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INTRODUCTION

PURPOSE OF THE STUDENT HANDBOOK

The purpose of this handbook is to acquaint students with the program structure, the resources available and the program policies that will help guide students during their nursing education. Every effort is made to ensure accuracy at the time of printing; however, the Walla Walla Community College Nursing Program reserves the right to change any provision or requirement at any time.

ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES

WWCC complies with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act (ADA) of 1990 as amended in 2008. Information regarding student accommodations may be obtained by contacting Claudia Angus, Coordinator of Disability Support Services, Walla Walla Community College, 500 Tausick Way, Walla Walla, WA 99362. Walla Walla campus: 509.527.4262, TDD 509.527.4412, claudia.angus@wwcc.edu; or Clarkston campus: Janet Danley, 509.758.1703, TDD 509.758.1714, janet.danley@wwcc.edu.

EQUAL OPPORTUNITY STATEMENT

Walla Walla Community College District No. 20 (WWCC) is committed to provide equal opportunity and nondiscrimination for all educational and employment applicants as well as for its students and employed staff, without regard to race, color, creed, national origin, sex, sexual orientation, including gender expression/identity, genetic information, marital status, age (over 40), the presence of any sensory, mental, or physical disability, the use of trained guide dog or service animal by a person with a disability, or status as a Vietnam and/or disabled veteran, National Guard member or reservist in accordance with the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Federal Rehabilitation of 1973, the Americans with Disabilities Act of 1990 and any other applicable Federal and Washington State laws against discrimination. Overall Affirmative Action/Equal Opportunity and Title IX program responsibility is assigned to Sherry Hartford, Vice President of Human Resources (509)527-4382. The College’s Section 504 Officer is Jose da Silva, Vice President of Student Affairs (509)527-4300.

COMMITMENT TO DIVERSITY

WWCC encourages its employees and students actively to promote, develop, and value diversity on campus and in the community.

TOBACCO FREE CAMPUS POLICY

September 1, 2016

Dear Nursing Student,

Welcome to the Nursing Program at Walla Walla Community College! We are glad that you chose to pursue your nursing education here. You will find that the nursing faculty is dedicated to helping you accomplish your educational goals of becoming a nurse. The nursing faculty will provide quality instruction, guidance, and support to assist in the learning process. We strive to make the learning environment one that takes into account different learning styles, different student strengths, and diversity in our student population.

Learning is a partnership between the student and instructor. As such, you have the responsibility to be an active learner, be prepared for your classes, and to demonstrate integrity in all interactions. The curriculum is challenging and will take hard work, but it will lead to one of the most rewarding professions available. We provide resources and guidance for learning to occur, but both the student and instructor have responsibilities in the learning partnership.

The information in this Nursing Student Handbook is provided to assist and guide you toward successful completion in this program. It is your reference for questions as you enter and continue in the program. You are responsible for reading the handbook, signing the forms at the end as indicated, returning the signed forms to the designated instructor, and for asking questions if any policy is unclear to you.

If you are having difficulties, please take advantage of the assistance offered to you by your nursing advisors and instructors. Your success is our goal!

Best wishes in your endeavors,

[Signature]

Kathleen Adamski, M.N., R.N.
Dean of Health Science Education
Director of Nursing Education
Walla Walla Community College
BRIEF HISTORY OF WWCC NURSING PROGRAM


In 1969, under the leadership of Ms. Kelly, an Associate Degree in Nursing (ADN) was offered through Walla Walla Community College for the first time. The PN to ADN concept of progression was begun in 1971. The LEGS (Learning Experience Guides for Nursing Students) curriculum was adopted in the fall of 1973 and utilized through June of 1990.

The program was originally accredited by the National League for Nursing in 1974 and has maintained this accreditation to the present time. In 2009, the program received an eight (8) year accreditation from the National League for Nursing Accrediting Commission (NLNAC) and an eight (8) year approval from the Washington State Nursing Care Quality Assurance Commission.


Originally, the classes were conducted in the old army barracks near the Walla Walla Airport. In 1967 classes were moved to the old Walla Walla High School building on Park Street. In 1974, Walla Walla Community College moved to its present location.

The ADN Nursing Program offered through the WWCC Clarkston Campus began as a PN Program in 1958 under the direction of the Clarkston School District. Classes were conducted in various community buildings and the Whittier Building located at 13th and Chestnut. The program became part of WWCC in 1971.

Prior to 1983, Clarkston students wishing to become registered nurses moved to Walla Walla or transferred to another school to complete the required academic and ADN nursing courses. In 1983, the Clarkston campus began to offer academic classes necessary for first year students continuing on to ADN. Second year ADN nursing courses continued to be offered on the Walla Walla campus. During the 1987/1988 school year, the ADN program was added to the already existing PN program at the Clarkston campus.

In Fall, 2007, the nursing faculty and students at both Walla Walla and Clarkston campuses moved into new facilities. These Health Science facilities contain advanced technology for the purpose of creating a new learning environment with a focus on simulation. The classrooms are equipped to deliver interactive television capabilities which connect the two campuses. Increased space for growth in student numbers is a primary need as the national and state nursing shortage continues to grow.

Well over 2,000 students have graduated from the Walla Walla Community College Nursing Program with many progressing to advanced degrees. In response to a nationwide initiative which encourages nurses to further their education by obtaining a Bachelor of Science in Nursing (BSN) degree, the WWCC Nursing Program added the Associate in Nursing Direct Transfer Agreement/Major Related Pathway (DTA/MRP) degree in Fall, 2015. This transfer degree allows the WWCC nursing graduate to transfer to a RN to BSN program in Washington State with only 1 year remaining for that degree.
The WWCC Nursing Program abides by the following Code of Ethics for Nurses:

**AMERICAN NURSES ASSOCIATION (ANA) CODE OF ETHICS FOR NURSES (2015)**
Copyright 2015, American Nurses Association, used with permission,
http://nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

2. The nurse’s primary commitment is to the patient, whether an individual, family, group, community, or population.

3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.

5. The nurse owes the same duties to self as to the others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.

6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.

7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.

8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.
The Associate Degree Nursing Program at WWCC is approved by the Washington State Nursing Care Quality Assurance Commission: 310 Israel Rd., Tumwater, WA 98501, phone (360) 236-4700, (www.doh.wa.gov). The Associate Degree Nursing Program is also accredited by the Accreditation Commission for Education in Nursing- ACEN (formerly called the National League for Nursing Accrediting Commission- NLNAC): 3343 Peachtree Road NE, Suite 850, Atlanta, Georgia 30326. Phone (404) 975-5000 (http://www.acenursing.org/).

The WWCC Nursing Program provides two Degrees/Certificates:

**Associate in Nursing DTA/MRP (Direct Transfer Agreement/Major Related Program) Degree**

Graduates who complete the Associate in Nursing DTA/MRP degree are eligible to take the National Council Licensure Examination-Registered Nurse (NCLEX-RN) exam to become licensed as a Registered Nurse. Passing the NCLEX-RN exam and completion of this transfer degree provide the general education and nursing courses for direct transfer with only one additional year of study to complete the Bachelor of Science in Nursing (BSN) degree at four-year institutions in Washington state. While the agreements with baccalaureate institutions assure the transfer of credit, the admission to a particular university program is not assured. Each institution has separate admission criteria which can be based on grades and other considerations.

**Practical Nursing Certificate**
(Please Note: Practical Nursing Certificate option is not accredited by ACEN)

The Practical Nurse is able to recognize and meet the basic needs of the client while providing nursing care under the direction and supervision of a registered nurse or licensed physician in routine nursing situations. Students who complete the first year ADN courses and additional coursework in the summer quarter are eligible to take the National Council Licensure Examination for Practical Nursing (NCLEX-PN). If successful, they are licensed as practical nurses (LPN).

**NURSING PROGRAM OUTCOMES**

1. The program’s three-year mean for the (NCLEX-RN) licensure pass rate will be at or above the national mean for the same three-year period.
   [WWCC 3 Year Average NCLEX-RN Pass Rate for 2015: 88%; National Mean for the same three-year period: 82%.

2. Seventy percent (70%) or more of students will earn an Associate level degree in nursing within three years of enrollment in the first nursing course (150% of the stated nursing program length).
   [WWCC 76% of the 2013 cohort received an ADN award within 150% of the stated nursing program length. Later classes are still in progress.]

3. Graduates will rate overall program satisfaction at average or above (> 2.5) on a 1-4 point scale.
   [WWCC 2015 graduates rated their overall program satisfaction as 3.7.]

4. Employers of the nursing program graduates will rate preparation of graduates at average or above (>2.5) on a 1-4 point scale.
   [WWCC Employers of 2015 nursing program graduates rated preparation of graduates at 3.5.]

5. Ninety percent (90%) of the nursing graduates will be employed in nursing and/or enrolled in a bachelor’s degree program six months after graduation.
   [WWCC 99% of 2015 graduates are employed in nursing and/or enrolled in a bachelor’s degree program.]
VISION, MISSION/PHILOSOPHY AND VALUES OF THE WWCC NURSING PROGRAM

Nursing Program Vision:

The Nursing Education program will ennoble the lives of our students and the profession of nursing in the communities we serve.

Nursing Program Mission:

It is the mission of the Nursing Education program to:

1. Transform the lives of nursing students to fulfill the increasingly complex role of entry-level professional nurses in the provision of safe, compassionate, culturally sensitive, evidence-based, ethically-grounded, and client-centered care;
2. Promote the well-being of a diverse patient population in the evolving healthcare environments of the communities we serve;
3. Facilitate academic progression of our students to the baccalaureate level and beyond to meet the healthcare needs of our communities, state, and nation.

This mission is accomplished in our nursing students, patient populations, and nursing profession by:

1. Providing a supportive, engaging, and progressive learning environment which fosters:
   a. professional integrity, leadership, a spirit of inquiry and scholarship, collaborative practice, and a commitment to community service
   b. development into the culture and profession of nursing through adoption of its values, standards, and codes of conduct, and by positive role-modeling of professional behaviors;
2. Preparing well-qualified graduates to meet the needs of a diverse patient population;
3. Collaborating with our community and educational partners.

Nursing Program Core Values:

1. **Respect:** We believe in the inherent dignity and worth of all human beings and strive to demonstrate mutual respect, courtesy, and consideration in all our interpersonal dealings. We embrace diversity and strive to conduct our program with equity for all. We value collaboration among colleagues and community partners, recognizing the unique contributions of each member.

2. **Excellence:** We believe that excellence in nursing means never accepting mediocrity but always striving to do one’s best in all nursing roles and deliver the highest level of quality care, first as students and then as nursing professionals. The ultimate responsibility for the development of this superior distinction is owned by the student; however, faculty inspire and cultivate the student’s desire to excel by modeling intellectual rigor, a spirit of inquiry, and a commitment to the profession of nursing. The potential for exceptional performance is achieved in a friendly learning environment where diverse learning opportunities, creativity, and innovation – founded on evidenced-based teaching practices – encourage student engagement.

3. **Integrity:** We believe that integrity is the wholeness of an individual’s character, manifested as consistency between thoughts, beliefs, words and actions. It reflects the universal standards of honesty, fairness, accountability, moral courage, and professional ethics. As nurses and nurse educators, we choose to do the right thing because it is right, even when it is challenging.
Nursing Program Core Values (continued)

4. **Accountability**: We believe that we have a duty and an obligation to:
   - maintain and advance professional competence
   - adhere to state nurse practice acts, regulations, standards of practice and ANA’s Code of Ethics for Nurses with Interpretive Statements
   - assure quality nursing educational experiences
   - prepare nursing students to be safe and effective nurses
   - foster a sense of responsibility and accountability for the student’s own learning and nursing practice

In light of these duties and obligations, as nurses and nurse educators we are answerable to others for our judgments, actions, and results.

5. **Caring**: We believe that caring is genuine concern for the health and well-being of another; it embodies a spirit of compassion which moves us to respond to the concerns and needs of those in the communities we serve. It compels us to promote, protect, and advocate for the rights and well-being of others. As caring nurses and nurse educators, we have the privilege of entering into another’s life and making a difference.

6. **Stewardship**: We value and advocate for the careful and responsible management of fiscal, physical, and learning resources that:
   - promote student success,
   - maintain the well-being of faculty,
   - nurture the development of new nurse educators,
   - accomplish program outcomes,
   - maintain program accreditation,
   - promote the standards of the profession of nursing

We demonstrate stewardship of self by creating a balance between self and professional fulfillment.

**Nursing Program Philosophy**:

The program of Nursing Education at Walla Walla Community College embraces the vision, mission, core themes and institutional values of Walla Walla Community College and has aligned its vision, mission, core values and philosophy statement to be consistent with that of the College.

**Humans** are spiritual, mental, emotional, physical and social beings. Human beings, possessing free will and capable of growth, have the right to actively participate in the processes that affect their health and well-being.

The **environment** is an intricate network of internal and external factors that impact the health of individuals, families and communities. Internal and external factors include, but are not limited to the following:
- An individual’s cognitive development, beliefs, relationships and worldview
- A society’s unique and diverse cultural, ethnic, experiential and socioeconomic background
- Social, political, and economic systems which impact available resources
- Healthcare providers’ experience and level of knowledge and skill

**Health** is a dynamic state, ranging from optimal well-being to disease and death. At all points on this continuum, human beings utilize internal and external resources to attain the best possible health, create meaningful experiences, and meet life goals.

**Nursing** is a dynamic profession that provides an essential service to society through its dual components of caring and science. Caring, the heart of the “humane calling” of nursing, embraces spirituality, healing, empathy, human diversity, mutual respect, and compassion. It incorporates communication that demonstrates
respect, deep listening, authenticity, and trust. This, in turn, promotes health and healing and builds relationships between nurses and patients. Through the caring perspective, nursing may be viewed as a delicate balance of promoting patients’ independence and providing assistance during times of dependence.

As a scientific practice discipline, nursing requires the systematic application of knowledge from nursing and related disciplines, a synthesis of critical thinking skills and evidence-based practice, and technological expertise to design, deliver, coordinate, and manage the care for complex individuals, families, groups, communities, and populations in a multicultural and global society. The nursing process, which forms the foundation for clinical decision making, includes the components of assessment, diagnosis, outcomes identification, planning, implementation, and evaluation.

Nurses are witnesses to life’s most profound events, especially when people are at their most vulnerable. As such, nurses serve as patient advocates. Through attentiveness to the dignity, value, and culture of their patients (individuals, families, communities, and larger societies), nurses provide direct and indirect patient-centered care throughout the lifespan in a variety of healthcare settings. Patient-centered care occurs within a framework of collaboration between patients and other healthcare professionals to promote optimal health, wellness and agreed-upon outcomes. The nurse fulfills functions of nursing, such as health promotion, health teaching, and health counseling, and uses appropriate resources to plan, manage and provide evidence-based nursing care that is safe, effective, and economically responsible.

Nurses are accountable for their own professional practice, functioning both autonomously and interdependently as a member of the healthcare team. They possess the knowledge and authority to safely delegate nursing tasks to designated team members, assuming accountability for all delegated care. Nurses must be prepared to provide leadership within their practice settings and for the profession as a whole. Nurses promote the image of nursing by modeling the values, standards, and attitudes of the nursing profession.

The purpose of the Nursing Education program is to prepare graduates with the knowledge, skills and attitudes necessary for licensure and to function as safe, effective, entry-level nurses. In addition, to respond to the increasing demands of a rapidly changing profession in a technological age, the program provides a pathway for nurses to achieve higher levels of education and training through seamless academic progression.

The faculty design and implement a curriculum and instructional processes which:

- utilize current technologies
- reflect educational theory and current, evidence-based teaching practices
- focus on developing the critical thinking skills and the technical competencies that are essential to entry into professional nursing practice
- are based on established professional standards and guidelines that reflect contemporary nursing practice
- are guided by accrediting bodies and national/state governing bodies
- are regularly evaluated through learning and program outcomes, and revised based on research evidence, the needs of a multicultural society, advances in technology, and the changing healthcare system

Courses build in complexity to allow students to progress from novice to advanced beginner by the conclusion of the program.

Education is a life-long process that affords the learner the opportunity to develop personally, socially, and intellectually. The professional nurse engages in self-reflection and self-evaluation of nursing practice on a regular basis, identifying areas of strength as well as areas in which professional growth would be beneficial. Ongoing professional development is necessary to maintain excellent nursing care, promote the nurse's growth, and continue the advancement of the nursing profession.
Learning is a dynamic, interactive process that is accomplished best in a student-centered environment which nurtures intellectual curiosity and scholarly inquiry. The faculty, who serve as role models for professional character and caring/competent nursing practice, recognize that the educational process is a shared experience based on caring, respect, communication, and collaboration. As such, the faculty provide educational opportunities for knowledge acquisition (cognitive, affective and psychomotor), and professional role development while students are encouraged to become increasingly self-directed learners. Throughout the educational process, the student is taught to utilize the sciences, nursing arts, and legal and ethical principles in the provision of holistic care. Excellence in nursing, fostered throughout the program, requires the ability to reason through complex clinical problems, and apply previous knowledge, competencies, and experience to clinical practice.

Faculty views each student as a unique person with special talents, abilities, needs, and aspirations. Cultural diversity, varying life experiences, and changing socioeconomic factors impact each student’s learning experience. Faculty endeavor to provide a student-friendly learning environment that enables students to realize their fullest potential.

Nursing Program Conceptual Framework:

Nursing practice is an art and science based upon the six foundational Concepts of 1) Nursing Judgment, 2) Patient Centered Care, 3) Teamwork and Collaboration, 4) Informatics and Technology, 5) Quality Improvement, and 6) Professionalism. The concept of Safety is overarching and integrated throughout the six foundational concept areas of nursing practice. In addition, concepts and learning activities progress across the curriculum from simple to complex, chronic to acute, and stable to unstable.

Within each of the six foundational concepts, there are defined Student Learning Outcomes. These Student Learning Outcomes are leveled depending on a student’s progression in the Nursing Program.

Upon completion of the first year of the Nursing Program, the student is expected to meet End-Level I Student Learning Outcomes. The student has moved from requiring instructor direction in all areas to having gained some independence in performance within the six foundational concept areas of nursing practice.

At the end of the second year of the Nursing Program, the student is expected to meet End-Level II/End-Program (Graduate) Student Learning Outcomes. The student has progressed to near-independent performance within the six foundational concept areas of nursing practice.

A student’s ability to meet the Level-specific Student Learning Outcomes is evaluated using measureable Competencies. These competencies describe the characteristics of the Student Learning Outcomes in student-focused, measureable terms. In nursing theory courses, these measureable competencies primarily fall within the Cognitive learning domain (Knowledge). By contrast, competencies in practicum courses often fall within the Psychomotor learning domain (Skills). As the student masters the measurable competencies in the Knowledge and Skills domains appropriate to their level of nursing, they are simultaneously developing a deep-seated mindset consistent with professional nursing practice in the Affective learning domain (Attitudes). These competencies are often referred to as the “Knowledge, Skills, and Attitudes or KSAs” that define the Student Learning Outcomes in the WWCC Nursing Program.
WWCC Nursing Education Program Conceptual Framework

Safety

Simple, Chronic, Stable, Complex, Acute, Unstable

Nursing Judgment  Patient Centered Care  Teamwork & Collaboration  Informatics & Technology  Quality Improvement  Professionalism

Excellence Respect  Accountability Stewardship  Integrity Caring
### NURSING STUDENT LEARNING OUTCOMES (SLOs)

<table>
<thead>
<tr>
<th>Concept</th>
<th>End-Level I Nursing Student Learning Outcomes</th>
<th>End-Level II/End-Program (Graduate) Nursing Student Learning Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing Judgment</td>
<td>Identify ways in which research/nursing science, current standards of practice, clinical experience, and patient preferences are used to make nursing judgments.</td>
<td><em>Integrate research/nursing science, current standards of practice, clinical expertise, and patient preferences to formulate sound nursing judgments.</em></td>
</tr>
<tr>
<td>Patient Centered Care</td>
<td>Plan and provide safe, holistic nursing care that is individualized to address patients’ diverse preferences, values and needs.</td>
<td>Plan and provide safe, holistic nursing care that is individualized to address patients’ diverse preferences, values and needs, and respects their capacity as a full partner with shared decision making.</td>
</tr>
<tr>
<td>Teamwork and Collaboration</td>
<td>Effectively use interpersonal communication and management principles when working with health care team members to promote optimal health outcomes and minimize risk of harm.</td>
<td>Effectively use interpersonal communication and management/leadership principles when collaborating with health care team members to promote optimal health outcomes and minimize risk of harm.</td>
</tr>
<tr>
<td>Informatics and Technology</td>
<td>Use technology to obtain and communicate information, enhance patient safety, and support decision-making within professional, ethical, and legal standards.</td>
<td>Use technology to manage and communicate information, enhance patient safety, and support decision-making within professional, ethical, and legal standards.</td>
</tr>
<tr>
<td>Quality Improvement</td>
<td>Identify ways to improve the quality, value, and safety of patient care by using data.</td>
<td><em>Continuously improve</em> the quality, value, and safety of patient care and <em>health care systems</em> by using data and <em>improvement methods to implement and evaluate changes.</em></td>
</tr>
<tr>
<td>Professionalism</td>
<td>Demonstrate professional behaviors that are consistent with moral/ethical and legal principles, that adhere to regulatory guidelines and standard-based care, and which promote the profession of nursing.</td>
<td></td>
</tr>
</tbody>
</table>
NURSING CURRICULUM for the ASSOCIATE IN NURSING DTA/MRP DEGREE

Program Requirements for Admission
Students may prepare for admission to Nursing Core Courses by meeting the minimum program requirements as outlined in the most recent Nursing Admission Guide posted online on the Nursing Program homepage http://www.wwcc.edu/nursing. GPA requirements: 2.0 for all college level classes.

<table>
<thead>
<tr>
<th>NURSING DEGREE REQUIREMENTS (65 credits)</th>
</tr>
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<tbody>
<tr>
<td>Prior to applying to Nursing Core Courses:</td>
</tr>
<tr>
<td>CHEM&amp; 110, Chemical Concepts w/lab</td>
</tr>
<tr>
<td>MATH 146, Intro to Statistics</td>
</tr>
<tr>
<td>ENGL&amp; 101, English Composition I</td>
</tr>
<tr>
<td>BIOL&amp; 160, General Biology w/lab</td>
</tr>
<tr>
<td>BIOL&amp; 251, Human A &amp; P I</td>
</tr>
<tr>
<td>COMPLETION OF THE ATI TEAS TEST</td>
</tr>
</tbody>
</table>

Prior to entering Nursing Core Courses: Credits
PSYC& 100, General Psychology | 5 |
PSYC& 200, Lifespan Psychology | 5 |
BIOL& 252, Human A & P II | 5 |
BIOL& 260, Microbiology | 5 |
NUTR& 101, Nutrition | 5 |
Show evidence of CNA license or passing the State exam for Nursing Assistants (Due by September 1).

Prior to entering Second Year of Nursing Core Courses: Credits
COMMUNICATIONS (from Distribution List) | 5 |
HUMANITIES (from Distribution List) | 10 |

<table>
<thead>
<tr>
<th>NURSING CORE COURSES (70 credits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year One Nursing (32 credits)</td>
</tr>
</tbody>
</table>

Quarter One Credits
NURS 100, Fundamentals of Nursing | 4 |
NURS 110, Fundamentals Practicum | 4 |
NURS/PHIL 140, Ethics and Policy in Healthcare I | 1 |
NURS/PSYC 150, Psychosocial Issues in Healthcare I-II | 2 |
Total Credits 11

Quarter Two: Credits
NURS 101, Beginning Nursing Concepts I | 5 |
NURS 111, Practicum I | 4 |
NURS/PSYC 151, Psychosocial Issues in Healthcare III | 1 |
Total Credits 10

Quarter Three: Credits
NURS 102, Beginning Nursing Concepts II | 6 |
NURS 112, Practicum II | 4 |
NURS/PHIL 142, Ethics and Policy in Healthcare II | 1 |
Total Credits 11
Year Two Nursing (38 credits)

<table>
<thead>
<tr>
<th>Quarter One:</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 200, Advanced Nursing Concepts I</td>
<td>5</td>
</tr>
<tr>
<td>NURS 210, Practicum III</td>
<td>6</td>
</tr>
<tr>
<td>NURS/PHIL 240, Ethics and Policy in Healthcare III</td>
<td>1</td>
</tr>
<tr>
<td>NURS/PSYC 250, Psychosocial Issues in Healthcare IV</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total Credits</strong></td>
<td><strong>13</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quarter Two:</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 201, Advanced Nursing Concepts II</td>
<td>5</td>
</tr>
<tr>
<td>NURS 211, Practicum IV</td>
<td>6</td>
</tr>
<tr>
<td>NURS/PHIL 241, Ethics and Policy in Healthcare IV</td>
<td>1</td>
</tr>
<tr>
<td>NURS/PSYC 251, Psychosocial Issues in Healthcare V</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total Credits</strong></td>
<td><strong>13</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quarter Three:</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 202, Advanced Nursing Concepts III</td>
<td>7</td>
</tr>
<tr>
<td>NURS 212, Practicum V</td>
<td>4</td>
</tr>
<tr>
<td>NURS/PHIL 242, Ethics and Policy in Healthcare V</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total Credits</strong></td>
<td><strong>12</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Optional Practical Nurse Option (Summer between First and Second Year Nursing)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please note: This option is not accredited by ACEN</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SUMMER QUARTER PRACTICAL NURSE OPTION</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 103 or NURS 104 Practical Nursing or LPN to ADN Transition</td>
<td>6</td>
</tr>
<tr>
<td>NURS 113 or NURS 114 Practical Nurse Practicum or LPN to ADN Transition Practicum</td>
<td>6</td>
</tr>
<tr>
<td><strong>Total Credits</strong></td>
<td><strong>12</strong></td>
</tr>
</tbody>
</table>
PROGRAM POLICIES AND PROCEDURES

STUDENT IDENTIFICATION

Some outside agencies, such as the State Board of Nursing and some off-campus clinical agency sites, require access to student social security numbers for legal/identification purposes. Therefore, nursing students are required to provide the Nursing Program with their social security numbers with the understanding that this information will only be shared with those agencies that require this information for student identification. All other department activities requiring student identification will be conducted according to college policy and mandated state law (RCW 28B.10.042) which stipulate the use of confidential student identification (SID) numbers.

REQUIRED DOCUMENTATION

The following requirements must be met prior to the first day of the Fall Quarter:

| PLEASE NOTE: STUDENTS MAY NOT ATTEND ANY NURSING CLASSES (EVEN THE FIRST DAY) WITHOUT HAVING COMPLETED THE TB SCREENING, VACCINATIONS, CPR, AND HIV/AIDS CERTIFICATIONS, BACKGROUND CHECK, AND PROOF OF HEALTH INSURANCE. |

1. For the TB/Vaccination requirement the student must provide a completed Vaccination and TB Screening Form showing documentation of current attainment of the following:
   - Annual Tuberculosis Screening
   - Varicella (Chicken Pox) evidence of immunity (written documentation from healthcare provider showing 2 doses of vaccine or laboratory evidence of immunity).
   - Measles/Mumps vaccination (written documentation from healthcare provider showing 2 doses of vaccine or laboratory evidence of immunity).
   - Rubella vaccination (written documentation from healthcare provider showing 2 doses of vaccine or laboratory evidence of immunity; at least one of the doses must be live rubella vaccine).
   - Tetanus-Diphtheria-acellular Pertussis (TDaP) vaccination with a Td booster every ten (10) years.
   - Hepatitis B vaccinations and post vaccination titer (documentation of 1st injection required by first day of fall quarter; series and titer must remain on schedule and be completed prior to entering second year).
   - Influenza vaccine (required annually).
2. Health Insurance Requirement: All students are required to provide proof of personal health insurance with a minimum of catastrophic health insurance coverage.
3. Transcript or Written Evidence of Completion
   - HIV/AIDS Education: Documentation showing completion of a 7-hour HIV/AIDS course.
   - American Heart Association Basic Life Support for Healthcare Providers (BLS-CPR) certification is required annually after June 1.

CRIMINAL BACKGROUND CHECK

Washington State law (R.C.W. 43.43.830 through 43.43.840) mandates that criminal background checks be conducted on all students entering clinical agencies. This law also stipulates that any student nurse with a criminal history of “crimes against persons” is not allowed to work in a nursing home. Because clinical experience in both acute care facilities and nursing homes is an integral part to the nursing
curriculum, students with a criminal history of “crimes against persons” will not be able to progress in the Nursing Program. Some agencies require copies of student background checks to be on file at the clinical site and/or require their own separate background check; copies will be sent to agencies upon request.

Criminal background checks must be completed through Americhek and Washington State Patrol prior to entrance into the first and/or second year of the Nursing Program, and at any non-traditional entry point. Long Term Care and other community agencies may also require a separate background check. The student will be responsible for all applicable fees associated with the acquisition of the criminal background check.

PLEASE NOTE: Students are expected to self-report, at any time throughout the program, any and all incidences that may affect clinical placement.

LICENSURE INFORMATION

It is important for students to be aware of these questions. The graduate will be required to answer YES or NO to the following questions on the application to Washington State Nursing Care Quality Assurance Commission. Similar questions will be asked on the Idaho application and will have to be notarized.

http://www.doh.wa.gov/LicensesPermitsandCertificates/NursingCommission/NurseLicensing/LicenseRequirements/RegisteredNurse (Retrieved 7.6.15)

1. Do you have a medical condition which in any way impairs or limits your ability to practice your profession with reasonable skill and safety?

2. Do you currently use chemical substance(s) in any way which impair or limit your ability to practice your profession with reasonable skill and safety? (Currently means within the past two years. Chemical substances include alcohol, drugs, or medications, whether taken legally or illegally).

3. Have you ever been diagnosed with, or treated for, pedophilia, exhibitionism, voyeurism or frotteurism?

4. Are you currently engaged in the illegal use of controlled substances?

5. Have you ever been convicted, entered a plea of guilty, no contest, or a similar plea, or had prosecution or a sentence deferred or suspended as an adult or juvenile, in Washington or another state or jurisdiction?

6. Have you ever been found in any civil, administrative or criminal proceedings to have:
   a. Possessed, used, prescribed for use, or distributed controlled substances or legend drugs in any way other than for legitimate or therapeutic purposes?
   b. Diverted controlled substances or legend drugs?
   c. Violated any drug law?
   d. Prescribed controlled substances for yourself?

7. Have you ever been found in any proceeding to have violated any state or federal law or rule regulating the practice of a health care profession?

8. Have you ever had any license, certificate, registration or other privilege to practice a health care profession denied, revoked, suspended, or restricted by a state, federal, or foreign authority?

9. Have you ever surrendered a credential like those listed in number 8, in connection with or to avoid
action by a state, federal, or foreign authority?

10. Have you ever been named in any civil suit or suffered any civil judgment for incompetence, negligence or malpractice in connection with the practice of a health care profession?

11. Have you ever been disqualified from working with vulnerable persons by the Department of Social and Health Services (DSHS)?

ATTENDANCE

Attendance at all scheduled classes, practicum and Skills Practice Labs is expected. Absences should be limited to illness or family emergencies. Absences and tardies will be monitored. A pattern of repeated absences and/or tardies will be addressed by level faculty and may result in the issuance of a Contract for Success or Special Concern (p. 19).

Excused Absence/Tardy

For an absence or tardy to be considered “excused”, students must notify the nursing education secretary prior to the beginning of the class, practicum or Skills Practice Lab experience from which they will be absent/tardy. The nursing department may be notified at any time, day or night, via voice mail (Walla Walla campus 527-4240; Clarkston campus 758-1702). Notifying individual instructors will not initiate an excused absence/tardy.

Unexcused Absence/Tardy

Failure to notify the nursing education secretary (and assigned practicum unit if applicable) prior to any scheduled class, clinical/practicum activity, or Skills Practice Lab experience will be considered an unexcused absence/tardy.

INCLEMENT WEATHER AND SCHOOL CLOSURES

Communication between faculty and students during inclement weather is essential. Students are expected to frequently check the WWCC website and Canvas if school closure or cancellation of clinical is a possibility. As soon as school closures are official, faculty will notify students by posting closure announcements via Canvas and/or email. If a college campus closes due to weather, the clinical rotations for that campus will be cancelled. Students are encouraged to sign up for emergency notifications via the college website: www.wwcc.edu. Select “Campus Safety & Security” from the Campus Life drop down menu and then click on the gold “Sign up to get emergency notifications” button.

GRADING

The grading scale for the Nursing Program is reflected in the following table:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
<th>GPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>94-100%</td>
<td>4.0</td>
</tr>
<tr>
<td>A-</td>
<td>90-93%</td>
<td>3.7</td>
</tr>
<tr>
<td>B+</td>
<td>87-89%</td>
<td>3.3</td>
</tr>
<tr>
<td>B</td>
<td>84-86%</td>
<td>3.0</td>
</tr>
<tr>
<td>B-</td>
<td>81-83%</td>
<td>2.7</td>
</tr>
<tr>
<td>C+</td>
<td>78-80%</td>
<td>2.3</td>
</tr>
<tr>
<td>C</td>
<td>75-77%</td>
<td>2.0</td>
</tr>
<tr>
<td>C-</td>
<td>70-74%</td>
<td>1.7</td>
</tr>
<tr>
<td>D+</td>
<td>67-69%</td>
<td>1.3</td>
</tr>
<tr>
<td>D</td>
<td>63-66%</td>
<td>1.0</td>
</tr>
<tr>
<td>F</td>
<td>0-62%</td>
<td>0.0</td>
</tr>
</tbody>
</table>
The point distribution for each nursing course is found in the course syllabus that is distributed at the beginning of each quarter.

Students must achieve a cumulative average of 75% on theory tests before any points for course assignments or participation will be considered in calculation of the final grade. If a student earns a score below 75% on tests that grade will be recorded as the course grade. All students must achieve a minimum final grade of 75% in both theory and practicum courses to progress.

Note: As evidence of professional accountability, students should demonstrate awareness that grades are earned by the student and not given by the instructor.

Tests

Students are expected to take tests at the designated time. Doors may be locked at the beginning of the test. Failure to take a test (including ATI tests) at the scheduled time, regardless of reason, will result in an automatic reduction of 5% of the available score from the earned score. Any test missed due to an excused absence must be taken within two working days from the last date of excused absence. (Example: If a student misses a test on Monday and attends practicum on Tuesday, the student must take the test Tuesday (day 1) or Wednesday (day 2). Exceptions may be made as required for program scheduling. A workday is defined as any day the school is officially open. If a test is not completed within the specified time frame, the student will receive a score of zero (0) for the test. A test missed due to an unexcused absence will receive a score of zero (0).

Whether a tardy is excused or unexcused, a student arriving late for a test, including ATI tests and those with ADA accommodations, must reschedule the test and will receive a 5% reduction of the available score from the earned score. The student must report in person to the Nursing Department, during the testing time, to be considered tardy. Any test missed due to tardiness must be taken within two (2) working days from the date of the test (includes the day of the test). Exceptions may be made as required for program scheduling.

Activities

Missed in-class activities cannot be made up by the student regardless of the reason class was missed. No points will be earned for missed Skills Practice Lab activities.

Assignments

Assignments due on the date(s) of an excused absence(s) become due upon return to class, practicum or Skills Practice Lab whichever comes first. If the assignment is not turned in upon the student's return, a one point per day late penalty will be assessed (including the day of return). If the absence is unexcused, the penalty will be deducted from the assignment due date.
CONTRACTS FOR SUCCESS AND SPECIAL CONCERNS

Contracts for Success
Students will be notified if they are performing at an unsatisfactory level. Identified concerns may reflect unsatisfactory practice, achievement or behaviors. Students may be given a Contract for Success, which will describe competency deficiencies and outline expectations for the student to fulfill in a satisfactory manner within a specified period of time. Failure to satisfactorily demonstrate competencies, as outlined in the Contract, may result in the lowering of an earned practicum grade, the issuance of a Special Concern, an unsatisfactory practicum rating, and/or practicum failure.

Special Concerns
A student’s practicum grade or progression in the program may be affected by serious problems or repeated incidences related to unethical/unprofessional behavior and/or unsafe practice. Each “Special Concern” will be documented, discussed, signed, and dated by the student and instructor.

A student may receive more than one “Special Concern.” A grade reduction should be expected for each “Special Concern”. The amount of grade reduction will be determined on an individual basis by the level faculty.

Incidents that involve one or more of the following will be referred to level faculty and will result in a “Special Concern”. This may result in the student receiving a failing grade (F) for the course and/or the student may be referred to the full faculty for consideration of dismissal from the program. See below:

1. Unsafe practice - behavior or errors in practice that could endanger the life and health of clients, self or others.


2. This includes, but is not limited to, the following:

- Sharing electronic healthcare record (EHR) login – sharing login information, including user names and/or passwords, with another student or staff member.
- HIPAA/Personal Health Information (PHI) – Printing, copying, reproducing, and/or sharing PHI in any manner (including on social media sites) and/or removing PHI from the agency. Printing of Kardexes may be allowed, according to individual facilities, while providing patient care. Patient Kardexes must be kept out of view from patients, families, and visitors at all times. Kardexes must be shredded upon completion of the clinical day, prior to leaving the facility.
- Conduct that obstructs or disrupts educational processes or otherwise has a negative impact on the learning environment (see also “Conduct Unbecoming” in the WWCC Student Code of Conduct).
- Conduct Unbecoming. The breech of any generally recognized and published code of ethics or standards of professional practice that governs the conduct of a particular profession for which the student is taking a course or is pursuing as an educational goal or major.
3. **Poor judgment** - decisions that have the potential for interfering with client progress toward wellness. This includes inappropriate communication that could impact the psychosocial well-being of the client.

4. **Faulty thinking** - evidences of thinking patterns that have resulted or are likely to result in harm to client and/or unsafe nursing practice.

5. **Consistent inability to meet expected performance criteria** - evidence of a documented performance pattern that does not achieve standards for safe/satisfactory nursing practice.

6. **Irresponsibility** - failure to accept accountability for actions that interfere with the delivery of health care.

7. **Moral turpitude** - conduct contrary to justice, honesty, modesty or good morals (Marsh vs. State Bar of California 210 Cal. 303, 291 P. 583, 584).

8. **Falsification/alteration of client care documents** - changing or falsifying patient information in the electronic healthcare record (EHR), (including copying previously entered data); including clinical written assignments, in such a way as to alter recorded information or documenting known false information.

**Incomplete (“I”) Grade**

An incomplete (“I”) grade may be assigned only upon the request of the student and with the concurrence of the instructor. It is given to the student who is doing passing work and has completed at least two-thirds of the course when circumstances arise that prevent normal completion. A student must obtain an Incomplete Grade Contract and negotiate a formal agreement with the instructor specifying the work done, the work remaining to complete the course, and the time allowed to do the work. The required work must be completed within two weeks of the beginning of the following quarter unless otherwise stipulated in the contract. Incomplete grades not made up within this time frame will be converted to the grade earned, but no higher than a “C-” and the student will not be allowed to progress.

**MEDICATION SAFETY**

**Safe Medication Administration Policy**

Patient safety is the primary concern for any medication administration performed by nursing students. As such, a Safe Medication Administration by Nursing Students policy is in place. Please refer to p. 43 in the Appendices to review the Safe Medication Administration policy.

**Medication Competency Test**

Students will be required to demonstrate ongoing medication administration/math competency. Students must pass a Medication Competency test each quarter with a minimum score of 80% correct in order to progress in the Nursing Program. Students are allowed one test retake opportunity to demonstrate competency and progress.

At a completion end point in the Nursing Program, students will be given one additional test retake opportunity (initial test and two retake opportunities) to demonstrate mastery of medication competency. Completion end points are the end of Practical Nurse summer quarter and the end of the second year of the Nursing Program. Students eligible for the additional test retake opportunity (3rd attempt) will be given an incomplete “I” grade and must successfully complete the test two weeks into the subsequent quarter.
Standardized Tests

Standardized testing for nursing, in the form of Assessment Technologies Institute (ATI) tests, will be given throughout the program. Should a student fail to achieve the designated proficiency level or designated percent score on an ATI test, remediation and one retake of the test is required. A testing fee is assessed each quarter that includes 2 attempts at each ATI test. See list of Tuition and Fees in the Nursing Program Admission Guide for the fee amount per quarter.

ATI scores are reliable indicators of student potential for passing the NCLEX and may be used to advise individual students. The results of these tests are one evaluation tool for the program of learning but are not a sole determinant for progression/graduation.

PROGRESSION

Progression in the Nursing Program is dependent upon the student’s cumulative grade point average (GPA), which is based on a 4.0 scale (p. 17). A minimum cumulative GPA of 2.0 is required by Walla Walla Community College for a student to graduate. Likewise, a minimum grade of “C” (2.0) is required in all nursing and support courses for progression in the Nursing Program.

1. Students must complete identified support courses with a grade of “C” (2.0) or better by the end of the specified quarter to progress to the next quarter in the Nursing Program.

2. All first year courses, including NURS 103/113, must be completed with a grade of “C” (2.0) or better to earn a certificate in Practical Nursing and to be eligible to take the NCLEX-PN exam.

3. All first and second year courses must be completed with a grade of “C” (2.0) or better to earn an Associate in Nursing DTA/MRP Nursing degree and to be eligible to take the NCLEX-RN examination.

4. Students are strongly encouraged to keep their advisor informed concerning aspects of their personal lives which may impact their academic performance.

5. Students are strongly encouraged to counsel with nursing faculty members concerning needed improvement for academic or practicum performance issues.

LPN TO ADN TRANSITION

LPN to ADN Transition students who have an active Washington State LPN license will enroll in the LPN to ADN Transition course (NURS 104/114). Refer to the Nursing Program Admission Guide for further details.

EXIT FROM THE NURSING PROGRAM

When a student exits the Nursing Program, the Nursing faculty will follow Walla Walla Community College grading policy in assigning a grade. The lead instructor or designee shall conduct an Exit Interview and complete an Exit Interview form. A copy of the signed Exit Interview form will be given to the student. The original copy will remain in the student’s permanent file within the nursing department.
READMISSION TO THE NURSING PROGRAM

Any student exiting the Nursing Program, whether it is his/her own decision or an academic performance issue, must reapply to be considered for re-entry. Readmission is on a “space-available” basis and based on the Nursing Admission Rating Scale score. If a student exits for academic failure, he/she may repeat one time in the program. Previous dismissal from the program will be reviewed by the Nursing Progression Committee and may prevent a student’s readmission.

Should a student repeat a theory course (i.e., NURS 100/140/150) to improve his/her grade, he/she must also repeat the practicum course offered concurrently (i.e., NURS 110). Likewise, should a student repeat a clinical (i.e. NURS 110) to improve his/her grade, he/she must also repeat the theory course offered concurrently (i.e., NURS 100/140/150).

Students seeking readmission must comply with all requirements as stated in the Nursing Program Admission Guide that is effective for the year to which they are applying. If the student has been out of the Nursing Program for more than 2 years, he/she may be required to repeat previously completed courses.

RETURNING STUDENTS OR TRANSFER STUDENTS ENTERING AFTER FALL QUARTER FIRST YEAR

Students will be assessed on an individual basis to determine their ability to perform selected lab skills and medication administration with safety and competency prior to being allowed in practicum at clinical agencies. Assessment will be done by level leads or their designees. If a student is unable to pass the selected skill and the Medication Competency Test from the previous quarter within 3 attempts by the time clinical begins, the student will not be allowed to progress and will be advised to withdraw from the nursing courses. The Admission Progression Committee will have the discretion to require additional skills testing based on Exit Interview recommendations. A complete list of the procedures/skills evaluated by quarter can be found in the appendices.

PLAGIARISM & ACADEMIC DISHONESTY (CHEATING)


Plagiarism:
All students must sign the Expectations with Regards to Plagiarism form in the appendices which outlines the WWCC and Nursing Program policy regarding plagiarism. By signing this document, students acknowledge that they have been made aware of the expectations and understand what plagiarism is. The following resource gives students additional information as to what constitutes plagiarism: http://library.acadiau.ca/sites/default/files/library/tutorials/plagiarism/.

Academic Dishonesty (aka “Cheating”):
Students are expected to maintain high standards of academic conduct and integrity. Any student found cheating will undergo disciplinary action up to and including possible dismissal from the Nursing Program.

Examples of cheating include but are not limited to the following:

1. Giving and/or receiving unauthorized information from another student during
any type of test or examination. Please note: Telling a classmate what is on a test that they have not taken is considered cheating.

2. Obtaining or providing unauthorized questions relating to a test or examination prior to or after the time of the test or examination.

3. Using or having in your possession any unauthorized sources of reference during any test, examination, or assignment.

4. Engaging in any and all forms of plagiarism. Plagiarism is the act of using the literary composition of another’s writing, or the ideas or language of the same, and passing them off as the product of one’s own mind.

PROFESSIONAL BEHAVIOR

Students who have chosen the profession of nursing are expected to demonstrate professional behavior and judgment both inside and outside of the academic setting. The student’s behavior reflects character, personal integrity, and respect for others. Students should anticipate a Special Concern with a possible letter grade drop and/or dismissal from the course or program for behaviors including, but not limited to the following:

- Falsification of documents
- Forgery of instructor or other healthcare professional’s signature
- Lying and/or cheating
- Theft of property from the college, clinical agencies, or fellow students
- Plagiarism
- Performing skills outside of the student’s Scope of Practice
- Violating confidentiality
- Discussing one’s own personal issues with patients or families
- Developing social/romantic relationships with patients or families.
  - Nursing students will have no social/romantic contact with any individual with whom they developed a professional relationship for a minimum of two years after exiting the Nursing Program.
- Refusing to follow instructions of agency staff or instructors or abide by agency expectations.
- Threats of violence or retaliation toward others.
- The use of abusive language in any format (written, verbal, or otherwise), or disruptive behavior directed toward peers, staff, faculty, or agency personnel.
- Sharing electronic healthcare record (EHR) login information.
- Copying or reproducing Protected Health Information (PHI) in any manner and/or removing PHI from an agency.
- Conduct Unbecoming. The breach of the ANA Code of Ethics or nursing standards of professional practice.

Students should be aware that using internet social networking sites (including, but not limited to, Facebook, Twitter, and Instagram) to discuss classmates, instructors, or the Nursing Program is unacceptable. Sharing ANY patient information or clinical experiences/stories outside of the classroom setting may be a HIPAA violation and is grounds for disciplinary action and/or dismissal from the course and/or program. Students will sign acceptance of this expectation on the Student Affirmation Form in the appendices.
DUE PROCESS/GRIEVANCE/APPEALS

A student appealing a faculty decision (including, but not limited to, the administration of a grade or Special Concern) must communicate this grievance (appeal) in writing to the Level Lead or designee no later than 5 working days from the time of the faculty decision, and no later than the last day of the quarter in which the faculty decision was made. Every attempt will be made to schedule appeal meetings by the final Nursing Faculty meeting of the quarter; any appeal that extends past the last day of the quarter will go to the Director of the Nursing Program. At each subsequent step of the Grievance Process, the grievance (appeal) must be presented in writing no later than 5 working days from the receipt of a faculty decision.

The grievance process should be addressed in the following order:

1. The level nursing faculty
2. The full nursing faculty
3. The Director of Nursing Education
4. The Vice President of Instruction

Grievances/Appeals should be related to a variance in program policy/procedure leading to the student’s inability to meet minimum standards. Failure to meet course/program expectations and/or achieve the required points should not be considered a valid reason for appeal.

If dismissal from the Nursing Program due to a student’s actions is being deliberated, the student will be given an opportunity to address the full Nursing Faculty (as available) on their own behalf and may be accompanied by a support person of their choosing prior to a dismissal decision. Please note that dismissal from the Nursing Program is different than exiting the program due to academic or personal issues in a specific nursing course. If dismissal is the action taken, the student will receive a failing grade (“F”) in the nursing core classes and embedded philosophy and/or psychology classes.

ELECTRONIC DEVICES

Electronic devices, including cell phones, may only be used in the learning environment for learning purposes and with professional courtesy. Cell phone volume/vibration must be turned off. Emergency messages may be routed through the nursing department contact number.

Students may use only simple, non-programmable calculators during testing if allowed. Cell phones may not be used as a calculator during testing. Calculators may not be shared during testing.

UNAUTHORIZED PRESENCE OF CHILDREN ON CAMPUS

Walla Walla Community College has a policy that prohibits children/infants attending classes with their parents or baby-sitters. Children are not allowed in classrooms, hallways, or study areas. Instructors have the authority to ask any student with a child in attendance to leave the class or study area with the child/children. Children may disrupt the educational process or the work setting when left on campus without supervision or when supervision is imposed on College employees or other students. Leaving children unsupervised may also create unsafe conditions for the children themselves or for others on the College campus.

1. As a general rule, students shall not bring children with them to their classes.
2. No students or visitor to the College shall leave a child unsupervised at the College, nor may such person leave a child with a College employee, unless that child is enrolled in an authorized College program.

3. Walla Walla Community College offers certain programs and activities for children and the College provides supervision for children enrolled in these activities. However, the College does not supervise children outside of these settings, and neither the College nor its employees, agents or students may accept responsibility to do so on behalf of the College.

4. Parents of unsupervised children on the campus will be asked to take the children home or to a day care facility. Children who arrive on campus without their parents and are unsupervised will be asked to leave.

5. This procedure pertains to all employees and persons who visit the College, or participate in classes, programs, events or other activities.

PRACTICUM/SKILLS PRACTICE LAB EXPECTATIONS

It is the expectation of the Nursing Program that students may be assigned to and participate in all areas of the practicum experience. Practicum times vary and will include day, evening and weekend hours. Travel is required and is the responsibility of the individual student. Instructors will make practicum accommodations for support courses only.

Faculty will arrange practicum. Practicum hours are planned allowing 2 hours of experience for each hour of credit (exception: NURS 212, Focused Practicum). The hours scheduled for practicum each week may vary. Practicum expectations will be given at the beginning of the quarter/rotation. At such time the practicum instructor will supply information such as (a) what to wear, (b) where and when to meet, (c) what students must do to prepare for practicum, (d) specific practicum placement, and (e) practicum expectations. Orientation in each new practicum setting will be arranged. Clinical agencies may prohibit students from attending clinical if certain requirements are not met.

Essential Program Capabilities

Students in the Nursing Program need to be aware of the expectations upon which practicum performance is based. All students will be expected to meet these criteria during both Skills Practice Lab sessions and practicum experience. The inability to meet these expectations could result in failure of the course in which the student is enrolled.

1. **BEHAVIORAL/EMOTIONAL:** The student must have the emotional stability to function effectively/competently under stress and to adapt in fast paced environments demonstrating the characteristics of adaptability and flexibility. The student must demonstrate responsibility and accountability.

2. **COGNITIVE:** The student must demonstrate the ability to evaluate and apply knowledge and engage in critical thinking in the classroom and practicum settings.

3. **COMMUNICATION SKILLS:** The student must demonstrate the ability to communicate in English in all formats; written, verbal, and reading. The student must be able to clearly express his/her ideas and feelings and demonstrate a willingness to give and receive feedback. The student must demonstrate effective and therapeutic communication with other students, faculty, staff patients, patient’s family, and other professionals.

4. **MOTOR:** The student must have the ability to lift or carry a minimum of twenty-five (25) pounds
independently and fifty (50) pounds with assistance. Intermittent standing, sitting, stooping, and walking is often necessary. Full range of motion of all joints is expected. Normal manual and finger dexterity are expected. The student must be able to physically endure clinical shifts lasting 6-12 hours.

5. **SENSORY/PERCEPTUAL:** The student must have intact vision, hearing, and the senses of touch and smell in order to thoroughly analyze patient data and provide accurate and safe patient care. Corrective devices may be utilized.

**Absence/Tardy for Clinical/Practicum Activity**

In the event that a student is going to arrive late to practicum or is unable to attend practicum, the student must notify the nursing education secretary *prior to the beginning* of the assigned practicum shift. The nursing education secretary may be notified at any time, day or night, via voice mail (Walla Walla campus 509-527-4240; Clarkston campus 509-758-1702). Individual Clinical Instructor Expectations may also request the student to notify the clinical instructor and/or the clinical agency if appropriate. Notification of an individual instructor will not initiate an “excused absence”. Rarely can a make-up experience be scheduled for a missed clinical/practicum activity.

A student should not attend a practicum while ill or impaired. Instructors may ask a student who seems “ill” or unable to provide safe nursing care to leave the practicum agency. **To ensure student and patient safety, students who have been under a physician’s care for an injury or surgery may be required to provide a “Letter of Release” or “Return to Work” form from the physician before being readmitted to the Practicum Area.**

Students are expected to attend a minimum of 75% of the available clinical hours to avoid a Special Concern with an automatic grade reduction and/or non-progression grade. The student is directed to the quarterly syllabus for the practicum course for additional information.

**Absence from Skills Practice Lab**

Absence policies for Skills Practice Lab may be found in course syllabi. If unable to attend Skills Practice Lab, the student must notify the main nursing department *prior to the beginning of the assigned lab*. Students will be held accountable for missed Skills Practice Lab content.

**Practicum Evaluation**

Students who are unprepared for practicum may be sent home and/or to the Skills Practice Lab. Competency for learned skills *must be maintained*. Students are expected to return to the Skills Practice Lab for needed practice to insure a safe level of performance.

Practicum courses are graded according to written criteria provided to the student at the beginning of each quarter. Evaluation methods may include observations by practicum instructors, practicum experience logs or journals, nursing care plans, case studies, participation in post conference, Pharmacology and Medication Competency tests, and scheduled testing in Skills Practice Lab.

Late assignments will receive a one-point deduction per day:

- Written clinical assignments that are either submitted after the due date/time, or have been submitted in an incomplete form, will receive a one-point deduction per day (including Saturday/Sunday), until all documents are received. Clinical written assignments may be submitted on weekends electronically as instructed.

Faculty will meet with each student as needed to identify problems and/or potential corrective measures.
Each student meets with faculty at the end of a practicum rotation and/or at the end of course for an Individual Conference Session (ICS) to review the student’s attainment of the course objectives.

**Unusual Occurrence/Practicum Incident Procedure**

Any student who has an Unusual Occurrence/Practicum Incident (medication error, injury, etc.) must notify the practicum instructor and complete the clinical agency and the Nursing Education Department’s Unusual Occurrence/Practicum Incident Report which can be found in the appendices. If the Unusual Occurrence/Practicum Incident involved a needle stick, sharp object injury, and/or body fluid exposure, a Needle Stick and Sharp Object and Body Fluid Exposure Report found in the appendices will also be completed. **The clinical instructor will supervise and assist the student in the completion of any clinical agency or Nursing Program incident reports.** All Unusual Occurrence/Practicum Incident Reports and Needle Stick Reports will be kept on file in the Nursing Education office.

**Legal Responsibilities**

The student is legally responsible to practice within the student’s current scope of education. This level is determined by how other students at the same level would be expected to act in a similar situation. Students will work under the direct supervision of faculty and/or assigned staff members at the discretion of the practicum instructor.

**INVASIVE PROCEDURES**

**General Information:**

During the Nursing Program, the student will be participating in laboratory activities in which learning by students requires the use of human subjects as part of the training procedures. As part of the learning activities, the student may be asked to perform specific skills or be asked to be the subject of specific skill practice by other students.

Learning activities that use human subjects shall be conducted under the supervision of the instructor who has been assigned to teach the course.

Before involvement as a human subject, a student must give informed consent. If under the age of 18, informed consent must be obtained from the parent or the legal guardian unless the participant is determined to be an emancipated minor.

**Benefits:**

The experiences listed below have been selected because they are skills essential to the learning process and the faculty believes that realistic practice is essential for optimum learning. Participation will enhance the learning process and the acquisition of technical skills. An alternative experience may not provide as realistic an opportunity to practice and therefore may result in less effective learning. Specific benefits are listed below.

**Risks/Discomforts:**

Participation may create some anxiety for the student. Some of the procedures may create minor physical or psychological discomfort. Specific risks/discomforts are listed below.

**Student Rights:**

The student has the right to withhold consent for participation and to withdraw consent after it has been given. If the student withholds consent, he/she will be required to participate in an alternative learning experience. If the student does not participate in either the planned or the alternative activity, he/she will not be able to successfully complete the course. The student may ask questions and expect explanations of any point that is unclear.
<table>
<thead>
<tr>
<th>Learning Activities</th>
<th>Specific Benefits</th>
<th>Specific Risks/Discomforts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Finger stick to check glucose</td>
<td>Appreciation for what it feels like to give and/or receive a finger stick</td>
<td>Minimal exposure/discomfort, bruising, infection</td>
</tr>
<tr>
<td>2. Subcutaneous injections</td>
<td>Appreciation for what it feels like to give and/or receive an injection</td>
<td>Discomfort related to use of a needle, bruising, minimal exposure to blood, infection</td>
</tr>
<tr>
<td>3. Intradermal injections</td>
<td>Appreciation for what it feels like to give and/or receive an injection</td>
<td>Discomfort related to use of a needle, bruising, minimal exposure to blood, infection</td>
</tr>
<tr>
<td>4. Intramuscular (IM) injections</td>
<td>Appreciation for what it feels like to give and/or receive an injection</td>
<td>Discomfort related to use of a needle, bruising, minimal exposure to blood, infection</td>
</tr>
<tr>
<td>5. Intravenous (IV) starts</td>
<td>Appreciation for what it feels like to give and/or receive an IV</td>
<td>Discomfort related to use of a needle, bruising, exposure to blood, infection</td>
</tr>
</tbody>
</table>
APPEARANCE AND HYGIENE

How a student looks, smells and behaves communicates messages to clients, families, coworkers, and prospective employers about the value the student places on nursing practice and the student’s career in nursing. Clients and their families frequently judge the quality of care provided based on the student’s appearance. Prospective employers note the student’s appearance while they are in practicum agencies and may use this data in employment decisions. The following expectations must be followed in the practicum setting:

1. Hair must be clean and professional in appearance. Hair color should not fall outside those shades which can be found naturally (i.e., pink, green, purple, etc. are not acceptable.) Hair that droops around the eyes, face, shoulders or into the work field is not acceptable.

2. Facial hair is to be neatly trimmed and not to exceed 1 inch.

3. Fingernails are to be kept clean and cut below the ends of the fingertips. Neutral color nail polish may be worn but must be without chips or cracks. No artificial nails or overlays.

4. Freshly laundered uniforms are to be worn daily. Uniform must be properly fitting to ensure modesty.

5. Shoes and laces need to be kept clean and neat.

6. Only one plain finger band and one small stud earring in each earlobe may be worn in the practicum setting. Other jewelry is to be left at home. No other visible body piercing (including tongue) is allowed in the clinical setting.

7. Tattoos must be covered while at practicum agencies.

8. While in uniform, the student should avoid odors that might be offensive to clients. The student is to abstain from the use of all scented personal products and all tobacco products while in uniform or professional attire. Foods with strong odors, such as garlic and onions, and any other strongly scented colognes/perfumes/lotions should be avoided.

9. Students may not chew gum in the clinical setting.

10. Additional clinical policies may be enforced.

DRESS CODE

The student is expected to adhere to the following Nursing Program dress code or to the dress code of the specific community agency to which the student is assigned.

1. The official WWCC photo identification must be worn on the approved uniform top, white lab jacket or blue warm-up jacket and must be visible at all times. For student safety, all lanyards must be quick-release or break-away design.

2. White T-shirts or white turtlenecks may be worn under the uniform top.

3. White closed toe shoes, socks, and laces must be worn with the uniform. Open-heel shoes must have a heel strap.
4. Regulation uniforms or lab coats with photo identification must be worn anytime a student is in an acute care practicum agency on official student business. Alternate attire may be worn in some specialty areas.

5. Professional attire must be worn under a lab coat (tailored-style clothes).

6. Non-uniform professional attire will be required for some community-based practicum experiences.

7. The WWCC Nursing Uniform should not be worn during non-school related healthcare activities.

**OCCUPATIONAL EXPOSURE TO POTENTIALLY INFECTIOUS SECRETIONS**

Nurses must balance occupational risks with providing quality care to all clients/patients. As front-line providers of care, nurses have an increased risk of exposure to potentially infected blood and body fluids with blood-borne pathogens such as human immune deficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), Ebola, and other blood-borne pathogens.

The WWCC Nursing Program follows the Center for Disease Control recommendations that all health care workers should strictly adhere to the use of Protective Barriers and Universal Precautions as the most effective means of preventing exposure and transmission of potentially infections secretions.

http://www.cdc.gov/mmwr/preview/mmwrhtml/00000039.htm

**Protective barriers** reduce the risk of exposure of the health-care worker's skin or mucous membranes to potentially infective materials. For universal precautions, protective barriers reduce the risk of exposure to blood, body fluids containing visible blood, and other fluids to which universal precautions apply. Examples of protective barriers include gloves, gowns, masks, and protective eyewear. Gloves should reduce the incidence of contamination of hands, but they cannot prevent penetrating injuries due to needles or other sharp instruments. Masks and protective eyewear or face shields should reduce the incidence of contamination of mucous membranes of the mouth, nose, and eyes.

**Universal precautions** are intended to supplement rather than replace recommendations for routine infection control, such as handwashing and using gloves to prevent gross microbial contamination of hands. Because specifying the types of barriers needed for every possible clinical situation is impractical, some judgment must be exercised.

The risk of nosocomial transmission of HIV, HBV, HCV, Ebola and other blood-borne pathogens can be minimized if health care workers use the following general guidelines:

1. Take care to prevent injuries when using needles and other sharp instruments.
   a. Immediately activate the needle safety shield or place needles/sharps in a puncture-resistant disposal container.
   b. Do not recap needles by hand.
   c. Do not remove used needles from disposable syringes by hand.

2. Use protective barriers to prevent exposure to blood, body fluids containing visible blood, and other fluids to which universal precautions apply.
   a. The type of protective barrier(s) should be appropriate for the procedure being performed and the type of exposure anticipated.
3. Immediately and thoroughly wash hands and other skin surfaces that are contaminated with blood, body fluids containing visible blood, or other body fluids to which universal precautions apply.
   a. Use gloves for phlebotomy, IV insertion, or finger/heel sticks.
   b. Change gloves between patients.

4. Practice hand hygiene between patients
   a. Thoroughly wash hands with soap and water
   b. Alcohol-based hand sanitizers may be used if hands are not visibly dirty or greasy.

Any student, who has any temporary or permanent condition that may put them or their clients/patients at risk, has the responsibility to notify their practicum instructor. Students with exudative lesions or weeping dermatitis should refrain from all direct client care until condition resolves.

Management of Occupational Exposure

1. Provide immediate care to the exposed site:
   • Wash wounds and skin with soap and water.
   • Flush mucous membranes with water.

2. Initiate report:
   • Immediately report the incident to practicum instructor.
   • Complete any clinical agency specific unusual “incident report”.
   • Complete the “Unusual Occurrence/Practicum Incident Report” and “Needle Stick and Sharp Object Injury and Body Fluid Exposure Report” found in the appendices.
   • Submit all forms to practicum instructor for appropriate distribution and follow-up.

3. Activation of follow-up treatment:
   • Level of risk will be assessed according to agency policy.
   • Post-exposure prophylaxis (PEP) will be initiated based on risk potential and CDC guidelines at the student’s expense.
SUBSTANCE USE/ABUSE

For the purposes of this program, substance abuse is defined as: the abuse or illegal use of alcohol and/or drugs, and being under the influence of such, while participating in any school-sanctioned activity.

In accordance with RCW 18.130 (Washington State Department of Health, Regulation of Health Professions, Uniform Disciplinary Act) and the Walla Walla Community College Substance Abuse Policy, the Nursing Department faculty actively oppose the ingestion of any substance that interferes with healthy development and function in the physical, psychological, social, occupational, and spiritual areas. Unauthorized alcohol intake is prohibited on the WWCC campus.

Walla Walla Community College Policies and Washington State laws governing Practical and Registered Nurses both consider substance abuse to be a health and safety problem. Substance abuse has significant negative effects on safety and performance. Clients are at risk for serious injury if a student is under the influence of a substance which inhibits performance. THE SAFETY OF THE CLIENT IS OUR FIRST PRIORITY.

Although the State of Washington passed a law (I-502) that legalized personal use of marijuana, it is essential that all nursing students understand that Washington’s system of legalized marijuana does not preempt federal law. Federally, Marijuana is illegal. It is listed as a Schedule I drug which is defined as drugs, substances, or chemicals with no currently accepted medical use and a high potential for abuse (source: http://www.dea.gov/druginfo/ds.shtml). If a nursing student tests positive for Marijuana metabolites, the student will be immediately dismissed from the WWCC Nursing Program.

Expectations
All student nurses shall abstain from alcohol and/or drug use that alters mental, verbal, or motor responses within eight hours prior to their practicum and class periods. This includes the use of illegal drugs, the illegal use of prescription drugs, and the abuse or illegal use of alcohol. Attending classes and/or practicum while under the influence of alcohol and/or drugs will be cause for suspension from the program.

If a student takes a prescribed medication that may impair consciousness, alertness, or cognitive ability, he/she must inform his/her practicum instructor. If the medication causes the student to demonstrate altered mental, verbal, or motor responses, he/she may be sent home. An individual on medications that dull the senses is not considered a safe practitioner. THE SAFETY OF THE CLIENT IS OUR FIRST PRIORITY.

Although the WWCC Nursing Program does not conduct drug testing without cause, students placed at some clinical agencies will be required to submit to a mandatory urine drug screening test before Day 1 of clinical or at any subsequent time as requested.

ALL REPORTS OF SUBSTANCE ABUSE IN ANY SCHOOL-SANCTIONED ACTIVITY WILL BE ACTED UPON IMMEDIATELY. (See “Procedure” below).

If a student nurse should be convicted of a drug-related felony, he/she will be dismissed from the Nursing Program. Health care facilities will not allow students who have been convicted of a drug-related felony to practice in the practicum area.

The Nursing Program will assist and support any student who wishes to obtain help for drug-related problems.
**Reporting Suspected Substance Use/Abuse**

A staff member of the practicum agency who suspects a student of being under the influence of alcohol and/or any other drug that alters mental, verbal, or motor responses should immediately report this observation to the agency supervisor and the WWCC instructor.

A student who suspects a peer of being under the influence of alcohol and/or any other drug that alters mental, verbal or motor responses should immediately report this observation to the WWCC instructor or the agency supervisor (if instructor not immediately available).

**Procedure**

An instructor who has received a report of suspected abuse or who suspects a student of being under the influence of alcohol and/or any other drug will immediately remove the student from direct patient care. The instructor will then confer with another instructor or agency staff member to assess, and if possible confirm, the evidence of suspected alcohol or drug use. Should two agree that there is observable evidence of substance abuse, the following will occur:

- The student will submit to urine and blood drug testing immediately after signing a consent/release of information form (see “Student Nurse Laboratory Test Results Certificate of Agreement in the appendices). Failure to submit to the testing and/or signing the Certificate of Agreement form will result in immediate suspension from the program.
- Every effort should be made to obtain testing within one hour from the initial observation of suspected influence. If the suspected offense occurs at a facility with testing capabilities, testing should occur at that facility.
- If the student is in the classroom or in a practicum setting which does not have testing capabilities, it will be the student’s responsibility to arrange for transportation to the testing facility. Students suspected of substance abuse may not transport themselves. The instructor will contact the testing facility and facilitate expeditious testing, informing them of the student’s impending arrival and need for drug/alcohol testing.
- If the test results are positive or not immediately available, the student will not be allowed to drive and/or leave the testing facility alone. It is the student's responsibility to arrange for safe transportation home.
- The student will be suspended from all Nursing Program activities until the Director of Nursing Education receives a copy of the test results.
- If the results for alcohol and/or drugs are positive the student will be immediately dismissed from the program.
- All expenses incurred due to mandatory testing and/or required transportation shall be the responsibility of the student.

**Readmission**

Students dismissed for alcohol/drug problems must provide documentation of substance abuse treatment prior to readmission to the Nursing Program. In addition, the student will be required to adhere to a plan, developed in conjunction with a counselor, for ongoing evaluation of compliance to the substance abuse policy.
STATEMENT OF SUSPENSION FOR NURSING STUDENTS

**Purpose**
To allow a period of not more than five (5) instructional days (excluding weekends) for purposes of investigation of any issue which may compromise student’s ability to provide safe, competent care to clients.

**Protocol**
During the investigative proceedings the student may continue with theory and/or practicum depending on the infraction. It is possible that the infraction would warrant suspension from both theory and practicum.

**Procedure**
1. The instructor will formulate a statement regarding the infraction (serious concerns/accusations related to improper demonstration of skills, client safety or legal/ethical issues). This statement will be given to the Director of Nursing Education who will then submit it to the Vice President of Instruction or designee.

2. A formal recommendation will be submitted to the Vice President of Instruction for final approval if such a suspension is warranted.

3. The student would then be notified in person and in writing of the suspension. A copy of the instructor’s statement and suspension protocol will be given to the student at this time.

4. The investigation will proceed. Information will be gathered from all parties concerned including the student.

5. Results of findings will determine students’ continuation in the program or dismissal.

6. A student may contest or appeal such at any time during this process, and is due the same consideration for appeal that applies to student termination or dismissal.
MISCELLANEOUS

NATIONAL STUDENT NURSES ASSOCIATION (NSNA)

All students are encouraged to join the NSNA. Dues are approximately $35.00 per year; this also includes membership in the Nursing Students of Washington State (NSWS) Organization. Contests, scholarships, loans, discounts, insurance, and job opportunity information are available to members through the organization.

FIRST YEAR NURSING CLUB

All first year nursing students are members of the First Year Nursing Club. There are no dues for membership.

Members participate in fund raising activities and receive funds from the WWCC Associated Student Body for class activities such as state conventions and regional workshops. Local social activities are dependent on the membership and their creativeness in planning activities that promote health awareness, fun, recreation and relaxation.

First Year Nursing Club/Class Officers:

1. President
2. Vice President for social activities
3. Secretary
4. Treasurer
5. ASB Representative and Alternate (attend weekly ASB meetings)
6. Department Committee Representative(s)

Any club/class officer who receives an academic warning will be required to resign from office.

SECOND YEAR NURSING CLUB

All second year nursing students are members of the Second Year Nursing Club. There are no dues for membership.

The purpose of the Second Year Nursing Club is to aid second year nursing students in preparation for professional nursing careers. Membership stimulates the understanding of, and interest in, the programs of the American Nursing Association and the National League for Nursing. It also prepares the students for membership and participation in national, state and local nurses’ organizations.

At the local level, members sponsor special entertainment, educational guest speakers, community projects, and workshops. Members are actively involved in the Associated Student Body (ASB), and participate in school-sponsored activities.
Second Year Nursing Club/Class Officers:

1. President
2. Vice President for social activities
3. Secretary
4. Treasurer
5. ASB Representative and Alternate (attend weekly ASB meetings)
6. Department Committee Representative(s)

Any club/class officer who receives an academic warning will be required to resign from office.

NURSING DEPARTMENT COMMITTEE REPRESENTATION

Students from each nursing class will be given the opportunity to select representatives and alternates to the following Nursing Department committees:

- Faculty
- Level Faculty
- Curriculum (2nd year only)

Student concerns are addressed regularly in Faculty and Level Faculty meetings. Students may present their concerns to faculty via their class representative(s). Requests to have items placed on meeting agendas should be presented to the committee chair prior to the meeting.

GRADUATION/NURSES PINNING CEREMONIES

Graduation Ceremony

Applications for Associate Nursing and Practical Nurse graduations must be submitted to the admissions office prior to graduation.

Graduation ceremonies are held on the Walla Walla and Clarkston campuses. Associate Nursing degrees are conferred during the graduation ceremony. Caps and gowns are free and must be ordered ahead of time. Attendance by nursing students is expected.

Nurses Pinning Ceremony

Guidelines for the Nurses Pinning ceremonies are established by the nursing faculty. **NOTE: This is a professional ceremony; students should dress and conduct themselves accordingly.** Uniforms according to the professional dress code are required. Graduation related committees will be organized consisting of graduating students. **All committee decisions are subject to faculty and/or administrative approval.** Nursing faculty will pin students with the WWCC pin. It is expected that first year students will participate as “honor guards” for the Associate Nursing pinning.

In accordance with the decision by the United States Court of Appeals for the Ninth Circuit, it is not constitutional to allow prayer as a part of a commencement exercise or similar official school function.
ACADEMIC ADVISING

Each student will be assigned a nursing faculty advisor. It is the student’s responsibility to:

1. Make appointments with the advisor.
2. Inform the advisor of any proposed class schedule changes.
3. Meet with their faculty advisor quarterly to assure satisfactory progress toward meeting program requirements.

PRACTICUM AGENCY CONTINGENCY PLAN

If for some unforeseen reason an agency used by WWCC Nursing Program should close or become unable to provide practicum experience, the following course of action will be taken by the faculty:

1. Assess courses that would be affected by agency closure.
2. Meet with Advisory Committee for community input for alternate practicum experience.
3. Explore expanded practicum hours in currently used agencies.
4. Explore alternative community resources to meet practicum objectives.
5. Explore regional community resources to meet needed practicum objectives.

DEPARTMENTAL GUIDELINES

1. When faculty/departamental meetings are in progress, instructors will be unavailable to meet with students.

2. Students wishing to meet with an instructor should do so during the instructor’s POSTED OFFICE HOURS and must use the phone to verify the instructor’s availability.

3. The copy machine in the nursing department is not for student use. Students have access to a copy machine in the library.

4. Students are not to be in the receptionist/secretarial work area.

5. On Walla Walla Campus telephones for student use are available in the lobby and 2nd floor hallway of the Health Science Building for local outgoing phone calls. There is also a student phone and pay phone in the Vo-Tech Building and a pay phone in the main Administration Building. On the Clarkston Campus, the telephones available for student use are across from the business office or at the pay phone in the northeast hallway of the main building and in the lobby of the Health Science Building.

6. No information about students, including job reference, will be released from the nursing department without written consent from the student (see Authorization to Release Information form in the appendices).

7. Although students may wish to show a gesture of appreciation to instructors by giving gifts, there are restrictions as to what the faculty can and cannot accept. According to the Ethics Policy for Walla Walla Community College, “No state officer or state employee may receive, accept, take, seek, or solicit, directly or indirectly, any thing of economic value as a gift, gratuity, or favor from a person if it could be reasonably expected that the gift, gratuity, or favor, would influence the vote, action, or judgment of the officer or employee, or be considered as part of a reward for action or
inaction.” “…exceptions generally include certain unsolicited items, tokens of appreciation…and minor promotional items, with a total annual value of less than $50.00.”

8. Although patients (or patient family members/friends) may wish to show a gesture of appreciation to students by giving gifts, the student should inform the patient that they cannot accept a gift. He/she can suggest that if the patient is appreciative of the service which was received the patient or family may discuss this with the nurse manager or charge nurse to see what might be appropriate to give the entire unit for the great care (although nothing is needed). The student could suggest that the patient convey his/her appreciation in the post-hospitalization survey that asks about the care received.

NURSING TECHNICIAN ROLE

The purpose of the role of nursing technician is to provide an opportunity for students enrolled in an ADN or BSN program to gain work experience within the limits of their education, but not limited to the scope of functions of the certified nursing assistant.

Definition

The nursing technician is as defined in the State of Washington WAC 246-840-870 Functions of the nursing technician. Key points include:

- Nursing technicians are defined as nursing students who are employed by a hospital or nursing home and are either enrolled in a Nursing Program approved by the Nursing Care Quality Assurance Commission and have not graduated, or have graduated from a Commission approved Nursing Program within 30 days (or 60 days with a determination of good cause by the Secretary of Health).

- Nursing technicians may only perform specific nursing functions based upon and limited to their education and when they have demonstrated the ability and have been verified to safely perform these functions by the Nursing Program in which the nurse technician is enrolled.

- The Nursing Program providing verification is immune from liability for any nursing function performed or not performed by the nursing technician. Nursing technicians are responsible and accountable for their specific nursing functions.

- Nursing technicians may only practice under the direct supervision of a registered nurse who agrees to act as supervisor and is immediately available to the nursing technician. The supervising RN must have an unrestricted license and two years of experience in the setting where the nursing technician works.

- In order to practice as a nursing technician, an individual must be registered by the state Department of Health (WAC 246-840-905). In addition to providing any registration criteria established by the Department, nursing technician applicants must submit acknowledgments from the Nursing Program and employer. Nursing technicians are added to the Uniform Disciplinary Act and are subject to discipline by the Commission.

Functions of the Nursing Program

The Nursing Program in which the nursing technician is enrolled shall:
• Provide to the employer written documentation of specific nursing functions the nursing technician may perform. This documentation shall be based upon, and limited to, the nursing technician’s education and demonstrated ability to safely perform the functions listed.

• Provide to the employer and the commission written documentation when a nursing technician is no longer considered to be in good standing as defined in WAC 246-840-010 (16). The Nursing Program shall notify the employer and the commission immediately if the nursing technician is no longer in good standing. Notification to the commission shall be sent to P.O. Box 47864, Olympia, Washington, 98504-7864.

**How to Register**

An individual shall complete an application for registration on an application form prepared and provided by the secretary of the department of health. This application shall be submitted to P.O. Box 47864, Olympia, Washington, 98504-7864.

Every applicant shall provide:

• The application fee under WAC 246-840-990
• Verification of seven clock hours of AIDS education as required by RCW 70.24.270 and chapter 246-12 WAC, Part 8.
• A signed statement from the applicant’s Nursing Program verifying enrollment in, or graduation from, the Nursing Program. If the applicant has not yet graduated, this statement will include the anticipated graduation date.
• A signed statement from the applicant’s employer or prospective employer certifying that the employer understands the role of the nursing technician and agrees to meet the requirements of RCW 18.79.360 (4).
SUPPORT SERVICES

FINANCIAL AID

The Financial Aid office at WWCC handles all Financial Aid information and transactions. Grants, short-term loans and nursing loans are available. If you are in need of aid, please contact the Financial Aid Office as soon as possible. Financial aid will only pay for courses directly applying to Nursing Program requirements.

Students are encouraged to access information regarding scholarships from Financial Aid and the Foundation offices. Announcements regarding additional scholarships are placed on the student bulletin board and instructors may announce them in class. Taking the time to complete an application is often worth the effort.

SCHOLARSHIPS

A variety of scholarships are available to Walla Walla Community College students, made possible by the WWCC Foundation, individual donors, special endowments, private corporations and other foundations. Award decisions are based on academic performance, potential to benefit, and financial need. Many scholarships are designed for students in specific fields of study.

Important Dates

The application deadline is March 31 each year. Announcements of awards for the following school year will be made in late spring.

Applications

Access the fillable PDF application on the Foundation’s web site: www.wwcc.edu/foundation. Late or incomplete applications will not be considered. To be considered for funding, application must include each of the following:

- Completed scholarship application form
- Official transcripts
- Two letters of recommendation

Contact Information

For questions, please contact the Foundation office at 509-527-4275.

STUDENT SERVICES

The college offers many services to students who need assistance with study habits, reading, test taking and other academic concerns. These services are offered through the Student Development Center: Advising, Disability Services, Career Center, Personal Counseling, Tutoring and Learning Center (TLC), Writing Center, Worker Retraining, TRiO, and Opportunity Grant may be sources of additional funding.

Students who need part-time job placement should contact the WorkSource office at (509) 524-5230.

The Nursing Program can be demanding and stressful. It is best to seek assistance early, before difficulties arise. There may be times when a faculty member will refer a student to seek additional counseling services.
ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES and EQUAL OPPORTUNITY STATEMENT

These statements can be found on page 1 of this handbook.

CHILD CARE

The Walla Walla and Clarkston campuses have on-site daycare facilities for student use. For more information call:

- Walla Walla campus (509) 527-4544
- Clarkston campus (509) 758-1779

HEALTH INSURANCE

Students are responsible for providing their own injury and illness insurance. All students are required to provide proof of personal health insurance with a minimum of catastrophic health insurance coverage.

The college and the practicum agencies do not assume any financial responsibility for student accidents occurring during the course of their studies.

Students may purchase an accident and sickness policy at a low cost at the College Business Office.

NOTE: Each student must complete the “Acknowledgment of Insurance Coverage” form in the appendices.
APPENDICES
Safe Medication Administration by Nursing Students

As stated in the WWCC Nursing Program Conceptual Framework, the concept of Safety is overarching and integrated throughout the six foundational concept areas of nursing practice. Patient safety is the primary concern for any medication administration performed by nursing students. As such, the following procedures will be followed to ensure safe medication administration.

Orientation to Safe Medication Administration

Students will be provided with both theory and clinical learning experiences related to safe medication administration appropriate to their level of education. Simulated experiences with medication administration skills will be satisfactorily completed in the Skills Practice Lab before a student is allowed to administer medications in the clinical environment with supervision. Students must always be supervised by a licensed nurse/licensed respiratory therapist for any medication administration to a patient. Student orientation to safe medication administration will include, but is not limited to, the following simulated learning experiences:

1. Correct reading and interpretation of a medication order
2. Safe identification of the patient
3. Routes of medication administration, including the nursing judgment required to safely implement the routes of medication administration
4. Safe use of Automated Drug Distribution Devices (ADDDs) and other medication dispensing systems
5. Processes for administration of controlled substances, medication wastage, and monitoring for drug diversion
6. Medication reconciliation procedures
7. Accurate dosage calculation
8. Correct documentation of medication administration

Students will complete training on Automated Drug Distribution Devices (ADDDs), by online tutorial, prior to the use of such in the clinical setting. In addition, students will receive on-site orientation(s) to agency-specific ADDDs, with supervision, by a licensed nurse (instructor or preceptor). Information regarding safe medication administration procedures will be provided in the instructor’s Clinical Expectations document and/or on the online Learning Management System (e.g., Canvas), and will be available via the clinical agency’s Policies and Procedures.

Evaluation of Medication Administration Competency

Students will be evaluated each quarter of the Nursing Program to determine medication administration proficiency by the use of exams that measure knowledge of pharmacology, medication administration techniques, and safe dosage calculation. Students must receive a score of 80% correct on the end-of-quarter Medication Competency exam (with one retake attempt) to progress in the Nursing Program.

Documentation of Student Medication Errors and Alleged Diversion

As mandated by the Washington State Nursing Care Quality Assurance Commission (NCQAC), the Nursing Program will complete documentation of student medication errors and alleged diversion of drugs and report these errors to the NCQAC as required. All student medication errors will be documented on the WWCC “Unusual Occurrence/Practicum Incident Report” form by the student and
supervising clinical instructor and will be kept in a confidential file in the Nursing Program Office. This form may be replaced by forms provided for this purpose by the NCQAC.

Documentation of Medication Administration Errors or Alleged Drug Diversion must include:

1. The date and nature of the event;
2. The names of the student or faculty member involved;
3. The name of the clinical faculty member responsible for the student's clinical experience;
4. Assessment of findings and suspected causes related to the incident or root cause analysis;
5. Nursing education program corrective action; and
6. Remediation plan, if applicable.

**Principles of “Just Culture,” Fairness, and Accountability Implemented in the Nursing Program Response to Medication Administration Errors or Alleged Drug Diversion**

Open reporting and participation in error prevention and improvement is facilitated by use of the principles of “Just Culture.” Most medication administration errors are unintentional behavioral choices where risk is not recognized. However, there are rare instances where a student makes the conscious behavioral choice to disregard a substantial and unjustifiable risk which results in a medication administration error. Careful review of mistakes, errors, and “near misses” facilitates learning from such occurrences and identifies opportunities for process and system improvement.

With this in mind, all error incidents will be reviewed by the Nursing Program with the intent of:

1. Determining the cause and contributing factors of the incident;
2. Preventing future occurrences;
3. Facilitating student learning; and
4. Using the results of incident assessments for on-going program improvement.

**Nursing Program Responses to Medication Administration Errors or Alleged Drug Diversion**

1. Nursing Program responses to medication administration mistakes are dependent on the student’s level in the Nursing Program and most often are in the form of system improvement or individual coaching, education, counseling, and/or remediation in the Skills Practice Lab environment. The response focuses on the behavioral choice of the individual, not merely the fact that an error occurred.
2. Disciplinary actions, up to dismissal from the Nursing Program, may be taken for a student who either:
   a. recklessly disregards patient safety with medication administration, or
   b. has an incident of confirmed drug diversion.
Skills Validation Testing for Returning or Transfer Students
Entering the Nursing Program after Fall Quarter, First Year

Protocol:

Students entering or transferring into the WWCC Nursing Program will be required to demonstrate competency in skills taught in the previous quarter, prior to entry, as well as proficiency on the previous quarter’s Medication Competency Test. For returning students, the Admission Progression Committee will have the discretion of requiring additional skills testing based on exit interview recommendations.

This testing will determine the student’s ability to perform selected skills safely and competently. Testing will be completed by level leads or their designees. If a student is unable to pass the selected skill within 3 attempts by the time clinical begins, the student will not be allowed to progress and will be advised to withdraw from the nursing courses.

The student must also pass the Medication Competency Test from the previous quarter within 3 attempts by the time clinical begins. If the student is not successful, he/she will not be allowed to progress and will be advised to withdraw from the nursing courses.

Procedure:

- Upon registration for the nursing courses, the student will receive a list of clinical skills, procedures, websites and video sites for student to review prior to orientation day. On orientation day, a time will be scheduled for a group demonstration of these skills by the Skills Practice Lab (SPL) Coordinator. Proctored practice time by the SPL Coordinator will be provided for the remainder of the day. During this time, all skills should be practiced—including those skills on which the student will NOT be tested.

- Students may make arrangements with the SPL Coordinator for independent practice time after the orientation day. It is the student’s responsibility to arrange this practice time. Students should feel free to ask the SPL Coordinator or lead instructor for assistance, if needed, during practice.

- After the proctored and independent practice time, it is the student’s responsibility to contact the SPL Coordinator to schedule a time for Skills Validation Testing. Failure to schedule practice sessions far enough in advance may prevent the student’s successful completion of the testing before clinical begins. There will be no provision made for students who wait until the “last-minute” to test.

- The student will make arrangements with the level lead or their designee to take the Medication Competency test (or retake test) from the previous quarter. The student must pass this test within 3 attempts by the time clinical begins. A score of 80% or better must be achieved to pass the medication competency test.
Clinical Skills by Quarter:

**Entering Winter Quarter, First Year**

**Practice:**
- Head-to-toe physical assessment
- Foley catheter insertion
- Sterile wet-to-moist dressing change
- Medication administration: oral, IM (sites), SQ, nasal, otic, ophthalmic, inhaled, transdermal, and topical

**Skills to be tested:**
- Skills Testing:
  - Sterile Skills: Foley catheter insertion

**Entering Spring Quarter, First Year**

**Practice:**
- Head-to-toe physical assessment
- Foley catheter insertion
- Sterile wet-to-moist dressing change
- Tracheostomy suctioning
- Medication administration: oral, IM (sites and Z-track), SQ (insulin) nasal, otic, ophthalmic, inhaled, transdermal, and topical
- Primary IV and Secondary IV (IVPB) administration with and without pump

**Skills to be tested:**
- Skills Testing: Students will randomly select and test on **ONE** of the following skills:
  - Sterile Skills: Foley catheter insertion, Sterile wet-to-moist dressing change, or Tracheostomy suctioning
  - Parenteral Medications: IM (including Z-track and SQ (insulin))
  - Primary IV and Secondary IV (IVPB) administration

**Entering Fall Quarter, Second Year**

**Practice:**
- Head-to-toe physical assessment
- Foley catheter insertion
- Sterile wet-to-moist dressing change
- Tracheostomy suctioning
- Medication administration: oral, IM (sites and Z-track), SQ (insulin) nasal, otic, ophthalmic, inhaled, transdermal, and topical
- Primary IV and Secondary IV (IVPB) administration with and without pump
- NG intubation and medication administration

**Skills to be tested:**
- Skills Testing: Students will randomly select and test on **ONE** of the following skills:
  - Sterile Skills: Foley catheter insertion, Sterile wet-to-moist dressing change, or Tracheostomy suctioning
  - Parenteral Medications: IM (including Z-track) and SQ (insulin)
  - Primary IV and Secondary IV (IVPB) administration
Entering Winter Quarter, Second Year

Practice:
- Focused physical assessment
- Foley catheter insertion
- Tracheostomy suctioning
- Central Venous Access Devices (management and dressing change)
- NG intubation and medication administration
- IM, SQ, and IVPB medication administration
- IV push medications
- Blood administration
- IV starts

Skills to be tested:
- Skills Testing: Students will randomly select and test on ONE of the following skills:
  - Sterile Technique: Foley catheter insertion, Tracheostomy suctioning or CVAD dressing change
  - Parenteral Medications: IM (including Z-track), SQ (insulin), Secondary IV (IVPB), or IV Push
  - Blood Administration
  - IV Start

Entering Spring Quarter, Second Year

Practice:
- Focused physical assessment
- Foley catheter insertion
- Tracheostomy suctioning
- NG intubation and medication administration
- IM, SQ, IVPB, and IV push medication administration
- Blood administration
- Central Venous Access Devices (management and dressing change)
- IV starts
- Chest Tube Management
- Patient-Controlled Analgesia (PCA)
- Parenteral Nutrition

Skills to be tested:
- Skills Testing: Students will randomly select and test on ONE of the following skills:
  - Sterile Technique: Foley catheter insertion, Tracheostomy suctioning or CVAD dressing change
  - Parenteral Medications: IM (including Z-track), SQ (insulin), Secondary IV (IVPB), or IV Push
  - Blood Administration
  - IV Start
AUTHORIZATION TO RELEASE INFORMATION

In accordance with the Family Educational Rights and privacy Act (FERPA), the college will not provide information contained in student records in response to inquiries unless the student has given written consent to the College.

The student should allow a **minimum of two weeks** for faculty to write letters of reference.

By signing this document, I _______________________________ hereby authorize

☐ Any Nursing faculty or staff member, **or**
☐ Only the following instructor(s): ____________________________

at Walla Walla Community College to release the following reference information to

☐ Any prospective employer
☐ Any educational institution to which I seek admission
☐ Any organization considering me for a scholarship or award
☐ **ONLY** the following agency/person(s): ____________________

Date of Release:  ☐ Indefinite
☐ For this specific time frame: _____________________________

I authorize release of the following levels of information (check **one of the following**):

☐ Student level of completion only (no information on performance)

**OR**

☐ Program performance information, including level of completion

I authorize the reference to be given (Check all that apply):

☐ By written request
☐ By verbal request

Name: ________________________________________________

Agency: ______________________________________________

Address: _____________________________________________

_____________________________________________________

Signature ___________________ Date ___________ SID Number

Nursing Student Handbook 48 2016-2017
**Letters for scholarship:**
Please indicate the name of the scholarship and a brief summary of why you think you should be selected for the award.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

**Letters for prospective employers:**
Please indicate who you want the letter addressed and/or what job you are applying for and how you may be uniquely qualified for the position:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

**Is there any additional information you think would be helpful?**

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

*If you need more space for any section, please attach a separate sheet of paper.*
**UNUSUAL OCCURRENCE REPORT**

Student Name: ______________________  Faculty Name: ______________________
Date report completed: ________________  

This form is to be completed by the student and the faculty member together. The completed form is to be submitted to the Level Lead.

<table>
<thead>
<tr>
<th>Occurrence</th>
<th>Demographics</th>
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<tbody>
<tr>
<td>Date: __________________</td>
<td></td>
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<tr>
<td>Time: __________________</td>
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<tr>
<td>Location of event: __________________</td>
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<tr>
<td>Category of Event: (check one)</td>
<td></td>
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<tr>
<td>○ Error</td>
<td></td>
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<tr>
<td>○ Near Miss</td>
<td></td>
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<tr>
<td>○ Fall</td>
<td></td>
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<tr>
<td>○ Other: __________________</td>
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<thead>
<tr>
<th>Recipient of Unusual Occurrence</th>
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<tbody>
<tr>
<td>Who was the recipient of the Unusual Occurrence?</td>
</tr>
<tr>
<td>○ Patient</td>
</tr>
<tr>
<td>○ Visitor</td>
</tr>
<tr>
<td>○ Staff</td>
</tr>
<tr>
<td>○ Student</td>
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<tr>
<td>○ Other (specify): ______________</td>
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<table>
<thead>
<tr>
<th>Type of Incident</th>
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<tbody>
<tr>
<td>○ Medication error:</td>
</tr>
<tr>
<td>○ Wrong dose/rate</td>
</tr>
<tr>
<td>○ Wrong route</td>
</tr>
<tr>
<td>○ Wrong client</td>
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<tr>
<td>○ Wrong drug/solution</td>
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<tr>
<td>○ Wrong time/delayed/out of sequence</td>
</tr>
<tr>
<td>○ Adverse/allergic reaction</td>
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<tr>
<td>○ Extra dose/ repeated</td>
</tr>
<tr>
<td>○ Omission</td>
</tr>
<tr>
<td>○ Patient self-medicated</td>
</tr>
<tr>
<td>○ Other (specify): __________________________________</td>
</tr>
</tbody>
</table>

| ○ Needle stick (complete “Needle Stick and Sharp Object Injury and Body Fluid Report”) |
| ○ Blood/Pathogen exposure |
| ○ Fall event  |  |
| ○ Witnessed: Yes ______ No ______ |  |
| ○ Assisted to the floor: Yes ______ No ______ |  |
| ○ Fall from: __________________  |  |

| ○ Injury to body |
| ○ Failure to assess and/or respond to an adverse change in client condition |
| ○ Breach of confidentiality |
| ○ Other: __________________ |  |
Unusual Occurrence Description

Describe event in detail here: __________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Reflection on Contributive/Causative Factors

○ Medication Error:
  ○ Allergy not documented
  ○ Assessment inaccurate/Incomplete
  ○ Drug not documented as given
  ○ Drug not checked with order/MAR
  ○ Drug not available
  ○ MAR misread/misinterpreted/ incomplete
  ○ Medication not scanned
  ○ Drug name similarity with other drug
  ○ Overlooked medication
  ○ Client refused/ unavailable
  ○ Other (specify): ______________________

○ Inadequate communication

○ Inadequate preparation and/or knowledge for providing patient care

○ Deviation from protocols

○ Equipment or medical device malfunction

○ Environmental safety – for self, patient or others

○ Inappropriate or inadequate supervision or assignment by faculty, preceptor, other student, health care team, patient, or visitor

○ Interruptions/Distractions

○ Client factors—for example, combative, agitated etc. (Specify): ______________________

○ Technical knowledge deficit

○ Other: __________________________________________________________
  __________________________________________________________
### Follow-Up Action

**Who was alerted?**
- WWCC Faculty-specify name(s): ________________
- WWCC Nursing Administration-specify name and title of the individual(s):
  ________________
- Patient
- Patient’s family-specify: ________________
- Healthcare Provider-specify: ________________
- Other: ________________
- Unknown

**Inform clinical agency:**
- Yes-specify name and title of individual(s): ________________
- No
- Unknown
- N/A

**Agency incident report completed:**
- Yes (specify who completed the agency report): ________________
- No
- Unknown
- N/A

**Changes occurring as result of incident:**
- System changes
- Policy changes
- Practice changes
- Curriculum changes
- Nothing at present
- Other: ________________
- Unknown
- N/A

**Measures to prevent his type of incident from occurring in the future:** ________________

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</table>
## Student Information

Current Level in the program:
- Level I
- Level II

Current Quarter in the Program: 

Student is:
- Returning student
- LPN to RN Transition
- Neither of the above

## Final Remarks

Provide any additional information you would like to add here:

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________
Needle Stick and Sharp Object Injury and Body Fluid Exposure Report

Name: ___________________________  Birthdate: __________________
SID#: ___________________________  Date of Injury: ________________

Where did the injury occur? (check one)

☐ Patient Room  ☐ Venipuncture
☐ Outside Patient Room (hallway, nurse’s station, etc.)  ☐ Dialysis Facility
☐ Emergency Department  ☐ Procedure Room (X-ray, EMG, etc.)
☐ Intensive/Critical Care Unit  ☐ Clinical Laboratories
☐ Operating Room  ☐ Autopsy/Pathology
☐ Outpatient Clinic/Office  ☐ Blood Bank
☐ Service/Utility Area (laundry, central supply, etc.)
☐ Other, describe ________________________________

Was the source patient known? (check one)

☐ yes  ☐ no  ☐ unknown  ☐ not applicable  Medical Record #___________

Was the injured worker the original user of the sharp item? (check one)

☐ yes  ☐ no  ☐ unknown  ☐ not applicable

Was the sharp item: (check one)

☐ contaminated (known exposure to patient or contaminated equipment)
☐ uncontaminated (no known exposure to pt. or contaminated equipment)
☐ unknown

For what purpose was the sharp item originally used: (check one)

☐ unknown/not applicable
☐ injection, intramuscular/subcutaneous, or other injection though the skin (syringe)
☐ heparin or saline flush (syringe)
☐ other injection into (or aspiration from) I.V. injection site or I.V. port (syringe)
☐ to connect I.V. line (intermittent I.V./piggyback/I.V. infusion/other I.V. line connection)
☐ to start I.V. or set up heparin lock (I.V. catheter or Butterfly™-type needle)
☐ to draw a venous blood sample
☐ to draw an arterial blood sample (ABG)
☐ to obtain a body fluid or tissue sample (urine/CSF, Amniotic fluid/other fluid, biopsy)
☐ fingerstick/heel stick
☐ suturing
☐ cutting (surgery)
☐ electrocautery
☐ to contain a specimen or pharmaceutical (glass items)
☐ other, describe ________________________________

Did the injury occur: (check one)

☐ before use of item (item broke or slipped, assembling device, etc.)
☐ during use of item (item slipped, patient jarred item, etc.)
☐ between steps of multistep procedure (between incremental injections, passing instruments, etc.)
☐ disassembling device or equipment
☐ in preparation for reuse of reusable instrument (sorting, disinfecting, sterilizing, etc.)
☐ while recapping a used needle
☐ withdrawing a needle from rubber or other resistant material (rubber stopper, I.V. port, etc.)
☐ other after use, before disposal (in transit to trash, cleaning up, left on bed, table, floor, or other inappropriate place, etc.)
□ from item left on or near disposal container
□ while putting the item into the disposal container
□ after disposal, stuck by item protruding from opening of disposal container
□ after disposal item protruded from trash bag or inappropriate waste container

What device or item caused the injury?

______________________________

Mark the location of the injury:
If the item causing the injury was a needle, was it a “safety design” with a shielded, recessed, or retractable needle?
□ yes □ no/not applicable

Was the injury: (check one)
□ superficial (little or no bleeding)
□ moderate (skin punctured, some bleeding)
□ severe (deep stick/cut, or profuse bleeding)

Describe the circumstances leading to this injury:
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

BODY FLUID EXPOSURE:

Which body fluids were involved in the exposure? (check all that apply)
□ blood or blood product □ pleural fluid
□ vomit □ amniotic fluid
□ CSF □ urine
□ peritoneal fluid □ other, describe_____________________

Was the exposed part: (check all that apply)
□ intact skin □ nose
□ non-intact skin □ mouth
□ eye(s) □ other, describe_____________________

Did the blood or body fluid: (check all that apply)
□ touch unprotected skin
□ touch skin through gap between protective garments
□ soak through protective garments
□ soak through clothing

Which protective items were worn at the time of the exposure? (check all that apply)
□ single pair latex/vinyl gloves □ surgical gown
□ double pair latex/vinyl gloves □ plastic apron
□ goggles □ lab coat, cloth
□ eyeglasses □ lab coat, other_____________________
□ faceshield □ other, describe_____________________
□ surgical mask
Was the exposure the result of: (check one)
- ☐ direct patient exposure
- ☐ touched contaminated equipment
- ☐ specimen container leaked/spilled
- ☐ touched contaminated drapes/sheets/gowns, etc.
- ☐ specimen container broke
- ☐ unknown

Estimate the quantity of blood or body fluid in contact with your skin or mucous membranes: (check one)
- ☐ small amount (up to 5 cc, or up to a quarter cup)
- ☐ moderate amount (up to 50 cc, or up to a quarter cup)
- ☐ large amount (more than 50 cc)

Mark the size and location of the exposure:

Describe the circumstances leading to this exposure:
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________

Instructor comments:
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________

Instructor Signature: ___________________________ Student Signature: ___________________________
ATI FAQ

1. Q: “Why do we have to have ATI tests? They are a waste of time.”

A: According to the literature, students who have completed a minimum of 1000 computerized test questions during their nursing education have a far greater chance of success on the NCLEX-RN than those students who have not. Multiple graduates, who while in the program did not like having to take ATI tests, have returned later after taking the NCLEX-RN and lauded ATI and thanked us for requiring it. ATI is an integral part of our program and here to stay.

2. Q: “Why can’t we get the answers to the questions on the proctored ATI tests? They don’t help me learn.”

A: The proctored ATI tests are not designed to be a learning tool. They are designed to assess your knowledge about certain topics related to nursing. For each ATI test, a printout of the results is available which provides the learner with the topics of questions the student did not answer correctly. This is designed to aid the student in focusing subsequent studies. However, the online practice ATI tests are designed as a learning resource and do provide rationales for the answers for all questions.

3. Q: “Why are there things on the ATI tests that were not covered in our theory class content? That’s not fair.”

A: It is fair to expect students to be accountable for previously learned knowledge as well as relevant information currently provided in ATI review modules, ATI’s web site, required textbooks and suggested learning resources. ATI tests cover nursing subjects in greater breadth than can be delivered in a few classes. For example:

- The Maternal-Newborn ATI test covers information provided in both years of the program; both normal labor and delivery taught in first year, as well as high risk maternal-newborn taught in second year.
- The Medical-Surgical Cardiac & Respiratory content, for example, covers content taught in both years over a number of quarters.
- The Mental Health test covers concepts taught in first year as well as the first two quarters of second year.
- The Management test covers content taught in first year, second year and in all three professional development courses.

It is inevitable that ATI tests, which are nationally standardized and designed to represent nursing’s body of knowledge on particular topics, will ask questions on topics or medications about which you have no knowledge. That is ok; what we are seeking to ascertain is if you have sufficient knowledge to care for patients safely and manage care effectively. You are not expected to know everything. Regularly, students who score 70-80% of the questions correct are in the upper 90th percentile in the nation. Again, we are assessing if you have sufficient knowledge – not that you know everything.

If you are struggling with ATI tests, it would be a good idea to review the “Testing and Remediation” module in NurseLogic 2.0 that is found in your ATI tutorials. Begin by reading the
section that is entitled “Preparing for Standardized Tests.” Then go through the rest of the module: “Critically Reading Test Items”, “Testing Taking Strategies”, etc.

4. **Q:** “What is the correlation between ‘Level II Proficiency’ and the grade we get?”

**A:** The Level II Proficiency Score (or designated percent score on a Comprehensive Predictor examination) is used to identify those persons who have and have not mastered the specific content at the designated level. Those who do not achieve the Level II Proficiency score (or designated percent score on a Comprehensive Predictor exam) are required to remediate and retake the failed ATI test one time. This provides the student with an opportunity to (1) demonstrate mastery of the content and (2) raise their earned test score up to (but not higher than) 75% of the available points.

Your achieved Proficiency Level will appear on your test report in the upper right hand corner, just under your “Adjusted Individual Total Score.” ATI Proficiency Levels are established by nursing experts from across the nation and are different for each ATI test. The “Level II Proficiency” is actually a range of scores; for our purposes, the minimum score of the Level II proficiency range will yield 75% of the available points. (See below for how the grade is calculated). The number of points possible for each ATI test is determined by the Level faculty.

5. **Q:** “How are the points calculated based on my ATI scores? Can I figure it out for myself?”

**A:** Yes. Here is how it works:

- **Step 1.** Multiply the available points by 75%. (Example: if an ATI test is worth 30 points, 75% would be 22.5 points).

- **Step 2.** Divide the Level II Proficiency minimum score by the product of Step 1. (Example: if the minimum Level II Proficiency score for a particular ATI test was 61.7%, divide 61.7 by 22.5, this would yield 2.74). (Faculty can provide the Level II Proficiency minimum score).

- **Step 3.** Divide the score percent you achieved on the ATI test by the quotient of Step 2. (Example #1: if you achieved a score of 75% on your ATI test, divide 75 by 2.74, this would yield a score of 27.37 points out of 30 points possible). (Example #2: if you achieved a score of 58.3% on your ATI test, divide 58.3 by 2.74, this would yield a score of 21.27 points out of 30).

6. **Q:** “Why can’t the points for the ATI tests be included in ‘activity points’ instead of ‘test & quiz’ points? We don’t like that it affects our test grade.”

**A:** ATI tests assess your knowledge and ability to process information to arrive at correct deductions just as much as our other tests do. As such, they are a valid assessment and the scores belong with other test scores. Secondly, we have been using ATI successfully for years in this program. In years past when ATI test scores were NOT included in “test & quiz” points, students, recognizing that there was little weight associated with the tests and that it had minimal impact on their grade, failed to take the ATI testing seriously and failed to apply themselves to achieving their very best. In turn, they failed to gain the body of knowledge necessary to demonstrate that they had sufficient mastery of the content. To help students understand the importance of studying to do their very best on ATI tests, faculty have – and will continue to – place ATI test scores with other “test & quiz” scores.
ATI CONTRACT

I, the undersigned, acknowledge that:

➢ As per the WWCC Nursing Student Handbook and nursing course syllabi, I am required to take standardized nursing tests (proctored online ATI tests) throughout the Nursing Program.

➢ Should I fail to achieve the designated proficiency level or designated percent score on an ATI test, I am required to retake the designated test **one** time. With the retake, I have the opportunity to improve my score on the failed ATI test up to (but not beyond) 75% of the available points.

➢ Should I fail any proctored ATI test, it is my responsibility to self-remediate before I re-take the failed test. **I may not retake an ATI test within 48 hours of failing the test.**

➢ If I fail an ATI test, remediation materials are provided on the ATI web-site as a Focused Review. If other remediation materials beyond the ATI Focused Review are desired, I should contact my advisor (or the designated instructor, if applicable) for further help.

➢ I may retake the failed ATI test at the **scheduled** retake times throughout the quarter. These scheduled retake times will be arranged with the testing center/computer lab or the designated instructor, when applicable. Please see the calendar for retake times.

➢ If I do not complete an ATI Comprehensive Predictor examination by the end of the quarter (Summer PN or Level II Spring), I will receive an incomplete grade for that course and have two weeks into the subsequent quarter to resolve the incomplete grade.

Printed Name: ___________________________________________

Signature: ________________________________________________

Date: ____________________________________________________
STUDENT NURSE LABORATORY TEST RESULTS
CERTIFICATE OF AGREEMENT

Under the suspicion of substance use/abuse, I understand that testing must occur within one hour and, if transportation to a testing facility is required, I may not transport myself.

I hereby authorize ___________________________ to perform a urinalysis and blood tests to determine the use of alcohol and/or controlled substances on specimens provided by me. I authorize Walla Walla Community College Nursing Program to receive these results and utilize the results of this test to determine suitability for continued enrollment in the Nursing Program.

Name (Please Print)  Student Identification Number

________________________________________  ____________________________
Signature Date

________________________________________  ____________________________
Witness Date

I hereby refuse to agree to the above testing and realize that my refusal will result in immediate suspension from the program.

________________________________________  ____________________________
Student Signature Date

________________________________________  ____________________________
Witness Date

________________________________________  ____________________________
Witness Date
PROGRESSION TO LEVEL II STUDENT ACCEPTANCE STATEMENT

Having thoroughly read the 2015-2016 Nursing Admission Guide during my application process, I acknowledge and accept that I will not be allowed to progress to the second year of the Nursing Program until I have completed ALL pre-requisite and support courses with a “C” (2.0) grade or better as outlined on page 6 of the 2015-2016 Nursing Admission Guide, including:

PRIOR TO APPLYING TO THE NURSING PROGRAM:

- CHEM& 110, Chemical Concepts w/lab 5 credits
- MATH 146, Intro to Statistics 5 credits
- ENGL& 101, English Composition I 5 credits
- BIOL& 160, General Biology w/lab 5 credits
- BIOL& 251, Human A & P I 5 credits

PRIOR TO ENTERING THE NURSING PROGRAM:

- PSYC& 100, General Psychology 5 credits
- PSYC& 200, Lifespan Psychology 5 credits
- BIOL& 252, Human A & P II 5 credits
- BIOL& 260, Microbiology 5 credits
- NUTR& 101, Nutrition 5 credits

BEFORE ENTERING SECOND YEAR OF THE NURSING PROGRAM:

- ENGL& 102, English Composition II 5 credits
- (or other selected Communication class from the distribution list)

HUMANITIES* 10 credits

(from the Humanities distribution list)

*Selected from at least two disciplines from the WWCC Master List of Transfer Courses. No more than 10 credits allowed from any one discipline. No more than 5 credits in foreign language at the 100 level. No more than 5 credits in performance/skills courses are allowed.

The Master List of Transferable Courses (also known as “the distribution list”) can be found at the following URL:

http://www.wwcc.edu/academic-transfer/

______________________________________________
Print Full Name

______________________________________________
Student Signature _____________________________

Date
ACKNOWLEDGMENT OF INSURANCE COVERAGE

I am aware that during the practicum and/or lab experience in which I am participating under the arrangements of Walla Walla Community College, certain dangers may occur, including, but not limited to, the following:

Infectious conditions, needle punctures, allergic reactions, musculo-skeletal injuries, etc.

In consideration, and as part payment for the right to participate in this practicum and/or laboratory experience and the other services of Walla Walla Community College, I have and do hereby assume all the risks involved and will hold the State of Washington, Walla Walla Community College, its employees, agents, and assigns, harmless from any and all liability actions, causes of action, debts, claims, demands of every kind and nature whatsoever, which may arise from or in connection with participation in any activities arranged for me by Walla Walla Community College. The terms thereof shall serve as a release and assumption of risk for the heirs, executors, administrators, and members of my family, including minors.

All students are required to provide proof of personal health insurance with a minimum of catastrophic health insurance coverage.

I have provided proof of my insurance to the nursing office (information below):

Insurance Information:

Policy # ____________________________

Company ____________________________

_________________________ Signature of Student

_________________________ Date

Printed Name of Student
This page left intentionally blank
Invasive Procedures Consent Form and Student Agreement for Use of Practice and Invasive Kits

I _____________________________________________ have read and understand my ethical responsibilities as outlined in the American Nurses Association Code of Ethics for Nurses and the Invasive Procedure Policy (p. 27). In accordance with these principles I agree to use kits intended for practice on mannequins, only on those mannequins and on equipment intended for that purpose. I also agree to use invasive kits for peer practice, on my peers only and in the presence of a WWCC instructor only. I understand that the intentional misuse of this equipment will be considered unethical conduct and such conduct will be brought before the Level for disciplinary action.

I understand the risks/discomforts and benefits of invasive procedure practice and my questions have been answered. I agree to participate as a subject in these optional learning experiences.

*(Check all that apply.)*

☐ Finger stick to check glucose    ☐ Intradermal injections    ☐ Intramuscular injections

☐ Subcutaneous injections    ☐ Intravenous (IV) starts (2nd year students only)

_________________________________________    ____________    _______________________
Student Signature                      Date                      Instructor Signature

OR

I, _____________________________________________ do not agree to participate as a subject in any learning activities involving invasive procedures. I understand I must complete an Alternative Learning Activity. It is the responsibility of the student to contact the instructor to arrange alternative learning activities.

_________________________________________    ____________
Signature of Student                      Date
EXPECTATIONS IN REGARD TO PLAGIARISM

According to the ANA Code of Ethics for Nurses, it is expected that all students demonstrate integrity and assume responsibility and accountability for their actions.

Please read the following procedure and place your initials beside each section, then sign and date at the bottom of this form and turn into the level lead.

1) Plagiarism is defined as presenting someone else’s work, including the work of other students, as one’s own.

A student must give credit to the originality of others and acknowledge indebtedness whenever:

- a. directly quoting another person’s actual words, whether oral or written;
- b. using another person’s ideas, opinions, or theories;
- c. paraphrasing the words, ideas, opinions, or theories of other, whether oral or written;
- d. borrowing facts, statistics or illustrative material; or
- e. offering materials assembled or collected by others in the form of projects or collections without acknowledgement.

People’s ideas may be contained in written text, visual text, multi-media products, including websites, music, and written text.

2) Any student who aids or abets the accomplishment of such activity as defined in subsection one (1) above shall also be subject to reasonable action by the instructor as defined below.

3) An instructor may take reasonable action against any student who is deemed to have been guilty of plagiarism. Course of action might include, but not be limited to:
   a. student receive warning;
   b. student receive a lowered grade;
   c. student receive failing grade for the course;
   d. student dropped from course;
   e. student be referred to the Vice President of Student Affairs for violation of Student Code of Conduct

4) An instructor taking action against any student for an act of academic misconduct may report such action to the Vice President of Instruction and the Vice President of Student Affairs, as soon as possible, but no later than five working days after the incident. Any student subject to action of an instructor for a violation of this section may seek review of that action by referring to the Grievance Procedure for Instructional Issues.

Printed Name: ______________________________________________________________________

Signature: ___________________________ Date: ___________________________
WWCC NURSING STUDENT AFFIRMATION FORM  
(Adapted from NWOSU Student Affirmation Form 6.8.2011)

I understand that as a nursing student I am a member of a profession which places me in a position of confidence requiring the utmost discretion and professionalism to protect those with and for whom I work. I acknowledge that as a member of the nursing profession I have a responsibility to act in a manner consistent with the essential attributes of the profession. In this regard:

I agree to protect the privacy of faculty, peers, patients and family members of patients by not inappropriately disclosing confidential information about faculty, peers, patients or their family members that is disclosed to me in my capacity as a WWCC nursing student. In addition, I agree not to inappropriately disclose confidential information about my agency or institution that is disclosed to me in my capacity as a WWCC nursing student. I will adhere to HIPAA guidelines.

I will not share assigned Electronic Health Record (EHR) log-in information with another student or staff member.

I will read the syllabus for each of the nursing courses I will attend this academic year. I understand that the grading criteria for each course is explained in the syllabus.

I agree that I will conduct myself in a manner that exhibits professional values and in accordance with the American Nurses Association (ANA) Code of Ethics for Nurses.

I will maintain and uphold the policies of WWCC and the ANA Code of Ethics for Nurses related to academic integrity, ethics, and professional conduct. I will not condone or participate in any activities of academic dishonesty including, but not limited to, plagiarism, cheating, stealing or copying another’s assigned work, lying about any situation, and/or forgery of another person’s name.

I understand that signing the name of my instructor, or other health care professional, to any document constitutes forgery.

I will not recreate any items or portions of any test/quiz for my own use, or for use by others during my enrollment in the WWCC Nursing Program.

I will not accept or access any unauthorized information related to any test/quiz administered during my enrollment in the WWCC Nursing Program.

I will sign my own papers and other documents and will not sign or initial any other student’s name to anything, including class roster.

I will not allow any student access to any of my paperwork for the purpose of copying.

I will not discuss or post any information about faculty, peers, patients, family members, or any clinical facility on any electronic venue (i.e. My Space, Facebook, Twitter, cell phones, etc.). Nor will I leave/save any patient, family, faculty, clinical facility or student information on any open access desktop or hard-drive.

I understand that marijuana is defined as an illegal substance by the Federal Government.

I understand that a clinical agency may require me to take a random drug screening test as a requirement for participating in clinical.

Student’s Signature __________________________ Date ____________ Student’s Printed Name __________________________

Nursing Student Handbook 72 2016-2017
PRACTICUM SCHEDULE ACCEPTANCE STATEMENT

I understand that during the course of the WWCC Nursing Program I will be assigned to clinical rotations in which I may be required to work during **day**, **evening**, **night**, and **weekend** shifts. I also understand that the length of shifts may vary and may last up to 12.5 hours. I further understand that I may be required to travel to distant clinical sites and am responsible for my own transportation. I accept and will abide by the clinical assignment scheduling terms above.

__________________________________________
Print Full Name

__________________________________________
Student Signature

__________________________________________
Date

NURSING STUDENT HANDBOOK ACCEPTANCE STATEMENT

Having read all of the WWCC Nursing Student Handbook program policies, I understand and accept the responsibilities of my role as a nursing student at Walla Walla Community College. I agree to abide and be bound by these policies as a condition of enrollment in and graduation from the program. I have had an opportunity to have my questions satisfactorily answered by a nursing faculty member or the Nursing Program Director.

__________________________________________
Print Full Name

__________________________________________
Student Signature

__________________________________________
Date

Turn this sheet into your instructor as directed.
AUDIENCE RESPONSE POLLING “CLICKER” USE CONSENT FORM

The WWCC Nursing Program requires mandatory use of clicker technology for student responses in various classroom activities.

At the beginning of the year, each student will be assigned a clicker that is **to be used by that student only**. Use of a clicker not assigned to that student would be considered unprofessional behavior and may result in disciplinary action. The assigned clicker will remain with the student for the entire academic year. Students are expected to come to every scheduled class with the clicker.

<table>
<thead>
<tr>
<th>Read and initial each statement below signifying that you understand the requirements for use of the clickers.</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____ I understand that I am required to bring my assigned clicker to every nursing class at WWCC.</td>
</tr>
<tr>
<td>_____ I understand that my clicker is to be used <strong>ONLY</strong> by me.</td>
</tr>
<tr>
<td>_____ If I fail to bring my clicker to class, I will obtain a temporary replacement clicker for the day per campus policy.</td>
</tr>
<tr>
<td>_____ I have my own clicker. I understand that the requirements above apply to me</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Initial the following <strong>ONLY</strong> if you are being assigned a clicker by the Nursing Program.</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____ At the end of the academic year or upon any exit point during the year, I will return my assigned clicker to the faculty.</td>
</tr>
<tr>
<td>_____ I understand that if I lose or damage the clicker, I must pay the replacement cost. Failure to do so will result in an incomplete for the quarter and/or a financial hold being placed on my college account, preventing access to transcripts and registration for classes.</td>
</tr>
</tbody>
</table>

__________________________
Student Printed Name

__________________________
Student Signature

________
Clicker Registration #
SIMULATION VIDEO TAPING NOTICE

I, the undersigned, do hereby acknowledge that Walla Walla Community College (WWCC), its employees, or agents have the right to take videotape recordings of me, during the simulation lab experience, while I am a student of the Nursing Program and to use these for educational purposes for the students involved in simulation.

I understand that my identity will not intentionally be revealed therein nor be identified by descriptive text or commentary.

I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

I understand that it is the established practice of the nursing education program to delete the simulation videos after the participants have had the opportunity to view and discuss the contents with the simulation instructor.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

By my signature on this document, I acknowledge that I understand the above information regarding videotaping during the simulation lab experience.

________________________________________
Print Name

________________________________________     ______________________________
Signature of Student                        Date