Nursing Student Guide

Associate in Applied Science (A.A.S.)

ARIZONA WESTERN COLLEGE

Nursing Program

INTRODUCTION

It is a pleasure to welcome you to the nursing program at Arizona Western College. You have selected a career which offers many rewards, challenges, and opportunities. Students entering the nursing program must be highly motivated, mature, and focused. The Director of Nursing, Faculty, and Support Staff wish you success as you begin your nursing education. The Nursing Student Guide has been developed to provide you with specific policies, procedures, and regulations set forth by the department, clinical facilities, and/or other regulating agencies associated with the educational program.

Certain program policies set forth prevail over other institutional policies to assure compliance with standards of practice established by the State of Arizona Board of Nursing, the American Nurses Association Code for Nurses, and nursing accrediting bodies.

The department reserves the right to make modifications, additions, or deletions to the Nursing Student Guide. You will be notified of any changes. Information found on the AWC nursing department website will take precedence.

You are responsible for becoming acquainted with the Arizona Western College catalog and the AWC Nursing Student Guide as well as general college policies.

1. **PROGRAM INFORMATION**

A. **Program Purpose**

Graduates will demonstrate (1) knowledge and skills to provide safe care as an entry level nurse, (2) basic knowledge in nursing that will prepare them for the registered nurse licensure examination, and (3) competency in communication, critical thinking, quantitative analysis, and technological applications.

B. **Program Outcomes**

Program Outcomes are performance indicators that reflect the extent to which the purposes of the nursing education unit are achieved and by which program effectiveness is documented. Program outcomes are measurable consumer-oriented indexes designed to evaluate the degree to which the program is achieving its mission and goals. Examples include but are not limited to: program completion rates, job placement rates, licensure/certification pass rates, and program satisfaction.

The AWC Nursing Program faculty has established the following Program Outcomes:
1) Students will graduate within 3 years of enrollment at a percentage determined by the faculty.
2) Graduates will have first-time pass on the National Council Licensure Examination (NCLEX) with a rate at or above the national mean for the same time period.
3) Graduate employment rate will be at or above the local employment rate.
(Source: AWC Nursing Program, Systematic Evaluation Plan, update 11/13)

C. **Mission**

The faculty of the Department of Nursing upholds the mission of Arizona Western College by supporting educational and lifelong learning needs of the community through innovative partnerships. The faculty is dedicated to (1) providing excellence in nursing education and practice, (2) incorporating changes aimed at current and emerging healthcare trends with a focus on the rural southwest. *(Reaffirmed: 11/13)*

D. **Philosophy**

The philosophy of the nursing program reflects the beliefs of the faculty and is consistent with the mission of Arizona Western College. The philosophy consists of beliefs regarding nursing and nursing education.
1) The practice of nursing must abide by the standards of the American Nurses Association Code of Ethics.
2) Excellence in nursing education requires current nursing knowledge and competencies, which are reflected in the Nurse of Future (NOF) Nursing Core Competencies *(Massachusetts Department of Education, 2010)*.
3) Students and Faculty: (1) respect and value the dignity of all human life and cultural diversity, and (2) view nursing practice as holistic, with a focus on the health care continuum experiences of individuals, families, and groups.

4) Students: (1) take ownership of their learning and faculty members facilitate through a commitment to provide learning activities to meet the needs of a diverse student population; both traditional and non-traditional.

5) Faculty: (1) embrace the idea of using multiple teaching modalities that recognize the unique worth of each student and are supportive of the student's attainment of their individual goals. *(Adopted: 11/13)*

E. Conceptual Framework-Model

AWC Nursing Conceptual Framework
Based on Nurse of the Future (NOF)
Nursing Core Competencies
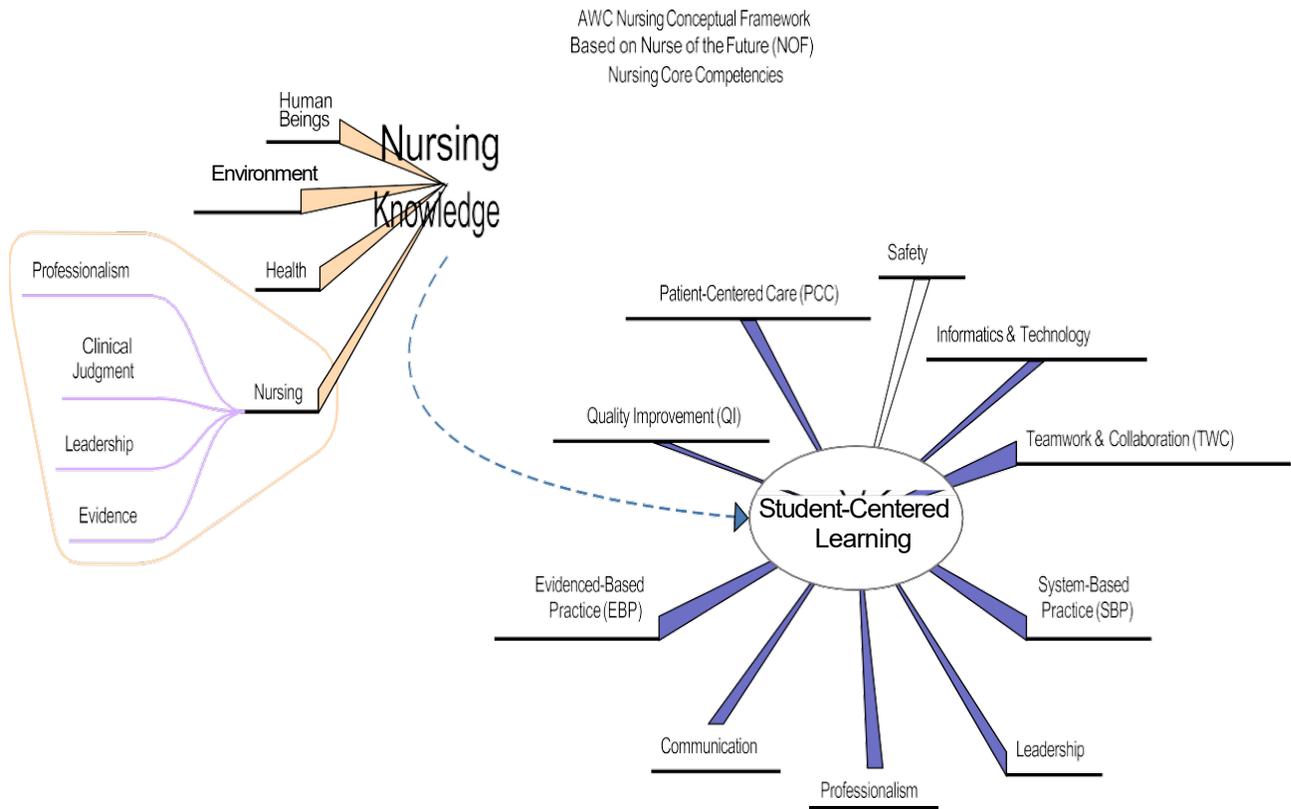
1) *Conceptual Framework*:
   The AWC Nursing Conceptual Framework and Competencies originates from the NOF Nursing Core Competencies and their relationship to nursing knowledge. The competencies, which will inform future nursing practice and curricula, consist of the following: (Used with permission of the Massachusetts Department of Higher Education Nursing of the Future Competency Committee, Boston, MA, April 9, 2013)

   a. **Nursing Knowledge:** "Nursing is a scholarly profession and practice-based discipline and is built on a foundation of knowledge that reflects nursing's dual components of science and art. Nursing knowledge in conjunction with a liberal

education prepares learners to enter practice with identified core competencies. The distinctive focus of the discipline of nursing is on nursing actions and processes, which are directed toward human beings and taking into account the environment in which individuals reside and in which nursing practice occurs (Fawcett & Garity, 2009). This distinctive focus is reflected in them metaparadigm of nursing, which identifies _human beings (patients), environment_, _health_, and _nursing_ as the subjective matter of interest to nurses (ANA, 2004)" (NOFC, 2010, p. 7).

- i. **Science of Nursing:** As a scientific discipline, nursing draws on a distinct body of knowledge that incorporates an appreciation of relationships among nurses, patients, and environments within the structure of health, nursing concepts and theories, and concepts and theories derivative from the basic sciences, humanities, and other disciplines. The science of nursing is applied in practice through a critical thinking framework known as the nursing process that is composed of _assessment, diagnosis, planning_, _implementation_, and _evaluation_ (Adapted from NOFC, 2010, p. 7).
- ii. **Art of Nursing:** The art of nursing is based on the foundations of caring and respect for human dignity. The art and science of nursing are indistinguishably linked, as a compassionate approach to patient care carries an obligation to provide that care competently and holistically. This is "accomplished through _delegated_, _independent_ and _interdependent_ practice (Koloroutis, 2004, pp. 123-125), and _collaborative practice_ (Tomey, 2009, p. 397) involving other colleagues and/or the individuals seeking support or assistance with their healthcare needs (ANA, 2004, p. 12)" (Adapted from NOFC, 2010, p.7).

2) _Construct Definitions_:
   a. **Human Beings/Patients**—the beneficiaries of nursing care or nursing services. These terms are consistent with the historically established tradition of the nurse-patient relationship and beneficiaries of nursing care. Beneficiaries may be individuals, families, groups, communities, or populations who receive nursing care throughout the health continuum (Adapted from NOFC, 2010, p. 7).
   b. **Environment**—the beneficiaries of nursing care or nursing services. These terms are consistent with the historically established tradition of the nurse-patient relationship and beneficiaries of nursing care. Beneficiaries may be individuals, families, groups, communities, or populations who receive nursing care throughout the health continuum (Adapted from NOFC, 2010, p. 7).
   c. **Health**—the beneficiaries of nursing care or nursing services. These terms are consistent with the historically established tradition of the nurse-patient relationship and beneficiaries of nursing care. Beneficiaries may be individuals, families, groups, communities, or populations who receive nursing care throughout the health continuum (Adapted from NOFC, 2010, p. 7).
   d. **Nursing**—the beneficiaries of nursing care or nursing services. These terms are consistent with the historically established tradition of the nurse-patient relationship and beneficiaries of nursing care. Beneficiaries may be individuals, families, groups, communities, or populations who receive nursing care throughout the health continuum (Adapted from NOFC, 2010, p. 7).
      i. _Professionalism_—is based on attitudinal attributes and its five dimensions:

- "the use of **professional organizations** as major referent groups and it addresses individual support of professional associations by attending professional meetings, serving on professional committees, leading such committees, and reading professional journals" (Wynd, 2003, p. 252).
- "the belief in **public service**, supporting the idea that the profession is beneficial and indispensable to society" (Wynd, 2003, p. 252).
- "the **autonomy** that allows professionals to make their own decisions and judgments about the services they provide with minimal pressure from external sources" (Wynd, 2003, p. 252).
- "belief in **self-regulation**…endorses control of work and the evaluation of work by colleagues who are fellow professionals" (Wynd, 2003, p. 252).
- "**sense of calling** representing a commitment to the profession beyond economic incentives" (Wynd, 2003, p. 252).

    ii. *Clinical Judgment*—is an interpretation or conclusion about an individual, group, community, or population's needs, concerns, health problems, and/or decision to take action (or not), use or modify customary approaches, or improvise new ones as judged appropriate by individual, group, community, or population responses (Tanner, 2006).

    iii. *Leadership*—is a process that occurs within the minds of individuals who live in a culture and are in relationships with others. The practice of effective leadership consist of 1) ongoing, active, and dynamic ties to the community; 2) maintaining a rhythm in life, which includes a time and means for reflection, and 3) exercising influence through stories or messages that communicate desired traits (Gardner, 1995).

    iv. *Evidence*—is synthesizing of the latest research, integration of resources, products, and services that foster optimal nursing care congruent with cultural and personal values/preferences of individuals, groups, and populations.

3) *Core Competencies Definitions*:
   a. **Patient-Centered Care:** The Nurse of the Future will provide holistic care that recognizes an individual's preferences, values, and needs and respects the patient or designee as a full partner in providing compassionate, coordinated, age and culturally appropriate, safe and effective care.
   b. **Safety:** The Nurse of the Future will minimize risk of harm to patients and providers through both system effectiveness and individual performance(QSEN, 2007).
   c. **Professionalism:** The Nurse of the Future will demonstrate accountability for the delivery of standard-based nursing care that is consistent with moral, altruistic, legal, ethical, regulatory, and humanistic principles.
   d. **Informatics and Technology:** The Nurse of the Future will use information and technology to communicate, manage knowledge, mitigate error, and support decision making (QSEN, 2007).
   e. **Teamwork and Collaboration:** The Nurse of the Future will function effectively within nursing and interdisciplinary teams, fostering open communication, mutual respect, shared decision making, team learning, and development (Adapted from

QSEN, 2007). (*Self, Team, Team Communication, Effect of Team on Safety & Quality, Impact of Systems on Team Functioning*)

f. **Systems-Based Practice:** The Nurse of the Future will demonstrate an awareness of and responsiveness to the larger context of the health care system, and will demonstrate the ability to effectively call on microsystem resources to provide care that is of optimal quality and value (Adapted from ACGME, n.d.).

g. **Leadership:** The Nurse of the Future will influence the behavior of individuals or groups of individuals within their environment in a way that will facilitate the establishment and acquisition/achievement of shared goals.

h. **Communication:** The Nurse of the Future will interact effectively with patients, families, and colleagues, fostering mutual respect and shared decision making, to enhance patient satisfaction and health outcomes. (*Therapeutic communication, Collegial Communication & Conflict Resolution, Teaching/Learning*)

i. **Evidence-Based Practice (EBP):** The Nurse of the Future will identify, evaluate, and use the best current evidence coupled with clinical expertise and consideration of patients' preferences, experience and values to make practice decisions (Adapted from QSEN, 2007).

j. **Quality Improvement:** The Nurse of the Future uses data to monitor the outcomes of care processes, and uses improvement methods to design and test changes to continuously improve the quality and safety of health care systems (QSEN, 2007). (Used with permission of the Massachusetts Department of Higher Education Nursing of the Future Competency Committee, Boston, MA, April 9, 2013)

F. Curriculum Plan: Associate in Applied Science (A.A.S.)

Application Requirements

- *Eligibility for Math 142 or higher*
- *Overall GPA 2.5*
- *Current and unrestricted Certified Nursing Assistant (CNA) on the AZBN registry*
- *HESI A2 scores: 75% or higher on Math, English Language Composite, and Cumulative*

Prerequisites: 7 credits		
ENG 101	Freshman Composition I	3 credits
BIO 201	Anatomy and Physiology I	4 credits

First Semester: 14 credits		
NUR 121	Nursing 1	8 credits (5 lec, 3 lab, 4.5 clinical)
NUR 117	Pharmacology with Clinical Calculations	2 credits
BIO 202	Anatomy and Physiology II	4 credits (3 lec, 2 lab)

- *All courses listed above must be completed **prior to** the beginning of the next semester in order to progress.*

Second Semester: 15 credits		
NUR 122	Nursing 2	8 credits (5 lec, 9 clinical)
PSY 101	Intro to Psychology	3 credits
FAS 238/PSY 238	Human Development	4 credits

- *All courses listed above must be completed **prior to** the beginning of the next semester in order to progress.*

Third Semester: 15 credits		
NUR 221	Nursing 3	8 credits (5 lec, 9 clinical)
BIO 205	Microbiology	4 credits
ENG 102	Freshman Composition II	3 credits

- *All courses listed above must be completed **prior to** the beginning of the next semester in order to progress.*

Fourth Semester: 14 credits		
NUR 222	Nursing 4	8 credits (4 lec, ~~12~~ 8 clinical)
Arts & Humanities	Elective	3credits
Math 142 or >**	College Math with Appl. (or higher	3 credits

- *Additional Courses*   *(2 credits)*

Total credits required for degree:	67 credits

*Select one requirement as per the AWC Catalog, Associate in Applied Science (A.A.S) General Education Course List, section C. Arts and Humanities

**Select one requirement as per the AWC Catalog, Associate in Applied Science (A.A.S.) General Education Course List, section B. Mathematics.

2. **STUDENT LEARNING OUTCOMES(SLOS)**

A. **Associate Degree Nursing Competencies/Student Learning Outcomes(SLOs)**

Nursing Program graduates are expected to:

1) Provides holistic care that recognizes an individual's preferences, values, and needs and respects the patient or designee as a full partner in providing compassionate, coordinated, age and culturally appropriate, safe and effective care. *(Patient Centered Care)*

2) Functions effectively within nursing and interdisciplinary teams, fostering open communication, mutual respect, shared decision making, team learning, and development. *(Teamwork and Collaboration)*

3) Identifies, evaluates, and uses the best current evidence coupled with clinical expertise and consideration of patients' preferences, experience and values to make practice decisions. *(Evidence-Based Practice(EBP))*

4) Uses data to monitor the outcomes of care processes, and uses improvement methods to design and test changes to continuously improve the quality and safety of health care systems. *(Quality Improvement(QI))*

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

6) Uses information technology to communicate, manage knowledge, mitigate error, and support decision making. *(Informatics and Technology)*

7) Practices accountability during delivery of standard-based nursing care that is consistent with moral, altruistic, legal, ethical, regulatory, and humanistic principles. *(Professionalism)*

8) Interacts effectively with families, and colleagues, fostering mutual respect and shared decision making, to enhance patient satisfaction and health outcomes. *Communication)*

9) Influences the behavior of individuals or groups of individuals within their environment in a way that will facilitate the establishment and acquisition/achievement of shared goals. *(Leadership)*

10) Demonstrates an awareness of and responsiveness to the larger context of the health care system, and will demonstrate the ability to effectively call on microsystems recourse to provide care that is optimal quality. *(System-Based Practice)* (Cronenwett et. al., 2007)

B. **Practical Nursing Competencies/Student Learning Outcomes(SLOs)**

Practical Nursing graduates are expected to perform within the scope of practice for a Licensed Practical Nurse:

1) Provides holistic care that recognizes an individual's preferences, values, and needs and respects the patient or designee as a full partner in providing compassionate, coordinated, age and culturally appropriate, safe and effective care. *(Patient Centered Care)*

2) Functions effectively within nursing and interdisciplinary teams, fostering open communication, mutual respect, shared decision making, team learning, and development. *(Teamwork and Collaboration)*

3) Identifies, evaluates, and uses the best current evidence coupled with clinical expertise and consideration of patients' preferences, experience and values to make practice decisions. *(Evidence-Based Practice (EBP))*

4) Uses data to monitor the outcomes of care processes, and uses improvement methods to design and test changes to continuously improve the quality and safety of health care systems. *(Quality Improvement(QI))*

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

6) Uses information technology to communicate, manage knowledge, mitigate error, and support decision making. *(Informatics and Technology)*

7) Practices accountability during delivery of standard-based nursing care that is consistent with moral, altruistic, legal, ethical, regulatory, and humanistic principles. *(Professionalism)*

8) Interacts effectively with families, and colleagues, fostering mutual respect and shared decision making, to enhance patient satisfaction and health outcomes. *Communication)*

9) Influences the behavior of individuals or groups of individuals within their environment in a way that will facilitate the establishment and acquisition/achievement of shared goals. *(Leadership)*

10) Demonstrates an awareness of and responsiveness to the larger context of the health care system, and will demonstrate the ability to effectively call on microsystems recourse to provide care that is optimal quality. *(System-Based Practice)* (Cronenwett et. al., 2007)

3. PROFESSIONAL STANDARDS/GUIDELINES
A American Nurses' Association Code of Ethics for Nurses

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

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

3) The nurse promotes, advocates for, and 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 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 principals of social justice into nursing and health policy. (ANA, 2015)

B. Legal Limitations for Nurse Licensure

1) Admission or graduation from the nursing program does not guarantee obtaining a license or certificate to practice nursing. Licensure and certification requirements and the subsequent procedures are the exclusive right and responsibility of the State Board of Nursing in which a student applies to. Students must satisfy the requirements of the Nurse Practice Act: statutes, rules and regulations independently of any college of school requirements for graduation.

2) In Arizona pursuant to A.R.S. § 32-1606(B)(17), an applicant for professional or practical nurse license by examination is not eligible for licensure if the applicant has any felony convictions and has not received an absolute discharge from the sentences for all felony convictions. The absolute discharge must be received five or more years before submitting this application. If you cannot prove that the absolute discharge date is five or more years, the Board cannot process your application.

3) All nurse and nursing assistant applicants for certification and licensure will be fingerprinted to permit the Department of Public Safety to obtain state and federal criminal history information.

4) If there is any question about eligibility for licensure or certification, contact the nursing education consultant at the Arizona State Board of Nursing at http://www.azbn.gov or E-mail: arizona@azbn.gov.

C. Guidelines for Student Conduct

1) The standards for professional conduct are an integral part of the AWC Nursing Program and students are expected to adhere to those standards while enrolled in the program. Students are bound by the Arizona State Board Nurse Practice Act, the ANA Code of Ethics for Nurses, the policies and regulations of the healthcare facility where they are assigned for clinical, and the guidelines published in the AWC Nursing Student Guide as well as the AWC Student Code of Conduct.

2) Nursing students are responsible for reading, understanding and following the AWC Student Code of Conduct found at https://www.azwestern.edu/student-life/student-conduct

3) Violations of academic integrity, as well as any student who knowingly or intentionally helps another student perform any acts of cheating and/or plagiarism, is subject to Formal Disciplinary action.

4) Informal and Formal Resolution Processes can be found in the AWC Student Code of Conduct: Policies and Procedures on pages 13 - 20

4) Harassment and Intimidation

Any student who reasonably believes that they are the subject of, or witness to, harassing or intimidating behavior should report the behavior directly to the Campus Life Office. The electronic form for incident reporting is available on the AWC Campus Life website at http://www.azwestern.edu/conduct.

A nursing student who believes they are subject to harassment from clinical facility staff should report the incident to their clinical instructor immediately. The clinical instructor will then be responsible for reporting to the incident the faculty team who will in turn make a report to the

Director of Nursing within 24 hours.

D. Academic Removal from the Nursing Program:

If a student fails to achieve an average of 78% or higher on the faculty prepared exams, the student will be removed from the program but will be eligible for readmission if they meet the criteria set forth in Section 4E of the Nursing Student Guide.

E. Student Expectation for Reporting Unprofessional Conduct

As required by the Arizona State Board Nurse Practice Act, students with knowledge of any behavior that may, or has, caused harm to a patient, is obligated to report such behavior to a member of the faculty or the Director of Nursing immediately.

F. Confidentiality Statement

Purpose: The confidentiality statement is required in order to ensure adherence to the confidentiality policy and procedures of the contracted clinical affiliates.

1) Maintain client confidentiality at all times. No discussions regarding clients shall be acceptable outside the classroom or clinical settings. In these areas, all discussions related to clients must take place in a location where the conversation cannot be overheard by uninvolved parties. In clinical conferences and classroom references, the client shall be referred to by initials only.

2) Any identifiable patient information must not be removed from the health care facility. Identifiable patient information includes copies of any health care records with or without patient demographic data. Health care records are the property of the health care facility.

3) If the student commits a violation of confidentiality, a grade of "F" may be given for the course followed by immediate dismissal from the program. The student may be ineligible for readmission. A second breach of confidentiality, at any time during the course of the student's enrollment in any AWC Nursing Department course will result in dismissal from the course and the student will be ineligible to readmit to that course or seek admission to another course/program offered through the AWC Nursing Department.

G. Guidelines for Appropriate Use of Social Networking Websites

Social networking websites provide unique opportunities for students to get to know one another, share experiences, and keep in contact. As with any public forum, it is important that users of these sites are aware of associated risks and act in a manner that does not embarrass students, the Nursing Department, clinical agencies, or Arizona Western College. It is also important to ensure patient information is not made publicly available. A breach in professional behavior regarding information about students, faculty, staff, administrators, clinical agencies, and/or patients will result in immediate disciplinary **action** and possible withdrawal from the Nursing Department Course. The Nursing Department has adopted the following guidelines to assist students safely using these sites.

1) Personal Privacy Recommendations
   a. Set profiles on social networking sites so that only those individuals with approved access may see personal information. Keep in mind that privacy settings are not impervious, and information can be shared willingly or unwillingly with others, even with "Friends Only" access.
   b. Evaluate photos of that are posted to these sites and "untag" photos that depict you in what may be construed as compromising situations.

2) Protection of Patient Information
   a. Comments made on social networking sites should be considered the same as if they were made in a public place in the hospital.
   b. HIPAA rules apply online, and students may be held criminally liable for comments that violate HIPAA.
   c. Remember that simply removing the name of a patient does not make them anonymous. Family members or friends of that patient or of other patients you are caring for may be able to determine to whom you are referring based on the context.

3) Professionalism
   a. Use of these sites can have legal ramifications. Comments made regarding care of patients or that portray you or your colleague in an unprofessional manner can be used in court or other disciplinary proceedings.
   b. Statements made under your profile are attributable to you and are treated as if you verbally made that statement in a public place.
   c. Use discretion when choosing to log onto a social networking site at school. Keep in mind that the use of these sites during lecture, lab, and clinical assignments is prohibited.
   d. Photographs and statements made are potentially viewable by future employers.
   e. You are representing the AWC Nursing Department when you log on a site and make a comment or post a photograph.

H. Grievance Procedure

If a student should wish to pursue a complaint, the chain of command is as follows:
1) First, discuss the problem with the nursing instructor involved. If it is a clinical issue, the student must speak with the assigned clinical faculty member.
2) If the issue cannot be resolved with the instructor, the student may go to the Course Coordinator and present the issue.
3) If the issue cannot be resolved with the Course Coordinator, the student may visit with the Nursing Faculty Committee that consist of select nursing faculty and the Director of Nursing and present the issue.
4) If the issue remains unresolved at the Director's level, the student may make an appointment to speak to the Dean of Career and Technical Education.

The rules and guidelines in the AWC Student Code of Conduct must be followed if a formal grievance is initiated.

4. GENERAL INFORMATION
A. Class and Clinical Preparation
1) General guidelines are to allow at least two hours of study for each hour of class that you have per week and one hour of study for each hour of lab or clinical per week. Students are expected to be prepared for their clinical experience in order to give safe patient care.

2) Learning experiences include: classroom, lab, clinical, online communication and assignments, and computer interactive learning and simulation.

B. Student Illness

Policy: Student illness, other health limitations, will be dealt with according to the College student code of conduct for the protection of students, College employees, other persons and themselves.
Procedure:
1) Students will use good judgment when illness occurs.

   a. Students with a fever and/or symptoms of infectious disease will NOT report to the lecture, lab, or clinical setting. A student must be free of fever without the use of antipyretics for a period of 24 hours before returning to lecture, lab, or clinical.
   b. A student may be dismissed from the lecture, lab, or clinical setting if the nursing faculty or clinical instructor determines the student poses a safety risk to themselves or others, including patients.
   c. Dismissal from clinical for illness will be recorded as a clinical absence and will follow the policy of clinical attendance.

C. Academic Advising

   1) Each nursing student is assigned a designated advisor at the beginning of NUR 121. The student will be responsible for meeting with this advisor _a minimum of one time during each semester._
   2) Students are required to provide a copy of unofficial transcripts to their assigned advisor after completion of NUR 221(Nursing 3) and prior to graduation to ensure all graduation requirements will be met.

D. Plan for Improvement

A student at risk for failing a nursing course is encouraged to seek faculty advisement. A plan for improvement may be established in order to enhance the student's potential for success. *(Form available as download at http://www.azwestern.edu/nursing)*

E. Readmission

Policy: Readmission

   A. Arizona Western College Nursing Program supports the readmission of qualified students with ONE withdrawal or failure (D, F, W, WF). The maximum amount of time students can be out of the program is **2 semesters**. NUR 121, NUR 122, NUR 221 & NUR 222 are capped at 40 students each semester.
   B. Readmission to the failed semester is not guaranteed and is based on seat availability and Ranking Criteria.
   C. NUR 117 grades will not be factored in the ranking.
   D. Readmission to the failed semester is only available for NUR 122, NUR 221 & NUR 222 courses.
   E. A student exiting the program for any reason must complete an Exit Interview (form 335.1) with the Instructor to be eligible for readmission.

Ranking Criteria	4 points	3 points	2 points	1 point
Nursing program grades *(Average of previous NUR courses)*	100-90	89-80	79 -78	77 and below
Current Course HESI Exam Benchmark	1200-1100	1099-900	899-850	849 and below
Fundamentals HESI	1200-1100	1099-900	899-850	849 and below
For NUR 221 and 222 students: HESI Med-Surg Benchmark Exam from NUR 122	1200-1100	1099-900	899-850	849 and below

Procedure:

1) Requests for readmission to the program must be submitted in writing to the Director of Nursing using the Readmission Request form available for download online at: http://www.azwestern.edu/nursing
   a. Individuals will be informed in writing of their readmission status within 45 days of the readmission application deadline.
2) Request for readmission **less than one semester** to NUR 122, NUR 221, NUR222:
   a. Requests must be received by the Department of Nursing no later than noon (12 pm), on the last day of Final ExamWeek.
   b. Submit readmission request (form 506-6)
   c. Must be current in all Health and Safety requirements (*If out of the program for more than one semester, a drug test must be submitted to CastleBranch before registration in the nursing course)*
   d. If a student withdraws from an NUR course prior to taking the course HESI MedSurg exam, the student will have the opportunity to take the exam and be considered in the readmission ranking. HESI scores must be submitted with the readmission request no later than noon (12 pm), on the last day of Final Exam Week.
3) Requests for readmission into NUR 121:
   a. Requests must be received by the Department of Nursing by the due date posted in the Nursing Department website.
   b. Submit readmission request (form 506-6) and admission application (form 305).
   c. Individuals will be included in the NUR 121 ranking for the next semester if they meet all current admission requirements.
4) Failure in NUR 117:
   a. Student must retake the course the following academic term and may not progress to NUR 122. A student who fails NUR 117 a second time, will be dismissed from the program.
5) Advanced Placement students (LPN) - who previously withdrew or failed (D, F, W, WF) in any AWC core nursing (NUR) course - also have one opportunity for admission and may not readmit. All other advanced placements follow admission guidelines
6) Requests for readmission to failed NUR course **after more than 2 semesters:**
   a. Student may be out of the nursing program for no more than two semesters if expected to return to same NUR course. Readmission is based on seat availability. Decision may need to be based on ranking criteria.
   b. After two semesters, student may be readmitted to the previous semester in which they were successful (*Applies to students that failed NUR 221 & NUR 222*).
   c. Requests must be received by the Department of Nursing by the due date posted in the Nursing Department website (form 506-6)

    d.   If readmission is granted to NUR 122, 221 or 222, a drug screen must be submitted and TB and CPR must be current. All requirements must be submitted into Castlebranch before registration in the nursing course.

7) A student with 2 withdrawals or failures must <u>wait 6 semesters before applying to NUR 121</u>.

    a.   Requests must be received by the Department of Nursing by the due date posted in the Nursing Department website.

    b.   Submit readmission request (form 506-6) and admission application (form 305). Individuals will be included in the ranking for the next semester if they meet all current admission requirements

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A leave of absence may be granted, on a case by case basis, to a student who is experiencing a situation beyond their control that is negatively impacting their ability to succeed. The situation must be reported to the semester faculty team immediately if the student is experiencing such a situation or believes that such a situation is imminent. The leave of absence requires the consensus agreement of the program faculty. If granted, the student must withdraw from the program within 10 days of being approved for the leave of absence or the last day to withdraw as determined by the AWC Academic Calendar, whichever comes first. If the student fails to withdraw within the established timeframe, the leave of absence approval will be withdrawn.

The withdrawal will not count against the student even if it would otherwise be considered the second program exit. *The leave of absence will not be granted retroactively. If the student fails the semester and then informs the faculty of a situation, the request will be denied.*

E. Calculator Use Guidelines

Policy: Nursing students will provide safe medication administration.

Purpose: Drug calculations occur in a variety of settings with or without the luxury of calculators or high-tech equipment. Therefore to maintain mathematical proficiency, a safe and prudent nurse calculates using the long hand or written method first, and then verifies the result using a calculator.

Procedure:

1) All students will be required to demonstrate drug calculations using the paper and pencil method.
2) A calculator can be used to verify the dosage calculation.
3) Classroom or clinical settings require 'show your work' method allowing for use of a calculator to verify answer.

F. Class Section and Clinical Group Assignment Process

Purpose: To establish greater balance in clinical groups in order to enhance the student's clinical experiences.

Procedure:

1) Each course team assigns their prospective students to class section and clinical groups, taking into consideration faculty recommendations from the previous course by the end of finals week. Registration forms, signed by faculty, are made available for student pick-up at the nursing office after Final Exam Week
2) In the event of an emergency or extenuating circumstance, a student must email a change request to the Nursing Clinical Facilitator with appropriate documentation. Requests are either granted or denied based on supporting evidence and space availability.
3) Incoming students (NUR 121) will be placed into a class section after they complete their health and safety requirements. *(Rev04/14)*

5. ACADEMIC CLASS REQUIREMENTS

A. Progression within the Nursing Program

1) Theory Grading System: All grades are carried to two decimal places throughout the course. There is no rounding of grades on the final course grade (i.e. 83.95 is an 83%). The student must average 78% or higher on all exams to successfully pass the course.
2) Clinical Grading System:
   a. The clinical component of the nursing course will be evaluated as satisfactory or unsatisfactory for each competency on the Clinical Evaluation Tool. Progression to the next nursing course will be measured as follows:

        i. Nursing 1 and 2: The student must obtain a satisfactory on every clinical competency for the semester.

        ii. Nursing 3 and 4: The student must obtain a satisfactory on every clinical competency for the rotation.

    b. A clinical grade of unsatisfactory on any competency will result in a grade of "F" for the course.

    c. Clinical Jeopardy: The Clinical Evaluation Tool (CET) identifies competencies that, if not met, may place the student in clinical jeopardy. Practice of nursing that is evaluated as unsafe by the instructor may be considered as grounds for dismissal from the program. This may occur at any point during the clinical component of the program. A student dismissed for unsafe practice will be given a grade of "F" for the course. This program policy and procedure supersedes the AWC "Withdrawals" policy and procedure stated in the college catalog.

3) Student ID Badges: Students are required to return any clinical facility ID badge to their course faculty **before** the Final Exam. The student will receive a grade of incomplete and may jeopardize their progression in the program if the ID Badge is not returned as required. *(Rev 11/14)*

B. Classroom Testing Guidelines

1) Students are expected to take all examinations on the designated day and time.
    a. No extra time will be allotted to students who arrive late.
    b. In the event of unforeseen circumstances, which prevent a student from attending an exam, the instructor must be notified **prior** to the administration of the exam.
    c. Students are responsible for making arrangements with the instructor for an exam make-up. Make-up exam questions may be in essay format.
2) Students must have:
    a. AWC student identification number available.
    b. #2 pencils with erasers for use on the Scantron testing sheets.
    c. cell phone turned off and stowed away during the testing process.
3) Calculators issued by the Nursing Program for classroom and mandatory standardized exams must be used exclusively.
4) All standardized examinations must be completed within the scheduled timeframe.

(Rev 01/14)

C. Classroom Test Administration

Purpose: The test administration process is designed to meet the following needs: 1) to prepare students for the timed standardized licensure exam, 2) to give students input in the test analysis process in a rational manner, 3) and to maximize test security.

Procedure:
1) Testing time:
    a. One minute per question plus 10 minutes will be allotted for test taking. (i.e. a 100 question test = 110 minutes)
    b. A clock will be made available
2) Test review:
    a. An Exam Face Sheet is placed on all test booklets (form 350.1), in order to provide opportunity for student input.
    b. Student questions or concerns regarding test items must be documented on the "Exam Face Sheet", including specific rationale.
    c. Once **all** students have completed the test and turned in the Scantron sheet, answers may be provided.

3) Booklets, including the face sheet, must be returned to the test proctor before the student leaves the classroom. Failing to do so is a violation of the AWC Student

Code of Conduct as Academic Dishonesty.

4) Test analysis:
   a. The Scantron is the definitive tool for test grading.
   b. The face sheet with student comments is detached from the booklet for use as part of the test analysis.
   c. Test booklets are shredded.
   d. Test results are analyzed using the Par Score process of item analysis.

5) Dissemination of final test results:
   a. Post-analysis results are provided the next class day, when available. Grades are posted in Blackboard.
   b. Students are given the individual "Student Test Report" when they review the exam with faculty.
   c. A student who requests to verify their test Scantron sheet will be allowed to do so under the faculty's direct supervision.
   d. Based on test analysis, major concepts may be clarified, re-taught, and discussed as deemed necessary by the professor.
   e. The concept review may be verbal and/or written and distributed as a handout. A written review does not provide the actual questions and answers from the test.

6) Student advisement:
   a. All students with a grade of 78% or less will be encouraged to schedule advisement with the appropriated faculty member in order to review the test and discuss improvement strategies.
   b. Further discussion relating to test results must be made by individual appointment with the professor within 2 weeks following the dissemination of final test results. *(Rev04/14)*

D. Success and Remediation Strategies

The AWC Nursing Faculty is focused on ensuring retention and success within the nursing program for all our students. Recommendations include (not limited to):

1) Nursing Orientation for incoming first semester students.
2) Increase awareness of the Mentorship program available through the Student Nurses Association.
3) Ensuring students are aware of the resources available such as the writing lab and student success center.
4) Faculty intervention each semester for students obtaining 78% or less on any quiz or test throughout the semester. Suggestions that may help students improve exam and quiz grades include:
   a. Writing a detailed study plan every Sunday evening that includes all reading, studying, assignments, end-of-chapter reviews, Evolve-Elsevier online support, and projects due or in progress.
   b. Schedule in time for family, work, sleep, etc. This is important, and you may feel less stressed about family demands if you set specific times to be together.
   c. Plan to study AT LEAST 2-4 hours, 3-5 times a week. Because of your current performance, you should aim for 20 hours/week. Study away from home if there are distractions that affect your ability to concentrate. Include 10-15 minute breaks every hour that allow you to get up and move, go outside, and give your brain a short rest.
   d. *Student must meet with the current faculty by designated time frame, to discuss strategies for success.*
   e. Reduce the number of hours you work if at all possible.
   f. Complete a minimum of 25 NCLEX-style questions each week from any NCLEX-

RN or other review book to improve your test-taking skills.
g. Join a study group or find a study partner.
h. Take lecture notes, make index cards, and tape lectures to increase your exposure to the material.
i. Do all reviews, critical thinking exercises, and other available online resources for your fundamentals and pharmacology texts.
j. Do all practice test available in your study guides or at the end of the chapters in your texts.
k. Review exams in detail to identify problems and test-taking strategies.
(Adopted 11/11)

E. Test Analysis

In the application of evidence-based practice (EBP), core-nursing course exams are processed for statistical analysis. Based on the statistical data and the review of written student comments, questions lacking in validity or reliability are evaluated and adjustments may be made to test scores based on the statistics and faculty judgment. The number of points that may be added are dependent on the type of question (multiple choice vs multiple answer).

6. CLINICAL ACADEMIC PREPARATION AND REQUIREMENTS

A. General Clinical Expectations

1) Nursing plans of care are a vital part of the clinical experience. It is the student's responsibility to make an appointment with his/her clinical instructor if clarification becomes necessary at any time during the semester.
2) A student may be required to re-demonstrate clinical skills in lab. The clinical instructor will give a Lab Referral form to the student. (See Clinical/Skills Lab Referral Policy and Procedure)

B. Clinical/Skills Lab Referral Policy and Procedure

Policy: The lab referral process is intended for nursing students needing improvement in lab demo on the "skills checklist," the clinical faculty will initiate the following process. The nursing student is not permitted to return to the clinical site until the skills are successfully completed and signed off by the course faculty. If a student is unable to perform a skill in the clinical setting at a satisfactory level following documentation of their clinical skills and to ensure follow-up in a timely manner.

Procedure:
1) The form titled "Clinical Lab Practice Referral" is provided to all clinical instructors.
2) The form is completed by the clinical instructor including:
   a) Date of referral
   b) Student's name
   c) Clinical instructor's name
   d) Specific skill to be reviewed, practiced, and demonstrated by the student (e.g.: IV therapy: needs to maintain sterile technique during insertion of the IV catheter or needs to be able to prime an IV tubing without wasting a large amount of fluid)
3) The clinical instructor will send the completed Clinical Lab Practice Referral Form via email to the course faculty and to the student (cc to skills lab coordinator) with details of why student needs practice and remediation. The student is informed of the responsibility to review the references for the specific skill and be prepared to practice in the skills lab with observation by the skills lab coordinator.
4) The student is responsible to make arrangements with the skills lab coordinator to practice the specified skill.

5) The student is responsible to make arrangements with the course faculty to perform the specified skill.

6) The course faculty completes the section "Successful completion of skill(s)" with an objective description. Date of skills completion and signature must be filled in.

7) The course faculty then emails completed form back to clinical instructor and student.

8) The clinical instructor will attach a copy of completed referral to the Clinical Evaluation Tool (CET-faculty copy).

9) An annotation of the referral is made on the student's Clinical Evaluation Tool (CET-faculty copy).

C. Clinical Attendance and Tardiness

Purpose: To ensure adequate clinical experience for nursing students to develop proficiency in their skills, knowledge, and clinical judgment.

Procedure:

1) Clinical Attendance

   a. Students are expected to attend every clinical experience.

   b. In the event an absence is necessary, the student must notify the clinical instructor before 6:30 a.m. by calling the unit to which the student is assigned and leave a message for the instructor regarding the absence. If the clinical instructor has established another protocol for reporting absences, then his/her protocol takes precedence. In addition, the student must notify the course faculty by leaving a message on his/her office voice mail by 6:30 a.m.

   c. One absence will result in a makeup clinical and/or an extensive assignment based on the decision of the faculty course team. A second clinical absence within a semester may result in clinical failure. Three absences within a semester will result in clinical failure unless prior arrangements have been made with the faculty team. Absences will be reviewed on a case-by-case basis by the faculty course team to determine the outcome.

   d. The student has the following responsibilities:
      i. Contact the course faculty on the first day the student returns to campus.
      ii. Provide a written explanation for the absence.
      iii. Attend the clinical makeup day if granted and as directed.
      iv. Complete additional assignments as required.
      v. Failure to follow the above guideline may result in denial of a clinical makeup day. A denial will be identified on the weekly clinical report and under professionalism objective on the formative/summative evaluation.

2) Tardiness

   a. Unexcused tardiness for any clinical experience will be documented on the weekly clinical report and under the professionalism objective on the formative/summative evaluation.

   b. Two unexcused tardiness will be documented on the weekly clinical report and an unsatisfactory performance under the professionalism objective on the formative/summative evaluation.

   c. Appeal: To appeal the decision, refer to the grievance procedure in the Nursing Student Guide. *(Rev 5/10)*

D. Professional Appearance Code

Guidelines for students when present in the clinical setting include the following:

1) Being meticulous regarding personal hygiene:

a. AWC approved uniform, clean and pressed
b. Hair and skin clean, No unnatural colors
c. Nails short and clean, no polish and no artificial nails
d. No strong scent (including, but not limited to; laundry detergents, deodorants, lotion, perfume, cologne)
e. Good oral hygiene
f. Hair arranged neatly and securely under control, away from the face
g. Beards neatly trimmed, remaining face/neck area clean shaved

2) Jewelry and body art:
a. Jewelry should be reasonably plain, not long and dangling. It must not present a safety hazard to patients or other personnel.
b. Visible body piercing decoration, i.e. nose, ear rings or tongue rings that may inhibit staff or patient safety, may not be worn when on duty. Pierced earrings are acceptable but must appear professional. Small nose stud or jeweled piercing is acceptable. Ear gauges should not be worn when on duty, flesh colored plugs, may be substituted; gauges should not exceed 1 " in diameter.
c. Body Art should be limited in body coverage and may not include: violence, obscene language, hate, or graphics (nudity and profanity) nor have gang affiliations.

3) No gum chewing.
4) No smoking during clinical hours.
5) Nursing Student uniform:
a. Scrubs must be clean, neat and free of wrinkles.
b. Properly fitting scrubs. White top and wine-colored bottoms. **Name tag must be worn above the waist**
c. Clothing must be of appropriate material and fit so that underwear is not visible though uniform. White or neutral undergarments under scrub top.
d. Uniforms should fit so that when the student bends forward, the bottom hem of the top covers the pant's waistband in the back. Visible chest cleavage is not permitted.
e. White Scrub dresses must be 1 inch below the knee.
f. Flesh or white colored hose for women wearing scrub dress, white socks for students wearing pants.
g. Pant hems should be tailored as to no drag on the floor when walking or standing and must cover the ankle.
h. Long sleeve white scrub jacket with patch on left sleeve.
i. Shoes must be all white or black closed toes. Clogs with heel straps are allowed. (Material must be easy to clean and maintain.)
j. For specialty areas, conform to the dress code for that area as specified by clinical instructor.
k. School patch must be worn on uniform at all times; it must be sewn on left sleeve 1 inch below shoulder seam.
l. Watch indicating seconds. (No cell phones)

If professional appearance code is <u>NOT</u> met and unable to be corrected on site, the student will be sent home and counted absent for the clinical day

E. Uniforms and Equipment
Scrub pants, skirts, dresses, tops and gait belts may be purchased from any uniform store. Patches must be purchased from the AWC Bookstore. ***Stethoscope and watch must be available on the 1st lab day.*** Nametags will be provided to students prior to the first

clinical day.

F. Use of Electronic Hand-Held Devices

The use of electronic hand-held devices during clinical experiences is permitted in order to facilitate access of resources and information necessary to provide safe and effective client care.

1) Client privacy protection:
   a. Students may not use electronic hand-held device cameras for any purpose during clinical.
   b. Healthcare data with client identification is not to be removed, or transmitted from the clinical site. Lab values and other assessment data can be stored on devices, but must not include client names or identification numbers connected to the data.
2) Professional Conduct:
   a. Students must not use devices for personal business during clinical without faculty permission.
   b. Students must not use devices for phone calls, voice-mail, texts, internet browsing, or social media while performing clinical duties.
3) Violations regarding hand-held electronic devices will be reflected on clinical evaluation tools in relation to clinical objective(s). Violations may result in failure of the clinical course. *(Adopted 4/14)*

G. Nursing Skills Lab/Clinical Guidelines

Scheduled skills lab hours will be posted.

1) Practice in the skills lab on the student's own time is required to be successful in the clinical portion of the course. The student must request instructor assistance as needed.
2) Students must satisfactorily perform each skill in the Skills Lab by the designated date set by course faculty.
3) A specific time frame may be allotted for the successful completion of certain skills.
4) Students are not allowed to perform designated skills in a clinical setting without initialed skills demo in the skills lab and instructor approval.
5) Success will depend on early planning, preparation, and *practice*.
6) It is the student's responsibility to ensure that the course faculty or clinical instructor properly annotates his/her Skills Checklist.
7) Student must bring their Nurse-Pac to the lab as directed by the instructor.
8) Needles & syringes must never be removed from the lab.
9) Failure to satisfactorily complete skills may:
   a. decrease the number of clinical opportunities for patient care experience.
   b. be reflected in the student's evaluation of preparedness for clinical experiences
   c. result in an unsatisfactory clinical grade

7. HEALTH AND SAFETY GUIDELINES

A Health and Safety Requirements-Student

Purpose: All students participating in the AWC Nursing Program (Program) are required to provide safe, effective and supportive patient care. The Program must ensure that students meet the health and safety requirements of all contracted clinical affiliates.

Procedure: The Program will provide applicants with the Health and Safety Requirements information as part of the admission process. All students entering core curriculum nursing courses must meet all Health and Safety requirements to maintain enrollment status for the course.

All documentation of Health and Safety Requirements must be submitted as directed by the date and time indicated in the Entry Requirements packet.

1) Fingerprint Clearance Card:
    a. Fingerprint clearance is required for enrollment in the Nursing Program. Fingerprint clearance is required to work and care for children, the elderly, and any vulnerable adult. If there is a positive criminal history, a fingerprint clearance may be denied. Students unable to obtain a fingerprint clearance card will be withdrawn from the Nursing Program. The Fingerprint Clearance Card required for the Nursing Program will not meet the requirements for certification through the Arizona State Board of Nursing.
    b. Students applying for enrollment in the Nursing Program are required to disclose any felony conviction on the Nursing Program application form. Falsification or presentation of fraudulent information on the application form may result in denial of enrollment in the program and once enrolled, is grounds for disciplinary action by the College including suspension or expulsion and conditions placed on future enrollment.
    c. Clearance of a student with a criminal history to participate in clinical settings in the College's Nursing Program does not insure that, upon completion of the Program, the student will meet the requirements for licensure. A student with any criminal history must disclose his or her criminal background at the time of application to take the licensure examination. At that time, the Arizona Board of Nursing will review his or her eligibility for eventual licensure as a registered nurse.
    d. Students will be provided a State of Arizona DPS Fingerprint Application packet at the New Student Orientation.
    e. Students that are in possession of a State of Arizona DPS Fingerprint card will be required to submit a copy to the College's Nursing Department, and validity will be verified with DPS before the student is allowed to enter the program.
2) Drug Testing Requirement:
    a. Students entering the Program are required to submit to a urine drug screening. This drug screening is required by the Program's clinical affiliates. These affiliates require AWC Nursing students to obtain the same type of drug testing as they require of their own employees who work in a clinical setting.
    b. The required drug screening is the student's responsibility and is initiated online at http://www.CertifiedBackground.com. The required urine sample must be provided in the manner directed by CertifiedBackground.com not more than 60 days prior to the health and safety requirements documentation submission deadline.
  c. If a urine sample tests positive, it will be sent to a Medical Review Officer (MRO) contracted by CertifiedBackground.com. The MRO will contact the student to discuss the positive result and elicit any prescription drug usage or other relevant information that could potentially impact the test result. The MRO will then make a final determination concerning the test result and will convey such determination to the College's Director of Nursing.
  d. A student who receives a positive drug screen as reported by the MRO will temporarily be excluded from nursing classes pending a final administrative determination. If the determination is that the student (a) tested positive as the result of use of an illegal substance or a non-prescribed legal substance, or (b) for any other reason poses an unreasonable risk to the health of safety of others in a clinical setting, the student will not be permitted to continue in the Program. In addition, if the student is currently licensed by the Arizona State Board of Nursing, a report will be made to such Board.
  e. A student may not submit previous drug screen results that were obtained at the request of a person or agency other than the AWC Department of Nursing.

    f.   A student who is excluded from the Program pursuant to the above process may appeal the decision to the Vice President for Student Services.

3) Physical Examination:
    a.   A physical examination is required within 2 months prior to the due date (after June 15th for fall admission; after November 1st for spring admission). The student's medical history must be documented on the Student Medical History form. A physical examination must be completed and documented by a licensed nurse practitioner, physician assistant, or physician (MD or DO).
    b.   Should there be any change in physical or mental status throughout the program, the student is required to submit an updated evaluation form completed and signed by a licensed nurse practitioner, physician assistant, or physician, stating the student is able to continue to provide safe, effective and supportive client care.

4) MMR: Measles (Rubeola), Mumps, and Rubella:
    a.   Documentation of 2 MMRs or laboratory evidence of immunity is required.
    b.   MMR vaccine is available for a fee at the county health department.

5) Varicella:
    a.   Documentation of 2 Varicella (Varivax) immunizations or Proof of immunity must be provided (Positive Titer)
    b.   If negative, the student must complete and submit a Varicella Susceptibility Awareness Form.
    c.   In the event of a Varicella (chicken pox) exposure, individuals presumed immune on the basis of vaccination may still be at risk to develop the disease. They do not need to be removed from healthcare settings, but rather monitored by Employee Health from day 10 – 21 following exposure for prodromal signs of infection.

6) Hepatitis B vaccinations:
    a.   Proof of immunization or waiver must be provided. (Waivers are available from the Nursing Department)
    b.   The hepatitis B vaccine is strongly recommended. The Hep B is administered in a series of 3 injections over a 6 months period.

7) Tetanus (Td or Tdap):
    a.   Documentation of Tetanus booster within the last 8 years.

8) CPR Competency:
    a.   Students must hold a Health Care Provider or Professional Rescuer (CPR) certification.
    b.   The CPR card must remain current/valid throughout the program (2 years) in order for a student to participate in the clinical component of coursework.
    c.   An online CPR course is not accepted. Classes are offered at various locations in the community.

9) Influenza vaccination:
    a.   Documentation of a flu shot administered during the current flu season or proof of declination/waiver by November 1st of each year while enrolled in the program.

10) TB Screening:
    a.   Documentation of a baseline two-step TB test (2 tests done 1-3 weeks apart) OR 2 tests within the last 12 months (the 1st step must be dated with the past year and the 2nd step must be within 9 months of the due date) must be provided.
       i.   A TB test is required annually while enrolled in the program.
    b.   Students with a history of a positive skin test must provide:
       i.   Chest x-ray results excluding a diagnosis of TB disease, within 12 months of entering the program.
       ii.   Completed TB symptoms questionnaire dated within 3 months of the due date.

iii.   A TB Symptom Questionnaire is required annually while enrolled in the program.

Students who fail to comply with Health and Safety requirements by the due date will not be allowed to attend clinical experiences until the requirements are met. The student will be documented as absent for each clinical experience missed. The instructor will document on the weekly clinical report the student did not meet the professional competency and will be considered as not being prepared for clinical. The student will receive an unsatisfactory (U) on the Professionalism objective on the upcoming clinical evaluation, either formative or summative. A clinical grade of unsatisfactory on the summative evaluation will result in a grade of "F" for the course.

Enrollment denial or dismissal related to the Health and Safety Requirements may be appealed through the Student Grievance Procedure as described in the AWC Catalog. *(Rev 12/15)*

B. Clinical Injury or Exposure to Infectious Materials
1) In the event of an injury or exposure to infectious materials while in the clinical setting, the student must immediately inform the clinical instructor and follow the clinical agency's policy.
2) Health Insurance claim:
   a. Students must complete a Health Insurance claim at AWC Health Services (HS), located on main campus at Cottage 1, *on the first business day the services are open.* If the incident happens on a Friday, the student can report to Health Services on Monday. It Is best for the student to report the incident as soon as possible (i.e. within 24 hours/ the next day), to keep the details fresh when filling out paperwork.
   b. If the student's blood work returns sero-negative, the student will be retested 6 weeks post-exposure and on a periodic basis thereafter (e.g. 12 weeks and 6 months after exposure) in order to determine whether transmission has occurred. Results will be sent to AWC HS and the Medical Director. The initial cost for blood work will be sent to Health Services.
   c. Students shall be counseled regarding safe sex, deferred from donating blood, etc. until results of source HIV/HBV /HC are known.
3) Insurance Coverage:
   a. AWC Student Accident insurance policy, Health Special Risk, (HSR) is secondary to all other insurances. If a student has primary insurance, they should follow protocol (pre-authorization) with their primary insurance company for filing of a claim and HSR will be secondary filing of insurance. HSR is limited coverage that has very specific definitions on what is and what is not considered an accident:
      i. *ACCIDENT means a sudden, unexpected and unintended event, which is identifiable and caused solely by an external physical force resulting in injury to a person.*
      ii. *Accident does not include a loss due to or contributed to by disease or sickness.*
   b. AWC has $1000 limit for communicable disease exposures, if the student is exposed while in the clinical setting. This insurance covers certain immediate preventative measures of exposure if reported within 48 hours of the incident but it does not cover on-going treatment or costs exceeding $1,000.
   c. Please note: *Only the insurance company (HSR) determines if an incident is covered under the insurance plan.* *(Rev6/11)*

C. Student Pregnancy

Policy: Arizona Western College is committed to protecting its pregnant nursing students from health and safety hazards that are known to be present in the clinical health care environment. Nursing students who are pregnant are required to follow the subsequent procedures.

Procedure:

1) Disclosure:
   a. As soon as the nursing student learns that she is pregnant, she must report the pregnancy to her course faculty and clinical instructor. The student must complete and submit an updated medical-health form signed by her healthcare provider to the course coordinator. The form should include estimated due date and confirmation that nursing school clinical work may be performed. Any subsequent change in status must be documented by the healthcare provider and submitted to the course coordinator. Any contraindications must be stated.

2) Infectious Disease Precautions
   a. A pregnant nursing student should not receive a TB skin test, chest x-ray or any vaccine without consulting her physician.
   b. A pregnant nursing student may not have contact with a known or suspected teratogen.
   c. Nursing students who may be pregnant are restricted from administering cytotoxic agents or caring for patients who receive these agents.

3) Precautions for Working in Radiation Environments
   a. A pregnant nursing student must refrain from any patient care environment in which radiation is present.

4) Post-pregnancy Follow-up
   a. A nursing student must submit a follow-up medical-health exam form providing a statement from the healthcare provider. This statement should confirm that the nursing student may return or continue the nursing clinical work being performed without any contraindications.

5) Clinical Schedules
   a. Following submission of disclosure information, the student shall meet with the course coordinator to discuss available options. The student will submit a written plan to complete the clinical course time and assignments within an agreed upon timeframe.
   b. The course team and any involved clinical faculty will review the plan and provide accommodations based upon space availability and learning needs.

6) Withdrawal
   a. If the clinical work is contraindicated either during pregnancy or post pregnancy the nursing student must withdraw from the program and may request readmission as detailed in the Readmission Policy found in the Nursing Student Guide. *(Rev 11/03)*

D. Technical Standards Policy and Procedure Essential skills and Functional Abilities (Physical, cognitive and behavioral requirements for students in the nursing program)

1) Please contact AWC's disabilities coordinator to receive information regarding disability accommodations and documentation requirements. To ensure appropriate accommodations, it is the student's responsibility to request accommodations in a timely manner and to provide appropriate documentation to verify eligibility for support services. *(5/02)*

Policy: In order to provide safe care in the nursing program the student must be able to satisfy, with or without reasonable accommodation, physical, cognitive and behavioral abilities required for satisfactory completion of all aspects of the curriculum. Nursing students must be able to perform a variety of patient care activities without restriction in Skills Lab and Clinical Settings. At a minimum, students will be required to lift patients, stand for several hours at a time and perform fine motor skills with dexterity. The clinical nursing experience also places students under considerable mental and emotional stress as they assume responsibilities and duties impacting patient's lives. Students must be able to demonstrate rational and appropriate behavior under stressful conditions to remain in the program. Individuals should consider the mental and physical demands of the program as described in detail under "Essential Eligibility Requirements for Participation in the Nursing Program" prior to submitting an application. Any change in physical, cognitive and/or behavioral status of the nursing student would require a new student medical history form to be placed in the student file in the nursing office.

Nursing is a practice discipline, with cognitive, sensory, affective, and psychomotor performance requirements. The following Core Performance Functional and Technical Standards identify essential eligibility requirements for participation in the Nursing Program.

FUNCTIONAL & TECHNICAL ABILITIES ESSENTIAL FOR NURSING PRACTICE

CATEGORY	DESCRIPTION	EXAMPLES OF NECESSARY ACTIVITIES (not all inclusive)
Gross Motor Skills	Gross motor skills sufficient to provide the full range of safe and effective nursing care activities	• Move within confined spaces • Sit and maintain balance • Stand and maintain balance • Reach above shoulders (e.g., IV poles) • Reach below waist (e.g., plug electrical appliance into wall outlets)
Fine Motor Skills	Fine motor skills sufficient to perform manual psychomotor skills	• Pick up objects with hands • Grasp small objects with hands (e.g., IV tubing, pencil) • Write with pen or pencil • Key/type (e.g., use a computer) • Pinch/pick or otherwise work with fingers (e.g., manipulate a syringe) • Twist (e.g., turn objects/knobs using hands) Squeeze with finger (e.g., eye dropper)
Physical Endurance	Physical stamina sufficient to perform client care activities for entire length of work role.	• Sustain repetitive movement (e.g., CPR) • Maintain physical tolerance (e.g., work entire shift)
Physical Strength	Physical strength sufficient to perform full range of required client care activities	• Push and pull 25 pounds (e.g., position clients) • Support 25 pounds of weight (e.g. ambulate client) • Lift 25 pounds (e.g., pick up a child, transfer client) • Move light objects weighting up to 10 pounds (e.g., IV poles) • Move heavy objects weighing from 11 to 50 pounds • Defend self against combative client • Carry equipment/supplies

		• Use upper body strength (e.g., perform CPR, physically restrain a client) • Squeeze with hands (e.g., operate fire extinguisher)
Mobility	Physical abilities sufficient to move from place to place and to maneuver to perform nursing activities.	• Twist • Bend • Stoop/squat • Move quickly (e.g., response to an emergency) • Climb (e.g., ladders/stools/stairs) • Walk
Perceptual/Sensory ability	Sensory/Perceptual ability to monitor and assess clients	• **Sensory abilities** to hear alarms, auscultatory sounds, hear cries for help, etc. • Hear faint voices • Hear faint body sounds (e.g., blood pressure sounds, assess placement of tubes) • Hear in situations when not able to see lips (e.g., when masks are used) • **Visual acuity** to read calibrations on syringe, assess color (e.g. cyanosis, pallor, flushed skin) • See objects up to 20 inches away (e.g., information on a computer screen, skin conditions) • See objects up to 20 feet away (e.g., client in a room) • See objects more than 20 feet away (e.g., client at end of hall) • Use peripheral vision • Distinguish color (e.g., color codes on supplies, charts, bed) • Distinguish color intensity (e.g., flushed skin, skin paleness) • **Tactile ability** to feel vibrations and detect temperature (e.g. pulses, skin solutions) • Feel differences in surface characteristics (e.g., skin turgor, rashes) • Feel differences in sizes, shapes (e.g., palpate vein, identify body and marks) • Detect environmental temperature (e.g. check for **Olfactory ability** to detect smoke • Detect odors from client (e.g., foul smelling drainage, alcohol breath, etc.) • Detect smoke • Detect gases or noxious smells drafts)
Cognitive/conceptual/Quantitative Abilities	1. Ability to read and understand written documents in English and solve problems involving measurement, calculation, reasoning, analysis and synthesis. 2. Ability to gather data, to develop a plan of action, establish priorities and monitor and evaluate treatment plans and modalities. 3. Ability to comprehend three-dimensional and spatial relationships	• Accurately processes information on medication container, physicians' orders, monitor and equipment calibrations, printed documents, flow sheets, graphic sheets, medication administration records, other medical records and policy and procedure manuals. • Convert numbers to and/or from the Metric System • Measure time (e.g., count duration of contractions, etc.) • Count rates (e.g., drips/minutes, pulse)

		• Use measuring tools (e.g., thermometer. • Calculates appropriate medication dosage given specific patient parameters

Technical Standards

Acquiring fundamental knowledge	1. Ability to learn in classroom and educational settings 2. Ability to find sources of knowledge and acquire the knowledge 3. Ability to be a life-long learner 4. Novel and adaptive thinking	• Acquire, conceptualize and use evidence-based information from demonstrations and experiences in the basic and applied sciences, including but not limited to information conveyed through online coursework, lecture, group seminar, small group activities and physical demonstrations. • Develop health care solutions and responses beyond that which is rote or rule-based.
Communication	1. Ability to communicate in English with accuracy, clarity and efficiency with patients, families, their families and other members of the health team (including spoken and non-verbal communication, such as interpretation of facial expressions, affect and body language) 2. Required communication abilities, including speech, hearing, reading, writing, language skills and computer literacy 3. Communicate professionally and civilly to the healthcare team including peers & instructors	• Accurately elicit or interpret information: medical history and other info to adequately and effectively evaluate a client or patient's condition • Accurately convey information and interpretation of information using one or more means of communication (verbal, written, assisted (such as TTY) and/or electronic) to patients and the health care team • Effectively communicate in teams • Determine a deeper meaning or significance in what is being expressed • Connect with others to sense and stimulate reactions and desired interactions.
Interpreting data	1. Ability to observe patient conditions and responses to health and illness 2. Ability to assess and monitor health needs 3. Computational thinking 4. Cognitive load management	• Obtain and interpret information from assessment maneuvers such as assessing respiratory and cardiac function, blood pressure, blood sugar, neurological status, etc. • Obtain and interpret information from diagnostic representations of physiologic phenomena during a comprehensive assessment of patients • Obtain and interpret information from assessment of patient's environment and responses to health across the continuum • Obtain and interpret for evaluation information about responses to nursing action • Translate data into abstract concepts and to understand data-based reasoning.
Integrating knowledge to establish clinical judgment	1. Critical thinking, problem-solving and decision-making ability needed to care for persons, families and/or communities across the health continuum and within (or managing or improving) their environments – in one or more environments of care 2. Intellectual and conceptual abilities to accomplish the essential of the nursing program (AWC Student Learning Outcomes & Competencies) 3. News-media literacy 4. Transdisciplinary	• Accomplish, direct or interpret assessment of persons, families and/or communities and develop, implement and evaluate plans of care or direct the development, implementation and evaluation of care • Critically assess and develop content that uses new media form, and to leverage these media for persuasive communication • Literacy in and ability to understand concepts across disciplines.

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	5.	Design mindset	•	Represent and develop tasks and work processes for desired outcomes
Incorporating appropriate professional attitudes and behaviors into nursing practice	1.	Concern for others, integrity, ethical conduct, accountability, interest and motivation	•	Maintain effective, mature, and sensitive relationships with clients/patients, students, faculty, staff and other professionals under all circumstances.
	2.	Acquire Interpersonal skills for professional interactions with a diverse population of individuals, families and communities	•	Make proper judgements regarding safe and quality care
	3.	Acquire Interpersonal skills for professional interactions with members of the health care team including patients, their supports, other health care professionals and team members	•	Function effectively under stress and adapt to changing environments inherent in clinical practice.
			•	Demonstrate professional role in interactions with patients, intra and inter professional teams
	4.	Acquire the skills necessary for promoting change for necessary quality health care	•	Operate in different cultural settings (including disability culture)
	5.	Cross-cultural competency	•	Work productively, drive engagement, and demonstrate presence as a member of a virtual team
	6.	Virtual collaboration		

E. Drug and Alcohol Procedure

1) <u>Purpose and Scope</u>: All students participating in the AWC Nursing Program are required to provide safe, effective and supportive patient care. This Nursing Program Drug and Alcohol Procedure ("this Procedure" or "the Procedure") is intended to augment the restrictions in AWC's Student Code of Conduct and to establish a zero tolerance for the use of alcohol and drugs by nursing students. In light of the health care responsibilities of nursing students, the use of unlawful drugs at any time shall be deemed to affect the operation of the College. When this Procedure prohibits drug use, it shall be deemed to apply to drug use at any time.

2) <u>The Student Code of Conduct</u>: This Procedure shall augment, but not replace, the AWC Student Code of Conduct. In any situation where this Procedure and the AWC Student Code of Conduct are in conflict, the provisions of this Procedure shall control.

3) <u>Definitions</u>: The following terms shall apply to this Procedure: The term "drug" or "drugs" includes any narcotic, dangerous drug, prescription medication, steroid, vapor-releasing toxic substance, marijuana, or controlled substance as defined by Arizona law. The term "drug" or "drugs" includes imitation controlled substances and imitation prescription-only drugs as defined by A.R.S. §13-3451. --- "Reasonable suspicion" is present when there is an objective, individualized basis to believe that a student has used, possessed, or transferred drugs, or alcohol in violation of this Procedure. This includes, but is not limited to, situations in which a student's behavior or physical appearance suggests impairment. Slurred speech, pupillary changes, impaired physical coordination, or very unusual behavior may indicate impairment. --- The term "transfer" includes any sale, purchase, or other exchange regardless of whether the exchange is completed or merely attempted and regardless of whether something of value is given or paid as consideration for the exchange.

4) <u>Violations of this Procedure</u>: It is a violation of this Procedure for a nursing student to:
   a. Violate the drug and alcohol policy provisions set out in Section II (A)(2) of the AWC Student Code of Conduct.
   b. Receive a positive drug and/or alcohol test pursuant to the protocol set forth in section E below.
   c. Use drugs at any time, unless the use involves: (i) prescription medication prescribed by a physician, (ii) the medication is used in accordance with the prescription, and (iii) use of the medication does not adversely impact the safe practice of nursing.

d. Possess (other than in the student's capacity as a nursing student), transfer or offer to transfer drugs or drug paraphernalia at any time.

e. Be impaired to any extent as a result of the use of drugs and/or alcohol while functioning in any capacity as a nursing student.

f. Fail and/or refuse (i) to submit to a drug and/or alcohol test when requested by an AWC instructor or administrator, (ii) to comply with a required procedure of a drug and alcohol testing facility (the "Testing Facility") related to the collection of a drug and/or alcohol sample, or (iii) to authorize the Testing Facility to release the results of any drug and/or alcohol test to the Director of Nursing. It is also a violation of this Procedure to attempt to tamper with, contaminate, or switch a drug and/or alcohol sample provided to Testing Facility.

g. Be convicted of a drug offense.

5) <u>Protocol for Conducting a Drug and/or Alcohol Test:</u> The following protocol shall be followed if: (i) an AWC nursing instructor or an AWC nursing staff member (hereafter

an instructor and a staff member are collectively referred to as an "Instructor") observes behavior by a nursing student that provides reasonable suspicion that the student has violated this Procedure, and/or (ii) a reliable third person relays information about a nursing student to an instructor that provides reasonable suspicion that the student has violated this Procedure.

a. The Instructor shall immediately notify the Director of Nursing who will notify the Dean of Instruction of the matter.

b. The Instructor shall remove the student to a private setting. The Instructor will discuss with the student the behavior observed by the Instructor and/or the

information reported to the Instructor by a third person. The student will be allowed to respond verbally to the information presented, giving an explanation for his or her behavior. The Instructor has the discretion as to whether to identify any third party that provided information to the Instructor. The Instructor may also ask the student questions concerning the student's use or possession of drugs and/or alcohol.

c. After discussion with the student as referenced in #2 above, if the Instructor determines that there is reasonable suspicion to believe that the student has used drugs, and/or alcohol in violation of this Procedure, the Instructor shall request that the student immediately undergo a drug and/or alcohol test at a Testing Facility chosen by the College.

   i. The Instructor shall inform the student that any failure or refusal to submit to a drug and alcohol test constitutes a violation of this Procedure.

   ii. The Instructor shall make arrangements to transport the student to the Testing Facility. After the drug and alcohol tests are completed, the Instructor shall make arrangements to transport the student from the Testing Facility to the student's residence.

   iii. The student shall authorize the Testing Facility to release the results of any drug and alcohol test to the Director of Nursing.

d. The Instructor shall prepare and deliver to the Director of Nursing a written report, documenting the Instructor's involvement in the matter, and including any observations of impairment made by the Instructor and/or any information received from a third party about a possible violation of this Procedure. The report shall also describe the arrangements made by the Instructor to transport the student to and from the Testing Facility.

6) <u>The Drug and Alcohol Testing Facility</u>: All sample collection and drug and alcohol testing shall be performed according to the following conditions:

   a. The Testing Facility shall comply with scientifically accepted analytical methods and procedures for sample collection and testing. Drug testing shall be conducted at a laboratory approved or certified by the United States Department of Health and Human Services, the College of American Pathologists, or the Department of Health Services.

   b. The Testing Facility shall provide confirmation of any positive drug test results. Confirmation of a positive drug test result shall be by use of a chromatographic technique such as gas chromatography-mass spectrometry or another comparably reliable analytical method.

7) <u>Cost of Drug and Alcohol Testing</u>: The College shall be responsible for any cost of transporting a student to and from the Testing Facility and for the cost of any drug and alcohol testing, including the cost of any confirmatory test.

8) <u>Exclusion from Clinical Experiences</u>: Pending the results of any drug and alcohol test, a student shall be excluded from all clinical experiences.

9) <u>Drug Test Indicating Use of Prescribed Medications</u>: If a student tests positive for a prescribed medication, the student must obtain a written statement from a physician, chosen by the College, stating that (i) the drug level is within prescribed limits, (ii) the drug level does not indicate impairment or abuse, and (iii) the drug level does not interfere with the safe practice of nursing. The student must also present evidence of the applicable prescription in the student's name. The above conditions must be satisfied before the student will be allowed to resume clinical experiences, and failure to satisfy any of the above-referenced conditions within a reasonable time shall be deemed presumptive evidence that a nursing student has violated this Procedure. The College shall pay the cost of the report required by this section.

10) <u>Confidentiality of Drug and Alcohol Testing</u>: A request that a student take a drug and alcohol test, and the results of any such test, shall remain confidential, except that an instructor, the Director of Nursing and/or the Dean of Instruction may inform other College administrators, faculty members, clinical personnel, the State Board of Nursing, and other entities on a reasonable need-to-know basis. The request for testing and the test results may also be used as evidence in a disciplinary proceeding. The mere absence of a student from a clinical setting or permission for a student to later make-up work is not a reason for disclosure. Positive drug and/or alcohol test results shall be placed in a student's records. Negative drug and/or alcohol test results shall only be placed in a student's records at the request of the student.

Hearing and Appeal Rights: Upon receipt of information indicating a violation of this Procedure, including but not limited to the receipt of a positive drug and/or alcohol test, the Director of Nursing shall inform the Dean of Instruction. The Director Nursing shall then file a complaint with the Vice President for Student Services, pursuant to Section IV of the AWC Student Code of Conduct. Upon filing of such a complaint, a formal hearing shall be held to determine whether there has been a violation of this Procedure. The formal hearing shall occur pursuant to the procedures set forth in the AWC Student Code of Conduct, and the Vice President for Student Services shall serve as the Hearing Officer. The Dean of Instruction shall serve as the College administration representative at the hearing. If the Hearing Officer finds that the student violated this Procedure, the presumptive discipline imposed, absent what the Hearing Officer believes to be unique extenuating circumstances, shall include a suspension of the student from the AWC Nursing Program for not less than one year. At the discretion of the Hearing Officer, the student may also be suspended or expelled from the College.

The student retains the right to appeal the decision of the Hearing Officer as set forth in Section V of the AWC Student Code of Conduct.

11) <u>Readmission to the Nursing Program</u>: A student who has been suspended from the Nursing Program pursuant to this Procedure may request to be readmitted to the Nursing Program at the end of the suspension period, pursuant to the general readmission

F. Student Nurses Association

Students are encouraged to participate in the AWC Student Nurses Association. This organization provides students with an opportunity to:
1) Become aware of and participate in professional activities for nursing
2) Participate in school and community activities
3) Enjoy social activities
4) Have an active voice in influencing the future of nursing

G. Student Records Policy

Policy: A written record of student progress in the nursing program will be kept on file in the nursing department.
Procedure:

1) Student files are retained for at least 3 years following the student's exiting the program.
2) The file includes: academic records, medical and immunization records, clinical evaluation records, and correspondence.
3) Exam grade records are retained for at least one calendar year from the date of Issuance.

H. Pinning Ceremony

Policy: The ceremony is a Nursing Program function that takes place at the end of each semester. Graduates have the opportunity to elect a student speaker, guest speaker, and a master of ceremony. Attire for the ceremony consists of the clinical uniform. Graduates may purchase a pin, which will be attached to a ribbon to be pinned.

Purpose: Florence Nightingale established the tradition in the 1860's when she presented a medal as a symbol of merit to her most deserving graduates. The Pinning ceremony evolved into a ritual that signifies the welcoming of nursing graduates into the nursing profession.

Procedure: Information relating to ceremony planning will be disseminated to graduating students within the course Blackboard.

8. **FINANCIAL AID ANDSCHOLARSHIPS**

   If you have any questions about financial aid and scholarships contact the AWC Financial Aid office at 344-7634 or visit their campus office.

9. **STUDENTRIGHTS ANDRESPONSIBILITIES**

   The nursing assistant program adheres to the AWC Policies and Procedures, which are available in the AWC Student Handbook and Activity Planner, and on the AWC website at www.azwestern.edu.

10. **FEES ANDFINANCIAL AID**

    College and program fees are found in the AWC course catalog and schedule of classes found at www.azwestern.edu. Financial aid information is also found on the AWC website at http://www.azwestern.edu/student_services/enrollment_services/financial_aid/. If you have any question about financial aid contact the financial aid office by calling 928-344-7634.

11. **WITHDRAWALS**

    The program adheres to the AWC Withdrawals Policy and Procedure, which may be found in the AWC Catalog.

Sources

- American Nurses Association, 2001 Code of Ethics for Nurses with Interpretive Statements, Washington, D. C.
- Arizona Western College (2007) Student Code of Conduct: Policies and Procedures, Yuma, AZ.
- Cronewett, L. et. al. (2007) Quality and safety education for nurses. *Nursing Outlook, 55*(3), 122-131.
- Gardner, H. (1995) *Leading Minds—An Anatomy of Leadership.* New York, NY. Basic Books.
- Massachusetts Department of Higher Education Nursing Initiative Nurse of the Future Nursing Core Competencies©, AUGUST 2010, BUILDING THE FRAMEWORK FOR THE FUTURE OF NURSING EDUCATION ANDPRACTICE.
- Merriam-Webster Online Dictionary.(2014).
- National Council of State Boards of Nursing (2012), 2013 NCLEX-RN Detailed Test Plan for the National Council Licensure Examination for Registered Nurses: Item Writer/Item Reviewer/Nurse Educator Version.
- Tanner, C. (2006) Thinking like a nurse: A research-based model of clinical judgment in nursing. *Journal of Nursing Education, 45*(6), 204-211.
- Wynd, C. (2003) Current factors contributing to professionalism in nursing. *Journal of Professional Nursing, 19*(5), 251-261.

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<u>NURSING STUDENT GUIDE RECEIPT</u>

Please sign this statement and return
it to your professor before leaving this class.

The signature of this document signifies that I have received the Arizona Western College Nursing Student Guide. I am responsible for the information that has been provided. I am hereby notified of the availability of student policies in the AWC General Course Catalog, the AWC Student Handbook & Activity Planner, and on the AWC website. The AWC Nursing Student Guide is maintained current on the AWC Nursing Department website at http://www.azwestern.edu/nursing. Should the printed information differ from information found on the AWC website, the website information will take precedence.

The nursing program will maintain this receipt.

Signature:

Printed Name:

Date: