# ______________________

WSCC Faculty Signature ___________________________    Date ______________________
The Alabama College System Nursing Programs Essential Functions

The Alabama College System endorses the Americans' with Disabilities Act. In accordance with College policy, when requested, reasonable accommodations may be provided for individuals with disabilities.

Physical, cognitive, psychomotor, affective and social abilities are required in unique combinations to provide safe and effective nursing care. The applicant/student must be able to meet the essential functions with or without reasonable accommodations throughout the program of learning. Admission, progression and graduation are contingent upon one's ability to demonstrate the essential functions delineated for the nursing programs with or without reasonable accommodations. The nursing programs and/or its affiliated clinical agencies may identify additional essential functions. The nursing programs reserve the right to amend the essential functions as deemed necessary.

In order to be admitted and to progress in the nursing program one must possess a functional level of ability to perform the duties required of a nurse. Admission or progression may be denied if a student is unable to demonstrate the essential functions with or without reasonable accommodations.

The essential functions delineated are those deemed necessary by the Alabama Community College System nursing programs. No representation regarding industrial standards is implied. Similarly, any reasonable accommodations made will be determined and applied to the respective nursing program and may vary from reasonable accommodations made by healthcare employers.

The essential functions delineated below are necessary for nursing program admission, progression and graduation and for the provision of safe and effective nursing care. The essential functions include but are not limited to the ability to:

1) Sensory Perception
   a) Visual
      i. Observe and discern subtle changes in physical conditions and the environment
      ii. Visualize different color spectrums and color changes
      iii. Read fine print in varying levels of light
      iv. Read for prolonged periods of time
      v. Read cursive writing
      vi. Read at varying distances
      vii. Read data/information displayed on monitors/equipment
   b) Auditory
      i. Interpret monitoring devices
      ii. Distinguish muffled sounds heard through a stethoscope
      iii. Hear and discriminate high and low frequency sounds produced by the body and the environment iv) Effectively hear to communicate with others
   c) Tactile
      i. Discern tremors, vibrations, pulses, textures, temperature, shapes, size, location and other physical characteristics
   d) Olfactory
      i. Detect body odors and odors in the environment

2) Communication/Interpersonal Relationships
   a) Verbally and in writing, engage in a two-way communication and interact effectively with others, from a variety of social, emotional, cultural and intellectual backgrounds
   b) Work effectively in groups
   c) Work effectively independently
   d) Discern and interpret nonverbal communication
   e) Express one's ideas and feelings clearly
   f) Communicate with others accurately in a timely manner
   g) Obtain communications from a computer
3) Cognitive/Critical Thinking
   a) Effectively read, write and comprehend the English language
   b) Consistently and dependably engage in the process of critical thinking in order to formulate and
      implement safe and ethical nursing decisions in a variety of health care settings
   c) Demonstrate satisfactory performance on written examinations including mathematical
      computations without a calculator
   d) Satisfactorily achieve the program objectives

4) Motor Function
   a) Handle small delicate equipment/objects without extraneous movement, contamination or
      destruction
   b) Move, position, turn, transfer, assist with lifting or lift and carry clients without injury to clients, self
      or others
   c) Maintain balance from any position
   d) Stand on both legs
   e) Coordinate hand/eye movements
   f) Push/pull heavy objects without injury to client, self or others
   g) Stand, bend, walk and/or sit for 6-12 hours in a clinical setting performing physical activities
      requiring energy without jeopardizing the safety of the client, self or others
   h) Walk without a cane, walker or crutches
   i) Function with hands free for nursing care and transporting items
   j) Transport self and client without the use of electrical devices
   k) Flex, abduct and rotate all joints freely
   l) Respond rapidly to emergency situations
   m) Maneuver in small areas
   n) Perform daily care functions for the client
   o) Coordinate fine and gross motor hand movements to provide safe effective nursing care
   p) Calibrate/use equipment
   q) Execute movement required to provide nursing care in all health care settings
   r) Perform CPR and physical assessment
   s) Operate a computer

5) Professional Behavior
   a) Convey caring, respect, sensitivity, tact, compassion, empathy, tolerance and a healthy attitude
      toward others
   b) Demonstrate a mentally healthy attitude that is age appropriate in relationship to the client
   c) Handle multiple tasks concurrently
   d) Perform safe, effective nursing care for clients in a caring context
   e) Understand and follow the policies and procedures of the College and clinical agencies
   f) Understand the consequences of violating the student code of conduct
   g) Understand that posing a direct threat to others is unacceptable and subjects one to discipline
   h) Meet qualifications for licensure by examination as stipulated by the Alabama Board of Nursing
   i) Not to pose a threat to self or others
   j) Function effectively in situations of uncertainty and stress inherent in providing nursing care
   k) Adapt to changing environments and situations
   l) Remain free of chemical dependency
   m) Report promptly to clinicals and remain for 6-12 hours on the clinical unit
   n) Provide nursing care in an appropriate time frame
   o) Accepts responsibility, accountability, and ownership of one's actions
   p) Seek supervision/consultation in a timely manner
   q) Examine and modify one's own behavior when it interferes with nursing care or learning
Upon admission, an individual who discloses a disability can request reasonable accommodations. Individuals will be asked to provide documentation of the disability in order to assist with the provision of appropriate reasonable accommodations. The respective College will provide reasonable accommodations but is not required to substantially alter the requirements or nature of the program or provide accommodations that inflict an undue burden on the respective College. In order to be admitted one must be able to perform all of the essential functions with or without reasonable accommodations. If an individual's health changes during the program of learning, so that the essential functions cannot be met with or without reasonable accommodations, the student will be withdrawn from the nursing program. The nursing faculty reserves the right at any time to require an additional medical examination at the student's expense in order to assist with the evaluation of the student's ability to perform the essential functions.

Requests for reasonable accommodations should be directed to Lisa Smith, Director of Special Populations, at 256.352.8052 or at lisa.smith@wallacestate.edu.
Anticipated Expenses for Completion of Degree

The following is a list of expenses that can be expected throughout the Nursing program. The one-time only expenses are not all due at the beginning of the program. Keep in mind that these expenses are estimates only and may vary (i.e., physical exam, immunizations, transportation costs, etc.).

<table>
<thead>
<tr>
<th>One Time Only Expenses</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing Entrance Exam (ACT)</td>
<td>60.00</td>
</tr>
<tr>
<td>Physical Exam (Yearly)</td>
<td>75.00</td>
</tr>
<tr>
<td>Immunizations</td>
<td>250.00</td>
</tr>
<tr>
<td>Background Check (Initial)</td>
<td></td>
</tr>
<tr>
<td>• Yearly update $10</td>
<td>49.00</td>
</tr>
<tr>
<td>Uniforms</td>
<td>200.00</td>
</tr>
<tr>
<td>Equipment (Stethoscope, etc.)</td>
<td>75.00</td>
</tr>
<tr>
<td>HESI Exit Exam</td>
<td>120.00</td>
</tr>
<tr>
<td>Graduation Fee</td>
<td>30.00</td>
</tr>
<tr>
<td>Pictures</td>
<td>60.00</td>
</tr>
<tr>
<td>State Board and Licensing Fee</td>
<td>285.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses Per Semester</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Testing</td>
<td>13.25</td>
</tr>
<tr>
<td>Immunization Tracker</td>
<td>15.00</td>
</tr>
<tr>
<td>Tuition</td>
<td>1,900.00+</td>
</tr>
<tr>
<td>Books</td>
<td>900.00+</td>
</tr>
<tr>
<td>Clinical Expenses</td>
<td>Varied</td>
</tr>
<tr>
<td>(Transportation, Parking, Meals, etc.)</td>
<td></td>
</tr>
<tr>
<td>Standardized Testing Fee (ATI)</td>
<td>312.00+</td>
</tr>
<tr>
<td>Insurance (Liability &amp; Accident)</td>
<td>14.50</td>
</tr>
<tr>
<td>Insurance (Major Medical)</td>
<td>Student responsible for individual purchase</td>
</tr>
</tbody>
</table>

Standardized Tests

The Department of Nursing Education requires students to participate in a standardized testing program to assist in evaluating achievement of the content of the courses throughout the curriculum. Included in this testing program are:

1. Examinations to evaluate areas that are essential for academic success.
2. Diagnostic and Achievement Tests help to identify your strengths and areas which need remediation in comprehending the content of the courses.
3. Pre-RN/PN Examination (mock licensure exam) provides reliable predictors of success for the NCLEX exam.
4. Specific examinations may be required as a part of progression in identified nursing courses.
Wallace State Community College
Health Science Division

Professional Code of Conduct Acknowledgment and Consent

I have carefully read the Wallace State Community College Health Science Division Professional Code of Conduct and hereby declare that I will adhere to this code from the time of signing and throughout my enrollment in a health program at Wallace State Community College.

Student Signature: ____________________________ Date: ____________________________

Student Printed Name: ____________________________ Student W#: ____________________________
Wallace State Community College
Department of Nursing Education

Philosophy, Conceptual Framework and Program Objectives

This is to confirm that (PRINTED Student Name) ____________________________, I have read the Philosophy, Conceptual Framework and Program Objectives of the Department of Nursing Education of Wallace State Community College. I have also read the Nursing Student Handbook regarding behavior and academic and clinical expectations. I agree to abide by these policies.

Failure to comply with any of these policies may result in dismissal from the Nursing Program.

1. I agree to abide by the regulations of the Infected Healthcare Worker Act.
2. I agree to have my test grade posted via Blackboard by my student number.
3. I agree to abide by the rules for use of the computer laboratory. I will not use any DVDs or CD's other than those supplied by the DNE or the college.
4. I have viewed any appropriate videos on universal precautions and OSHA guidelines and read the barrier precaution policies and agree to abide by these policies.
5. Upon assignment to the clinical facilities, I will read the barrier precaution policies and clarify any discrepancies with the instructor.
6. I understand that as part of fulfilling clinical hours, students may be required to travel to the nearest available facility which may be a few hours in some instances. All travel expenses including parking expenses at some facilities are the responsibility of the student.
7. I understand that under the clinical contract between the clinical facility and the college, students may not file suit against the facility.
8. I understand that some clinical agencies require proof of individual student's health insurance. Proof of coverage for all students is required at the beginning of each semester. Students are also required to notify the Department of Nursing Education immediately of any change in health insurance coverage.
9. I understand clinical assignments that are made by the clinical coordinator or program director. I shall not, with the exception of reporting tardiness or absence, contact the clinical agency without going through the proper chain of command. I understand that failure to abide by this policy can result in dismissal from the program.
10. I understand that if my name is on the Abusive Caregiver List, then I am ineligible under the Omnibus Reconciliation Act to provide patient care in any clinical facility which receives Medicare/Medicaid funding. This will severely limit my assignment to clinical agencies, and may result in my inability to meet course objectives and/or write the NCLEX-RN/PN (as determined by the ABN).
11. I understand that I will submit a background check prior to clinical agency assignment.
12. I understand that I may be prohibited from a specific clinical agency based on the outcome of the background check.

Student Signature ____________________________ Date __________________________
Student Printed Name ____________________________ Student W# __________________________
The Health Insurance Portability and Accountability Act (HIPAA) of 1996 includes provisions that protect the security and confidentiality of health information.

Any information communicated by a patient to a health care provider is considered privileged communication, which means it is private. Any information obtained by a health care student/worker by any means, i.e. via electronic form, written form, observation, etc. is considered confidential.

A breach of confidentiality occurs when patient information is disclosed to others who do not have a right to access the information. Disclosure of private patient information to unauthorized individuals is a violation of the federal law – HIPAA.

It is a violation of HIPAA to access patient information outside your scope of work as a student.

You will be required to complete more in depth HIPAA training as part of your clinical orientation. By signing below, you are acknowledging understanding of the basics of HIPAA confidentiality and agreeing to abide by HIPAA privacy rules by maintaining confidentiality in regard to patient information you have access to in on campus and clinical settings.

Student Signature

Date

Student Printed Name

Student W#
1. Students are expected to arrive on time to all clinical assignments. Contact your clinical instructor by phone if you are arriving late or will be absent to clinical. If unable to reach the clinical instructor by cell, then call the assigned clinical unit and ask to speak with the clinical instructor. Students who arrive late (15 minutes after assigned time) will receive a Clinical Warning regardless of the reason for the first offense and an Unsatisfactory for the second tardy after 15 minutes. Students will receive an Unsatisfactory on the clinical occurrence report if arriving late without contacting their clinical instructor. Students who arrive later than 60 minutes to clinical will not be permitted to attend clinical that day and will be required to complete a clinical make up assignment. Students should keep their instructor’s number and or facility unit number readily available to use as needed during the clinical time frame. If a student is absent from clinical regardless of the reason the student will be required to complete a clinical make up assignment prior to the final exam unless prior arrangements are made. Clinical hours are required to be completed as part of the course grade. Students are required to email the lead course instructor and clinical coordinator when an absence occurs on the day that the absence occurs. Students will also attach a copy of the email sent to the instructor & coordinator on the clinical absence form found in the course packet.

2. Students are expected to arrive to clinical prepared for the day. Students will be sent home if they do not have their WSCC photo ID on their uniform. In addition to following the uniform policy of blue scrubs with patch on left chest, plain brown, black, or white leather solid shoes with a covered heel, short nails with clear polish only, each student must also bring their stethoscope, scissors, watch with a second hand, pen light, calculator and an ink pen. Students may wear white only under their uniform. Students are required to bring their clinical packet each week and the facility orientation forms on the first day of clinical. Hair should be pulled back away from the face. Jewelry may include a wedding band and one pair of earring studs only. Failure to arrive prepared with appropriate uniform, paperwork and equipment will constitute a Clinical Warning for the first day this occurs and a clinical Unsatisfactory for the second day of unpreparedness on the clinical occurrence form. The instructor may then choose to send the student home for arriving without required uniform, paperwork and or equipment and the student will have to present a clinical make up assignment to complete the course requirements.

3. Each student will be required to complete a clinical make-up assignment for the first clinical absence regardless of the reason for the absence. Each student will have to make up the missed clinical hours for the second clinical absence at a site determined by the clinical coordinator. The student may receive a Clinical Failure regardless of the course grade after missing > 20% of clinical/simulation hours in the same course. Students may not ask their clinical instructors to provide them an opportunity to attend another clinical day to avoid doing a make-up clinical assignment.

4. Students who fall asleep at clinical will be awakened and given a Clinical Unsatisfactory, be sent home from clinical, and will have to complete a clinical make-up assignment at the end of the semester. If this behavior occurs again the student will be sent home from clinical and be required to have a release to return to the clinical site from their physician.

5. Students may not have a cell phone turned on inside the clinical facility except as permitted under the Electronic Device Policy. You may have a cell phone on to walk from the parking area to the facility but then the cell phone is to be turned off. If a student takes a picture with their phone inside a clinical facility and/or patient area the student may be dismissed from the program.
6. Students may not discuss or mention anything regarding clinical and or the clinical facility on any social media sites. Violation of this can result in dismissal from the nursing program. Students may not look at information on a patient unless they are specifically assigned to and caring for that patient.

7. Students are not permitted to question techniques or correct hospital staff or physicians. If a student has a question or concern about techniques or procedures observed then the student should discuss this privately with their instructor who will be responsible for passing the concern on to the charge nurse or manager. It is not part of the student role to monitor or critique the techniques of the staff.

8. Student Incivility will not be tolerated in the clinical setting. Students are required to speak with respect to their instructors, classmates, hospital staff, patients, and visitors. Students cannot use derogatory comments, offensive gestures, or language in the clinical setting. Students are expected to maintain a professional demeanor and exhibit sensitivity while at clinical and refrain from loud talking or laughing in patient areas.

9. Students should expect to provide many aspects of care in the clinical setting including personal hygiene, assessment, documentation, medication administration and communication. Students should anticipate performing the role of the patient care tech, housekeeping, practical nurse, and registered nurse during their clinical day.

10. Students are expected to exhibit enthusiasm, eagerness, and willingness to learn while at clinical regardless if the student is interested in that particular area of nursing. It is inappropriate to comment or give the impression that the student is not interested in a particular area of nursing. Patients and staff should perceive a genuine interest in learning from the student.

11. Students should expect constructive feedback from their clinical instructors and recognize that this feedback is not personal but rather given to assist the student in meeting the course objectives and the goals of the professional nurse.

12. Students should discuss concerns or issues at clinical with their instructor first and then with their lead course instructor and or clinical coordinator if the issue is not resolved.

13. Students must maintain patient confidentiality at all times and may not discuss privileged information with classmates, family, friends or anyone who is not involved in caring for the patient. Violation of patient confidentiality will result in dismissal from the nursing program.

14. Students may not smoke anything during lunch or other breaks regardless of clinical location.

15. Students should review medications prior to administration and be prepared to validate classification, safe dose, any nursing considerations. In addition the student may be asked to verify fluid rate, dilution, and compatibility with IV meds.

My signature on this form validates that I understand and agree to comply with the clinical behaviors:

<table>
<thead>
<tr>
<th>Student Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Printed Name</td>
<td>Student W#</td>
</tr>
<tr>
<td>(Fa 16/kw.ac)</td>
<td></td>
</tr>
</tbody>
</table>

Revised 01/03/18

WSCC DNE 2017-2018 Nursing Handbook
Wallace State Community College
Department of Nursing Education

Clinical Responsibility and Confidentiality Statement

Printed Student Name ______________________________________________

In discharging my Program responsibilities at the Healthcare Facility, I, the undersigned, agree as follows:

1. To abide by the Policies, Procedures, By-Laws, Rules and Regulations of the Facility and Medical Staff and that I will not disrupt, interfere with or adversely affect the operation and services of the Facility.

2. To comply with all applicable federal, state and local statues and all regulations and guidelines of applicable accrediting bodies in connection with the performance of Program activities:

3. To comply with my responsibility under applicable Federal law and this Agreement to keep confidential any information regarding Facility patients, as well as all confidential information of the Facility. The undersigned agrees, under penalty of law, not to reveal to any person or persons except authorized clinical staff and associated personnel any specific information regarding any patient and further agrees not to reveal to any third party any confidential information of the Facility, except as required by law or as authorized by the Facility:

4. To obtain prior written approval from the Facility and School before publishing any materials relating to the Program:

5. To be certified in Cardio-Pulmonary Resuscitation (CPR) and provide the Facility with evidence of same if in clinical area:

6. To obtain/maintain medical insurance while in the nursing program.

7. That for and in consideration of the benefits provided me in the Agreement in the form of experience in evaluation and treatment of patients of the Facility, I and my heirs, successors and/or assigns do hereby covenant and agree to assume all risks of, and be solely responsible for, any injury or loss sustained by me while participating in Program operated by School at the Facility unless such injury or loss arises solely out of the Facility's gross negligence or willful misconduct.

8. That I am to be treated as a trainee who has no expectation of receiving compensation or future employment from the Facility or School.

Student Signature _____________________________ Date __________________

Student Printed Name ___________________________ Student W# __________________
Health Science Division

Consent to Alcohol and Drug Testing

Printed Student Name ________________________________________________

I have received and carefully read the Drug Testing Policy and fully understand its contents. I understand that by enrolling in a health profession program, I will be required to submit to mandatory drug testing. I voluntarily agree to submit to specimen collection for analysis for alcohol and drug use. I understand that my continued participation in the health profession program is conditioned upon satisfaction of the drug testing requirement through the college designated vendor. I further understand that if I have a positive drug screen or if I refuse to consent to mandatory testing, both announced and unannounced, that I will be dismissed from the health program. A grade of “F” will be recorded for the course(s) if I do not officially withdraw. The College reserves the right but has no duty to lift the prohibition against reenrollment upon its consideration of written application for readmission evidencing that the student has demonstrated an ability and readiness to comply with all College health division regulations. The College will not consider such a request until at least two years from the date of dismissal. Requests should be directed to the Vice President for Students Office. The appeal process is outlined in the college catalog in the Health Science Programs of Study section.

I further agree and consent to the disclosure of results of drug testing and their release to the Dean of Health Sciences, program director, and appropriate clinical representative(s) in order that my eligibility to participate in the required clinical activities can be determined.

Student Signature ___________________________ Date ___________________________

Student Printed Name ___________________________ Student W# ___________________________

Program Director ___________________________ Date ___________________________

Program ___________________________
Wallace State Community College
Health Science Division

Background Check Consent and Release Form

Printed Student Name ________________________________________________

I have received and carefully read the Background Check policy and fully understand its contents. I understand that the healthcare program to which I am admitted requires a background check to comply with clinical affiliate contracts. By signing this document, I am indicating that I have read and understand Wallace State Community College’s policy and procedure for background checks. I voluntarily and freely agree to the requirement to submit to a Background Check and to provide a negative Background Check prior to participation in clinical learning experiences. I further understand that my continued participation in the healthcare program is conditioned upon satisfaction of the requirement of the Background Check with the vendor designated by the College.

I understand that if I have a positive Background Check and I am denied access to clinical learning experiences at the clinical affiliate(s), that I will be dismissed from the program. A grade of “F” will be recorded for the course(s) if I do not officially withdraw.

I further understand that any offense resulting in an arrest occurring after my admission into a healthcare program must be reported to the program director within 72 hours of the arrest or I will be subject to dismissal from the program.

A copy of this signed and dated document will constitute my consent for release of the original results of my Background Check to the College. I direct that the vendor hereby release the results to the College. A copy of this signed and dated document will constitute my consent for the College to release the results of my background check to the clinical affiliate(s)’ specifically designated person(s). I direct the College to hereby release the results to the respective clinical affiliate(s).

I agree to hold harmless the College and its officers, agents, and employees from and against any harm, claim, suit, or cause of action, which may occur as a direct or indirect result of the background check or release of the results to the College and/or the clinical affiliates.

I understand that should any legal action be taken as a result of the Background Check, that confidentiality can no longer be maintained.

I agree to abide by the aforementioned policy. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone. I hereby authorize the College’s contracted agents to procure a background check on me. I further understand this signed consent hereby authorizes the College’s contracted agents to conduct necessary and/or periodic background checks as required by clinical affiliates.

Student Signature __________________________________________ Date ___________________

Student Printed Name __________________________________________ Student W# ___________________

Program Director __________________________________________ Date ___________________

Program __________________________________________
Wallace State Community College
Health Science Division

Simulation Center Rules and Procedures

Printed Student Name ________________________________________________

Wallace State Community College Simulation Center (WSCC SC) replicates a simulated clinical/laboratory experience. Therefore, all policies and procedures related to a clinical/laboratory setting will be implemented at the WSCC SC. Please note the following rules and regulations:

1. Participant performance in the Simulation Center may be considered part of the clinical experience and will be evaluated based on specific criteria as outlined by your instructor/facilitator. Participants are to interact with simulators as if they are real clients. Students are expected to follow departmental/institutional policies for clinical dress, preparation, and interaction with peers and clients (see Departmental Handbook).

2. All students are expected to come prepared to the simulated experience and be actively involved in the experience. This is to include any simulation prep assignments to be complete prior to the scheduled simulation. Students with incomplete or missing simulation prep assignments will be disallowed participation in the simulation and will be considered absent.

3. It is recommended to arrive 10 minutes prior to the scheduled simulation. Once a simulation session has begun, students will not be allowed to enter the simulation area and students will be considered absent. All simulation absences must be made up at the time designated by faculty to receive credit for the course. Simulation absences that have not been made up will result in an “I” in the course grade.

4. Only participants will be allowed into the Simulation Center. When entering and exiting WSCC SC, please do so quietly out of respect to others who may be actively participating in a simulation experience.

5. Cell phones are NOT allowed in the Simulation Center.

6. No food, drink, or gum is allowed in the simulation area.

7. Simulated activities may be recorded to video. Discussion of the simulated experiences will occur in the debriefing phase of the simulated experience. A debriefing session may occur at any time during the simulated experience. Confidentiality is to be maintained regardless of the methods used for communication (real time experience, video recording, and/or verbal communication). In order to maintain an optimal simulation experience for ALL learners, participants are to maintain strict confidentiality of ALL aspects of the simulation experience including but not limited to pre-briefing, in situ and debriefing phases. Breaches of the confidentiality may result in disciplinary action per the College’s Student Handbook Health Division Code of Conduct and Clinical Policies.

ACKNOWLEDGMENT

I have received and agree to abide by the above listed rules and procedures at the Wallace State Community College Simulation Center.

Student Signature ___________________________ Date ________________
Student Printed Name ___________________________ Student W# ____________________

Revised 01/03/18
WSCC DNE 2017-2018 Nursing Handbook
Release for Audiovisual Digital Recording and Still Photographs

Student Printed Name

Course/Scenario

Date

Still photography and continuous audiovisual (AV) digital recording will be utilized in the simulated patient environment of the WSCC SC. By signing this agreement, you are consenting to still photography (slides or print) and continuous AV digital recording while in the simulation center and/or skills labs. Photographs and/or recordings may be shown for educational, research, and/or administrative purposes. No commercial use of photographs or AV recordings will be made without written permission.

ACKNOWLEDGMENT

I have received and agree to abide by the above listed at the WSCC Simulation Center.

Student Signature ___________________________ Date ___________________________

Student Printed Name ___________________________ Student W# ___________________________

Program Director ___________________________ Date ___________________________

Program ___________________________
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Integrity</td>
<td>Mature behavior patterns that demonstrate a positive attitude and conduct above reproach.</td>
<td>DNE</td>
</tr>
<tr>
<td>Approved Health Care</td>
<td>A licensed physician, physician assistant or Certified Registered Nurse Practitioner Provider (CRNP)</td>
<td>DNE</td>
</tr>
<tr>
<td>Campus Laboratory</td>
<td>A laboratory experience on campus which provides the student with simulated practice for selected nursing skills.</td>
<td>DNE</td>
</tr>
<tr>
<td>Clinical Agency</td>
<td>A facility which provides the student with required or supplemental clinical experiences with clients across the lifespan.</td>
<td>DNE</td>
</tr>
<tr>
<td>Clinical decision making</td>
<td>A type of decision-making that combines clinical expertise, patient concerns, and evidence gathered from nursing science to arrive at a diagnosis and treatment recommendations within the scope of practice.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>Clinical Warning</td>
<td>Clinical behavior and/or work does not meet all aspects of the performance described in the behavior or performance is inconsistent. When a CW is awarded, the student is given specific criteria required to convert the CW to an S.</td>
<td>DNE</td>
</tr>
<tr>
<td>Community</td>
<td>A group of people with diverse characteristics who are linked by social ties, location, culture, or the sharing of joint actions.</td>
<td>National Institute of Health</td>
</tr>
<tr>
<td>Concept</td>
<td>A common characteristic that organizes information into cohesive categories that facilitates attainment of the knowledge and skills necessary to provide patient centered care within the family and community context. For example, the concept of oxygenation is relevant to many health alterations, including: asthma, CHF, COPD, anemia, pneumonia, postpartum hemorrhage, pre-op/post-op care, SIDS etc.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>Co-requisite Course</td>
<td>Courses that are taken in conjunction to a specified course. These are often in the form of associated laboratory or clinical courses.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>Course Failure</td>
<td>Lack of demonstration of expected academic and/or clinical behaviors as defined by individual course requirements.</td>
<td>DNE</td>
</tr>
<tr>
<td>Developmental</td>
<td>The period from infancy through adolescence.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>DNE</td>
<td>Department of Nursing Education</td>
<td>Department of Nursing Education</td>
</tr>
<tr>
<td>Evaluation</td>
<td>A method used to determine the degree of progress a student has achieved.</td>
<td>Department of Nursing Education</td>
</tr>
<tr>
<td>Evidenced Based Practice</td>
<td>Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.</td>
<td>QSEN</td>
</tr>
<tr>
<td>Exemplars</td>
<td>Minimum suggested activities and/or frequently seen alterations taught within a module of instruction representing commonly occurring concepts of health, wellness, and illness.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>Fit for Duty</td>
<td>A statement by an approved health care provider that a student meets the Essential Functions and may engage in theoretical and/or clinical activities without undue restrictions which may interfere with the ability to meet course requirements.</td>
<td>DNE</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
<td>Reference</td>
</tr>
<tr>
<td>-------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------</td>
</tr>
<tr>
<td>Graduate Competencies</td>
<td>Expected measurable levels of graduate performance that integrate knowledge, skills, and abilities. Competencies may include specific knowledge areas, clinical judgments, and behaviors based upon the role and/or scope of practice of the graduate.</td>
<td>ACEN</td>
</tr>
<tr>
<td>Health Care Domain</td>
<td>Contains the competencies identified by the Institute of Medicine including Evidence-Based Practice, Informatics, and Quality Improvement as well as elements essential to the delivery of safe and effective client care from the nursing perspective.</td>
<td>QSEN North Carolina Concept-based Learning Editorial Board 2011</td>
</tr>
<tr>
<td>Human Flourishing</td>
<td>Advocate for patients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings. Human flourishing is difficult to define, but it can be loosely expressed as an effort to achieve self-actualization and fulfillment within the context of a larger community of individuals, each with the right to pursue his or her own such efforts. The process of achieving human flourishing is a lifelong existential journey of hope, regret, loss, illness, suffering, and achievement. Human flourishing encompasses the uniqueness, dignity, diversity, freedom, happiness, and holistic well-being of the individual within the larger family, community, and population. The nurse helps the individual in efforts to reclaim or develop new pathways toward human flourishing.</td>
<td>NLN 2012</td>
</tr>
<tr>
<td>Individual Domain</td>
<td>Relating to the individual as a holistic, complex, multidimensional, unique, significant being with health, wellness, illness, quality of life, and achievement potential.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>Informatics</td>
<td>Use of information and technology to communicate, manage knowledge, mitigate error, and support decision making.</td>
<td>QSEN</td>
</tr>
<tr>
<td>Knowledge, Skills, and Abilities (KSA) Indicators</td>
<td>An alpha-numeric designator indicating the scope and depth of student learning and level of teaching and measurement by faculty. KSAs represent terminal levels and should be represented by adequate coverage within all measurement instruments related to the specified student learning outcome.</td>
<td>Alabama Community College System (ACCS)</td>
</tr>
<tr>
<td>Medical Emergency</td>
<td>A sudden, often unforeseen event that threatens health or safety.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>Meta-concept</td>
<td>An abstract, higher level concept designating other concepts that analyze the original concept.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>NLN</td>
<td>National League for Nursing.</td>
<td>NLN 2012</td>
</tr>
<tr>
<td>Nursing Domain</td>
<td>Concepts essential to the practice of nursing and unique to the contributions nurses make to the health care team. Key among these concepts is clinical decision making and caring interventions.</td>
<td>North Carolina Concept-based Learning Editorial Board 2011</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
<td>Reference</td>
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<tr>
<td>Nursing Judgment</td>
<td>Make judgments in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and that promote the health of patients within the family and community context. Nursing Judgment encompasses three processes: namely, critical thinking, clinical judgment, and integration of best evidence into practice. Nurses must employ these processes as they make decisions about clinical care, the development and application of research and the broader dissemination of insights and research findings to the community, and management and resource allocation.</td>
<td>NLN 2012</td>
</tr>
<tr>
<td>Patient Centered Care</td>
<td>Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs.</td>
<td>QSEN</td>
</tr>
<tr>
<td>Plan of Instruction (POI)</td>
<td>This document is used to establish standardized instruction throughout the college system for a specified course and outlines minimum content, objectives, scope of instruction, and student evaluation. Faculty members may exceed the content but must include all content provided in the POI. Faculty members use this document to make decisions related to delivery of the course to include methodology, instructional materials, and sequencing.</td>
<td>ACCS</td>
</tr>
<tr>
<td>Point of Care</td>
<td>Electronic documentation and testing at or near the site of patient care.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>Prerequisite Courses</td>
<td>Courses that must be successfully completed prior to admission into a specified course.</td>
<td>ACCS</td>
</tr>
<tr>
<td>Professional Identity</td>
<td>Implement one’s role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context. Professional identity involves the internalization of core values and perspectives recognized as integral to the art and science of nursing. These core values become self-evident as the nurse learns, gains experience, and grows in the profession. The nurse embraces these fundamental values in every aspect of practice while working to improve patient outcomes and promote the ideals of the nursing profession. Professional identity is evident in the lived experience of the nurse, in his or her ways of “being,” “knowing,” and “doing.”</td>
<td>NLN 2012</td>
</tr>
<tr>
<td>QSEN</td>
<td>Quality and Safety Education for Nurses</td>
<td>QSEN</td>
</tr>
<tr>
<td>Quality Improvement</td>
<td>Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.</td>
<td>QSEN</td>
</tr>
<tr>
<td>Safety</td>
<td>Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.</td>
<td>QSEN</td>
</tr>
<tr>
<td>Satisfactory Evaluation</td>
<td>Student demonstrated knowledge and preparation in performing all aspects of the behavior.</td>
<td>DNE</td>
</tr>
<tr>
<td>Scope of Practice</td>
<td>Nursing practice standards and guidelines that clarify the roles and relationships associated with regulation of nursing practice.</td>
<td>ANA</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
<td>Reference</td>
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<tr>
<td>Shall / Will / Must</td>
<td>A requirement.</td>
<td>DNE</td>
</tr>
<tr>
<td>Should / Ought</td>
<td>A recommendation.</td>
<td>DNE</td>
</tr>
<tr>
<td>Skills Validation</td>
<td>Instructor observation and documentation of student’s competency.</td>
<td>ACCS Nursing Faculty</td>
</tr>
<tr>
<td>Spirit of Inquiry</td>
<td>Examine the evidence that underlies clinical nursing practice to challenge the status quo, questions underlying assumptions, and offer new insights to improve the quality of care for patients, families, and communities. A spirit of inquiry is a persistent sense of curiosity that informs both learning and practice. A nurse infused by a spirit of inquiry will raise questions, challenge traditional and existing practices, and seek creative approaches to problems. The spirit of inquiry suggests, to some degree, a childlike sense of wonder. A spirit of inquiry in nursing engenders innovative thinking and extends possibilities for discovering novel solutions in ambiguous, uncertain, and unpredictable situations.</td>
<td>NLN 2012</td>
</tr>
<tr>
<td>Student Learning Outcomes</td>
<td>Statements of expectations written in measurable terms that express what a student will know, do, or think at the end of a learning experience; characteristics of the student at the completion of a course and/or program. Learning outcomes are measurable, learner-oriented abilities that are consistent with standards of professional practice.</td>
<td>ACEN</td>
</tr>
<tr>
<td>Student Learning Outcomes</td>
<td>Used to ensure adequate sampling of student knowledge as specified by the cognitive student learning outcomes within a specific module.</td>
<td>ACCS</td>
</tr>
<tr>
<td>Test Blueprint</td>
<td>Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.</td>
<td>QSEN</td>
</tr>
<tr>
<td>Teamwork and Collaboration</td>
<td>A process in which the nurse consciously influences a client or helps the client to a better understanding through verbal or nonverbal communication. Therapeutic communication involves the use of specific strategies that encourage the patient to express feelings and ideas and that convey acceptance and respect.</td>
<td>Mosby’s Medical Dictionary</td>
</tr>
<tr>
<td>Unsatisfactory Evaluation</td>
<td>Clinical behavior and/or work is either unsafe, inconsistent, or inadequate in meeting all aspects of the performance described in the behavior. When a U is given for the first time, the student is given specific criteria required to convert the U to an S.</td>
<td>DNE</td>
</tr>
<tr>
<td>Wellness</td>
<td>A state of well-being that includes self-responsibility; an ultimate goal; a dynamic, growing process; daily decision making in the areas of nutrition, stress management, physical fitness, preventive health care, and emotional health; and, most important, the whole being of the individual.</td>
<td>North Carolina Concept-based Learning Editorial Board 2011</td>
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</tbody>
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