VOCATIONAL NURSING PROGRAM

STUDENT HANDBOOK

2026-2027

WEATHERFORD COLLEGE

WEATHERFORD, TEXAS

Policies and procedures outlined in this manual are supported and endorsed by the Advisory Committee of the Vocational Nursing Program.

The Weatherford College Vocational Nursing Student Handbook will provide information pertinent to students enrolled in the Vocational Nursing program. The purpose of this handbook is to detail policies and procedures specific to this program. The handbook is constructed to be used as a supplement to the Weatherford College Student Handbook and serves to bridge the overriding policies of the College with the policies specific to this program. The policies and procedures outlined in this handbook are designed to support the success of the student.

The Weatherford College Student Handbook is available online or at each campus's administrative offices.

WELCOME

The administration, faculty, and staff of Weatherford College extend a warm welcome to each new student. We are pleased that you have chosen to attend the vocational nursing program at Weatherford College, and we will do our best to assist you in reaching your goal of becoming a vocational nurse.

This policy manual was developed to assist the student in adjusting to the role of the vocational nurse. It is the responsibility of each vocational nursing student to read and comply with the rules and regulations outlined in this policy manual, as well as the Weatherford College General Catalog and the Student Handbook.

The Faculty of the Vocational Nursing Program
Dr. Lori Boyd, Director
Kimberly Severson, Assistant Director
Debra Weeks, Faculty
Christina Gilbreath, Faculty
Spencer Murphy, Faculty
Stacy Johnson, Faculty
Kelly Korkmas, Lab Coordinator
The VN program utilizes adjuncts for clinical and lab

Weatherford College is an affirmative action/equal opportunity educational institution. Applicants are considered based on qualifications without regard to gender, age, race, color, creed, religion, national or ethnic origin, veteran status, or non-job-related disability or any other legally protected status.

ADA Statement:
Any student with a documented disability (e.g., learning, psychiatric, vision, hearing, etc.) may contact the Office on the Weatherford College Weatherford Campus to request reasonable accommodation. *Phone:* 817-598-6350 *Office Location:* Office Number 118 in the Student Services Building, upper floor. *Physical Address:* Weatherford College, 225 College Park Drive, Weatherford, TX

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Student Confidentiality Statement

Confidential information is defined as any information found in a patient's medical record, personal information, or work-related information. All information relating to a patient's care, treatment, or condition constitutes confidential information. This Agreement applies to any individuals in a WC lab and/or at any of our Clinical Affiliates' facilities, including patients, volunteers, college employees, students, friends, or family members.

- Students will not discuss a patient's medical condition with any non-employee or non-student of the Weatherford College Health & Human Science (HHS) Division, friends, or family members. Confidential matters involving patients will not be discussed in areas where they might be overheard by others. Students are to be aware at all times that conversations regarding patients are not to be overheard by others and take appropriate steps to ensure this confidentiality.
- Students will not divulge the information to any unauthorized person for any reason. Neither will they directly nor indirectly use, or allow the use of, information for any purpose other than that directly associated with education. Students understand that all individually identifiable information is strictly confidential.
- Furthermore, students will not, either by direct action or by counsel, discuss, recommend, or suggest to any unauthorized person any individually identifiable information.
- If any violation of this policy is noted at any time, the student must report directly to the Program Director or Clinical Coordinator immediately upon discovery.

I have received a copy of, read, understand, and agree to uphold this written policy on matters of confidential information. I also understand that in my daily duties as an HHS student, I will have access to confidential information and any violation of confidentiality, in whole or in part, could result in disciplinary action, including dismissal from the HHS program.

I understand that this signed document is my agreement to uphold the provisions of this policy and will be kept on file.

Signature: _____Date_____

INTRODUCTION TO PHILOSOPHY

The purpose of the Weatherford College Vocational Nursing Program is to provide quality education to individuals with the expressed desire to become a vocational nurse. This will be accomplished through the hiring of qualified instructors who strive to improve their own knowledge and experience through continuing education.

PHILOSOPHY

Man

The Weatherford College Vocational Nursing Program believes that man is a unique being with physical, emotional, social, and spiritual needs (Timby, 2020). We believe that man is in a constant, continual process of change and that the health care needs of each individual should be approached in a holistic manner. Abraham Maslow believed that an individual's behavior is formed by the individual's attempts to meet essential human needs, which he identified as physiologic, safety and security, love and belongingness, and esteem and self-actualization (Cooper and Gosnell, 2019).

Health

We accept the World Health Organization's definition of health: "a state of complete physical, mental, and social well-being, and not merely the absence of disease and infirmity." A person's state of health is in a constant state of change as the body adapts to conditions and events affecting it (deWit 2009). However, we recognize that each person perceives and defines health differently and that health requires personal effort (Timby, 2020). Health promotion is "behavior motivated by the desire to increase well-being and actualize human health potential," which includes primary, secondary, and tertiary prevention throughout all life stages (Pender, 2011).

Nurse

"Nurse" means a person required to be licensed under this chapter to engage in professional or vocational nursing. (Texas Board of Nursing, 2019). Pender described nursing as "collaboration with individuals, families, and communities to create the most favorable conditions for the expression of optimal health and high-level well-being. (Pender, 2011). Nursing encompasses care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. (ICN, 2011).

Nursing

"Vocational nursing" means a directed scope of nursing practice, including the performance of an act that requires specialized judgment and skill, the proper performance of which is based on knowledge and application of the principles of biological, physical, and social science as acquired by a completed course in an approved school of vocational nursing. The term does not include acts of medical diagnosis or the prescription of therapeutic or corrective measures. Vocational nursing involves:

A. Collecting data and performing focused nursing assessments of the health status of an individual;
B. Participating in the planning of the nursing care needs of an individual;
C. participating in the development and modification of the nursing care plan;
D. participating in health teaching and counseling to promote, attain, and maintain the optimum health level of an individual;

E. assisting in the evaluation of an individual's response to a nursing intervention and the identification of an individual's needs;
F. Engaging in other acts that require education and training as prescribed by board rules and policies, commensurate with the nurse's experience, continuing education, and demonstrated competency (Texas Board of Nursing, 2019).

Teaching-Learning

"Learning is the act or process of acquiring knowledge or some skill through the means of study, practice, or experience. It is the knowledge, wisdom, or a skill acquired through systematic study or instruction." (Mosby's Medical, Nursing, and Allied Health Dictionary, 2013). Learning is optimal when a person has a purpose for acquiring new information (Timby, 2020).

Compassion

The Vocational Nursing Program recognizes the difference our future graduates make in the lives of patients and families during their most vulnerable moments; therefore, we as a faculty are committed to teaching and demonstrating the importance of compassionate care. According to Jean Watson's Theory of Human Caring, "caring is the most valuable attribute nursing has to offer humanity."

Competence

The Vocational Nursing student should receive ample opportunities for Personal and professional growth, and should recognize the need for continuing education to maintain practice competencies. Through the attainment of technical skills, the use of relevant knowledge, and the development of judgment and accountability, the graduates of the Weatherford College Vocational Nursing Program contribute significantly to the health care delivery system. We accept the Texas Board of Nursing's Differentiated Essential Competencies as a structured guideline for theory and clinical practice.

Resources

Cooper, K., Gosnell, K. (2023). *Foundations and Adult Health Nursing, 9th ed*. ([Pageburstls]). https://pageburstls.elsevier.com/#/books/9780323100014/

National Council of State Boards of Nursing (NCSBN,2021). NCLEX-VN examination: Test plan for the National Council Licensure Examination for vocational & registered nurses.

Pender, N. (2011). Health Promotion Model.

https://www.bon.texas.gov/laws_and_rules_nursing_practice_act_2019.asp#Sec.301.001

Sherrill, K.J. (2020). Clinical judgment and next generation NCLEX®–A positive direction for nursing education. *Teaching and learning in Nursing*, *15*(1), 82-85.

Timby, B. K. (2020). *Fundamental Nursing Skills and Concepts*. Lippincott Williams & Wilkins. Philadelphia.

CONCEPTUAL FRAMEWORK

The conceptual framework for the Weatherford College Vocational Nursing Program is grounded in Tanner's Clinical Judgment Model and enhanced through intentional integration of the traditional nursing process and the National Council of State Boards of Nursing (NCSBN) Clinical Judgment Measurement Model (NCJMM). Together, these frameworks guide curriculum design, instructional strategies, clinical learning experiences, simulation, and student evaluation to prepare graduates for safe, evidence-based nursing practice and success on the Next Generation NCLEX-PN

Steps in Tanner's Clinical Judgment Model

1. **Noticing**: Focused observation, recognition of deviations from expected patterns, information seeking from patient and family.

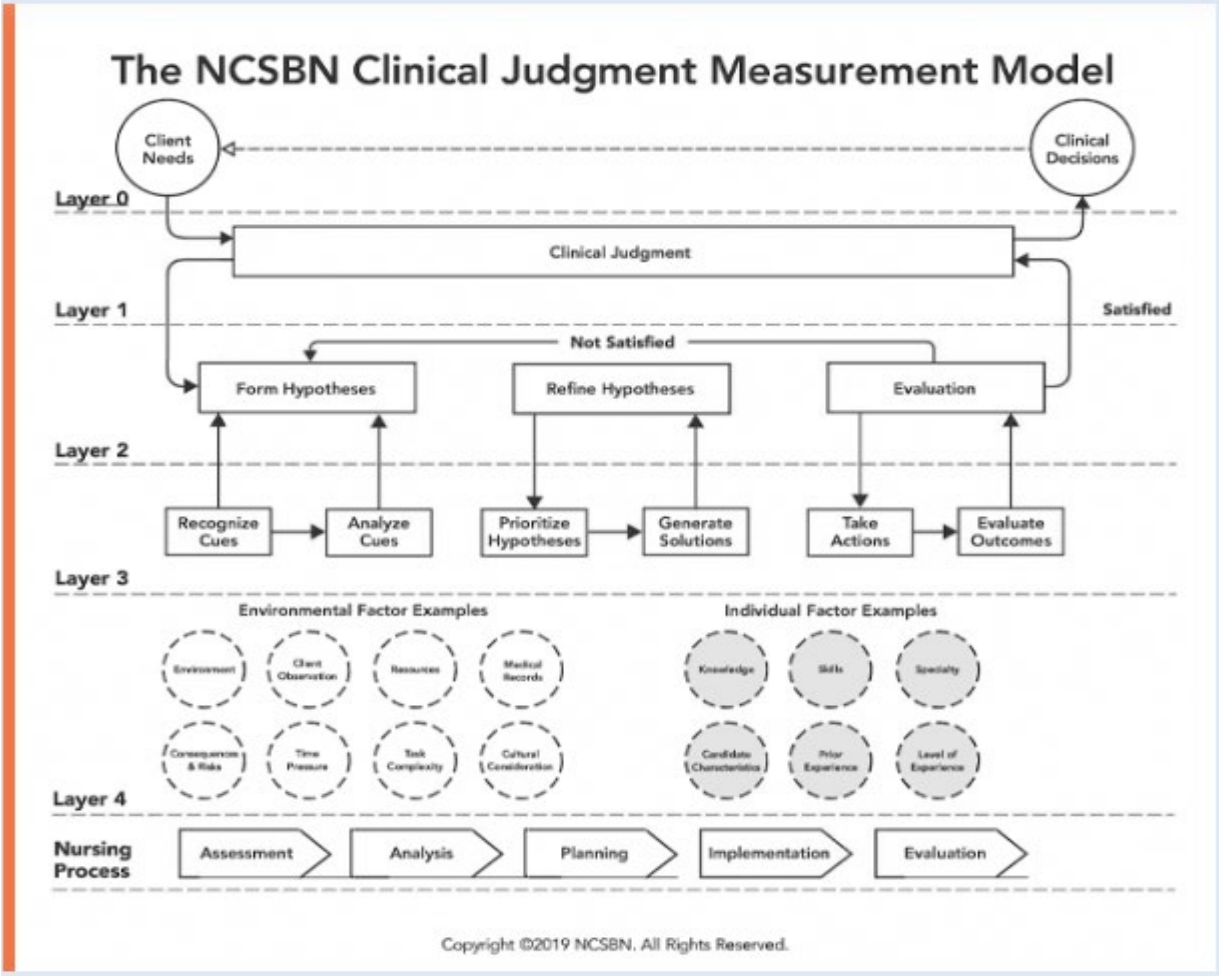
2. **Interpreting**: Developing sufficient understanding of the situation to determine an appropriate response. Interpretation involves: making sense of the data, prioritizing the data, and developing an intervention plan.
3. **Responding**: Development of calm and confident leadership, clear communication with patients, families, and team members, well-planned and flexible intervention individualized to the patient, responsiveness to patient response, proficiency/mastery in the use of nursing skills.
4. **Reflection:** Evaluation and analysis of choices and decisions made in clinical performance, commitment to ongoing improvement of personal nursing practice

Clinical Judgment Model

The NCSBN Clinical Judgment Measurement Model (NCJMM) is an evidence-based model that identifies six cognitive skills needed to make appropriate clinical judgments. These skills include recognizing cues, analyzing cues, prioritizing hypotheses, generating solutions, taking action, and evaluating outcomes. This NCSBN model of clinical judgment builds on and expands the nursing process. Faculty implement a variety of learning activities, including unfolding case studies that align with the transition from the nursing process to the NCJMM, as the clinical judgment is the focus of new test item types presented on the NCLEX. The table below depicts the transition from the nursing process to the NCJMM. (NCSBN, 2019).

Nursing Process (ADPIE/AAPIE)	Tanner's CJ Model	NCJMM
Assessment	Noticing	Recognize Cues
Diagnosis/Analysis	Interpreting	Analyze Cues
Diagnosis/Analysis	Interpreting	Prioritize Hypotheses
Planning	Responding	Generate Solutions
Implementation	Responding	Take Action
Evaluation	Reflecting	Evaluate Outcomes

National Council of State Boards of Nursing (NCSBN,2021).



National Council of State Boards of Nursing (NCSBN ,2021).

MISSION STATEMENT

In accordance with the mission of Weatherford College, the Vocational Nursing Program is committed to providing effective learning opportunities in vocational nursing education that enrich the lives of our students and the communities we serve. This mission is accomplished by:

- Presenting students with the standards of nursing practice, with an emphasis on safe, legal, and ethical nursing.
- Promoting excellence in nursing education.
- Encouraging students to be responsible for their professional growth.
- Preparing students to function safely in a variety of health care settings and within cultural, racial, ethical, and developmental diversities.

Students will be prepared to function as a member of the nursing profession, a provider of patient-centered care, a patient safety advocate, and a member of the health care team.

PROGRAM OBJECTIVES

The goal of the Vocational Nursing Program is to prepare an individual to function within the scope of the practice as defined in the Nurse Practice Act for the state of Texas. Upon completion of the Vocational Nursing Program, the graduate should be able to:

1. Provide safe, competent, patient-centered care utilizing evidence-based practice for clients of any age in a variety of structured health care settings under the supervision of a registered nurse, advanced practice registered nurse, physician assistant, physician, podiatrist or dentist.

2. Communicate effectively with clients, families, peers, and members of the health care team, while respecting established lines of authority.

3. Utilize a systematic approach to provide individualized care and advocacy for clients and families.

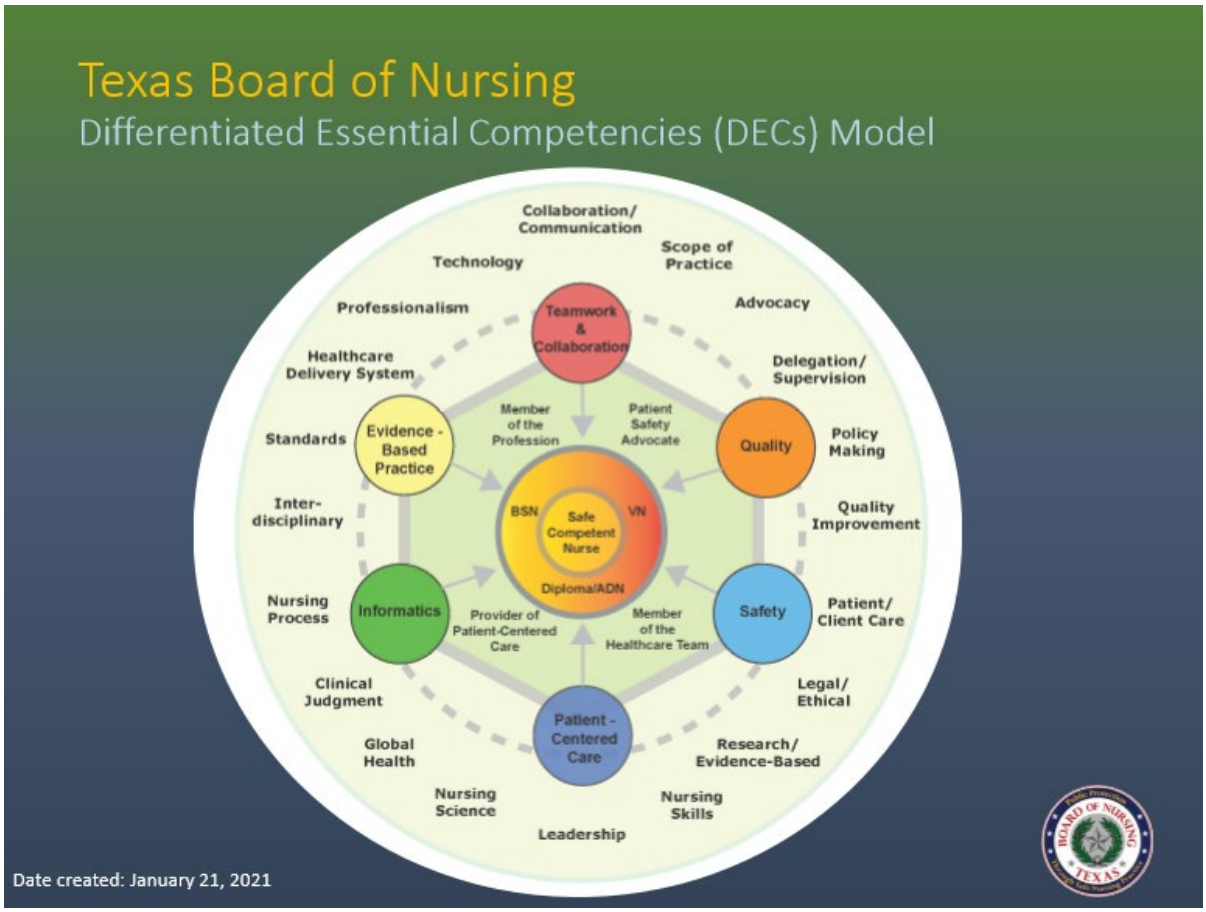
4. Demonstrate the ability to administer medication safely and accurately through knowledge of drug classifications, effects, reactions, and indications, as well as calculation of correct dosages.

5. Collaborate with other members of the health care team to teach clients to promote health maintenance and wellness.

6. Accept legal, ethical, and professional accountability in the practice of Vocational Nursing. Including but not limited to adherence to federal HIPAA regulations.

DIFFERENTIATED ESSENTIAL COMPETENCIES (DECs) OF TEXAS GRADUATES OF VOCATIONAL NURSING PROGRAMS

The entry-level graduate of a VN program provides nursing care within a directed scope of practice under appropriate supervision. The vocational nurse uses a systematic problem-solving process in the care of multiple patients with predictable health care needs to provide individualized, goal-directed nursing care. The vocational nurse contributes to the plan of care by collaborating with interdisciplinary team members and with the patient's family. The new graduate can readily integrate technical skills and the use of computers and equipment into practice.



Upon completion of this program, the graduate should demonstrate these entry-level competencies:

I. **Member of the Profession**

A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.
B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.
C. Contribute to activities that promote the development and practice of vocational nursing.
D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

II. **Provider of Patient-Centered Care**

A. Use clinical reasoning and knowledge based on the vocational nursing program of study and established evidence-based practice as the basis for decision-making in nursing practice.
B. Assist in determining the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their families, and in interpreting health-related data based on knowledge derived from the vocational nursing program of study.
C. Report data to assist in the identification of problems and formulation of goals/outcomes and patient-centered plans of care in collaboration with patients, their families, and the interdisciplinary health care team.

D. Provide safe, compassionate, basic nursing care to assigned patients with predictable health care needs through a supervised, directed scope of practice.
E. Implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors.
F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes.
G. Implement teaching plans for patients and their families with common health problems and well-defined health learning needs.
H. Assist in the coordination of human, information, and physical resources in providing care for assigned patients and their families.

III. **Patient Safety Advocate**

A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.
B. Implement measures to promote quality and a safe environment for patients, self, and others.
C. Assist in the formulation of goals and outcomes to reduce patient risks.
D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.
E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.
F. Accept and make assignments that take into consideration patient safety and organizational policy.

IV. **Member of the Health Care Team**

A. Communicate and collaborate in a timely manner with patients, their families, and the interdisciplinary health care team to assist in the planning, delivery, and coordination of patient-centered care to assigned patients.
B. Participate as an advocate in activities that focus on improving the health care of patients and their families.
C. Participate in the identification of patient needs for referral to resources that facilitate continuity of care, and ensure confidentiality.
D. Communicate patient data using technology to support decision-making to improve patient care.
E. Assign nursing activities to LVNs or unlicensed personnel based upon an analysis of patient or workplace need.
F. Supervise nursing care by others for whom the nurse is responsible.
G. Assist health care teams during local or global health emergencies or pandemics to promote health and safety, and prevent disease.

LICENSING AGENCY

Weatherford College will conduct the Vocational Nursing Program according to the standards adopted by the Board of Nursing (BON) for the state of Texas and the Texas Coordinating Board.

ADVISORY COMMITTEE

Purpose:

The Vocational Nursing Advisory Committee will guide the development of policies and matters related to the welfare of the program.

Functions:

1. Provide the Vocational Nursing Program with information regarding current trends or changes in the field of nursing.

2. Advise the department regarding established skills standards or changes in standards.

3. Provide input regarding program philosophy, objectives and major policies.

4. Advise on new equipment needs, selection or acquisition.

5. Advise and make recommendations regarding program development and effectiveness.

6. Identify resources within the community who will provide external learning experiences, student employment and placement.

7. Assist in the professional development of the faculty.

8. Serve public relations function in promoting and publicizing the program to the community.

9. Assist or support the department's efforts with accreditation by the respective accrediting agencies.

Membership:

The membership of the Vocational Nursing Program Advisory Committee, hereinafter referred to as the Advisory Committee, shall consist of individuals that broadly represent the demographics, including ethnic and gender diversity, of the College's service area and of the occupational field, and who are informed about the required knowledge and skills necessary in the vocational nursing field. For example, membership may include Individual registered nurses, licensed vocational nurses, community representatives, graduates of the program, and students currently enrolled in the program. Members serve in a voluntary capacity and serve continuously until no longer interested or able to participate actively. Full-time faculty and staff of the college offering the program must work together with the Advisory Committee members to keep them informed of the progress in meeting the identified program outcomes.

Meeting of Members

The committee shall meet at least annually. The meeting time may be specified by the membership. However, it is recommended that contact with the committee members be maintained throughout the year. The Advisory Committee Chairman may call special meetings in case of curriculum revisions or other business deemed necessary by the membership.

Notices of meeting shall be communicated to each member at least three weeks before the meeting. In case of special meetings, the Chairperson may inform the membership by

telephone, e-mail, or by fax. The purpose of each special meeting shall be outlined in the notice of such meeting. Matters of follow-up will be communicated to members via email.

Amendments to the Bylaws

Amendments to the Bylaws will be made with previous written notice to the membership. Bylaws will be changed by a majority vote cast after a quorum has been established. A review of the Bylaws will be held annually by the membership at the spring meeting.

Officers or the director of the Vocational Nursing Program may initiate proposals for amendments to these Bylaws. Copies of all proposed amendments filed shall be submitted to the membership for further study and recommendations.

Student Opportunities for Input

Students shall have the opportunity to evaluate faculty, courses, and learning resources, and these evaluations shall be documented. Students will evaluate faculty, clinical sites, clinical instructors/preceptors, courses, and participate in surveys for the total program evaluations. Students may be selected to serve as student representatives at Advisory Board meetings and faculty meetings. All evaluations are documented and used to improve program outcomes. Evaluations may be done via Canvas, Trac Prac, or online.

STUDENT HANDBOOK

INTRODUCTION

The student policies for the Vocational Nursing Program were developed for the purpose of maintaining an environment conducive to learning as well as for student progress. Each student is expected to read and comply with these policies so that high standards of nursing education and student activity can be achieved. Texas Board of Nursing rules and regulations supersede all VNP guidelines. **Due to the fast pace and rigorous program, it is HIGHLY recommended that students work 20 hours per week or less. The Passing standard for all VN classes is 78%. There is no grade rounding.**

APPLICATION TO THE VOCATIONAL NURSING PROGRAM

1. The applicant must be accepted to Weatherford College.
2. Application to the Weatherford College Vocational Nursing Program requires a high school graduate or having a GED certificate.

To apply to the Vocational Nursing Program, the individual must submit the following to the program:

a) Passing scores on the entrance test.

b) Allied Health application.

c) High school transcript/GED scores.

d) All college transcripts.

e) Required immunizations, including, but not limited to, Tdap, TB, Hepatitis B, MMRs, Varicella, and influenza.

In addition, the individual should submit proof of completion of a high school Health Careers class, Accredited Phlebotomy Course, and/or the Weatherford College Medical Terminology class (or equivalent), if applicable.

1. Falsification of admission requirements is prohibited. Any student admitted to the program with false information shall be dismissed.

2. International applicants, any Visa holders, permanent residents, and exchange students whose native language is not English, must provide proof of proficiency in English communication skills. More information about this policy and the required testing may be obtained from the secretary of the Vocational Nursing Program.

SELECTION OF STUDENTS

All prospective student applications will be reviewed. An applicant to the program must first be accepted by the College before being accepted by the Vocational Nursing Program. Selection into the Vocational Nursing Program is based on a point system using the following criteria:

1. High school transcript or acceptable GED scores.
2. Entrance examination score.
3. College-level GPA.
4. Completion of college-level courses: Anatomy and Physiology I & II, Microbiology, and Nutrition, if applicable.
5. Successful completion of a high school Health Careers class, if applicable.
6. Successful completion of Weatherford College Medical Terminology course, if applicable.
7. Successful completion of a nationally accredited phlebotomy course, if applicable.
8. Current certification of Certified Nursing Assistant and Certified Medical Assistant, if applicable.
9. United States Veteran.
10. Residency in certain counties: Parker, Wise, Jack, Hood, Palo Pinto.

ADMISSION PROCEDURES

Once selected for admission into the Vocational Nursing Program, the applicant must attend orientation activities, as scheduled by the Vocational Nursing Program, and meet additional criteria. Final admission to the program is provisional until attendance at the orientation session and all the required materials have been satisfactorily submitted and the criteria met.

1. Free of illegal drug use and any misdemeanor convictions that would prevent participation in clinical activities. Felony convictions, along with some misdemeanor convictions may disqualify an individual from consideration for the

clinical rotations. All students are subject to drug screening at the time of admission/re-admission and with cause throughout the year at the student's expense.

1. A criminal history check (DPS/FBI) will be conducted on each applicant, prior to the beginning of class, at the applicant's expense. The applicant's acceptance into the Vocational Nursing Program is contingent upon the results of this report. Delays or special circumstances will be reviewed by the Director. Please refer to the information related to "Student Immunization and Screening Requirements Procedure" available on the WC web page, under "Prospective Students".

Once the Board of Nursing (BON) receives the DPS/FBI criminal background check, the BON will do the following:

a) Mail the blue postcard directly to those applicants who have a clear background check. The card should be submitted to the Vocational Nursing Program; or,
b) Correspond with those who have a positive background check and request a petition for a declaratory order (DO); or,
c) Correspond with the students who have a rejected fingerprint scan and request another fingerprint scan; or
d) Correspond with the applicants that the Operations Team cannot approve their DO petition and they must pay a $150 review fee and then their file will be transferred to our Enforcement Team.

Applicants who have a positive criminal history will be required to go through the declaratory order process. If the nature of the issue can be resolved within the delegated authority of the Operations Department, there will be no charge and the applicant will be sent an "outcome letter" stating that they will be allowed to take the NCLEX upon graduation. If the nature of the criminal issue is beyond the delegated authority of the

Operations Department and must be transferred to the Enforcement Department for Review, the applicant will be billed the $150 review fee. Only upon receipt of the fee will the file be transferred to the Enforcement Department for review. The applicant will be prevented from registering for classes in the Vocational Nursing Program until s/he is cleared by the Enforcement Department of the BON and the "outcome letter" is provided to the Program. Allow up to four months for the file to be reviewed by the Enforcement Department.

1. CPR/Health Care Provider certificate. Prior to beginning the clinical rotations, the student must attain an American Heart Association certificate of CPR for health care providers. A copy of the certificate must be kept on file in the student's record. <u>The student must maintain a current (within 2 years) CPR certificate throughout the year in order to participate in clinical</u>. It is the student's responsibility to provide and maintain current record status. Failure to maintain current CPR certification will prevent the student from participating in program related activities until he/she complies. Absences will be recorded for any missed time. The student may be counseled by the clinical instructor and/or program director and may be placed on probation.

2. Physical Examination with TB test or chest X-ray, performed within three months prior to the beginning of class by an MD, DO. Advanced Practice Nurse, or Physician Assistant. A back/spine screen is also required, along with a 10-panel urine drug screen conducted at the direction of the VNP.

3. It is required that each student submit copies of documentation of immunization status, required by law, before the beginning of class. The immunizations/diagnostic tests are done at the student's expense and records must be submitted for the student's file. Please refer to the information related to "Student Immunization and Screening Requirements Procedure" available on the WC web page, under "Prospective Students." No vaccine waivers are allowed.

4. Personal health insurance is required of all students enrolled in the program; proof of insurance must be kept in the student's file throughout the year. It is the student's responsibility to provide current insurance information to Castle Branch. Failure to maintain insurance will prevent the student from participating in clinical until proof of insurance is provided. Professional liability insurance is also required and will be purchased at the time the student registers for the first semester classes.

"For students in this course who may have a criminal background please be advised that the background could keep you from being licensed by the State of Texas. If you have a question about your background and licensure, please speak with your faculty member or the department chair. You also have the right to request a criminal history evaluation letter from the applicable licensing agency."

ADMISSION TO CLASS AND CONTINUED ENROLLMENT

1 A new class will begin in the fall semester. Each Prospective student must be present and ready to start classes on the designated date.

2. Admission to the Vocational Nursing Program is provisional until all required papers are submitted. These must be submitted according to the schedule provided and before registration for the first semester classes. Failure to submit required papers will result in the applicant's inability to register, with the exception of alternates that may be called just before the beginning of semester.

3. Student must maintain certain requirements throughout the program. It is the student's responsibility to submit results of health testing, current immunization records, current CPR certificates, and proof of medical insurance following the current guidelines provided in the acceptance letter. Failure to keep current information in **CastleBranch** will result in disciplinary actions, prevent the student from participating in class and/or clinical, and possibly result in dismissal. Students will take a clinical absence if they are noted to have out-of-date records in CastleBranch and will be subject to the demerits and grading policy.

Students must have dependable transportation and a smartphone throughout the entire program.

COURSE TRANSFER INFORMATION

Courses with VNSG prefixes may not transfer to most colleges or universities. These courses are considered technical courses, not academic courses. Individuals with concerns about the transfer of VNSG courses should contact the appropriate college or university to determine the transferability of technical courses.

PROGRAM STANDARDS

The faculty of the nursing program believes that socialization into the role of the vocational nurse is an important aspect of the education process. The Texas Board of Nursing Rules and Regulations Relating to Nurse Education, Licensure and Practice will be used as a resource. www.bon.state.tx.us The following standards will be utilized to monitor the student's progress in the nursing program.

1. **Honesty**: It is expected that the nursing student will adhere to the policies and practices described in the ANA Code of Ethics for Nurses (www.ana.org) the NAPNES code of Ethics (www.napnes.org), the Weatherford College Student Handbook and the Student Handbook of the Vocational Nursing Program.

2. **Accountability**: Student nurses must take responsibility for their own decisions and actions. This can include what the student chooses to do (acts of commission) and what the student chooses not to do (acts of omission.) Refer to BON Rule 217.11(1), 217.11(2).

3. **Confidentiality**: Respecting the privacy of others in a standard that all nursing students must adhere to. The student is expected to safeguard the implicit trust between the nurse and the client. Protection of facility-related information from discovery by or display to others in an inappropriate manner is expected. Adherence to HIPPA regulations is mandatory for all WC VNP students. Refer to BON Rule 217.11 (1E).

4. **Professionalism**: Nursing Students represent the College and the Nursing Program at all times and should, therefore, conduct themselves in a positive manner, on and off campus. This includes being considerate and respectful of others and demonstrating self-respect. Refer to BON Rule 217.12 for information regarding the standards of professional conduct for nurses.

5. **Safety**: Students are expected to behave in a manner in which they are free of risks and injury. Each student should protect him/herself and others from harm by practicing safe nursing and adhering to the National Patient Safety Goals set by the Joint Commission. Refer also to the BON Rule 217.11 (1B), (1G), (1H) and (1T) along with Rule 217.12 (4) and 214.18 (1D1).

6. **Responsibility**: Reliability and trustworthiness is expected of nursing students. Each student is responsible to Weatherford College for policies and behaviors listed in the Student Handbook of the Vocational Nursing Program. The student is also responsible to the clinical agencies for their policies and procedures that apply to the student nurse's practice. Refer to the BON Rule 217.11 (1).

7. **Growth**: Nurses continually learn and grow in order to maintain a competent practice. The student nurse should also be committed to professional growth by

evaluating his/her own performance, accepting educational feedback, and incorporating new learning into his/her practice of nursing. Refer to the BON Rule 217.11 (R).

CLASS AND CLINICAL EXPERIENCES

The total length of the day course is three (3) semesters. It is (5) Semesters for the night program. The first thirty-two (32) weeks will be a classroom, laboratory, and clinical phase during which time the student spends approximately 40 hours per week in formal learning situations. The remaining twelve (12) weeks will be spent in a combination of classroom and clinical situations. The clinical/theory hours will not exceed forty (40) hours per week.

1. **Classes**: will be scheduled Monday through Friday between the hours of 7:30 A.M and 5:00 P.M. Night program hours and clinicals will vary by day and time.

2. **Clinical experiences** may be scheduled between the hours of 5:00 A.M and 11:30 P.M. Students may be required to attend night shift or weekend clinical. Clinical experiences will vary and may include 8- or 12-hour shifts. When in hospital clinical, the student will have thirty (30) minutes for lunch. Each student must ask permission from the instructor and the charge nurse if he/she wishes to leave the unit. The student is not allowed to leave the clinical unit during the clinical shift, unless otherwise specified by the instructor, failure to do so will result in a section 1 (g) offense. Day clinical during first second semesters are scheduled for 8-hr shifts, two days per week. Third semester clinical can be 8 or 12-hour shifts, two or three days per week. Clinical hours and days will vary for the night program students per semester.
3. Clinical experiences require students to travel to sites away from the college campus. Clinical sites include hospitals and other health care facilities in Mineral Wells, Stephenville, Weatherford, Graham, Millsap, Fort Worth, Decatur, Jacksboro, Granbury, and Bridgeport. Other Locations may be used if deemed necessary for student learning. Students must be prepared to drive to any of these locations for clinical.

4. The nursing faculty will determine clinical assignments, depending upon the learning environment, availability of clinical resources, and needs of the students.

5. Clinical days for both day and evening programs may be Mon-Sun if needed.

LEARNING RESOURCES

All students enrolled in the VNP must have individual access to the required textbooks and electronic resources. Lab packs must be purchased from the campus bookstore for Basic and Advanced Skills in order to participate in these courses. Failure to purchase lab packs may prevent the student from participating in the skills course, with absences recorded for time missed. Students are required to have a smartphone with a data plan and GPS capability for clinical hours. Students are required to have earbuds for HESI testing. No smart watches, Bluetooth, or electronic ear buds in class or clinical.

A medical and nursing library is available to the student for study and reference reading. The Streib Center and the Academic Support Center are also available to the student for assistance in learning. Students are encouraged to utilize these learning resources.

Due to safety concerns, access to the nursing skills lab is limited to students, faculty, and staff.

ROOM AND BOARD

Each student must provide his/her own lodging and meals.

HOLIDAYS

The following holidays will be observed:

1) Thanksgiving
2) Christmas
3) New Year's Day
4) Martin Luther King Day
5) Fourth of July
6) Labor Day
7) Memorial Day
8) Good Friday

VACATIONS AND ATTENDANCE

Students are allowed five (5) absences for clinical shifts during the twelve (12) month course – 2 in the first semester, 2 in the second, and 1 in the third semester. The term "shift" refers to any unit of time designated as clinical, regardless of the length of time (including clinical appreciation days). For example, a "shift" could refer to a 1-hour classroom meeting, a 4-hour lab session, an 8-hour shift at a physician's office, or a 12-hour shift at a hospital. A no-call/no show, or leaving clinical early without permission, is grounds for immediate program dismissal. Clinical absences should be utilized for emergencies only and result in a 4-point clinical demerit regardless of the reason.

1. For the day and night program, Students are allowed no more absences than are outlined in each course syllabus. Night program absences vary per semester and are discussed in each syllabus.

   The student must be in his/her designated clinical area and prepare for instruction at the scheduled time for that rotation.

   If a student is unable to attend clinical, it is his/her responsibility to report the intended absence. A call to report the absence must be made to the **clinical instructor** 2 hours prior to the scheduled time for the rotation. If the absence is not reported in this manner, the student will be disciplined according to the Health & Human Science Division Policies Section 1 (s).

2. Beginning in the second week of the first semester, students who are absent on clinical days (whether on campus or off campus) and do not contact the

instructor will be disciplined according to the Health & Human Sciences Division policies. The student is also responsible for notifying the designated supervisor at clinical sites.

3. Students reporting to clinical sites without adequate preparation for patient care (required paperwork) will be considered to be unsafe to practice nursing and may be sent home. Clinical absence(s) will accrue as appropriate.

4. Students are allowed no more absences than are outlined in each course syllabus. Any absence over the allowed number will result in the final course grade being reduced by 10% for each additional absence. Absences will not be carried over into the following semesters. 4-point clinical demerits per absence.

5. Any student who is called to active military duty while enrolled in the Vocational Nursing Program must notify the Director as soon as orders are received. Students who are absent from class or clinical due to military duty may be exempt from the above attendance policies, based on his/her orders, etc. The Director of the program will make the final decisions regarding this after reviewing the military orders. Make-up work may be required for any absences related to military duty.

6. Arriving late and/or leaving early from class or clinical is not acceptable. This behavior may result in academic, as well as disciplinary probation. The student is responsible for using Trac prac for his/her own attendance/skills in clinical

.

7. When a student is absent from clinical or class for more than ten (10) minutes for any reason, the student shall be counted absent for the entire clinical shift or class period. One absence shall accrue every 3 times the student misses 10 minutes or less of class or clinical, due to late arrival, a long “break,” and /or leaving early. A student who is considered absent due to a late arrival will not be allowed to participate in clinical for that day. EXCEPTION: A student that is more than 10 minutes late to an on-campus clinical learning activity shall be counted absent, but will be allowed to participate in the activity.

8. It is the responsibility of the student to obtain information presented in class, lab and/or clinical conference if an absence occurs. Failure to attend classes regularly may result in academic failure and subsequent dismissal from the program.

STUDENT HEALTH

1. Students are responsible for their own health care. Students who are ill are encouraged to stay home rather than attend class / clinical. This will promote rest for the ill student and prevent the spread of the illness to others in the class. Students may be asked to wear a mask if they have a cough or other symptoms.

2. If a student needs to make an appointment with his/her private physician, she/he must schedule the time so that it does not conflict with the scheduled class or clinical experience.

3. Students are not allowed to discuss personal medical problems with physicians or any staff personnel on the assigned unit.

   For the safety of the student and client in the clinical area, nursing faculty must be notified of student pregnancy and/or other health conditions. Weatherford College and the VN faculty are not responsible for a student's health.

   Certain health conditions may require a Clinical Activity Release before the student will be allowed to return to the program. If the condition prevents the student from participating fully, she/he will not be allowed to return to clinical until the physician has released the student to full duty. There are no accommodations for light duty. If this release is in excess of the allowable absences, the clinical grade will be adversely affected. See instructors for the required release form. The student must be able to fulfill clinical objectives and clinical learning outcomes in addition to having a full medical release.

Due to the sometimes-stressful nature of the health care environment, students should be aware that Weatherford College offers student counseling, free of charge, through Student Services.

EXAMS AND ASSIGNMENTS

1. Each student is expected to take tests as scheduled. No test will be given before the scheduled date and time. Unless otherwise instructed, students may not copy exam items or use any electronic devices to record tests. 78% is the passing Standard in the vocational nursing program with no grade rounding for tests, Assignments or final grades. No smart watches, Bluetooth devices, or electronic ear buds during quizzes, exams, or clinicals.

2. All class and clinical assignments are due on appointed dates at the designated time. Late classroom assignments due to absences will be accepted upon the student's first return to campus, and 15 points will be deducted. Other late assignments will not be accepted. The clinical instructor will determine deductions for late clinical assignments using the clinical grading policy. Failure to cite resources in class or clinical assignments may constitute plagiarism of the information used.

3. Make up tests should be taken on the first day the student returns to the campus. Tests cannot be accepted after that day, and a "0" will be recorded for the grade. The highest possible score a student can achieve on a makeup test is an 85. Students must test before class on the first day back, at lunch, or after class is over in the testing center, as it is open early and late.

It is the student's responsibility to make arrangements with the instructor to take the makeup test. At the instructor's discretion, make-up tests may be multiple choice, matching, short answer, fill-in-the-blank, or essay.

4. Students are responsible for marking all answers appropriately, according to the testing system in use.

5. Some exams will be taken on college computers. Students will need to comply with instructions from the faculty for completion of these exams. Any computer difficulty during the exam must be reported to the faculty present at the exam at that precise time so it can be seen and address. Testing policy applies to all exams.

6. Questions or concerns regarding grades on coursework and/or tests should be brought to the instructor's attention within 5 days after receipt of the grade with the exception of the final exam. After 5 days grades will not be adjusted. Students assume responsibility for recording all answers appropriately on the answer sheets.

A. Grading in the clinical course:

Clinical Grades are determined in three different areas:

Clinical Evaluation Tool:	85%
Final Clinical Exam:	5 %
Simulation:	10%
	100%

B. Dosage Calculation Exam: During semesters 1 and 2 of the program, students will be given a medication dosage calculation exam. Students must pass the exam at established levels in order to successfully pass the clinical course. In semester 1, the student is required to score a grade of 90% on a 25-item exam. In semester 2, the student is required to score a grade of 95% on a 25-item exam. The student is permitted three attempts to pass the exam. However, the actual grade on the exam is not entered into the course grade. See grading specifications below.

Dosage Calculations

Each vocational nursing student must demonstrate competency of dosage calculations to administer medications safely and meet the objectives for clinical.

First semester exam: There will be 3 scheduled opportunities to take the calculation exam in the first semester. The exam must be passed with a 90% or better in order to meet the clinical objectives for the first semester and continue in the program in the second semester. If the student does not make the required

grade on the first attempt, she/he must remediate with the nursing faculty to take the exam a second time/third time.

If the student makes less than 90% on the first attempt, s/he will have 2 points deducted from the clinical grade and be given a second/third scheduled opportunity to demonstrate competency. Students who do not achieve a 90% or better in this exam after 3 attempts will have a 25% reduction in his/her clinical grade.

Second-semester **exam**: There will be 3 scheduled opportunities to take the calculation exam in the second semester. The exam must be passed with a 95% or better in order to meet the clinical objectives for the second semester and continue in the program in the third semester. If the student does not make the required grade on the first attempt, she/he must remediate with the nursing faculty to take the exam a second time.

If the student makes less than 95% on the first attempt, she/he will have 2 points deducted from the clinical grade and be given a second/third scheduled opportunity to demonstrate competency. Students who do not achieve a 95% or better in this exam after 3 attempts will have a 25% reduction in his/her clinical grade.

Students must take the exam(s) as scheduled. A missed dosage calculation test will result in a (-15 pt.) deduction. It is the student's responsibility to contact instructor within 24 hours if a dosage test is missed.

Timeliness and accuracy are important components in the calculation of dosages. Due to the nature of the healthcare profession, each vocational nursing student will be expected to complete the dosage calculation exam in the designated time-- **50 minutes allowed for 25 items.**

Dosage Calculations Exam Test Plan

25 Items per Exam
3 Scheduled Opportunities

	First Semester Exam	Second Semester Exam
mg-mg	5	3
Gm-mg	5	2
units-units	3	1
mcg-mg	5	2
tsp-ml	2	1
TBSP-ml	2	1

ounces-ml	**3**	**1**
IV flow rates	**0**	**7**
mg/kg-ml	**0**	**7**
REQUIRED SCORE	**90%**	**95%**

Attendance:
Clinical learning experiences are considered to be a critical part of the vocational nursing program. Students are expected to display the behaviors that are expected by clinical employers of the nursing staff. Missed clinical experiences are difficult to "make up" and detract from the student's overall learning. Absences, for any reason, or being tardy, are a disruption in learning. Each clinical course outlines the number of permitted emergency absences in the syllabus. Each absence is a 4-point demerit, and it is required that the student notify the instructor and the clinical site in advance of the scheduled clinical experience. Each absence in excess of the allowed absences noted in the day or night program clinical syllabus will result in an overall reduction of the clinical course grade by 10%, documented on the summative evaluation at the end of the course.

Learning to incorporate values that demonstrate reliable, responsible behaviors that are expected of a licensed nurse is essential to the effective learning of the vocational nursing student. Individuals who are repeatedly tardy in arriving at the
Clinical experience do not demonstrate that level of reliability. If a student accumulates **three (3) or more tardies** during a clinical course, that behavior is converted to a clinical absence**.** Tardy is defined as being less than 10 minutes late. If the student is more than 10 minutes late, the event is considered a clinical absence. Points will be deducted for attendance issues in the clinical evaluation tool. See Clinical Grading Policy.

Safety: Any behavior that causes harm or could cause harm to a patient, staff member, visitor, faculty, or classmate is considered an actionable behavior. The safety of others must be observed at all times, whether on campus or in the clinical setting. Behavioral issues of commission or omission that can or do interfere with the safety of others may result in a violation of the Allied Health Sciences Incident Categories. Students will be counseled based on the Allied Health policy for incident categories. Violations will result in the student being placed on **probation** for the duration of the program or dismissed from the program, depending upon the severity of the occurrence. Subsequent violations of the incident categories may result in dismissal from the program. Point deductions on the clinical evaluation may also result, depending on the severity of the safety issue. See Clinical Grading Policy.

TESTING GUIDELINES

1. Arrive to classroom 15 minutes prior to class for all exams.

2. Place all backpacks, bags, purses or other parcels at the front of the room—not in the aisles or on an empty desk.

3. All cell phones or other electronic devices must be turned OFF and placed in bags to be picked up after the exam when exiting the room. Apple watches with connectivity must be placed in purses or backpacks. No Bluetooth devices/ear buds

4. No drinks (cups, bottles, etc.) or other items on the desk.

5. No Personal calculators-the program will provide a standard calculator for testing.

6. Scratch paper will be provided by the faculty if needed.

7. Once the exam has started, students may not leave the room until the exam is over.

8. Upon completion of computerized testing, all computers are to be turned off and left at your seat.

9. If the student has a question during the exam or a problem with their computer, a raised hand will indicate the need for assistance.

10. Only WC internet servers are allowed for testing purposes. No outside VPNs

Vocational Nursing Program
Student Self-Assessment & Success Plan

1. Recommend reviewing the Test Taking Tutorials found within your HESI Case Studies and Practice Test. They can be found under the HESI Case Studies Tab.

2. Commit/invest in yourself. Make this one of your “must-dos.”

3. When reviewing questions, take time to understand the rationale given. It is very important to know why it was wrong as well as why it was right.

4. If utilizing HESI comprehensive Practice Test Exams, it has been found that students scoring in upper 60's to lower 70's do well on their EXIT Exam. That is on their first attempt at the exam.

5. The day before the exam, stop studying by noon. Have a “Me” day. Eat right and get plenty of sleep! Have faith in yourself. We have given you the necessary resources and you have worked hard!

Assigning Grades:

The HESI score will be utilized as a part of course grades as outlined in specific course syllabi.

This document describes the self-improvement/remediation policy for Licensed Vocational Nursing (LVN) students at Weatherford College (WC). "The process of identifying the need to take action to remedy a situation that, if left unresolved, will result in unfavorable outcomes, whereas implementing intervention strategies will successfully address the situation" (Culleiton, 2009).

Purpose: The purpose of the self-improvement plan/contract is to improve students' critical thinking, reasoning skills, and test-taking strategies to achieve NCLEX success (Evolve, n.d.).

Expectations for Success: Faculty will communicate the value of testing and success plans regularly to encourage a positive testing culture and better student outcomes.
HESI is intended to help prepare students for the NCLEX and specifically target areas of student strengths and weaknesses (Evolve, n.d.).

Following HESI specialty and Exit Exams, students must fill out and return a self-improvement/success plan dependent upon their individual HESI score in each exam. HESI Exam Scores can indicate the student's risk level for success in the program and on the NCLEX.
Students with lower HESI scores require more intense self-improvement/remediation plans.
All students will be required to complete the online individualized HESI remediation packets by the due date assigned by their instructor. The remediation packets are specific to the students and designed to help them understand concepts and content they can improve upon. The HESI assessments are not used as gatekeeping; however, they are designed as a tool to identify needs and opportunities for improvement and guidance.
Students are required to view all rationales at the end of each HESI Exam. This will be monitored by the faculty administering the HESI Exam.

The following areas of "Nursing Process, Client Needs, and Concepts, and NGN" are identified as the areas of self-assessment and remediation.
Students will be taught after the first HESI exam on how to complete/their forms and interpret results.
To complete the remediation contract, students may use Saunders Comprehensive Review for the NCLEX-PN Examination questions, U-World, Case Studies, or other faculty-suggested tools/platforms.
Weatherford College Academic Integrity/Honesty Policy applies to all HESI work submitted.
Students must bring a computer-compatible set of headphones for each test and may be given a scratch piece of paper for each test. A scratch paper should be returned to the faculty administering the HESI immediately upon exam completion. No Bluetooth headphones.
Phones are not allowed in the classroom during testing. ALL WC testing policies apply. Students with accommodations must schedule their exams in advance with the WC Testing Center.
If a student is absent on HESI administration day, the student will be required to take an alternative supervised exam within 24 hours.

Subject Area	HESI Score	# of Questions Answered Correctly	Individual Action Plan
Nursing Process			
1			
2			
Client Needs			
1			
2			
3			
4			
Concepts			
1			
2			
3			

Assigning Grades:
The HESI Scoring will be utilized as part of course grades, as outlined in specific course syllabi HESI Scoring but may not count for more than 10 % of the course grade.

HESI Scoring Interval	Performance Level	Grade Book Conversion

>1050	Recommended Performance Level	100
1001-1050		100
950-1000		95
900-949		90
875-899	Acceptable Performance	90
850-874		85
800-849	Below Acceptable Performance	75
750-799		70
700-749	Needs Further Preparation and Retesting	70
≤ 699		60

References

Culleiton, A.L. (2009). Remediation: A closer look in an educational context. Teaching and Learning in Nursing, 4(1), 22-27. https.elsevier.com

*This scale was adopted by the Weatherford Vocational Nursing Faculty

STUDENT WITHDRAWALS, READMISSIONS, AND DISMISSALS

1. Weatherford College reserves the right to dismiss or deny readmission to any student whose health, conduct, or scholastic records indicate that it would make it inadvisable for the student to continue with the program. STUDENTS WILL BE READMITTED TO THE PROGRAM ONLY ONCE AND PLACED ON ACADEMIC PROBATION, UNDER GUIDELINES OF THE CURRENT STUDENT HANDBOOK.

2. Students who withdraw of their own accord and have performed satisfactorily to that point will receive a grade of “W”. If the student wishes to be readmitted, the student's records will be reevaluated, and the readmission procedure will be followed, provided the student has completed all admission requirements for new applicants. Students are encouraged to follow withdrawal policies as outlined in the WC Student Handbook. Students are readmitted if space permits.

3. A student may attempt to complete the VN Program only twice and must complete it within two years.

Students who are dismissed from WC Nursing or Health Science programs for disciplinary problems are not eligible for admission or readmission.

Individuals who have been out of class / clinical for 2 weeks or more who are seeking readmission OF ANY KIND must:

*Submit application and required documents before the deadline

*Show no evidence of drug or alcohol use

*Score an 85 or better in all completed courses, and take a comprehensive test over each course to establish competency. Individuals must score 85 or better on this test. If they do not achieve this score, they must take that course in its entirety. These tests must be taken before the first day, and the individual seeking readmission must make arrangements through the nursing faculty.

*Take the entire course/courses in which they made less than a final grade of 85.

*Register for Basic Nursing Skills and Clinical I for individuals returning in the first semester, or Advanced Nursing Skills and Clinical II for individuals returning in the second semester. If the student repeats the third semester, the student must register for Nursing Health & Illness III and Clinical III.

*Pass a Dosage Calculations competency exam, in 1 attempt, appropriate to the semester.
Example (If re-entering Semester II, the student must pass the dosage calculation competency exam given to Semester I students before registration/readmission)

4.**First Semester:** Students are readmitted to the first semester on a space- available basis. Students seeking readmission status will be considered after new students are selected and may be admitted only if room permits. Students who are unsuccessful in the first semester and wish to re-enter the program as a “new” student should submit notification via email to the program director. These students are required to submit a new application, all required documents, and admission criteria by the admission deadline. If all documentation and application criteria are met, and before consideration for readmission, students are required to meet with the program director and faculty members by **June 1,** prior to the semester starting, to discuss the circumstances of the unsuccessful attempts that may impact future success. All returning first-semester students must re-take Clinical 1 and Basic Skills. Students must repeat any course in which they received a final grade of 85%. Students can be exempt from repeating remaining courses if they made over an 85% and pass the competency exam with an 85%. These tests must be administered before beginning the semester.
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Second and Third Semesters: Students who do not complete the second or third semester must submit a letter to the Program Director stating their intent to seek readmission. This letter should include the reasons for the need to repeat the semester and what the student has done, or will do to resolve the situation(s). Students are required to meet with the program director and faculty members before the semester begins, by October 1, to set up testing and review criteria. Students must:
*Show no evidence of drug or alcohol use

*Score an 85 or better in all completed courses, and take a comprehensive test over each course to establish competency. Individuals must score 85 or better on this test. If they do not achieve this score, they must take that course in its entirety. These tests must be taken before the first day, and the individual seeking readmission must make arrangements through the nursing faculty.

*Take the entire course/courses in which they made less than a final grade of 85.

*Advanced Nursing Skills and Clinical II are required to take if returning in the second semester. If the student repeats the third semester, the student must register for Nursing Health & Illness III, Leadership and Clinical III.

THESE STUDENTS MUST TAKE THE SECOND SEMESTER MATH EXAM WITH THE REST OF THE COHORT AT THE APPROPRIATE TIME WITH THE SAME PASSING STANDARDS.

5. **Students will not be readmitted if their separation from the VN program was related to unsafe nursing practice, dishonesty, and/or unethical behavior, section I or II behaviors from the "WC Health & Human Science Division Incident Categories" policy may prevent the student from re- enrolling.**

6. Readmitted students have 2 years from the date of his/her **FIRST** admission to complete the program.

COMMUNICATION

1. The student should respond to communications from faculty appropriately and within the time frame given. **Students must have smart phone w GPS for clinical**

2. Bulletin boards in the nursing classroom or practice lab are also used for some communications between students and faculty. The student should also check these frequently for important information.

3. If problems arise, students are expected to follow the chain of command.

4. Weatherford College (WC) provides an email address for each student that is to be used for correspondence with instructors and other WC personnel. Students should check their WC email account and the LMS classroom on a daily basis.

5. Students should adhere to the social media/Networking Policies of The Allied Health and Human Science Division.

TELEPHONES AND ELECTRONICS

1. Telephones and/or electronic devices should not disrupt class. If class is disrupted, the student will be asked to leave, may not return until the next break and will be counted absent for that class.

   Electronic devices may be used during class/clinical for the purpose of accessing textbooks or resources with the approval of the faculty or facility. Students may not access electronic devices for other, non-academic purposes during class/clinical time.

2. During tests, all electronic devices should be turned OFF and placed in the student's backpack until after completion of the test.

3. Cellular phones, cameras, PDAs, personal computers, etc. may be prohibited, per agency policy, at the clinical sites. Without exception, no photographic images should be taken while in the clinical/lab setting without authorization from your nursing instructor.

4. Unauthorized recording (video/audio/still shot) of instructors, students, and/or patients is prohibited and the student will be subject to disciplinary action, up to and including, immediate removal from the program. Students may record class lectures with the permission of the instructor.

STUDENT DISMISSALS FOR MISCONDUCT

The Nursing Program Faculty has the authority to dismiss a student whose conduct in the classroom or clinical area is not in keeping with the high standards of behavior expected of vocational nursing students. **Misconduct may prevent the student from applying for readmission**. Please refer to the information on "Incident Categories" in the Health Sciences General Procedures section of this manual.

DRESS CODE

Students are expected to be clean and appropriately groomed at all times when in the role of a Weatherford College Vocational Nursing student. A casual or sloppy appearance and extremes of clothing, hair, and makeup are not acceptable in the learning environment. Clinical uniforms are to be worn only for clinical activities.

CLINICAL:

1. A complete school uniform must be worn (unless otherwise stated). This includes a uniform top and bottom (faculty-designated style and color) with school patch on left sleeve, sewn securely, two inches below the seam (shoulder). The school uniform also consists of polished white leather shoes with a rubber sole (no high-top or mid-top tennis shoes), white socks, college photo ID on the right (with name and title clearly visible), a watch with a second hand, a hemostat, scissors, a penlight, a black ink pen, and a stethoscope. Uniforms must be clean, pressed, and size-appropriate. Lab-approved VN T-shirts ONLY may be worn in skills with green scrub pants only on Tuesdays and on campus clinical days.

   School patches should be replaced as needed to maintain the original appearance. A casual or sloppy appearance and extremes of dress, hair, and makeup are not acceptable in the clinical environment.

   Students will be allowed to wear a crew neck shirt under the scrub top if desired. Shirts should be white (not dingy) with no visible writing, decorations, etc. Sleeves should be no longer than the wrist and should not interfere with the care of the patient. Under shirts should be tucked into the scrub pants with no visible shirttail.

2. For safety and infection control reasons, while in uniform, only the following jewelry will be permitted:

a) Watch with a second hand.
b) One small post-type earring in each ear lobe only! If gauges are worn, they must be clear or flesh tone.
c) One Ring with smooth surfaces (no stones)
d) No facial or mouth jewelry (nose, cheek, tongue etc.)
e) Head cover for religious purposes must be black and tucked inside the uniform top.
f) False or Lash extensions are not permitted due to infection control

a) Fingernail polish may not be worn. Nails must be neat, clean, and kept no longer than one eighth of an inch (1/8") above fingertips. No artificial nails, nail tips, etc. May be worn.

b) Smoking/vaping is prohibited in the clinical areas. Avoid colognes, perfumes, hand lotions, smoke or other odors that are offensive and potentially harmful to others.

c) Hair must be neat/clean, secured back away from the face and off the collar. Extreme hairstyles or colors are not allowed. Hair accessories must be without ornamentation. Beards and mustaches are to be clean and neatly trimmed. Men without beards/mustaches must be clean-shaven each day.

d) VN approved lab coats may be worn over the uniform, if desired. College ID should be worn on the right side with student's name and photo clearly visible.

The school patch should be sewn securely on the left sleeve. Sweaters, "hoodies", etc., should not be worn with the school uniform.

e) No other items, devices, pins, jewelry, campaign buttons, etc. may be attached in any manner to the school uniform or lab coat.

f) Back braces are allowed, but must be worn under the uniform.

g) Visible body art must be covered at all times while in the clinical uniform. Flesh-colored tattoo cover-up sleeves may be worn with the approval of the clinical Instructor. Please see instructor for advice for covering hand tattoos.

h) Because appearance is part of the environment, students must adhere to affiliating clinical agencies' professional dress codes.

a) Field trips and seminars: Casual professional dress is required unless instructed to wear a clinical uniform.

ACADEMIC DISHONESTY

The vocational nursing program expects its students to maintain high standards of personal and scholarly conduct. Academic dishonesty of any kind will not be tolerated; the student may be subject to disciplinary action, up to, and including immediate removal from the VNP. Academic dishonesty includes, but is not limited to, cheating on an examination or homework assignment, plagiarism, falsification of records, and the abuse

of resource materials. Refer to the WC College Handbook and the Incident Categories of the Health and Human Sciences Division of Weatherford College.

A full record of all demonstrable violations of this policy will be retained in the student's file for his or her tenure at Weatherford College.

The student retains the right to appeal any disciplinary actions following the chain of command. Students dismissed from the VNP are to use the process outlined in the WC Technical Appeals procedure in order to seek reinstatement to the program.

HARASSMENT

Weatherford College forbids engaging in unwanted and unwelcome verbal or physical conduct directed toward another student, WC employees, clinical staff, patients, and/or family. Please refer to the WC Student Handbook for more information.

SCHOLASTIC REQUIREMENTS

Grades are expressed in letters as follows: Passing in the Vocational Nursing Program is 78%. There is no grade rounding.

90 -100	A
80-89	B
78-79	C
Less than 78	F
Withdrawal	W
Incomplete	I

Any score less than a 78% will result in failing with NO GRADE ROUNDING

1. **Academic deficiency**: Any student having academic difficulty in an individual course will have the opportunity for counseling during the semester. Students are encouraged to monitor their academic progress on Canvas and seek assistance when indicated.

   Extra credit assignments may be offered to the entire class, but no individual extra credit work will be allowed.

2. **Dose Calculations Competency**: Each student must demonstrate competency in dose calculations to administer medications safely and meet the objectives for clinical. A copy of the test plan will be posted in the clinical classroom. There will be 3 scheduled opportunities in the first and second semesters to demonstrate calculation proficiency. If the student does not make the required grade on the first attempt, he/she must attend the required remediation with the nursing faculty to take the exam again. Two points will be deducted from the student's clinical grade each time he/she do not pass the dose calculation exam.

The schedule for the dose calculation competency exam is as follows:

First Semester: Test will be administered at the end of the first semester, and must be passed with a 90% or better to meet the clinical objectives for the first semester and continue in the program in the next semester. If the student makes less than 90%, he/she will be given a second/third scheduled opportunity to demonstrate competency. Students who do not achieve a 90% or better on this exam, after 3 scheduled attempts, will have 25% deducted from his/her clinical grade.

Second Semester: Test will be administered at the end of the second semester and must be passed with a 95% or better to meet the clinical objectives for the second semester and continue in the program. If the student makes less than 95%, he/she will be given a second/third scheduled opportunity to demonstrate competency after required remediation. Students who do not achieve a 95% or better on this exam, after 3 scheduled attempts, will have 25% deducted from his/her clinical grade.

There is NO OPPORTUNITY for a makeup test if the student does not take the Dosage Calculation Exam as scheduled.

Any student disputing a final grade may follow the steps of the Technical Program Appeals process available from Student Services. A student desiring to appeal to the department chair/program director within one (1) business day of the release from a technical program. The written notification of the appeal must include a detailed explanation of the reason or justification for the appeal, any other evidence in support of the student's claim(s), and why the release should be overturned, and be signed and dated by the student.

CLINICAL EVALUATIONS

Clinical records will be maintained for each student. Clinical evaluations will be scheduled each semester and as deemed necessary. It is at this time that the student will be told of strong points and any areas in need of improvement. All conferences held with students are confidential and require signatures from the instructor and student. These may be conducted electronically.

Clinical grades shall be determined by the student's performance in the clinical areas (Based on clinical objectives), written clinical exams, completion of the required Documentation as designated by the clinical instructor, and the completion of the Clinical Specialty Rotation Objectives. These objectives are to be completed by the student independently; the student is expected to gather information from his/her textbooks and personal observations. Clinical Evaluations are done via the Trac Prac Tool.

CLINICAL EXPERIENCES

Clinical assignments are made by the faculty based on BON rules, student learning needs, clinical objectives, and facility policies. These unpaid learning experiences may take

place in a variety of settings (acute-care, long-term care, physician offices, public health clinics, etc.) with various hours of scheduled responsibilities. Students will be notified of the clinical assignments by the instructor promptly, but they may be revised as needs change. Day and Evening students may be required to do day, evening, weekend, or overnight clinical shifts depending upon availability.

Students under active legal investigation may be prevented from participating in clinical activities. **Any charges, other than minor traffic violations, must be reported to the VNP Director within 3 days of the occurrence.**

Eligibility for Externship Experiences with Clinical Affiliates

The clinical affiliates that partner with Weatherford College have the right to refuse any student for clinical placement. Policy at clinical sites may vary in whether or not students with particular positive findings on the background check will be allowed to attend clinical. In the event there are positive findings on any portion of the criminal background check, a primary clinical site will be notified and requested to decide whether or not the student will be allowed to complete a rotation at the site, in light of the specific positive findings on the criminal background check. If the clinical site will not allow the student to participate at that site, the clinical coordinator will contact up to two additional clinical sites offering the same type of clinical experience, if available, to attempt to place the student. If these attempts do not result in a clinical site placement for the student, the student will be notified that s/he may not enroll in clinical courses and any co-requisite courses. In most cases, this will mean that the student will not be able to progress in the program and will therefore not be able to complete the courses required for graduation.

Clinical Compliance Requirements:

- **Hepatitis B: (2- or 3-dose series) OR (+) titer**
- **Measles, Mumps, Rubella (MMR): 2 doses required OR (+) titer**
- **Varicella (Chicken Pox): 2 injections OR (+) titer**
- **Tetanus, Diphtheria & Pertussis (TDaP): every 10 years**
- **Influenza (Flu): current annual flu vaccine (flu season August to May)**
- **Complete a criminal background check and provide clearance from the Texas Board of Nursing (BON) before the start of classes**
- **Obtain a TB screen test or chest x-ray (must be current within one year)**
- **Obtain a urine drug screen**
- **Have a back/spine examination by a licensed physical therapist or physician**
- **Submit proof of major medical health insurance**
- **Provide proof of current American Heart Association Health Care Provider BLS CPR**
- **Have a physical examination by an M.D., D.O., APRN, or PA**

Every semester includes a clinical component, and placement in these settings depends on fulfilling the requirements of the clinical facilities/affiliates. Students must satisfy the affiliate requirements (as

denoted above) for placement and approval to participate in clinical rotations in the VN program. No vaccine waivers are permitted for clinical placements

DESIGNATED SUPERVISOR

An instructor-specified staff member who may, on occasion, directly supervise a student's learning experience in the clinical setting. The student is required to remain in compliance with the Texas Nurse Practice Act.

FINANCIAL ASSISTANCE

If the student needs financial assistance, the student should consult with the Financial Aid Department. Tuition, books, fees, and other expenses are subject to change as deemed necessary by Weatherford College. This will be made known to the student in advance of the effective date.

REFUNDS

The nursing program is not responsible for refunds of tuition, books, and/or fees. Some fees paid in the third semester may be non-refundable. WC refund dates are posted on the WC website.

ACCIDENT OR INJURY TO THE STUDENT

If a student is injured while in class or the clinical setting, the instructor must be notified immediately. The injured student may choose to be treated at his or her own expense in the hospital's emergency room or at a private physician's office. The faculty will observe the student's legal right to privacy and the facility's protocols if a student seeks treatment after an injury.

A Weatherford College Occurrence Report (obtainable from the instructor) must be completed by the student, and a copy will be placed in the student's file. Weatherford College and the faculty assume no liability for any accidents or injuries.

OCCURRENCE REPORTS

Should an incident occur involving a vocational nursing student, an instructor must be notified immediately and an occurrence report completed. An occurrence report is defined as a written document that describes an incident occurring in a health care agency that involves harm or the threat of harm to a patient, visitor, health care person, and/or facility. **A nursing student has a duty to report an occurrence that results in harm, or potential harm, to a patient, family member, facility, etc., through negligence,**

violation of professional boundaries, substance abuse, lack of skills/judgments, or confidentiality concerns. (BON Rule 217.11) The clinical instructor will investigate incidents and take measures in accordance with policies of the college and the health care agency. Incidents which involve medication errors will be documented, and the resulting discipline will be based on the severity of the medication error. If a discrepancy related to medication administration occurs, the WC VN student will follow the same protocol as the clinical site employees. Please refer to the guidelines for medication administration in the section "Clinical Objectives."

TRANSFER STUDENTS

Please refer to the information on “Transfer Students” in the Health Sciences General Procedures section of this manual.

OFF-CAMPUS EVENTS AND INDEPENDENT STUDY ASSIGNMENTS

Students may be required to attend off-campus seminars, field trips, or other courses scheduled by the faculty. Students may also be required to complete independent study assignments. Refer to the dress code for field trips/seminars for information regarding appropriate attire. Failure to follow faculty directions, comply with the dress code, and/or attend off-campus events will adversely affect the student’s grade and may result in a recording of an absence.

REQUIRED INSURANCE

Personal health (major medical) and professional liability insurance is required of each student before clinical experiences begin. Proof of such insurance is to be current and uploaded to Castle branch. It is the student’s responsibility to maintain records for his/her file. Failure to maintain insurance will prevent the student from participating in clinical until proof of current insurance is provided, and the clinical grade will be adversely affected. It is strongly recommended that students follow-up any requests for faxes or other documentation to ensure compliance. Absences will be recorded for any missed time, and the clinical grade will be adversely affected.

DRUG-FREE LEARNING ENVIRONMENT

Weatherford College is committed to a drug-free learning environment. Students must disclose any conviction for a drug-related offense, which occurs while enrolled in the Vocational Nursing Program, to the Program Chair within 5-10 days after such a conviction. Failure to disclose the conviction shall be grounds for dismissal from the program. Refer to Incident Categories Section 1.

COMMENCEMENT / PINNING CEREMONY

The Commencement / Pinning Ceremony will be held at the end of the day program and the evening program. A certificate will be issued by Student Services to those who have completed the requirements of the program. All students are encouraged to participate in the commencement ceremony.

STATE BOARD EXAMINATION APPLICATION

Completion of the VN Program at Weatherford College does not guarantee that the Board of Nursing (BON) for the state of Texas will approve the applicant to take the state licensing exam (NCLEX-PN).

All prospective State Board Examination applicants will be asked the following questions (taken from the BON website): Previous Convictions (required)
For any criminal offense, including those pending appeal, have you:

a) Been convicted of a misdemeanor?

b) Been convicted of a felony?

c) Pled nolo contendere, no contest or guilty?

d) Received deferred adjudication?

e) Been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?

f) Been sentenced to serve jail or prison time? Court-ordered confinement?

g) Been granted pretrial diversion?

h) Been arrested or have pending criminal charges?

i) Been cited or charged with any violation of the law?

j) Been subject to a court-martial; Article 15 violation; or received any form of military judgment/punishment/action?

(You may only exclude Class C misdemeanor traffic violations.)

NOTE: Expunged and Sealed Offenses:

While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket, or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office with your application. Failure to reveal an offense, arrest, ticket, or citation that is not in fact expunged or sealed, at a

minimum, subjects your license to a disciplinary fine. Nondisclosure of relevant offenses raises questions related to truthfulness and character.

NOTE: Orders of Non-Disclosure:

Pursuant to Tex. Gov't code §552.142(b), if you have criminal matters that are the subject of an order of nondisclosure, you are not required to reveal those criminal matters on this form. However, a criminal matter that is the subject of an order of nondisclosure may become a character and fitness issue. Pursuant to other sections of the Gov't Code chapter 411, the Texas Nursing Board is entitled to access criminal history record information that is the subject of an order of nondisclosure. If the Board discovers a criminal matter that is the subject of an order of nondisclosure, even if you properly did not reveal that matter, the Board may require you to provide information about any conduct that raises issues of character.

Yes
No

Pending Investigations (required)

Are you currently the target or subject of a grand jury or governmental agency investigation?

Yes
No

Previous Discipline (required)

Has **any** licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a nursing license, certificate or multistate privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?

Yes
No

Drug and/or Alcohol Treatment (required)

Within the past five (5) years, have you been addicted to and/or treated for the use of alcohol or any other drug?

Yes
No

Mental Impairment (required)

Within the past five (5) years, have you been diagnosed with, treated, or hospitalized for schizophrenia and/or psychotic disorders, bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder?

Yes
No

The review process to determine eligibility for testing is very long (3 months to 2 years), and a permit granting a temporary authorization to practice as a Graduate Vocational Nurse (GVN) will not be issued upon graduation until the individual is approved by the BON to take the examination.

"For students in this program, who may have a criminal background, please be advised that the background check could keep you from being licensed by the State of Texas. If you have a question about your background and licensure, please speak with your faculty member or the department chair. You also have the right to request a criminal history evaluation letter from the applicable licensing agency."

Additional information may be obtained from the Board of Nursing at www.bon.state.tx.us

WEATHERFORD COLLEGE VOCATIONAL NURSING Day PROGRAM

Certificate Program

		Lecture Hours	Lab Hours	Contact Hours
FIRST SEMESTER 17 credit hours				
VNSG 1115	Disease Control & Prevention	1	0	16
VNSG 1116	Nutrition	1	0	16
VNSG 1320	A & P for Allied Health	3	0	48
VNSG 1122	Vocational Nursing Concepts	1	0	16
VNSG 1423	Basic Nursing Skills	2	6	128
VNSG 1400	Nursing in Health & Illness I	3	2	80
VNSG 1360	Clinical I	0	0	288
	TOTAL	11	8	592
SECOND SEMESTER 16 credit hours				
VNSG 2331	Advanced Nursing Skills	2	4	96
VNSG 1136	Mental Health	1	0	16
VNSG 1234	Pediatrics	2	0	32
VNSG 1230	Maternal-Neonatal Nursing	2	0	32
VNSG 1509	Nursing in Health & Illness II	5	0	80
VNSG 1361	Clinical II	0	0	288
	TOTAL	12	4	544
THIRD SEMESTER 9 credit hours				
VNSG 1119	Professional Development	1	0	16
VNSG 1510	Nursing in Health & Illness III	5	0	80
VNSG 1362	Clinical III	0	0	288
	TOTAL	6	0	384
	GRAND TOTAL	**29**	**12**	**1520**

Total Hours = 1520 Total Class Hours = 656
Total Clinical Hours = 864 **Total Semester Hours = 42**

Students who satisfy the requirements of this program are issued a certificate of completion and may be eligible to take the Board of Nurse Examiners exam for licensure in the State of Texas.

Any final class score less than 78% will result in failing with NO GRADE ROUNDING

Night Class Schedule of classes is different than the above course schedule and is noted to be 5 semesters in length.

Vocational Nursing Certificate - Evening Program

Program
Vocational Nursing
Degree Type
Certificate
Capstone experience: Texas Board of Nursing Licensure Exam.

NOTE: Students who satisfy the requirements of this program are issued a certificate of completion and may become eligible to apply to take the NCLEX-PN exam for licensure.

First Semester

VNSG 1423	Basic Nursing Skills
VNSG 1116	Nutrition
VNSG 1122	Vocational Nursing Concepts
VNSG 1261	Clinical I

Sub-Total Credits
8

Second Semester

VNSG 2331	Advanced Nursing Skills
VNSG 1320	Anatomy and Physiology for Health Science
VNSG 1262	Clinical II
VNSG 1115	Disease Control and Prevention

Sub-Total Credits
9

Third Semester

VNSG 1400	Nursing in Health and Illness I
VNSG 1161	Clinical III

Sub-Total Credits
5

Fourth Semester

VNSG 1509 Nursing in Health and Illness II
VNSG 1230 Maternal-Neonatal Nursing
VNSG 1234 Pediatrics
VNSG 1263 Clinical IV

Sub-Total Credits
11

Fifth Semester

VNSG 2510 Nursing in Health and Illness III
VNSG 1119 Leadership and Professional Development
VNSG 2261 Clinical V
VNSG 1136 Mental Health

Sub-Total Credits
9

Total Credits
42

Any final class score less than 78% will result in failing with NO GRADE ROUNDING

WEATHERFORD COLLEGE VOCATIONAL NURSING PROGRAM COURSE DESCRIPTIONS

VNSG 1115 Disease Control and Prevention. Study of the general principles of prevention of illness and disease, basic microbiology, and the maintenance of aseptic conditions. Prerequisite: Admission to the program. Sixteen hours of lecture per semester.

VNSG 1116 Nutrition. Introduction to nutrients and the role of diet therapy in growth and development, and in the maintenance of health. Prerequisite: Admission to the program. Sixteen hours of lecture per semester.

VNSG 1320 Anatomy and Physiology for Allied Health. Introduction to the structure (anatomy) and function (physiology) of the human body, including the neuroendocrine, integumentary, musculoskeletal, digestive, urinary, reproductive, respiratory, and circulatory systems. Prerequisite: Admission to the program. Forty-eight hours of lecture per semester.

VNSG 1122 Vocational Nursing Concepts. Introduction to the nursing profession and its responsibilities. Includes legal and ethical issues in nursing practice. Concepts related to the physical, emotional, and psychosocial self-care of the learner/professional. Prerequisite: Admission to the program. Sixteen hours of lecture per semester.

VNSG 1423 Basic Nursing Skills. Mastery of basic nursing skills and competencies for a variety of health care settings, using the nursing process as the foundation for all nursing interventions. Prerequisite: Admission to the program. Thirty-two hours of lecture and ninety-six hours of laboratory per semester.

VNSG 1400 Nursing in Health and Illness I. Introduction to general principles of growth and development, primary health care needs of the client across the lifespan, and therapeutic nursing interventions. Prerequisite: Admission to the program. Forty-eight hours of lecture and thirty-two hours of laboratory per semester.

VNSG 1360 Clinical I. A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. The clinical professional provides direct supervision. Prerequisite: Admission to the program. Two hundred eighty-eight laboratory hours per semester.

VNSG 1230 Maternal-Neonatal Nursing. A study of the biological, psychological, and sociological concepts applicable to basic needs of the family, including childbearing and neonatal care. Utilization of the nursing process in the assessment and management of the childbearing family. Topics include physiological changes related to pregnancy, fetal

development, and nursing care of the family during labor and delivery and the puerperium. Prerequisite: Successful completion of all fall semester courses with a grade of 78 (C) or better. Thirty-two hours of lecture per semester.

VNSG 1234 Pediatrics. Study of the care of the pediatric patient and family during health and disease. Emphasis on growth and developmental needs utilizing the nursing process. Prerequisite: Successful completion of all fall semester courses with a grade of 78 (C) or better. Thirty-two hours of lecture per semester.

VNSG 1136 Mental Health. An introduction to the principles and theories of positive mental health and human behaviors. Topics include emotional responses, coping mechanisms, and therapeutic communication skills. Other topics include co-dependency, violence, eating disorders, and substance abuse. Prerequisite: Successful completion of all fall semester courses with a grade of 78 (C) or better. Sixteen hours of lecture per semester.

VNSG 2331 Advanced Nursing Skills. Application of advanced-level nursing skills and competencies in a variety of healthcare settings, utilizing the nursing process as a problem-solving tool. Prerequisite: Successful completion of all fall semester courses with a grade of 78(C) or better. Thirty-two hours of lecture and sixty-four hours of laboratory per semester.

VNSG 1509 Nursing in Health and Illness II. Introduction to health problems requiring medical and surgical interventions. Prerequisite: Successful completion of all fall semester courses with a grade of 78 (C) or better. Eighty hours of lecture per semester.

VNSG 1361 Clinical II. A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. The clinical professional provides direct supervision. Prerequisite: Successful completion of all fall semester courses with a grade of 78 (C) or better. Two hundred eighty-eight laboratory hours per semester.

VNSG 1119 Leadership and Professional Development. Study of the importance of professional growth. Topics include the role of the licensed vocational nurse in the multidisciplinary health care team, professional organizations, and continuing education. Prerequisite: Successful completion of all spring semester courses with a grade of 78 (C) or better. Sixteen lecture hours per semester.

VNSG 2510 Nursing in Health and Illness III. Continuation of Nursing in Health and Illness II. Further study of medical-surgical health problems of the patient, including concepts of mental illness. Incorporates knowledge necessary to make the transition from student to graduate vocational nurse. Prerequisite: Successful completion of all spring semester courses with a grade of 78 (C) or better. Eighty lecture hours per semester.

VNSG 1362 Clinical III. A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. The clinical professional provides direct supervision. Prerequisite: Successful completion of all spring semester courses with a grade of 78 (C) or better. Two hundred eighty-eight laboratory hours per semester.

VNSG 1261 -Evening Clinical I. A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. Prerequisite: Admission to the program. 192 clinical hours.

VNSG 1262- Evening Clinical II.

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. Prerequisite: Successful completion of all fall semester evening courses with a grade of 78 (C) or better. 192 clinical hours.

VNSG 1161 Evening Clinical III. A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. Prerequisite: Successful completion of all spring semester evening courses with a grade of 78 (C) or better. 92 clinical hours.

VNSG 1263 Evening Clinical IV. A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. Prerequisite: Successful completion of all summer semester evening courses with a grade of 78 (C) or better. 192 clinical hours

VNSG 2261 Evening Clinical: A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. Prerequisite: Successful completion of all Fall II semester evening courses with a grade of 78 (C) or better. 192 clinical hours

Any final class score less than 78% will result in failing with NO GRADE ROUNDING

GENERAL CLINICAL PERFORMANCE OBJECTIVES

Using the clinical objectives, students will be evaluated in three areas of clinical practice:

1. Direct patient care
2. Interaction with peers and other health-care providers on behalf of the client.
3. Preparation of patient care documentation, as assigned.

The clinical rotations shall consist of:

1. Clinical Lab Level I
2. Clinical Lab Level II
3. Clinical Lab Level III
4. Clinical Lab Level IV (evening students)
5. Clinical Lab Level V (evening students)

Clinical evaluations will be conducted during each semester.

Medication or treatment error/omission, see Policy Manual.

These clinical performance guidelines are based on the student's meeting normal patient care needs and the maintenance of a safe patient care environment.

The patient care needs listed below are "normal" anticipated patient care needs--these needs must be anticipated and met by the student without detailed or repetitive instructions by the program faculty or clinical agency personnel.

- Report to assigned clinical area at designated time, per instructor, for all clinical laboratories (unless otherwise instructed by the faculty)
- Obtain a proper report from the nursing/agency staff.
- Review patient's Medical Record as soon as possible (no later than 1 hour after the beginning of the shift).
- Compare medications profile to the physician's orders as soon as possible (no drugs may be administered before review)
- Perform tests promptly – if ordered at a specific time, 30 minutes variance will be allowed, except for STATs, according to the facility policy.
- Obtain and document vital signs appropriately, according to facility protocol. Obtain additional vital signs as ordered, 5-minute variance.
- Complete bed baths promptly.
- Complete bed/linen changes promptly.
- Maintain medical aseptic technique, where appropriate.
- Maintain surgical aseptic technique, where appropriate.
- Provide a safe environment for clients, co-workers, and self.
- Provide basic, normal comfort measures.
- Maintain and carry out therapeutic needs, such as intravenous therapy, nasogastric suction/feedings, etc.
- Compile, before clinical day, pre-work as assigned by faculty.
- Administer medications as ordered, using correct technique to ensure:

Right Patient,	Right Drug	Right Documentation
Right Dose	Right Route	Right Time
Right Reason	Right Response	

- Follow the instructions issued by the program faculty.
- Follow the correct instructions issued by the medical staff.
- Follow routine patient hygiene measures, including, but not limited to:

Catheter care-perineal care

- Nail/hair care Shaving (males must be shaved each day) Oral care (before and after each meal and as needed)
- Evaluate/assess each patient at the start of each clinical shift.
- Observe, but DO NOT serve as a witness to, the signing of patient legal documents, such as releases of liability, etc.
- Leave duty station no earlier or later than the assigned time, unless pre-approved by faculty.
- Maintain proper communication and rapport with fellow students, with program faculty and with clinical agency employees.
- Complete charting one (1) hour before going off duty.
- Arrive on time for all clinical conferences, in-services, meetings, etc.
- Assess & report abnormal vital signs, responses to medication/treatments, and adverse changes in the client's condition immediately to the team leader/charge Nurse and clinical instructor.
- Maintain, evaluate, and report intake/output findings to the team leader/charge nurse.
- Do not take verbal/telephone orders.
- Review the physician and treatment orders periodically throughout the shift and before performing new treatments or administering new medications.
- Give a report, as required by the clinical agency, concerning the physical and mental status of each client assigned to student care, with the exception of “transfer” reports.
- Adhere to all policies and procedures of the Vocational Nursing Program of WC.
- Adhere to all policies and procedures of the clinical agency.
- Meet or exceed the written Clinical Specialty Rotation Objectives.

CLINICAL SPECIALITY ROTATION OBJECTIVES

COMMUNITY HEALTH NURSING

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the specialized role of the community health nurse.

2. To introduce the vocational nursing student to the relationships of various cultural and ethnic groups in the health care system.

3. To introduce the vocational nursing student to the practical applications of promoting wellness and preventing illness.

4. To allow the vocational nursing student to further develop patient interviewing skills and patient assessment techniques.

5. To increase the vocational nursing students' awareness of community resources.

LEARNING OBJECTIVES

On completion of the rotation in the community health setting, the vocational nursing student will submit to the clinical instructor:

a. A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
b. A 1-2-page narrative report summarizing the producers' observed activities in which the student participated.

1. **Describe** the role of the community health nurse.
2. List at least two elements of community health practice, including:
   a. Preventive health services.
   b. Health protection services.
   c. Health promotion services.

3. List two examples of interdisciplinary collaboration and interagency collaboration.
4. Describe two examples of client participation.
5. Relate three examples of cultural differences observed during this rotation.
6. Perform a client interview and physical assessment.
7. **Describe** the prenatal and postpartum care in the community health setting.
8. **Describe** infant/child health programs, including:
   a) Immunizations
   b) Well-baby checks
   c) Infant/child assessment.
   d) PKU and other laboratory procedures.

9. Relate the special care needs of children with disabilities.

CLINICAL SPECIALITY ROTATION OBJECTIVES

CHILD DEVELOPMENT SETTING

PURPOSE OF ROTATION:

1. To observe the development of children in a child development setting, and to compare their development with the norms for the appropriate age group.

2. To observe the total environment and educational programs of the Child Development Center.

3. To identify the purpose of the Head Start Child Development Program.

LEARNING OBJECTIVES:

Upon completion of the rotation in the Child Development setting, the vocational nursing student will submit to the clinical instructor:

- A written report responding to the following objectives (a copy of these objectives must be submitted with the written report)

- A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

- Remember that each report should represent the student's own work and sources should be cited when necessary.

1. **Prior to the Head Start rotation:** Visit the U.S. Department of Health & Human Service Administration for Children & Families online: http://eclkc.ohs.acf.hhs.gov/hsic for the Early Childhood Learning & Knowledge Center to gain understanding of the **Head Start** and **Early Head Start** programs. Under the Head Start tab > About Head Start

2. Compare growth and development for a specific (selected) child observed in the Head Start setting to the “normal” growth and development of this aged child, described in the professional literature (textbook). Discuss aspects of a) physical growth, b) motor activities, c) language/speech, d) social, and e) emotional patterns.

3. **Tell about** the health promotion activities that you observed or participated in during this rotation.

4. **Describe** the nutritional status and eating habits of two age groups of children in the Child Development setting. (Compare “textbook” to observations.)

5. **Describe** the nutritional status and eating habits of two age groups of children in the Child Development setting. (Compare “textbook” to observations.)

6. **Prepare** medication cards for the following medications/Vaccines:

Hep B	Erythromycin	DPT	Meningitis
MMR	Tetanus	Phytonadione	Chicken Pox

7. **Describe** five different childhood illnesses and three common infection control practices.

8. **Explain** the difference between active and passive immunity.

9. **List** at least four safety concerns for children in each of these age groups: newborn, toddler, school age, and adolescent.

*Should be prepared before rotation at Head Start.

CLINICAL SPECIALTY ROTATION OBJECTIVE

EMERGENCY DEPARTMENT

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the patient care role of the emergency department nurse.

2. To allow the vocational nursing student to observe, assist with, and to understand the experiences of the emergency patient so that the student can interpret his/her own roles and functions in relation to any patient in a crisis.

3. To allow the vocational nursing student to recognize what constitutes an emergency or crisis.

4. To allow vocational nursing students to practice the principles of first aid/emergency care.

5. To encourage the vocational nursing student to actively participate in patient care in a crisis environment.

LEARNING OBJECTIVES:

On completion of the Emergency Department clinical rotation, the vocational nursing student will submit to the clinical instructor:

a) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report)
b) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. Identify the responsibilities/duties of each member of the emergency care team: nurses, admitting clerk, EMTs, social worker, physicians, scribes, as well as personnel from the laboratory, x-ray, and cardiopulmonary departments.

2. List at least five principles of first aid/emergency care that apply to the care of the client in the emergency department.

3. Describe the location and purpose of the following:
   a. Crash Cart
   b. Cardiac monitor
   c. Defibrillator
   d. Pedi crash cart
   e. Oxygen delivery devices
   f. Resuscitators

g. Suction devices
h. Casting supplies/equipment
i. Dressing/bandage supplies
j. Instrument trays
k. Suture materials
l. Intravenous fluids/medication

4. List 5-7 nursing actions that are performed immediately upon the arrival of the patient in an emergency.

5. Relate three principles of medical asepsis, as applied in the ED.

6. Explain the value of the nurse's ability to adjust rapidly changing situations and to think clearly and perceptively in the ED.

7. Describe 3-4 legal implications for the nurse working in the ED.

8. Describe “triage” and the principles associated with this.

9 Discuss why each patient and family member must be respected, protected and cared for with the highest level of nursing skill possible.

10. Prepare lab diagnostic cards for Troponin, BNP, CPK-MB, and Myoglobin.

11. Prepare medication cards for the following:
Nitroglycerin Morphine Sulfate Tetanus
Ceftriaxone Ketorolac Dexamethasone

CLINICAL SPECIALTY ROTATION OBJECTIVES

INTENSIVE CARE UNIT

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the patient care role of the intensive care nurse.

2. To allow the vocational nursing student to participate in all nursing activities, either actively or passively, as well as to understand the mechanics of intensive care nursing.

LEARNING OBJECTIVES:

On completion of the clinical rotation in the intensive care unit, the vocational nursing student will submit to the clinical instructor:

a) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report)
b) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. Identify the responsibilities/duties of each member on the intensive care team: RNs, LVNs, social workers, religious leaders, physicians, and personnel from Cardiopulmonary, laboratory, and x-ray departments.

2. List at least five principles of intensive care nursing that apply to the care of the ICU client.

3. Locate and identify the function of:
   a. Crash cart
   b. Cardiac monitor
   c. Defibrillator
   d. Resuscitators
   e. Suction devices
   f. Oxygen delivery services

   Prepare medication cards for the following:
   a. Propranalol
   b. Dopamine
   c. Lidocaine
   d. Propofol
   e. Midazolam

4. List 5-7 nursing actions that are performed immediately upon the arrival of the patient in ICU.

5. Relate three principles of medical asepsis, as applied in the ICU.

6. Explain the value of the nurse's ability to adjust to rapidly changing situations and to think clearly and perceptively in the ICU.

7. Discuss why each patient and family member must be respected, protected and cared for with the highest level of nursing skill possible.

8. Identify three elements in reading EKG strips.

9. Describe procedures performed in the ICU:
   - 12-lead EKG
   - Chest tubes
   - Basic/advanced cardiac life
   - Orthopedic traction
   - Arterial blood draws
   - Portable chest x-ray

10. Describe how to determine priorities of patient care for patients in the ICU.

11. Compare/contrast the assessment of the patient in the ICU with the assessment of the patient in the medical unit.

CLINICAL SPECIALTY ROTATION OBJECTIVES

OBSTETRICAL AND NEWBORN UNITS

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the patient care role of the labor/delivery and neonatal nurse.

2. To allow the vocational nursing student to participate in all nursing activities, either actively or passively, as well as to understand the mechanics of obstetrics and neonatal nursing.

LEARNING OBJECTIVES:

On completion of the clinical rotation in the L & D and/or newborn nursery, the vocational nursing student will submit to the clinical instructor:

a) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report)
b) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. Describe the responsibilities of each team member: L & D nurse, neonatal nurse, postpartum nurse, physician, and unit secretary.

2. Locate and identify the function of:
   - Fetal monitor
   - Neonatal warmer
   - Delivery table
   - Delivery set-up
   - Bili light
   - Doppler
   - Resuscitation equipment

3. Relate three principles of surgical asepsis, as applied in L & D and the newborn nursery.

4. Explain the value of the nurse's ability to adjust to rapidly changing situations and to think clearly and perceptively in L&D.

5. Describe 3-4 legal implications for the nurse working in L & D.

6. Relate the principles and precautions associated with the Pitocin Challenge or stress test.

7. List 4-5 ways the L & D nurse acts as a support person for the laboring woman.

8. Describe the preparation of the patient prior to a Caesarean delivery.

9. List 5-7 nursing actions that are performed immediately upon delivery of the newborn infant.

10. Describe the uses of sonograms, as related to pregnancy.

11. Prepare medication cards for the following:
    a) Oxytocine
    b) Terbutaline
    c) Methergine
    d) Prostaglandin
    e) Hep B
    f) Phytonadione
    g) Surfactant
    h) Cytotec
    i) Magnesium sulfate (for PIH)

Note: Students are not to be giving medications when in the birthing area. Meds may be given with permission in the PP and/or newborn areas.

12. Describe the four stages of labor, including appropriate assessment and nursing care for each Stage.

13. Prepare diagnostic cards for Strep B, Urine for protein/glucose, CBC, H & H, urinalysis, drug panel, Rh factor, and STD screening (VDRL).

Name: _____ Date: _____

Newborn Nursery

Objectives for Newborn Nursery

The Vocational Nursing Student will:

1. Observe and assist the nursing staff in the general care of newborns.
2. Take vital signs prn, recognize normal versus abnormal findings, report per policy, and chart them.
3. Assist with charting and maintaining required records.
4. Observe and assist with nursing procedures.
5. Work with the nursing staff while they are assisting the physician.
6. Work with the nursing staff in maintaining a clean nursery.
7. Use good hand washing techniques while attending to the newborns.
8. Assist the nursing staff in patient teaching.
9. Complete the following examination of a selected newborn.

Examination of a Newborn

Please have the textbook picture of the newborn completed prior to the clinical rotation.

Textbook Picture of Newborn:	**Selected Newborn**
1. Length at birth_____	_____
2. Weight at birth_____	_____
3. Weight at birth on 2nd day _____	_____
4. Head Circumference_____	_____
5. Chest Circumference_____	_____
6. Vitals	
a. Temperature _____	_____
b. Pulse_____	_____
c. Respirations_____	_____
d. 02 saturation_____	_____

Textbook Picture of Newborn:	**Selected Newborn**
Description of Cry	
_____	_____
Skin Color	
_____	_____

Skin Assessment:

1.	Lanugo _____	_____
2.	Vernix Caseosa _____	_____
3.	Tissue Turgor _____	_____
4.	Desquamation _____	_____
5.	Milia _____	_____
6.	Physiologic Jaundice_____	_____
7.	Hemangiomas _____	_____
8.	Forceps Marks _____	_____
9.	Mongolian Spot _____	_____

Head

1.	Fontanels _____	_____
2.	Size of Anterior _____	_____
3.	Size of Posterior _____	_____
4.	Distended Fontanel _____	_____
5.	Depressed Fontanel _____	_____

Neuromuscular System:
Which of the following reflexes are present, is this a normal or abnormal finding, and how do you test for this type of reflex?

1. Coughing: _____
2. Sneezing: _____
3. Gagging: _____
4. Blinking: _____
5. Crying: _____
6. Moro Reflex: _____
7. Tonic Neck Reflex: _____
8. Grasping: _____
9. Babinski: _____
10. Rooting: _____

GI System:

1. How long after birth, did the infant have its first bowel movement?

_____

2. Is this normal?

_____

3. Describe what the stool looked like?

_____

4. What is the typical stool called?

_____

5. How much formula does this infant generally take with each feeding?

_____

6. If infant is breast-fed, how long does she/he usually nurse?

_____

7. What are some of the safety factors the nurse should use in feeding newborn?

_____

_____

What was the Apgar score for this infant at 1 minute after birth? _____

5 minutes after birth? _____

Was these scores within normal limits?

_____

List and describe the components utilized in the Apgar score

_____

_____

_____

_____

_____

_____

What are some safety factors that all nursery nurses should observe when caring for Infants: _____

_____

What measures are in place at your clinical facility for an infant abduction plan?

Reflect on your experience with rotation and relate its value to your future nursing practice:

Postpartum Unit

CLINICAL SPECIALTY ROTATION OBJECTIVES POSTPARTUM UNIT

PURPOSE OF ROTATION:

1) To introduce the vocational nursing student to the specialized care of the post-partum patient.

2) To allow the vocational nursing student to participate in all nursing activities, either actively or passively, as well as to understand the physiologic changes that occur in the post-partum period.

3) To learn to communicate therapeutically and become involved with the family dynamics of bonding in the post-partum period.

Students will be expected to perform patient care in this area as assigned by your clinical instructor. This is a guideline to help you be prepared to take care of a postpartum patient. You will be expected to know this information before taking a patient assignment.

Upon completion of this rotation, the vocational nursing student will submit to the clinical instructor:

a. A written report responding to the following objectives (a copy of these objectives must be submitted with the written report).
b. A 1-2 page narrative report, summarizing the procedures observed or activities the student participated in.

1) Describe the changes that occur in the uterus after delivery has occurred.

2) Detail how to massage a fundus appropriately.
    a. Why might the uterus be boggy?
    b. Why might the uterus be higher than expected and displaced to the right?
    c. How does breastfeeding affect the uterus?
    d. What is the effects of oxytocin on the uterus?

3) List the lochia changes and describe when each of these is expected to occur.
    a. Documentation of character, amount, and presence of clots
    b. What might odor indicate with lochia?
    c. What might heavy bleeding or excessive passage of clots indicate?
    d. Be able to assess the amount of blood loss and its significance during the post-partum period.

4) Explain how to assess of the breasts of the postpartum patient
    a. Assess for any fissures or cracks to the nipples
    b. Assess for any swelling, redness or pain to breasts

c. What is the reasoning for a support bra?
d. Know the definition of mastitis and the signs and symptoms associated with that condition
e. Teaching breastfeeding to mothers. Be able to demonstrate different breastfeeding positions and/or use of nipple shield as needed. Proper latching of the infant during feedings.

5) Relate the assessment of the perineum in the postpartum female. Be sure to include:
   a. Episiotomy site
   b. Hemorrhoids
   c. Use of laxatives
   d. Use of sitz baths and/or ice

6) List at least four components that should be included in a teaching plan for the postpartum family. Briefly describe what the nurse should explain.

7) Identify and describe:
   1) Docusate Sodium
   2) Benzocaine (Dermoplast)
   3) Tucks
   4) Ferrous sulfate
   5) Prenatal vitamins

CLINICAL SPECIALTY ROTATION OBJECTIVES

PHYSICAL THERAPY

PREREQUISITES:
Review nursing skills for body mechanics, patient positioning, and range of motion

PURPOSE OF ROTATION:

To introduce the vocational nursing student to the proper use of body mechanics.

To introduce the vocational nursing student to the various rehabilitation modalities and equipment used in treatments.
To introduce the vocational nursing student to the role of physical therapy in meeting the needs of clients with specified disease processes or conditions.

LEARNING OBJECTIVES:
On completion of the clinical rotation in the physical therapy department, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report)
2) A 1-2-page narrative report summarizing the procedures observed or activities the student participated in.

1. Define rehabilitation and what might be involved for a patient who has had:
   a. Hip replacement
   b. Knee replacement
   c. Cerebral vascular accident
   d. Decubitus ulcer
   e. Fractures/traction

2. Relate the role of the physical therapist and the physical therapy assistant.

3. Explain how the physical therapy department interfaces with the nursing department to meet the needs of patients who are in the hospital.

4. Explain the importance of pre-medicating for pain before physical therapy sessions.

5. Review the following drug classifications and prepare a drug card for one drug that is representative of each classification.
   a. non-steroidal anti-inflammatory drugs (NSAIDs)
   b. Muscle relaxants
   c. Anticoagulants
   d. Antihypertensive
   e. Anticonvulsants
   f. Narcotic analgesics

CARDIOPULMONARY UNIT

(Respiratory Therapy)

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to various respiratory therapy procedures.

2. To allow the vocational nursing student to participate, both actively and passively, in the management of patients with diminished respiratory system function.

3. To all the vocational nursing students to observe patient response to cardiopulmonary management.

LEARNING OBJECTIVES:

On completion of the clinical rotation in the cardiopulmonary unit, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report)
2) A 1-2-page narrative report summarizing the procedures observed or activities the student participated in.

1. List the responsibilities of personnel in the cardiopulmonary department.

2. Describe the effects of age and disease on the oxygenation process.

3. Differentiate between the management of acute and chronic respiratory problems.

4. Describe the uses of the following:
   A. oxygen flow meter/ regulator
   B. oxygen masks
   C. nasal cannula
   D. nebulizer treatment
   E. volume cycled ventilators
   F. croup tents

5. List 4-6 oxygen therapy safety precautions.

6. Describe what is meant by the term "rebreather."

7. Describe patient responses to the various respiratory therapy procedures: O2 therapy, EKGs, updraft and/or nebulizer treatments, etc.

8. Name and briefly describe the uses of 4-5 medications utilized in this department.

9. Prepare diagnostic card for: ABG

UNIT SECRETARY

PURPOSE OF ROTATION:

To introduce the vocational nursing student to the unit secretary's contribution as part of the health care team.

LEARNING OBJECTIVES:
On completion of the clinical rotation with the unit secretary, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.

2) A 1-2-page narrative report summarizing the procedures observed or activities the student participated in.

1. Describe the unit secretary's role as a member of the health care team.

2. Relate specific examples of each of the following:
   a. Communication between departments (lab, x-ray, dietary, etc.)
   b. Communication with patients/families
   c. Managing physician orders
   d. Management of unit supplies
   e. Support for nursing staff

CLINICAL SPECIALTY ROTATION OBJECTIVES

CARDIAC REHABILITATION

PURPOSE OF ROTATION:

1) To introduce the vocational nursing student to the rehabilitation program for cardiac clients.

2) To introduce the vocational nursing student to the rehabilitation process for chronic pulmonary patients.

3) To familiarize the vocational nursing student to prudent heart living.

4) To emphasize the role of exercise in the prevention and rehabilitation of cardiac/pulmonary clients.

LEARNING OBJECTIVES:

On completion of the clinical rotation in the cardiopulmonary unit, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report)
2) A 1-2-page narrative report summarizing the procedures observed or activities the student participated in.

1. Describe the lifestyle changes required for successful rehabilitation.

2. Describe the planning process for cardiac rehabilitation.

3. Compare the roles of the health team workers in the cardiac rehabilitation setting.

4. Relate the educational needs of the cardiac/pulmonary client.

WOUND CARE CLINIC

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to observe specific techniques of stoma and wound care.

2. To introduce the vocational nursing student to the role of the specialized Wound Care clinical staff.

LEARNING OBJECTIVES:

On completion of the Wound Care rotation, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. Explain the four factors (allergies, mechanical trauma, chemical reactions, and infections) that contribute to the loss of skin integrity.

2. Identify 4-6 patient care products that are utilized in the care and management of patients with various wounds.

3. Discuss the etiology / pathophysiology associated with various types of wounds:
   A. venous stasis ulcers
   B. decubitus ulcers
   C. traumatic wounds
   D. infected wounds
   E. MRSA / VRE
   F. diabetic ulcers
   G. skin grafts
   H. amputations
   I. burns

4. Outline the physiological factors and appropriate nursing interventions relating to impaired wound healing.

5. Define / describe whirlpool, hyperbaric therapy, and wound vacuums and list benefits of each regarding wound care.

6. Describe “wound staging.”

7. Identify appropriate documentation as related to wound care.

CLINICAL SPECIALTY ROTATION OBJECTIVES

BEHAVIORAL HEALTH / MENTAL HEALTH NURSING

PURPOSE OF ROTATION:

To introduce the vocational nursing student to the role of the Psychiatric Nurse Specialist and other health care professionals in the behavioral health/mental health setting.

LEARNING OBJECTIVES:

On completion of the Mental Health rotation, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. Identify at least four defining characteristics of people who have a psychiatric disorder.

2. Define the five axes of DSM-IV used to examine and treat mental illness.

3. Identify three major components of nursing assessment that focuses on mental status.

4. Explain five major psychiatric disorders.

5. Describe 4-6 nursing interventions for clients experiencing various mental health problems.

6. Relate at least three key elements that constitute therapeutic communications.

7. Prepare medication cards for at least five of the following:

Lithium carbonate	duloxetine (Cymbalta)	aripiprazole	(Abilify)
Tramadol	diazepam	clozapine	
Ziprasidone (Geodon)	quetiapine (Seroquel)	trazadone	
Risperidone (Risperdal)	divalproex (Depakote)		

8. Discuss how medications are used in conjunction with other therapies (meds) to help modify an individual's behavior.

CLINICAL SPECIALTY ROTATION OBJECTIVES

LABORATORY SERVICES

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the role of the Medical Technologist and Medical Laboratory Technologist, and the Phlebotomist.

2. To introduce the vocational nursing student to the various areas of the lab to include hematology, serology, blood banking, urinalysis, microbiology, clinical chemistry, toxicology, and pathology.

3. To introduce the vocational nursing student to the equipment and supplies used in the laboratory services area.

LEARNING OBJECTIVES:

On completion of the clinical rotation in the laboratory, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. Briefly describe each of the following:
   a. The purpose / role of laboratory services.
   b. role of laboratory personnel

2. Define each of the following tests (including normal parameters) and briefly describe its use:
   a. CBC
   b. Urinalysis
   c. Arterial Blood Gases
   d. Chemistry Panel
   e. Protein (total)
   f. Cardiac Panel

3. Relate various venipuncture techniques observed during the rotation:
   a. Note the difference between starting an IV and venipuncture
   b. Note the difference Vacutainer tubes and their uses
   c. Note varying techniques used to draw blood-syringes, butterflies

4. Compare/contrast techniques for capillary blood collection-finger stick vs. heel stick.
5. Describe the procedure of handling various specimens, from collection through test completion.
6. Define “critical value” and the procedure for notifying the nurse of such values.

CLINICAL SPECIALTY ROTATION OBJECTIVES

RADIOLOGY

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the role of the Radiologist, Radiology Technologist, and other personnel in this department.

2. To introduce the vocational nursing student to the various areas with the Radiology Department.

3. To introduce the vocational nursing student to the equipment utilized in the Radiology Department.

LEARNING OBJECTIVES:

On completion of the clinical rotation in the Radiology Department, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. State the purpose / role of radiological services.

2. Describe the role of the radiologist, radiology technologist and other personnel in this department.

3. Identify the function of each of the following:
   a. Diagnostics/Fluoroscopy
   b. Computerized Tomography
   c. Ultrasound
   d. Nuclear Medicine
   e. Special Procedures Room
   f. Darkroom
   g. MRI

4. Relate specific nursing interventions for the client undergoing radiographic studies.

5. List 5-7 common diagnostic tests commonly performed at this facility.

6. Name and briefly describe 3-4 pieces of equipment utilized in the department.

CLINICAL SPECIALTY ROTATION OBJECTIVES

PHARMACY

PREREQUISITES:
Review chapters in pharmacology text that address the basic pharmacology laws and principles, calculation, and the nursing process.

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the role of the pharmacy personnel.

2. To introduce the vocational nursing student to the various functions and responsibilities within the Pharmacy.

3. To introduce the vocational nursing student to the various methods of preparation for medications and routes of medication administration.

LEARNING OBJECTIVES:
On completion of the clinical rotation in the Pharmacy, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. Relate the role of the Pharmacy staff.
   a. Pharmacist
   b. Pharmacy Technician
   c. LVN

2. Describe how medications are stored in the pharmacy and what guidelines apply to storage of medication on the nursing units.

3. Trace an order for medication from the source (patient chart), through the pharmacy and to the patient care unit where it is available for patient use.

4. List the various <u>forms</u> of medications (IVs, unit dose, liquids, etc.) and relate any special considerations for storage or preparations of the various forms.

5. Describe the routes of medication administration.

6. Describe the equipment utilized in the pharmacy for the preparation of medications (laminar flow hoods, etc.)

CLINICAL SPECIALITY ROTATION OBJECTIVES

SCHOOL NURSE

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the school nurse role.

2. To allow the vocational nursing student to observe, assist with, and to understand the experiences of the school age child/adolescent in order that the nursing student can interpret and anticipate his/her own functions in relation to each individual student.

3. To allow the vocational nursing student to observe and to participate in pediatric care in a school environment.

LEARNING OBJECTIVES:

On completion of the clinical rotation with the school nurse, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. **Describe** at least four of the responsibilities / duties of the school nurse.

2. Assess the normal child growth and development of various age groups.

3. **Describe** appropriate interviewing techniques and physical assessment skills.

4. Assist in health screening and examinations, if appropriate.

5. Assist in health education that is appropriate for the age group.

6. Identify special needs of the child with a handicap.

7. List three examples of interdisciplinary collaboration and interagency collaboration.

8. Document information about commonly used medications using format from VN policy manual. (methylphenidate, Adderall, Clonidine, Dexedrine, Tegretal, albuterol, Intal)

9. List the required immunizations for school age children / adolescents.

10. Identify and briefly describe five common communicable diseases according to the Texas Department of Health Guidelines.

CLINICAL SPECIALITY ROTATION OBJECTIVES

PHYSICIAN OFFICES

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the patient care role of the nurse working in the physician's office.
2. To allow the vocational nursing student to observe and to participate in patient care in a non-institutional environment.
3. To allow the vocational nursing student to observe the care of the well, sub-acute, and convalescing client, especially in the areas of:
   A. pediatrics
   B. general surgery
   C. obstetrics/gynecology
   D. orthopedics
   E. family practice
   F. cardiovascular/pulmonary disease
   G. neurology

LEARNING OBJECTIVES:

On completion of the rotation in the doctor's office, the vocational nursing student will submit to the clinical instructor:

1) a written report responding to the following objectives (a copy of these objectives must be submitted with the written report)
2) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

Identify the roles of the various members of the professional staff (office manager, technicians, assistants, LVNs, RNs, etc.) employed in the office.

1. **Describe** at least five (5) responsibilities / duties of the LVN(s) employed in the office.
2. Identify three (3) therapeutic communication **principles** utilized by the nurse or physician when interacting with the client.
3. Relate two (2) **principles** of medical asepsis practiced in the doctor's office.
4. Locate and identify the function of the equipment utilized in the office.
5. Name and briefly **describe** five (5) medications commonly used in the office or prescribed by the physician.
6. Describe diagnostic lab tests commonly ordered/performed in the office, including HgbA1C, and cholesterol, plus 2-3 additional tests
7. Perform patient care procedures (with supervision) appropriate to the office/client.

CLINICAL SPECIALITY ROTATION OBJECTIVES

PREOPERATIVE AREA / OPERATING ROOM / POST-ANESTHESIA CARE UNIT

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the patient care role of the nurse working in the preoperative, operative, post-operative units.

2. To allow the vocational nursing student to observe, assist with, and to understand the experiences of the operative patient in order that the student can interpret, and anticipate his / her own functions in relation to each individual surgical patient.

3. To allow the vocational nursing student to observe and to participate in patient care in a critical care environment.

****

Students are required to observe actual surgical procedures in the operating room.
Procedures will vary according to the clinical facility.

****

LEARNING OBJECTIVES:

On completion of the Peri-operative clinical rotations, the vocational nursing student will submit to the clinical instructor the following:

1) a written report responding the following objectives (a copy of these objectives must be submitted with the written report)
2) a 1-2-page narrative report, summarizing the procedures observed

Pre-op Area

1. Describe at least three (3) responsibilities / duties of the preoperative team.

2. Describe the pre-surgical preparation of the patient that takes place before his/her arrival to the hospital (permits, teaching, lab work, etc.)

3. List at least seven (7) nursing actions that are performed after the patient's arrival to the hospital and before he/she is transferred to the operating room (refer to the Pre-op "checklist.")

4. Name and briefly describe at least three (3) medications that are used as preoperative medications.

5. Relate two (2) possible emotional reactions of patients and families toward impending surgery and how the nurse assists individuals with these emotions.

Operating Room

1. Describe the responsibilities / duties of each member of the surgical team: OR manager, circulating nurse, scrub nurse / technician, nurse anesthetist (CRNA), anesthesiologist, surgeon, assisting physicians, and clerk.

2. List five (5) possible surgical complications that may affect the surgical patient.

3. Relate three (3) principles of surgical asepsis.

4. Identify five (5) nursing actions that indicate the specific ways the surgical patient is protected from injury before, during and after a surgical procedure.

5. Name and briefly describe at least four (4) medications / anesthetic agents used in this area.

6. Explain the value of emotional stability and mental alertness on the part of the nurse in the operating room setting.

7. Discuss why each patient, whether conscious or anesthetized, must be respected, protected, and cared for with the highest level of nursing skill possible.

Post-Anesthesia Care Unit (PACU) / Recovery Room

1. Explain the responsibilities / duties of the PACU nursing staff.

2. List 5-7 nursing actions that are performed immediately upon the patient's arrival to the PACU from the Operating Room.

3. Describe three (3) surgical complications that are most likely to occur in the immediate postoperative period and the measures that are taken to prevent these from occurring.

4. Locate and identify the function of the crash cart, cardiac monitoring device, warmer, and supply cart.

5. Name and briefly describe three (3) medications utilized in the PACU.

6. List 4-7 nursing actions that must be performed before the patient is dismissed or transferred from the PACU.

7. Discuss the value of emotional stability and mental alertness on the part of the nurse in the PACU setting.

8. Describe the teaching necessary for the client and/or the family upon discharge from the PACU. Develop a discharge-teaching plan for a selected patient—include objectives and rationales for nursing actions.

CLINICAL SPECIALITY ROTATION OBJECTIVES

CHEMOTHERAPY ROTATION

To introduce the vocational nursing student to the patient care role of the nurse working with clients on the chemotherapy unit.

1. To allow the vocational nursing student to observe, assist with, and understand the experiences of the client with a diagnosis of cancer in order that the student can interpret and anticipate his/her own functions in relation to the individual client.

LEARNING OBJECTIVES:

Upon completion of the rotation to the chemotherapy unit, the vocational nurse will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2) A 1-2-page narrative report, summarizing the learning experiences of the rotation.

1. List the most common types of cancer that occur in men and women.

2. Describe four different types of cancer therapy: surgery, radiation, chemotherapy, and biotherapy.

3. Describe systemic side effects of chemotherapy: bone marrow suppression, nausea / vomiting, and alopecia.

4. Explain “extravasations”.

5. Plan at least seven nursing actions / interventions that would be appropriate for the client undergoing chemotherapy.

6. Relate two possible emotional reactions that clients and families might have to chemotherapy.

7. Name and briefly describe at least three medications that are used for chemotherapy.

8. Explain the role of the nurse working on this area

9. Describe the usual course of events for a client’s stay in the area.

NOTE: Without exception, students are not allowed to access porta-caths or any central lines.

CLINICAL SPECIALITY ROTATION OBJECTIVES

UTILIZATION MANAGEMENT

1. To introduce the vocational nursing student to the role of the nurse in utilization management.

2. To allow the vocational nursing student to observe, assist with, and understand the utilization review process.

LEARNING OBJECTIVES:

Upon completion of the rotation to utilization management, the vocational nurse will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2) A 1-2 page narrative report, summarizing the learning experiences of the rotation.

1. Define utilization management and explain its origins and purpose.

2. Describe the role of the utilization review nurse.

3. Identify criteria used in the utilization process.

4. Explain patient care pathways and describe how they are influential in the utilization process.
5. Differentiate between Medicare and Medicaid.

6. Identify the principal components of criteria for admission, continued stay, and discharge.

7. Identify the legal responsibilities of the utilization profession.

8. Explain the difference between “utilization management” and “case management”.

9. Complete at least one (1) chart audit, using the form in your VN Policy Manual or one provided by the hospital.

CLINICAL SPECIALITY ROTATION OBJECTIVES

ENDOSCOPY

1.
2. To introduce the vocational nursing student to the responsibilities and the role of the nurse who works in the endoscopy unit.

3. To allow the vocational nursing student the opportunity to observe, assist with, and to be able to apply classroom knowledge of different disease processes with the clinical experience in this assigned area.

LEARNING OBJECTIVES:

Upon completion of this rotation, the vocational nurse will submit to the clinical instructor:

a. A written report responding to the following objectives (a copy of these objectives must be submitted with the written report).
b. A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1) The student should be able to identify anatomy and physiology of digestive tract.

2) Define the following tests, the purpose of the procedure, patient preparation, and post procedure care:
   a. Colonoscopy
   b. Endoscopic retrograde cholangiopancreatography (ERCP)
   c. Bronchoscopy
   d. Gastroscopy
   e. Esophagoscopy
   f. Sigmoidoscopy

3) Define the difference between diverticulosis and diverticulitis. Discuss the treatment plan for each and ways to avoid complications with these different diagnoses.

4) Define polyp and list how a patient can be diagnosed with this. Also, explain why it is important to have early detection of polyps.

5) Define gastritis and discuss signs and symptoms commonly seen with this diagnosis. Also, discuss patient teaching that you may include to help your patient avoid recurrent episodes of this disease.

6) Describe the difference between gastric and duodenal ulcers. List some possible triggers.

7) List at least four common medications that are administered in this area. Define the rationale for its use, the dosage, the route of administration, and the side effects commonly seen with these.

CLINICAL SPECIALTY ROTATION OBJECTIVES

HOSPICE CARE

PURPOSE OF ROTATION:

1. To introduce the vocational nursing students to hospice care.

2. To allow the vocational nursing student to observe, assist with, and to understand the experiences of the hospice client in order that the student can interpret his/her own roles and functions in relation to the client situation.

3. To allow the vocational nursing student to practice the principles of hospice care.

LEARNING OBJECTIVES:

Upon completion of the hospice rotation, the vocational nursing student will submit to the instructor:

1) a written report responding to the following objectives (a copy of these objectives must be submitted with the written report)
2) A 1-2 narrative report, summarizing the procedures observed or activities the student participated in.

1. Define terminal illness.

2. Briefly **describe** the five stages of grief/dying.

3. Explain the benefit of grieving.

4. **Discuss** the philosophy of hospice care.

5. Describe the role of the hospice team members: social worker, nurse, chaplain, physician, home health aide, and volunteers.

6. List at least four aspects of terminal care.

7. What are the criteria for admission to hospice care?

8. **Describe** how the hospice team provides support for the family.

9. **Discuss** at least two legal issues associated with end-of-life care.

10. Name and briefly describe three medications commonly used in hospice care.

CLINICAL SPECIALTY ROTATION OBJECTIVES

DIALYSIS UNIT

PURPOSE OF ROTATION

1. To introduce the vocational nursing student to the patient care role of the nurse working with the client in the dialysis unit.
2. To allow the vocational nursing student to observe and understand the experiences of the client with the diagnosis of renal failure in order that the student can interpret and anticipate his/her own functions in relation to the individual client.

Upon completion of the rotation to the hemodialysis unit, the vocational nursing student will submit to the clinical instructor:

1) a written report responding to the following objectives (the student will submit a copy of the objectives with the written report)

2) A 1-2-page narrative report, summarizing the learning experiences of the rotation.

3) Choose a patient during your rotation. Review their chart and conduct an interview about their disease process and submit a 1-2-page report

LEARNING OBJECTIVES

1) Define hemodialysis, and peritoneal dialysis.
2) Describe the differences between chronic and acute renal failure.
3) At what point would a pt. with CRF need to start dialysis? (hint; labs, symptoms 4) What criteria would need to be met for a patient to be accepted for peritoneal dialysis? 5) List three disease processes that can contribute to renal failure.
4) Describe the renal diet.
5) List one food from each of the four food groups that would be low in phosphorus.
6) List three foods that the renal patient should avoid that are high in phosphorus, potassium, and sodium.
7) Define “dry weight” and discuss the problems associated with fluid excess or fluid deficit in the renal patient.
8) List three medications that are used to support blood cell production and write a medication cards for each drug.
9) List five lab values that are monitored and give the nursing implications for increased or decreased values for each lab.
10) Describe the difference between a fistula, a graft and a shunt.
11) Complete diagnostic cards BUN, creatinine, and potassium.

CLINICAL SPECIALTY ROTATION OBJECTIVES

HOME HEALTH

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the nurse's role in home health nursing.

2. To compare and contrast the role of the home care nurse to other community health nursing roles.

3. To assist in assessing the patient, family, & the environment & correlate the data gathered to develop a plan of care.

LEARNING OBJECTIVES:

1. List the criteria a patient must meet in order to be considered for home health services.

2. List the different types of home health services that are provided to patients and describe their roles.
   a. Nursing services
   b. Rehabilitation services
   c. Social services
   d. Homemaking services

3. Describe how Medicare funding determines reimbursement for home health care.

4. Differentiate among the different roles that are demonstrated in the home setting by the RN, LVN, & the Nurse Aide.

5. Describe three of the most common drugs that were administered in the home setting during your clinical setting.

6. Describe the importance of teaching patients and family members in the home health setting.

7. List what type of evaluation of a patient's home the nurse should have to make for the well-being of the patient.

8. Describe what types of documentation were utilized in the home health care setting during your rotation.

CLINICAL SPECIALTY ROTATION OBJECTIVES

LONG-TERM CARE ROTATION W/ PRECEPTOR

PURPOSE OF ROTATION:

1. To assist vocational nursing students, gain knowledge regarding the Licensed Vocational Nurses role in the long- term care setting.

2. To allow the vocational nursing student to observe and participate in client care in a non-institutional setting.

LEARNING OBJECTIVES:

The VN student will work directly with designated long-term care employees to accomplish the following objectives.

On completion of the rotation in the long-term care facility, the vocational nursing student will submit to the instructor:

1. A written report responding to the following objectives (a copy of these objectives must be submitted with the written report).
2. A 1-2-page narrative report, summarizing the activities involved during the rotation.

1. **Describe** the daily routines of long-term care residents.

2. Relate the role of the LVN on the long-term care health team.

3. Relate participation in activities performed daily in the long-term care setting.
   a. Monitoring of medication regimens.
   b. Medication administration
   c. Skin assessments and wound care management.
   d. Physical and functional assessments. (Monthly summaries)
   e. Monitoring and evaluate nutritional status of residents.
   f. Gathering of specimens and monitoring of diagnostic tests.
   g. Documentation of resident care.
   h. Delegation of duties to unlicensed personnel.

4. **Describe** professional and therapeutic communication as related to the delivery of care to long-term care residents and communication with staff members. Provide two examples of professional or therapeutic communication that you witnessed / participated in during this rotation.

5. Relate an understanding of the use of the nursing process in long-term care. Give an example of Assessment, Diagnosis, Planning, Implementation and Evaluation.

6. Identify aspects of the care planning process for long-term care residents.

7. Discuss the importance of family, friends and community involvement with long-term care.

8. Discuss the importance of an interdisciplinary approach to long-term care. Give an example observed of the various departments (occupational therapy, physical therapy, dietary, etc.) working in collaboration to help residents meet goals of their care plan.

9. Identify funding sources for long-term care and what the LVN's role is in the funding process.

10. Relate challenges faced by nurses working in the long-term care industry.

CLINICAL SPECIALTY ROTATION OBJECTIVES

James L. West Alzheimer's Center

While at the center, you will be expected to be involved in the activities of the assigned unit. Please reflect on your experience at the nursing home and respond to the following. You can submit your report electronically or in a folder the Monday following the last day of your rotation.

For the following, compare (how was it alike) and contrast (how was it different) at the Alzheimer's center and the long-term care facility that you attended for clinical.

1. How were Maslow's Hierarchy of needs met. Give examples of each. Make sure all activities of daily living are addressed.

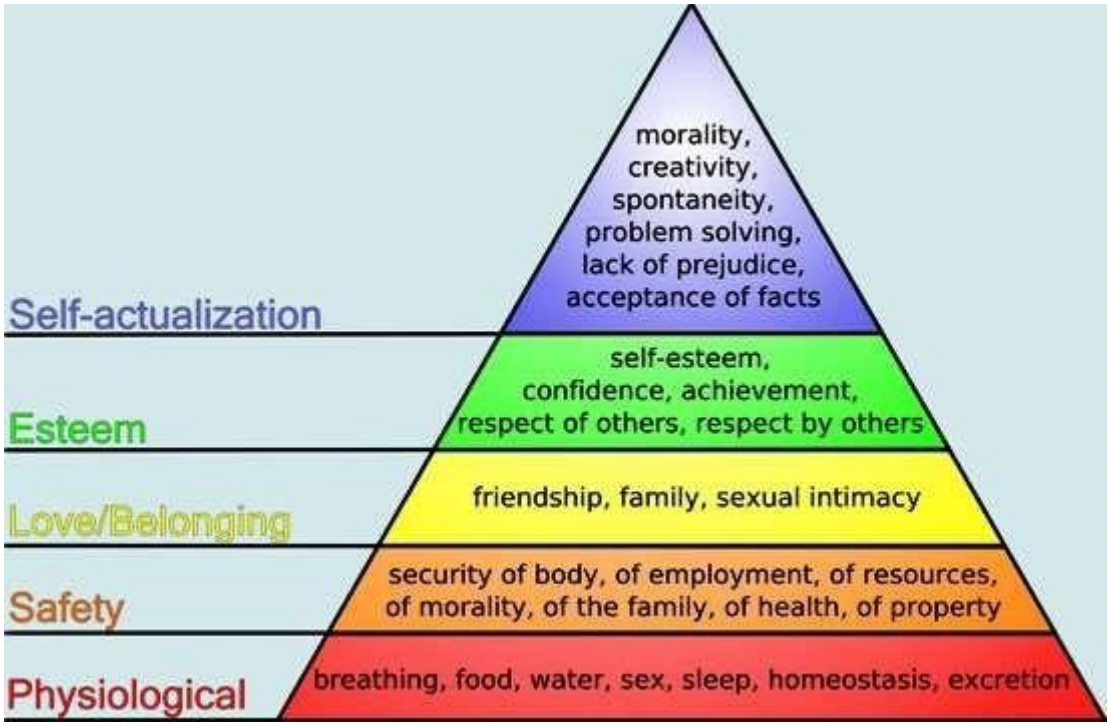
   A. Physiological needs

   B. Safety and security needs

   C. Love and belonging needs

   D. Self-esteem needs

   E. Self-actualization needs



2. Atul Gawande in *Being Mortal* tells of Keren Wilson Brown, the originator of assisted living centers, belief that all persons have the right to be as independent as possible in their own space and the ability to keep that space private and secure. He also tells of Dr. Bill Thomas, who began the Eden Alternative at Chase Memorial Nursing Home in an effort to

create a rich environment, including plants and animals. Furthermore, he wrote that some nursing homes have a philosophy that nursing care is to be administered and that results in schedules and routines. The outcome in that type of environment is striving for safety and efficiency in completing tasks rather than meeting the needs of each individual. Mr. Gawande asks the question, “Is it an institution or is it a home?”

After experiencing the environment of two very different facilities, reflect on your feelings, ideas, etc., and write your opinion about Mr. Gawande's question in reference to your experience.

3. Write a narrative of your experience at James L. West (This will count as your journal entries, so one page for each day, please, and be descriptive of your experience).

CLINICAL SPECIALITY ROTATION OBJECTIVES

Rehabilitation Services

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the rehabilitation program for cardiac clients.
2. To introduce the vocational nursing student to the rehabilitation process for chronic pulmonary patients.
3. To familiarize the vocational nursing student to prudent heart living.
4. To emphasize the role of exercise in prevention and rehabilitation of cardiac/pulmonary client.

LEARNING OBJECTIVES:

On completion of the clinical rotation in the cardiopulmonary unit, the vocational nursing student will submit to the clinical instructor:

1) A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2) A 1-2-page narrative report, summarizing the procedures observed or activities the student participated in.

1. Define the philosophy of rehabilitation nursing.
2. List 3-4 goals of rehabilitation therapies.
3. Describe the interdisciplinary rehabilitation team concept and the function of each team member.
4. Describe the role of the nurse in the specialized practice of rehabilitation nursing.
5. Relate the importance and significance of family-centered care in rehabilitation.
6. Identify three types of patients who would benefit from rehabilitation services and how those patients would benefit from the services.
7. Recognize polytrauma as a difficult challenge for rehabilitation.
8. Describe the goals of pediatric and gerontologic rehabilitation nursing.

CLINICAL SPECIALITY ROTATION OBJECTIVES

PEDIATRIC CLINICAL OBJECTIVES FOR COOK CHILDREN'S ROTATION

PURPOSE OF ROTATION:

1. To introduce the vocational nursing student to the specialized care of the pediatric client.

2. To observe pediatric client in the clinic / Dr office setting.

3. To increase the vocational nursing student's awareness of community resources available to the pediatric client / family.

LEARNING OBJECTIVES:

Upon completion of the rotation at Cook Children's Neighbor Clinic, the vocational nurse will submit to the clinical instructor:

1. A written report responding to the following objectives (a copy of these objectives must be submitted with the written report.)
2. A 1-2-page narrative report, summarizing the learning experiences of the rotation.

Prior to this rotation, review the chapters in your textbook and the NCLEX Review book relating to the stages of growth and development.

1. Explain the importance of family-centered care in pediatrics.

2. Identify and describe at least 2-3 medical diagnoses commonly seen at the clinic to which you are assigned.

3. Prepare drug cards for five (5) medications commonly used on the clinic to which you are assigned.

4. Describe 2-3 diagnostic tests commonly ordered for patients seen at the assigned unit.

5. Identify and describe at least two community resources available to the pediatric client / family.

6. Participate in the care of the pediatric patient, as allowed (prepping rooms, calling pts to "back", VS, weights, etc.) Relate your activities in the narrative report.

7. Describe at least three (3) differences between nursing care of the pediatric client and adult.

8. Observe the administration of medication to the pediatric patient, if appropriate. Compare/contrast medication administration between the adult and pediatric patient.

9. Select a child that is seen in the clinic for immunizations. Use the CDC resource below to determine and describe what the next immunization(s) are for the child. Give appropriate injection locations for a child of that age.

   Recommended Immunization Schedule for Children and Adolescents Aged 18 Years or Younger, United States, 2018

   https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html

10. For the child selected for # 9, give what site(s) would be recommended according to the CDC website below. Also, list three safety guidelines that would need to be used according to this site.

    Vaccine Administration

    https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/administration.html

11. List several age-appropriate comfort measures following immunizations for the child selected for #9 and #10.

CLINICAL SPECIALTY ROTATION OBJECTIVES

MEDICATION ADMINISTRATION ROTATION

PREREQUISITE:

1. Review techniques for the administration for parenteral and non-parenteral medications.

2. Review arithmetic related to drug calculations with special emphasis on conversion from one system (metric / apothecary) to another system, calculations of dosage within one system, calculation of IV flow rates, and calculation of pediatric drug dosages.

3. Review general guidelines for administration of medications.

4. Review the BON guidelines regarding medication administration, specifically Rule 217.11 (C), and (N).

****

Students shall adhere to the following guidelines when assigned to the medication cart:

1. **Students shall follow the BON guidelines and basic principles regarding medication administration. Students shall also adhere to policies of the clinical facility when administering medications.**

2. Check for any medications discrepancies as instructed by the clinical instructor.

3. Check appropriate serum drug levels prior to administration of medication for ranges of therapeutic levels and intervene appropriately.

4. Write on the MAR, with a licensed nurse, the times the medications are to be administered on your shift (if this is not computer-generated.)

5. Sign your name and initials in the signature area on the medication profile, if applicable.

6. Ascertain insulin dosages and times (most are given in the morning between 7 - 7:30 a.m.) Be sure to check blood sugars and take appropriate action prior to insulin administration. Always have a licensed nurse watch you prepare insulin and ask a 2nd licensed nurse to check the prepared dose.

7. Prior to the administration of any anti-hypertensive drug, obtain a current blood pressure reading and chart the reading on the MAR above the time that the drug is to be administered.

8. Prior to the administration of any digitalis preparations or thyroid preparations, obtain an apical pulse (pulses by palpation are not acceptable) and chart the pulse rate on the MAR according to facility policy.

9. Immediately following the administration of a medication, document according to agency policy. Medications should NOT be documented as given prior to administration.

10. Indicate on the MAR the initial dose (ID) of a new medication, if appropriate for your facility.

11. One time / non-recurring medication orders are to be charted as designated by the facility on the MAR and in the nurse's notes.

12. STAT drug orders must be indicated as such on the MAR and in the nurse's notes.

13. Intravenous fluids: Main line solutions are charted in the IV area on the medication profile or other appropriate areas as indicated by the agency.

14. Piggyback solutions are charted with the other recurring or non-recurring medications depending upon the situation.

15. When any ordered medication is withheld, document according to the policies of the clinical facility. Chart in the nurse's notes the reason for not administering the medication. Report medications that are held to the primary nurse responsible for the patient.

16. The Primary Nurse and the clinical instructor should be notified, in a timely manner, of any variation from the MAR and / or changes in the patient's condition (need for pain medication, abnormal VS, etc.)

17. Review the following formulas for calculations:

Within the same system:

$$\frac{\text{Desired Dose}}{\text{Dose on Hand}} \times \text{Volume}$$

Child's wt. in kilo:

Child's wt. in pounds.
2.2 X manufacturer's recommended dose per kilo

IV Calculations:

$$\text{cc's / hr.} = \frac{\text{Total volume}}{\text{Number in hour's}} \qquad \text{gtts/min} = \frac{\text{total volume x gtt factor}}{\text{number in minutes}}$$

GUIDELINES FOR MEDICATION ADMINISTRATION

Nursing students shall adhere to the following guidelines when administering medications to patients in affiliating clinical agencies. **NO STUDENT IS ALLOWED TO ADMINISTER MEDICATIONS INDEPENDENTLY AT ANY TIME. MEDICATION MAY ONLY BE ADMINISTERED WITH CLINICAL INSTRUCTOR OR LICENSED NURSE PRESENT.**

1. Before administering medications with a licensed nurse present, students must be observed a minimum of three times by program faculty, or supervisor designated by the faculty, when administering medications by the following routes.
   a. oral
   b. topical
   c. rectal
   d. parenteral (sub q, intradermal, intramuscular)

Students must demonstrate minimal proficiency in the calculation of dosages and the administration of medications as determined by the faculty. All students demonstrating minimal proficiency will be allowed to administer the above medications **with supervision.**

2. Student must, without exception, have a licensed / registered nurse check the following medications for proper drug and dosage prior to administration:
   a. insulin
   b. anticoagulants
   c. all fractional does
   d. any dose requiring calculation
   e. all drugs that are to be administered to pediatric patients

   *** No drugs may be given by the student in the Labor and Delivery area prior to or during the birth process.**

3. After successful guided practice, students may be allowed to participate in IV therapy under the supervision of the program faculty. Areas of practice may include: a. regulation of flow rate by both manual and mechanical means, b. computation of correct flow rates, c. hanging main-line intravenous solutions, d. changing main-line intravenous tubing, e. preparing, changing, and administering drugs by piggyback method of maintenance, f. infusion sites, g. discontinuing infusions

4. The following drugs may not be administered via the intravenous route (IV) by the student Vocational Nurse:
   a. insulin
   b. all anti-coagulant agents
   c. all adrenergic drugs
   c.1. Intropin
   c.2. Isuprel
   c.3. Levophed, etc.
   d. other cardiovascular drugs
      - Lidocaine
      - Inderal, etc.
      - Verapamil

e. Aminophylline
f. All Antihypertensive agents
g. Versed, etc.
h. Dilantin
i. Pitocin

5. Students may not administer the following IV drugs:
   a.a magnesium sulfate
   a.b chemotherapeutic agents
   a.c. hypertonic intravenous solutions
   a.d. blood or any blood product (RhoGam, ProCrit)

6. Students may not perform any procedures related to central lines (no flushes, dressing changes, etc.)

7. Students must demonstrate an understanding of the basic principles of pharmacology and the need for attention to detail and to safely administer medications. Students should use two patient identifiers prior to administering medications.

WITHOUT EXCEPTION: The student must have knowledge of each drug before it is administered to the patient.

8. Students shall be aware of any patient allergies.

9. Students shall immediately notify program faculty and primary nurse of any medication error and complete an occurrence/incident report with the assistance of a faculty member or preceptor.

10. Student may <u>not</u> administer any medications via the intravenous push method without a member of the program faculty.

11. In the acute care setting, medications must be administered within 30 minutes of the ordered time for administration. New medications must be administered within a reasonable time frame after the physician writes the new order.

12. Students shall demonstrate aseptic technique in the administration of all parenteral drugs.

13. STUDENTS SHALL NOT TAKE VERBAL OR WRITTEN MEDICATION ORDERS FROM THE NURSE.

14. Students shall adhere to the policies and procedures of the affiliated agency and of the Vocational Nursing Program of Weatherford College when administering medications.

15. Students who, by their behavior, demonstrate inadequate competence in medication administration shall be subject to disciplinary action, failing clinical grade, and possible dismissal from the program. Inadequate competency shall be demonstrated by, but not limited to, the following:
    a. **repeated medication errors**
    b. **inability to compute drug dosages,**
    c. **failure to notify the instructor of a medication error or omission**
    d. **failure to follow the above guidelines**
    e. **failure to administer drugs in a safe manner**
    f. **failure to follow instructions in the administration of medications**

g. **inability to properly administer medications following the Six Rights**
h. **Administering (or attempting to administer) medication without knowledge of the drugs uses, actions, side effects, and nursing implications.**

Refer to Incident Categories under “General Procedures” for additional information**.**

OBSERVATIONS TO REPORT TO THE CHARGE NURSE / INSTRUCTOR

1. Observe closely and accurately, and report promptly to your clinical instructor, who will help determine if the primary nurse in charge of your patient should be notified.

2. All symptoms: Noted by the patient or observed but for which no complaint is voiced

3. Abnormal vital signs or a change in vital signs / abnormal vital signs: Temperature, pulse, respirations, and blood pressure

4. Change in general appearance: Weak, depressed, apathetic, apprehensive, or hysterical

5. Change in skin color: Sudden pallor, yellowish flushing, cyanosis, or blotching

6. Abnormal respirations: Difficult breathing (dyspnea), rapid respiration, gasping, inability to breathe except when sitting or standing erect, or painful breathing

7. Breath: Unpleasant, foul, sweet or fruity odor, or smell of alcohol

8. Cough: Exhausting, harsh, tight, dry, hacking, painful, or wheezing. If productive, report quantity, color (rusty, green, bloody), or thick / mucoid

9. Dizziness: Any loss of balance, complaint of dizziness, or faintness

10. Nausea or vomiting: Self-induced by patient, projectile (with force projection), color (Bloody, coffee-ground color, greenish), and consistency (liquid or undigested food)

11. Convulsions: Time, duration, intermittent or continuous, mild or violent, generalized or limited to one part of the body

12. Delirium: Continuous or intermittent, rambling of ideas or one persistent idea, coma or unconscious or failure to respond

13. Chills: Time and duration, severity of chill (violent or shivering), temperature at time chill is completed, and temperature 30 minutes after chill is completed

14. Crying: Fretful, sharp, whining, or moaning. Give reason, if known

15. Discharges: Unusual body discharge, location and type (bloody, mucous, pus, or clear)

16. Swelling: (Edema) location—generalized or local, color change accompanying swelling

17. Skin condition: Dryness, scales, rash, hives, blotching, boils, itching, reddened areas, bruises, abrasions, bedsores, or open raw areas

18. Abdomen: Distended, hard, rigid, painful, or tender, unable to auscultate bowel sounds.

19. Eyes: Bloodshot, dull, yellowish color, anxious, inflammation, watery and tearing, sensitive to light, twitching, pupils contracted, dilated or unequal, constant involuntary movement of eyeballs, or fixed look

20. Appetite: Loss of appetite, failure to eat a meal (may be diabetic), eating of additional foods while on a restricted diet, and difficulty the patient may have swallowing, chewing or feeding himself/herself. Always report I&O appropriately.

21. Accidents or incidents: Time, witness(es), observations of injury, and cause or suspected cause or bruises / abrasions

22. Sleep: Moaning, restless, sleep inability or short interval sleeping

23. Oral hygiene: Lost or broken dentures or bridgework, mouth sores, tenderness, or bleeding gums

24. Physical activities: Failure of ambulatory patient to get out of bed or refusal to walk or exercise

25. Bowel: Diarrhea, stool of unusual color (clay or black with blood), hard-formed stool, failure to defecate or variation from his/her normal established bowel habits

26. Urine: Unusual odor, color, cloudy or bloody, change in output or failure to void, catheter drainage system not draining adequate amounts

27. Bath: Failure to have bath or other routine nursing care for which you are responsible

28. Personality change: Irritable, depressed, anxious, hostile, combative, inappropriate laughter or crying, or withdrawn

LABOR AND DELIVERY CLINICAL OBSERVATIONS

Student: _____Date: _____

Patient's Initials: _____ Date of Admission: _____ Date of Delivery: _____

Marital Status M W D S Occupation: _____ Education Level: _____

Gravida: _____ Para: _____ Living Children: _____ AB: _____

EDC: _____ LMP: _____ Childbirth Classes: _____

Rubella Immunization: _____ STDs: _____

Past Medical History: Major illnesses, surgeries or hospitalizations: _____

_____

_____

_____

Prenatal Care: Date started: _____ Comments: _____

_____

_____

Brief Description of Labor: _____

_____

_____

Medication / Treatments Used During Labor: _____

_____

Type of Delivery: _____

Analgesia / Anesthesia Used: _____

_____

Weatherford College Vocational Nursing Program

Student Information Sheet

Clinical Lab Levels I, II, III Student Information Sheet

Student Name: _____

Address: _____

Home Phone Number: _____

Cell Phone or other contact number: _____

Email Address: _____

Emergency Contact Name and Phone Number: _____

_____

CPR Expiration Date: _____ Date of TB: _____

Health Insurance Expiration Date: _____

Allergies: _____

Latex Allergy: _____

*List any medical needs that would possibly require emergency medical attention while in the clinical setting? (Seizure disorder, diabetes pregnancy, etc.):

_____

*Will you require any type of accommodation or medical assistance while in the clinical setting?

If yes, please describe: _____

_____

Work experience or experience with being in contact with the public: _____

_____

Concerns or questions concerning the clinical experience:

Information Sheet for Medical Diagnosis

(Use this paper as the Master to make copies.)

Disorder / Disease: _____

Description / Etiology:

Signs / Symptoms:

Usual Medical Treatment (possible meds? surgery? etc.):

Nursing Interventions:

Weatherford College
Health and Human Science Division
General Procedures
Revised 2024

Social Networking Guidelines

Social media can have a significant impact on the reputations of those who use them. This includes not only individuals, but the organizations they represent. Students must be mindful that anything they post on a social media site may be seen by anyone. Therefore, inappropriate postings about other students, faculty, college policies, actions or decisions could be the ***basis for disciplinary action including termination from the program***. Furthermore, the discussion of patient information through any of these venues is a **violation of patient confidentiality and HIPAA**. You have rights afforded by state and federal law but be aware that not everything you say, or post online is protected. False, defamatory, harassing, or intimidating postings are not protected free speech.

The College recognizes many students chose to participate on social networking sites. Students are reminded to use caution when posting on sites. Future employers and supervisors may have access to these internet pages, comments and photographs which may be perceived as derogatory thus impacting employment opportunities. Students are reminded not to post photographs from clinical and laboratory settings as this is considered a breach of confidentiality. Comments that may be construed as negative/derogatory concerning the College and/or clinical site experiences, operations or patients may negatively impact student status and any reference to these is strictly prohibited.

Weatherford College Health and Human Sciences Division
Caring for Patients in Isolation

1. Students should avoid contact with all patients in isolation if there is doubt about the medical diagnosis (inconclusive diagnostic tests or unknown results).

2. Students may care for patients in isolation if there is a definitive diagnosis, the patient is not diagnosed or suspected to have a **Category A** pathogen, and with instructor/preceptor approval.

3. Students should notify his/her clinical instructor immediately if a patient with a **Category A** pathogen (or one that has a *possible* diagnosis of **Category A** pathogen) is on the unit to which the student is assigned.

    a. **Category A** pathogens are those organisms/biological agents that pose the highest risk to national security and public health because they:
    b. -can be easily disseminated or transmitted from person to person
    c. -result in high mortality rates and have the potential for major public
        i. health impact
    d. -might cause public panic and social disruption
    e. -require special action for public health preparedness

    f. Examples of **Category A** diseases/pathogens are: anthrax, botulism, Dengue, Ebola, and Marburg

4. Students should notify his/her clinical instructor if he/she has had exposure to anyone with a **Category A** pathogen, whether through travel to a foreign country or a visiting family member or friend.

www.niaid.nih.gov

Weatherford College
Health & Human Sciences Division

PROCEDURE STATEMENT

Title: PROGRAM-TO-PROGRAM TRANSFER

Purpose:

To establish guidelines for the regulation of students who desire to transfer within Health and Human Sciences Division of Weatherford College.

Statement:

A. A student, enrolled in a Weatherford College Health and Human Sciences Program, may transfer to another Weatherford College Health and Human Sciences Program under the following circumstances:

1. The student is in good standing, and
2. The student has withdrawn from a program while in good standing, and
3. The student is not on probation for a non-academic issue. and
4. The student obtains a letter of recommendation from the prior Health and Human Sciences program director.
5. The student must meet the requirements of the program to which they are transferring and receives acceptance from the respective program director.

B. Any student who requests to transfer into another Weatherford College Health and Human Sciences program must meet all the specific admissions requirements for that program. Prior admission into a Weatherford College Health and Human Sciences Program does not guarantee admission into another program.

Weatherford College Health and Human Science Division
Alcohol/Substance Testing Procedure

If the student attends any program-related activity and is suspected of being under the influence of alcohol or drugs (including prescription drugs), the student must submit to a specified 10-panel urine or blood screen and blood alcohol testing at his/her own expense. Failure to submit to the screen will result in dismissal from the program.

Suspicion of impairment includes <u>but is not limited to</u> the following:

- Behavioral abnormalities
  - Euphoria
  - Excitation
  - Drowsiness
  - Disorientation
- Altered motor skills
- Poor perception of time and distance
- Drunken behavior with or without odor
- Constricted or dilated pupils
- Altered respiration

Students suspected of being impaired will remain at the school or clinical site until the Program Director or designee makes arrangements for the student to be transported to a predetermined laboratory for screening. The student is responsible for all costs related to the transport and screening. The drug screen must be performed at a specified site promptly. Students who refuse to follow program directives and /or refuse to submit to a drug/alcohol screening will be immediately dismissed from the program. In addition, students will not be allowed to leave the classroom or clinical site without being transported by a responsible adult (excluding Weatherford College faculty). Students who choose to leave without a school-supervised transport or a responsible adult transport will be reported to law enforcement. The student will not be allowed to participate in program-related activities until the results from the tests are complete. Absences will be accrued during this time period.

If a student is involved in an inaccurate Schedule II/Schedule III controlled substance count at a clinical facility during a clinical rotation, the student will also be subject to submission of drug screening at the student's expense.

The following represents values that are to be considered "positive" for alcohol impairment:

Urine specimen 0.02%
Blood specimen 0.01%

Any value higher than 0.00% will be considered positive for any other drug.

If a student's test results are positive, they will be dismissed from their respective program and will not be reinstated to that program or any other Health and Human Sciences Program at Weatherford College. If the student's test results are negative, the accrued absences related to the specific incidence will be dismissed, and the student will suffer no punitive consequences.

This drug testing is not being undertaken for any law enforcement purpose in order to avoid the more stringent requirements of the Fourth Amendment associated with law enforcement-related searches.

Weatherford College Health and Human Science Division
Leave of Absence Policy

A leave of absence may be considered when a student is absent for more than 5 clinical days or 5 class/lab days within a semester. A leave of absence may include, but is not limited to, emergency medical reasons, pregnancy, jury duty, or military leave. The student is required to notify the program director of the leave of absence before the expected leave, and official documentation must be submitted for program documentation. If the leave of absence is due to an unexpected injury/accident, notification of the incident must be communicated to the program director within 48 hours by either the student or a family member, and documentation must be submitted as soon as possible, but no later than the first day of the student's return. Each leave of absence will be handled on a case-by-case basis, and clinical hours/assignments will be made up at the discretion of the program director; however, some absences may result in the inability of the student to progress in the respective program. The possibility of readmission with the following cohort may be considered.

In cases of pregnancy, childbirth, false pregnancy, termination of pregnancy, or recovery from any of these conditions, the college will provide students with "reasonable adjustments" that may be necessary due to the pregnancy.

Weatherford College

Health & Human Sciences Division

PROCEDURE STATEMENT

Procedure Title: RELIGIOUS HOLY DAYS

Procedure Purpose:

To establish guidelines to allow student utilization of Religious Holy Days

Procedure Statement:

A. In accordance with state law HB 256, Texas Education Code §51.911, Weatherford College Health and Human Sciences programs shall allow an excused absence to students for the observance of a "religious holy day," defined as a holy day observed by a religion whose places of worship are exempt from property taxation under section 11.20, Tax Code.

B. A student shall be excused from attending classes, or other required activities, including examinations, for the observance of a religious holy day, including travel for that purpose. A student whose absence is excused under this provision may not be penalized for that absence and shall be allowed to take an examination or complete an assignment within a reasonable time after the absence.

C. A student who is excused under this section may not be penalized for the absence, but the instructor may appropriately respond if the student fails to satisfactorily complete the assignment or examination. The following conditions apply:

Education Code 51.911

1. The notification is in writing, either delivered personally with receipt of the notification acknowledged and dated by the instructor, or by certified mail-return receipt requested.
2. Assignments or examinations missed during the absence will be completed within a reasonable amount of time as determined by the program director.

Additional Guidelines:

1. It is a day of obligation generally requiring followers of the faith to miss class/work.
2. The date occurs on, or includes a weekday (dates that occur when classes do not meet are not included).
3. Days of religious observance falling on semester breaks or on scheduled college holidays are not included.

Sources:
Texas A & M Student Rule 7, Appendix IV, revised 2005
Tarrant County College Handbook
SUMMARY OF ENACTMENTS--78th LEGISLATURE-Texas

Incident Categories

Section I

Any student committing any Section I offense will be subject to disciplinary action, up to, and including immediate removal from the program. Section I offenses include but are not limited to.

a. Falsification, incomplete, and/or alteration of patient, facility, student, college, or publisher records, as well as websites for resource materials.
b. Representing self as any person other than a WC Health & Human Sciences student to gain access to secured resources intended for instructor uses.
c. Participating in any form of conduct that is fraudulent, defamatory, or creates a conflict of interest.
d. Participating in illegal or unethical acts.
e. Utilizing any resources, including but not limited to study guides, test banks, and/or exam related material without the consent of WC Health & Human Sciences faculty.
f. Theft of personal, college, or facility property
g. Insubordination or failure to follow direct orders or assignments of program faculty or designated supervisor that has the potential for or results in harm to the patient.
h. Failure to adhere to any written policies and/or procedures of Weatherford College or any affiliated clinical agencies that has the potential for or results in harm to the patient.
i. Being under the influence of illegal drugs and/or alcohol during any program-related situation or bringing said substances into the facility or consuming these substances while on facility property. Students are subject to drug screening for just cause and at the student's expense (See Alcohol/Substance Testing Procedure)
j. Demonstrating noticeable physical and/or cognitive impairment due to substance misuse while participating in any school sponsored event.
k. Any unauthorized release of patient-related information or photocopying of patient records. Confidentiality must be maintained at all times in accordance with HIPAA regulations.
l. Failure to demonstrate the ability to function as a team member in class or clinical.
m. Failure to render a minimal, safe standard of care; or unethical patient care, as determined by the program faculty.
n. Involvement in illegal drug use or any of the following:
    1. Felony convictions/deferred adjudications
    2. Misdemeanor convictions or felony deferred adjudications involving crimes against persons (physical or sexual abuse), illegal use or distribution of drugs.
    3. Misdemeanor convictions or deferred adjudications related to moral turpitude (prostitution, public lewdness/exposure, theft under $1,500, computer crimes of fraud, etc.)
    4. Felony deferred adjudications for the sale, possession, distribution, or transfer of narcotics or controlled substances.
    5. Registered sex offenders
    6. OIG, GSA, OFAC, and Medicaid Sanctions
    7. U.S. Terrorist suspected list
    8. Pending charges and warrants for arrest.
o. Disruptive or abusive behavior on or off campus during college related activities.
    1. Use of foul language.
    2. Inappropriate display of anger
    3. Verbal, mental, or physical abuse including sexual harassment.
p. Representing self as Health and Human Sciences student, in clinical facilities/activities when not involved in school sponsored activities.
q. Entering a clinical facility during unapproved hours representing self as a Weatherford College Health and Human Science student.
r. Giving medications or conducting diagnostic testing without consent of instructor/preceptor and/or without a physician order
s. Accepting gifts from clients or families
t. Failure to follow program specific clinical absence policy (no call, no show)
u. Academic dishonesty including cheating, collusion or plagiarism.

v. A verbal act or physical act of aggression against another person on facility or college premises
w. Deliberate destruction or damage to facility, college, patient, student, visitor or employee property
x. Commits patient and/or clinical assignment abandonment by leaving or being unavailable to your assigned area or facility during clinical time without authorization of the educational coordinator or preceptor at the clinical site and a faculty member in the Weatherford College Health and Human Science Division (according to program specific guidelines)
y. Expulsion from the clinical site due to unprofessional, unethical, or egregious behavior.

Section II

Any student committing any Section II offense will be subject to the following disciplinary considerations.

- 1st incident – probation
- 2nd incident – dismissal from the respective program

Section II offenses include, but are not limited to:

a. Causing damage to college, clinical facility, or patient property through negligence
b. Causing injury or potential harm to a patient, staff, visitor, peer, or instructor through negligence
c. Insubordination or refusal to obey an order (not resulting in harm to a patient)
d. Removal from the clinical site at the request of the clinical site personnel, with the possibility of transfer to another site

Section III

Any student committing any Section III offense will be subject to the following disciplinary considerations.

- 1st offense – Written reprimand
- 2nd incident – Probation
- 3rd incident – Dismissal from the respective program

Section III offenses include but are not limited to:

a. Leaving or being unavailable to your assigned area or facility during clinical time without authorization of the educational coordinator or preceptor at the clinical site and a faculty member in the Weatherford College Health and Human Science Division (not resulting in patient and/or job abandonment)
b. Substantiated complaint from any clinical site or college faculty of inappropriate/unprofessional behavior or appearance
c. Failure to follow Weatherford College Health and Human Science, respective programmatic policy or clinical facility rules or policies (not resulting in patient harm)
d. Failure to report an absence from clinical rotations in the proper manner (other than no call no show)
e. Failure to comply with written or verbal instructions pertaining to hospital onboarding policy/procedures.
f. Failure of a student to maintain personal hygiene and/or dress code.
g. Failure to follow the appropriate chain of communication.

Weatherford College Health and Human Sciences reserves the right to define additional Section I, II, and III offences on a case-by-case basis as determined HHS Program Directors and the Dean of Health and Human Sciences.

ALL OFFENSES ARE CUMULATIVE THROUGHOUT THE PROGRAM

APPEAL PROCEDURE

A student may appeal an Incident Form action to the Program Director. If the student is not satisfied with the decision, he/she may initiate an appeal through the instructional chain of command (Divisional Dean) and/or the Student Appeals Committee. This process will be facilitated by the Program Director.

WEATHERFORD COLLEGE HEALTH AND HUMAN SCIENCE DIVISION
INCIDENT FORM

During the _____ program it is important that serious problems be documented. This form must be placed in the student's file within 10 business days of the incident.

Student Name _____

Student ID # _____

Date of Incident _____ Location _____

Description of Events/Disciplinary Action

Signature of person filing report _____ Date _____

Category of Incident: _____ I _____ II _____ III

THIS SECTION FOR COLLEGE USE ONLY

Incident appealed: Yes _____ No_____

If yes, attach results of appeal and the action taken by the college to this sheet.

Student Signature _____ Date_____

Program Director Signature _____ Date_____

Medical Director _____ Date_____

(If incident involves patient care)

TECHNICAL PROGRAM GRIEVANCES

Student issues related to technical program academic or disciplinary responses will route to the program area's instructional dean, who shall function as the vice president's designee in these matters. When the dean's intervention does not resolve concerns, the appeal will route to the Student Appeals Committee.

APPEALS PROCEDURE

College policy dictates that a student subjected to academic or disciplinary response may appeal the ruling before the Student Appeals Committee. If dissatisfied with the judgment of the Appeals Committee, the student, complainant, or the administrative officer of the College may appeal to the College President for a disposition of the case.

STUDENT APPEALS

Students have the right to a fair hearing. Procedural requirements are not as formal as those existing in the civil or criminal courts of law. Weatherford College will follow the procedures listed below to ensure fairness to all.

APPEALS COMMITTEE:

In cases where the accused student disputes the facts and/or penalties upon which the charges are based, the Student Appeals Committee shall hear such charges. The Student Appeals Committee will be comprised of three faculty representatives, one Student Services Administrator, one Student Advisor, and one student government representative. When appropriate, the appeals committee will include one or more branch campus/education center representatives. The committee shall preside over a fair hearing for the student and the institution's administration. Counsel may represent the student and the institution at the appeals.

NOTICE:

The appeals committee shall notify the accused student by letter, telephone, or email of the appeals date, time, and location. Unless the student and the appeals committee otherwise agree, the appeals shall take place within seven class days after the letter's date. If the student has been suspended, the appeals shall take place as soon as possible.

CONTENTS OF THE NOTICE: The notice shall:

1. Direct the student to appear at a specified time, date, and location.
2. Advise the student of their rights:
   - To be represented by counsel at the appeals
   - To call witnesses, request copies of evidence in the district's possession, and offer evidence on their behalf
   - To have the appeals recorded verbatim and have a stenographic digest made of the recording
   - To ask questions of each witness who testifies against the student
3. Contain the names of witnesses who will testify against the student and a description of documentation and other evidence that will be offered against the student
4. Contain a copy or description of the complaint in sufficient detail to enable the student to prepare their defense against the charges
5. State the proposed consequences or range of consequences that may be imposed.

FAILURE TO APPEAR FOR HEARING:
Except in cases of a student charged with failing to comply with College authority, no student may be found to have violated programmatic rules/regulations solely because the student failed to appear before a disciplinary body. In all cases, the information supporting the charges shall be presented and considered.

HEARING PROCEDURE:
The appeal shall proceed as follows:

1. The appeal chairperson shall read the complaint.
2. The appeal chairperson shall inform the student of their rights.
3. The designated official or representative shall present the institution's case.
4. The student or representative shall present their defense.
5. The designated official or representative shall present rebuttal evidence.
6. The designated official or representative shall summarize and argue the institution's case.
7. The student or representative shall summarize and argue their case.
8. The designated official or representative shall have an opportunity for a rebuttal argument.
9. The hearing committee may take the matter under advisement for 24 hours before rendering a decision unless more time is needed to conduct further investigation, as determined by the committee chair. The decision shall be made by a majority vote.
10. The decision shall be communicated to the student in writing within 15 business days of the hearing.
11. The appeal Chairperson may approve deviation to an appeal proceeding if it does not alter the hearing's fundamental fairness.

EVIDENCE:
Evidence shall be handled according to the following:

1. Legal rules of evidence do not apply; the appeal chairperson may admit evidence that is commonly accepted by reasonable persons in the conduct of their affairs. The appeal chairperson may exclude irrelevant, immaterial, and unduly repetitious evidence.
2. At the appeal, the College District shall be required to provide evidence that the charges are accurate.
3. A student may not be compelled to testify.
4. The appeal committee shall decide the issue and determine an appropriate penalty, when indicated, solely based on the hearing evidence.
5. A tape recording shall be made of the appeal. Committee deliberations will not be recorded. A stenographic digest of the recording shall be made at the student's expense if needed for an appeal. The student may request and shall be given provided a copy of the digest. A student defendant or their representative may listen to the tape recording and compare it with the digest. At their expense, a student may have a stenographer present at the hearing to make a stenographic transcript of the hearing.

DECISION:
The appeals committee shall render a written decision as to the accused student's guilt or innocence of the charges. The committee may either uphold the prior determination or alter it, in total or part, at its discretion. If the committee finds the student guilty, it shall include facts in support of its decision. The Vice President of Academics and Student Services or designee shall administer the penalty if any.

PETITION TO THE COLLEGE PRESIDENT

Within ten College District business days of receiving notice of the appeal committee's decision, a student may petition in writing the College President to review the decision. The student's petition shall state with particularity why the decision is believed to be incorrect. After receiving notice of the appeal, the appeals committee chairperson shall forward all evidence considered during the hearing, the audio recording of the hearing, and the digest of the hearing, if applicable, to the College President.

The College President shall hold a conference with ten College District business days after the appeal notice is filed. At the conference, the student may provide information concerning any documents or data referenced by the committee. The College President may set reasonable time limits for the conference. The conference shall be audio recorded.

The College President shall provide the student with a written response, stating the basis for the President's decision, within ten College District business days following the conference. In reaching a decision, the College President may consider the evidence included in the student's petition, provided during the conference, and forwarded by the committee chairperson. The College President may affirm, modify, remand, or reverse the appeals committee's decision.

If the College President affirmed or modified the appeals committee's decision or if the time for a response has expired, the student may appeal the decision to the College Board of Trustees. The appeal notice must be filed in writing, on a form provided by the College District, within ten College District business days after receipt of the College President's written response, or, if no response was received, within ten College District business days of the response deadline.

EXPULSION HEARING

If the Vice President of Academics and Student Services or designee determines that the student's misconduct warrants expulsion [see Charges and Hearings, above], the Board shall convene to conduct an expulsion hearing. The College President or designee shall inform the student of the date, time, and place of the Board meeting at which the appeal will be on the agenda for presentation to the Board. The notice shall contain the contents described at Appeals Committee—Contents of Notice, above.

The College President or designee shall provide the Board the documentation presented by the College President.

The Board shall proceed according to the procedures set out at Appeals Committee—Failure to Appear for Hearing, Appeals Procedure, and Evidence, above. In an appeal to the Board of Trustees, the Board shall be understood to serve as the committee, and the presiding officer of the Board substituted for the committee chairperson.

HEARING RECORDS:

The disciplinary records and proceedings shall be kept confidential and separate from the student's academic record.

Descriptive Study of Safe Student Reports (SSR) of Student Nurse Practice Errors and Near Misses in Prelicensure Nursing Programs

12/13/2017

Principal Investigator:

Nancy Spector, PhD, RN
National Council of State Boards of Nursing (NCSBN)
111 East Wacker Drive, Suite 2900 Chicago, IL 60601
Direct Line: (312) 525-3647
Main Phone: (312) 525-3600
Fax: (312) 279-1032 Fax
Email: nspector@ncsbn.org

Proposal for the Safe Student Reporting Tool

Background

Through the National Council of State Boards of Nursing's (NCSBN's) Center for Regulatory Excellence, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN, from the University of Minnesota, received a grant to study and pilot a tracking system (the Generating Reports about Safe Student Practice or GRaSSP tool[1]) for reporting student nurse errors. There is no precedent, either nationally, internationally or in other health care professions, for tracking student errors on an ongoing basis. With preventable medical errors being associated with between 210,000 and 400,000 premature deaths annually in the U.S. (James, 2013), it is crucial to understand the magnitude of errors and near misses in all health care situations in order to learn how to prevent them in the future. Further, safety science calls for transparency in reporting

1 Drs. Disch and Barnsteiner, and the University of Minnesota have signed over the legal rights to the GRaSSP tool to NCSBN. The tool has been rebranded and is now called the Safe Student Reports (SSR) tool, and it will be referred to that in the rest of this proposal.

errors and near misses so that we can identify and correct system errors (Barnsteiner & Disch, 2012; Disch & Barnsteiner, 2014; Institute of Medicine, 2001).

Literature Review

There is little available research on the type or extent of student nurse errors in the U.S. (Disch & Barnsteiner, 2014; Hes, Gaunt, & Gissinger, 2016) or internationally (Ozturk et al., 2017; ReidSearl, Moxham, & Happell, 2010). Of the data that is available, most focuses solely on medication errors (Disch & Barnsteiner, 2014; Harding & Petrick, 2008; Hes et al., 2016; Reid-Searl et al., 2010; Wolf, Hicks, & Serembus, 2006). However, one study by Currie et al. (2009) conducted with post baccalaureate nursing students in the first year of their advanced practice registered nurse program reported errors other than medication errors related to the following: infection, environmental, fall, and equipment issues. Noland and Carmack (2015) suggested that nursing students may not gain sufficient experience in the transparent communication of errors through their education. Nursing students acknowledged the importance of error reporting but admitted they frequently did not report errors. Fear of negative repercussions from faculty and peers may affect nursing students' decision to report errors (Disch, Barnsteiner, Connor, & Brogren, 2017; Natan, Sharon, Mahajna, & Mahajna, 2017). Additionally, Disch et al. (2017) suggested that a culture of underreporting might occur in part due to the fear that public knowledge of student errors may affect the status of clinical site agreements between nursing programs and clinical sites.

Individual programs that have independently developed safety-reporting tools have seen positive results in the facilitation of error communication and the removal of barriers to reporting, and have reported success in creating a culture of transparency and patient safety (Cooper, 2013; Disch & Barnsteiner, 2014; Penn, 2014). Disch & Barnsteiner (2014) recommend that nursing programs and educators collect and analyze error and near miss data in order to assist in developing and implementing processes that will potentially decrease future errors and near misses.

Disch et al. (2017) conducted a national study including nursing schools (N = 494) across 48 states to determine the existence of policies and tools for nursing student error and near miss reporting. The researchers found that a majority (55%) of schools did not have a reporting tool for errors and near misses and most schools reported they did not have either a written policy (50%) or consistent standard (17%) for addressing student errors and near misses. The results suggest a residual need for policies, tools, and consistent approaches for managing errors and near misses involving student nurses. A faculty member at one of the participating schools commented "A repository and a tracking tool could help faculty and students anticipate vulnerabilities in the system and in their human response to it" (p. 30).

Objective of Study

To obtain baseline information from prelicensure nursing programs on the extent and types of student nurse practice errors and near misses in order to develop methods to reduce or prevent them.

Methods Study Design

This will be a descriptive study to evaluate the extent and types of student nurse practice errors and near misses in prelicensure nursing programs.

Reporting Tool

The SSR reporting tool was developed to provide data on the nature and frequency of student errors and near misses. The design was meant to provide an anonymous online platform where faculty (or students and faculty together or students and their preceptors) could report errors in detail, in a manner that allowed analysis of practice gaps but still promoted a just culture.

The tool was piloted at the University of Minnesota in 2013 (Disch & Barnsteiner, 2014). The pilot program showed that both student and faculty users had a positive response to the tool and found it robust enough to capture a wide array of incidents in a number of settings. User-suggested changes were implemented after the pilot to improve ease of use.

Disch and Barnsteiner (2014) stressed the importance of creating a national data repository of nursing student errors and near misses in order to develop interventions to reduce them. Thus, Disch and Barnsteiner approached NCSBN in spring of 2015 about housing the final, validated version of the tool and becoming the national repository for nursing student error data. The Regulatory Innovations Department at NCSBN held discussions with Disch and Barnsteiner about validating the final tool. One major change in the tool was made and agreed upon by all parties: In the pilot students were permitted to enter errors or near misses into the tool independently; it was agreed, however, that the NCSBN offering of the tool would require that errors or near misses be reported by faculty, a dyad of student and faculty, or other personnel such as a clinical preceptor. This was a crucial issue for nursing regulation because it would promote transparency of error reporting.

Additionally, Regulatory Innovations sent a survey to a sample of nurse educators to determine if there was interest in using the tool. While Disch and Barnsteiner reported that there was a lot of interest in nursing programs using the SSR tool, NCSBN believed it was important to confirm this prior to implementing the project. Of 376 nursing dean/director responses to the question about their willingness to use the SSR tool, 92% were either likely to use the tool or wanted to learn more about it before making the decision, while 8% reported they were unlikely to use the tool.

The Information Technology (IT) Department at NCSBN integrated the SSR tool into a database similar to the one used by the original researchers. With the acquisition of the SSR reporting tool, NCSBN will have developed the only national repository for student error reporting. Unlike other systems that only collect medication errors made by students (Hes et al., 2016), this tool will collect different types of errors or near misses (See Appendix A – New Occurrence Worksheet). Similar to other national databases that NCSBN maintains, the SSR tool will be a source of aggregate data on student nurse errors and near misses on an ongoing basis, filling an important knowledge gap in nursing research. The use of analysis tools to critically evaluate patient safety incidents has been shown to assist in identifying areas for improvement and prevention of future errors

(Dolansky, Druschel, Helba & Courtney, 2013; Valdez, de Guzman, & Escolar-Chua, 2013).

NCSBN will make the SSR tool widely available to nursing programs, providing a predeveloped resource for promoting a culture of communication among the programs' students.
The tool will be housed at the domain, www.safestudentreports.com.

Study Sample Selection

A convenience sample will be used for this study.

Inclusion criteria:

1) Any prelicensure nursing education program including LPN/VN, ADN, Diploma, BSN, Second-degree BSN/Accelerated BSN, Masters Entry

2) Any error or near miss committed/omitted by a student nurse enrolled in any prelicensure nursing education program participating in the study

Exclusion criteria:

Any post-licensure nursing education program, which includes RN-BSN, Masters, PhD, and DNP programs.

Procedure

NCSBN will send letters (Appendix B – SSR Letter to Nursing Programs) and brochures (Appendix C – SSR Brochure) to all U.S. Prelicensure programs inviting them to participate. Telephone calls (Appendix D – Follow up Telephone Script) will be made to the deans and directors of the nursing programs to follow up on their interest in participating in the study. A study website, www.safestudentreports.com, was developed to house the secure database/data collection tool and provide basic information about the research study to nursing education programs. The NCSBN website also has a webpage, www.ncsbn.org/ssr, dedicated to providing details about the research study to the public. Additionally, brochures will be distributed at national and regional nursing conferences and advertisements will be printed in newspapers, organizational newsletters, and social media (such as Twitter and Facebook) and be discussed on informational webinars to advertise the study (Appendix E – General Ad). Participation in error reporting to the SSR tool will be on a voluntary, per-institution basis. Interested nursing education programs will be asked to complete an application (Appendix F – SSR Study Application) in order to verify that the program is an eligible program. Once eligibility is confirmed, the nursing program will be enrolled and that program will receive a unique user ID, which will be distributed to authorized users (faculty, preceptors, and student/faculty dyads) for error reporting. NCSBN will train participating nursing education programs on the use of the

web-based database and manage daily activities related to data collection. Prior to each error/near miss entry, a study participant will be presented with an online study participant information sheet (Appendix G – Study Participant Information Sheet) to review study information including information about the Certificate of Confidentiality. After reviewing the online information sheet, the study participant can choose to continue to the survey or end without starting the survey by clicking on the "Cancel" button. If the study participant chooses to participate and proceed with the survey (See Appendix A for survey questions), the study participant can continue by entering data, clicking on the "I agree to the terms of the Study Participant Information Sheet" box to confirm he/she has reviewed the information sheet, and click on the "Submit" button.

Using the web-based tool on www.safestudentreports.com, nursing education programs will be able to generate confidential reports of data reported from their own programs. NCSBN will report aggregate data to all participating nursing education programs twice yearly in order for programs to compare their data with national statistics. Identifying information of the nursing programs will not be shared with other participating nursing programs or the public.

After one-year of data collection, an external advisory panel consisting of representatives from nursing education, patient safety organizations and boards of nursing (BONs) will be convened to analyze the aggregate data and to make recommendations for the future.

Data Collection and Handling

Data Collection

All data will be entered into a web-based data collection and reporting system, www.safestudentreports.com.

Potential Risks and Benefits

There is a potential risk of loss of confidentiality. Every effort will be made to keep all study records confidential. The data will be entered directly by the study participants into a password protected online data collection system with a secure server.

Study participants may not experience any direct benefit from participating in the study but the knowledge gained from this study might help improve identification and correction of system errors in the institution or areas in the nursing education program that should be revised (e.g., additional content on needle sticks).

Nursing programs will be able to analyze student errors within their own programs, compare them to aggregate data from other nursing programs, identify system issues, and make changes to improve patient safety and student nurse performance.

NCSBN will offer the use of the SSR reporting tool free of charge.

Confidentiality

Every effort will be made to keep all data collected from faculty, preceptors, and/or students of nursing education programs confidential. In order to assist in protecting the confidentiality of study participants, NCSBN and the principal investigator plans to apply for a Certificate of
Confidentiality from the National Institute of Nursing Research at the National Institutes of Health. The research team will use this Certificate of Confidentiality to legally refuse to disclose information that may identify study participants in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings, for example, if there is a court subpoena. The research team will use the Certificate to resist any demands for information that would identify any study participants, except as explained below.

The Certificate does not prevent the study participant or a member of his/her family from voluntarily releasing information about himself/herself or the study participant's involvement in this research.
NCSBN retains the ability to use all aggregate information collected prior to any revocation of authorization. Any public reporting of data by NCSBN will be done in the aggregate and specific institutional data will not be reported, and this will be made clear to all the participating nursing programs, faculty, preceptors, and students.

IRB Monitoring Plan

In order to protect the rights of the study participants, approval to conduct the study will be requested via review by the Western Institutional Review Board (WIRB). The study will undergo continuous IRB monitoring as required by WIRB policy.

Data Analysis Plan

Descriptive statistics will be used since the primary objective of this study is to establish a baseline repository of data related to student nurse practice errors and near misses that have not been collected before. The data will be reported in aggregate to nursing programs twice yearly in order for them to use for comparison to their own program.

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NCSBN
National Council of State Boards of Nursing

111 E. Wacker Drive, Suite 2900
Chicago, IL 60601-4277

312.525.3600
www.ncsbn.org

[Date]

Dear Deans and Directors:

The National Council of State Boards of Nursing (NCSBN) would like to invite your program to participate in a new study involving the collection of nursing student errors and near misses. In 2013 NCSBN awarded one of our Center for Regulatory Excellence (CRE) grants to two researchers, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN. These researchers developed an innovative reporting and tracking tool, Safe Student Reports (SSR), for nursing student errors and near misses. Nothing like this exists in the health professions, nor outside the U.S. NCSBN is now making it available to schools of nursing free of charge through participation in a research study. Here are the benefits your program will receive, at no cost to you:

- Reports about the numbers and types of errors and near misses that occur in your program–only your program will see these reports;
- Ability to analyze data related to student errors and near misses;
- Quarterly reports from NCSBN about the aggregate numbers and types of errors and near misses so that you can compare them with your program reports;
- Collaborate with a network of colleagues who are interested in patient safety and just culture in schools of nursing.

Nursing is the first health care discipline to provide educators with a database where they can collect and analyze their students' errors and near misses and compare them to other participating nursing schools.

If your program is interested in participating in the SSR study, you can contact me at ssr@ncsbn.org.

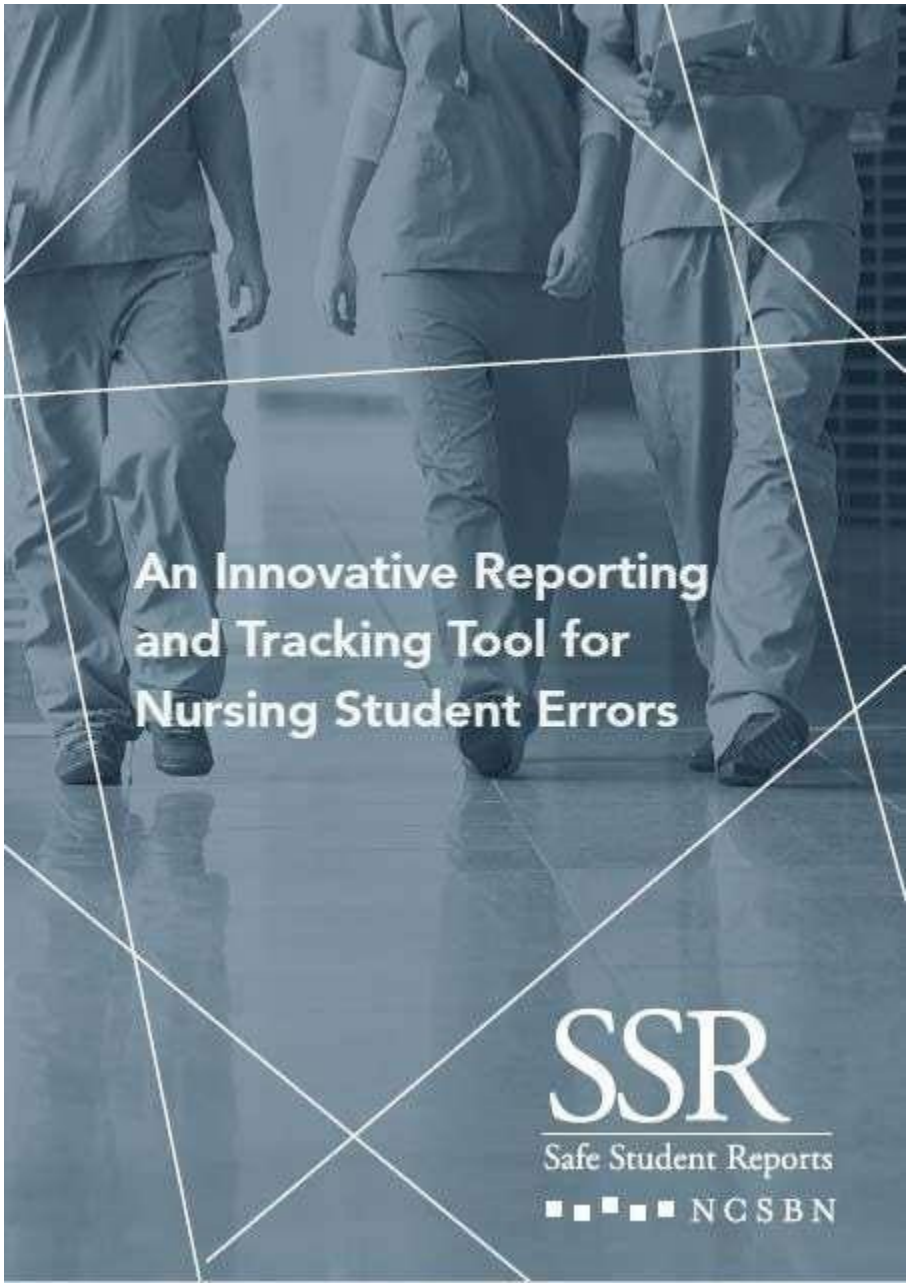
We look forward to working with you and your students.

Sincerely,

Nancy Spector, PhD, RN, FAAN

Nancy Spector, PhD, RN, FAAN

Version 12.13.2017



Page 1 of Brochure

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SSR

Safe Student Reports

A National Web-based Network for Anonymous Reporting of Student Errors and Near Misses

Prelicensure nursing schools are invited to participate in this research study at the National Council of State Boards of Nursing (NCSBN).

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Nursing is the first health care discipline to provide educators with a database that collects and analyzes their students' errors and near misses and compares them to other participating nursing schools.

For more details visit www.ncsbn.org/ssr.

Prelicensure nursing schools interested in obtaining a detailed study proposal can contact the principal investigator, Nancy Spector, PhD, RN, FAAN, at ssr@ncsbn.org.

[For the informational webinar, details of the study as described in the SSR proposal will be discussed. Additionally, the original developers of the database, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN, will be invited to discuss their experience with developing the database, conducting the original pilot study, and continuing work with student nurse errors as described in the following list of journal articles (click on the hyperlinks below to access the articles):

Barnsteiner, J., & Disch, J. (2017). Creating a fair and just culture in schools of nursing. *AJN, 117*(11), 42-48.

Disch, J., & Barnsteiner, J. (2014). Developing a Reporting and Tracking Tool for Nursing Student Errors and Near Misses. *Journal of Nursing Regulation, 5*(1), 4-10.

Disch, J., Barnsteiner, J., Connor, S., & Brogren, F. (2017). Exploring how nursing schools handle student errors and near misses. *AJN, 117*(10), 24-31.]

SSR
Safe Student Reports

SAFE STUDENT REPORTS STUDY APPLICATION

APPLICANT CONTACT INFORMATION		
Name:		Title:
Phone:	Fax:	Email:
NURSING PROGRAM INFORMATION		
Name of Nursing Program:		
Mailing address:		
City:	State:	Postal Code:
SIGNATURE		
Signature of applicant:		Date:

Study Participant Information

Sponsor: National Council of State Boards of Nursing (NCSBN)

Protocol Title: Multi-Institutional, Descriptive Study of Safe Student Reports (SSR) of Student Nurse Practice Errors and Near Misses in Prelicensure Nursing Programs

Investigator: Nancy Spector, PhD, RN, FAAN

You are being asked to participate in a research study that will try to collect information on the extent and types of student nurse practice errors and near misses in order to develop methods to reduce or prevent them.

Your participation will involve completing a survey about errors/near misses that you or your student committed/omitted and take about 10-20 minutes to complete.

There is a potential risk of loss of confidentiality. Every effort will be made to keep all study records confidential. In order to assist in protecting your confidentiality, the principal investigator is applying for a Certificate of Confidentiality from the National Institutes of Health – National Institute of Nursing Research. [If a Certificate of Confidentiality is approved, the prior sentence will be replaced by the following "In order to assist in protecting your confidentiality, the principal investigator has obtained a Certificate of Confidentiality from the National Institutes of Health – National Institute of Nursing Research."] The research team will use the Certificate to resist any demands for information that would identify you and any other study participants, except as explained below. The research team may not disclose or use information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other action, suit, or proceeding, or be used as evidence, for example, if there is a court subpoena, unless you have consented for this use. Information protected by this Certificate cannot be disclosed to anyone else who is not connected with the research except, if there is a federal, state, or local law that requires disclosure (such as to report child abuse or communicable diseases). You should understand that a Certificate does not prevent you or a member of your family from voluntarily releasing information about yourself or your involvement in this study.

The research team will share the records generated from this research with the sponsor (NCSBN and its membership), the National Institutes of Health – National Institute of Nursing Research, and regulatory agencies such as the IRB. This information is shared so the study can be conducted and properly monitored. Additionally, the sponsor may report aggregate data to the public but data specific to any individual institution or study participant will not be reported. If you do not provide permission to use your information, for the purposes of reporting aggregate data to the other participating nursing programs and publication, you cannot be in the study.

This permission will not end unless you cancel it. You may cancel it by sending written notice to the study investigator as noted below. Any information collected before you withdraw may still be used.

Your decision to be in this study is voluntary. You will not be penalized if you decide not to participate or if you decide to stop participating.

You may not receive a direct benefit if you agree to participate. However, the information obtained from this study might help improve identification and correction of system errors that might benefit others in the future.

Your alternative is to not participate in this study.

Contact Nancy Spector at 312-525-3657 or nspector@ncsbn.org for questions, concerns or complaints about the study or if you think you have been harmed as a result of joining this study. Contact the Western Institutional Review Board (WIRB) if you have questions about your rights as a study participant, concerns, complaints or input: 1-800-562-4789. WIRB is a group of people who perform independent review of research.

NCSBN
Leading Regulatory Excellence

SSR
Safe Student Reports

Safe Student Reports (SSR) Research Study

A National Web-based Network for Anonymous Reporting of Student Errors and Near Misses

Prelicensure nursing schools are invited to participate in this research study at the National Council of State Boards of Nursing (NCSBN). In 2013, NCSBN awarded a Center for Regulatory Excellence (CRE) grant to two researchers, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN. They developed an innovative reporting and tracking tool for nursing student errors and near misses. Nothing like this exists in the health professions, nor outside the U.S. NCSBN is now making it available to schools of nursing free of charge through participation in a research study.

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- Reports about the numbers and types of errors and near misses that occur in your program – only your program will see these reports;
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- The opportunity to collaborate with a network of colleagues who are interested in patient safety and just culture in schools of nursing.

Nursing is the first health care discipline to provide educators with a database that collects and analyzes their students' errors and near misses and compares them to other participating nursing schools.

Prelicensure nursing schools that are interested in participating in the SSR initiative must first complete the application.

Trac Prac Responsibilities and Expectations Policy

Purpose

To create a valid and reliable process of evaluating student performance in the clinical area

Frequency of Evaluations

A TracPrac® electronic formative evaluation must be completed for each clinical day for each student.

Rationale*: Students have very few clinical days in the nursing program and require a comprehensive review of their clinical performance to identify areas for improvement. Additionally, daily evaluations will more quickly recognize concerning behaviors so that they can be addressed promptly.*

One digital form per semester for each student will include all clinical days, including simulation evaluations.

Rationale: *One electronic file can be printed and/or stored electronically so that all evaluations are contained in a single document*

Timeliness of Evaluations

Each formative evaluation should be completed within 24-hours of the clinical day, with few exceptions.

Rationale: *(1) Students deserve a timely review of their performance. (2) As time passes, the clinical instructor will be less likely to provide a detailed account of each student's performance. (3) Often, students will be attending a simulation or lab day soon after a clinical day, and the evaluations will no longer be sequential to show continuous progression towards a satisfactory performance*.

Responsibilities of the Clinical Educator

• The clinical educator is responsible for obtaining training (online or in person) for the proper use of TracPrac. If additional one-on-one training is required, the clinical educator must notify the lead faculty or clinical coordinator to make arrangements.

• The clinical educator must complete his/her own evaluation of each student based on the performance.

Educators may not record an evaluation for another clinical faculty.

• At the end of each rotation, the clinical educator must confirm that the student has received one evaluation for each day of clinical experience.

Responsibilities of the Classroom Educator, Lead Faculty, or Chair

• Provide training (online or in person) on the proper use of TracPrac®, and its policies and expectations.

Responsibilities of the Student

• To acknowledge each clinical evaluation before the next clinical day. Students not acknowledging their evaluation before the next clinical/simulation day should be issued a "Needs Improvement/Progressing" grade for Professionalism.

• To notify the clinical educator or classroom educator if there is a concern about the accuracy of information within the electronic evaluation. To log in and out of Trac Prac at the clinical site using the GPS and site map as instructed during Trac Prac orientation, given in the first week of school. Students must also tie two Essential Competencies per day in a formative note explaining which skill they used to meet the chosen competency.

The summative tool adopted by Vocational Nursing Faculty is the Mechanism and verbiage used to evaluate and show student progression utilizing a structured framework.

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Summative Evaluation – Narrative Verbiage Samples

Competency	Satisfactory Improvement	Needs Improvement	Unsatisfactory	Not Observed
Patient-Centered Care	• Care is delivered in a kind and caring manor. • _____ was able to include family in the client teaching and care. • _____ was able to demonstrate problem solving skills in the care of clients. • Provided priority-based care to clients throughout the shift.	• _____ could improve his/her caring nature by being more aware of non-verbal mannerism when communicating with the client and family. • _____ could improve cultural competence by addressing the specific dietary preferences of the client. • _____ could improve care by including the family when offering medication instructions. • _____ could improve care by showing more consistency in the delivery of care each clinical day.	**Requires the initiating of a Learning Contract**	**This should be rarely used. The role of the clinical instructor is to observe student performance.**
Professionalism	• _____ demonstrated professionalism in communicating with the health care provider. • _____ demonstrated the legal standards of his/her role as a student nurse. Consistently • applied the role of the professional nurse throughout the shift. Professional behaviors • are within the scope of practice.	• _____ could improve in the area of professionalism by increasing awareness of how his/her passive nature is perceived by others. • _____ could improve in consistently differentiating between the role of the UAP, LVN, and RN.		
Leadership	• _____ demonstrates leadership in his/her ability to make patient-centered suggestions for care to the nurse. • _____ delegated basic care to another member of the health care team.	• _____ could improve in the area of leadership by increasing awareness of how his/her passive nature is perceived by others. • _____ could improve delegation skills by better utilizing the full potential of each health care team member.		

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		• Required prompting to delegate when appropriate and safe.		
System-Based Practice	• _____ demonstrated understanding of micro/macro systems when identifying _____. • _____ suggested the including of a dietary consult appropriately.	• _____ could improve care by performing hand-off report when the client is transferred to surgery under the care of another department.		
Informatics and Technology	• _____ demonstrated the use of the EHR and bar code system safely.	• _____ could improve knowledge by assisting with the use of technology equipment rather than observing.		

Communication	• ____ communicates assertively and professionally with the health care team. • ____ communicates assertively and professionally with the client and family.	• _____ could improve his/her communication skills by prioritizing available information and sharing it with the staff nurse and/or clinical instructor in a timelier manner.		
Teamwork and Collaboration	• ____ Functions and a contributing health care team member. • ____ communicates patient findings and events to the health care team in a timely manner.	• _____ could improve his/her role as a team member by becoming actively involved in the care. • _____ could improve teamwork by clearly communicating with the patient's changing needs once identified.		
Safety	• ____ provided safe, competent care, seeking assistance when appropriate. • ____ reviewed the agency policy manual prior to skill performance.	• _____ could improve the technique of (_____) by practicing in the lab and thereby decreasing his/her anxiety in the clinical setting.		
Quality Improvement	• ____ identified the need for _____ within the agency and brought it to the attention of the charge nurse.	• _____ could improve the identification of quality improvement need by consciously reflecting each shift about systems that need improvement and sharing it with others.		

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Evidence-Based Practice	• ____ was able to perform _____ using evidence-based practices. • ____ identified and reviewed unit resources and policies when delivering care.	• _____ could improve by establishing the resources of best-practices that are available on the unit.		

How Instructors judge progression	Novice Doesn't Yet See Picture	Advanced Beginner Sees Part of the Picture	Competent Sees the Basic Picture	Proficient Sees the Big Picture
Patient assessment	Performs assessment with guidance/prompts	Distinguishes between abnormal and normal assessment findings	Recognizes changes in patient condition, appropriate health team reports to the member, intervenes appropriately and reassess	Classifies relative importance of multiple assessment findings over time
History gathering	Recalls questions for basic history data with guidance/prompts	Discriminates between normal and abnormal history data	Utilizes knowledge of pathophysiology to guide history taking and assessment	Includes past medical history to develop comparison with current condition
Patient teaching	Seeks guidance to answer patient/family questions	Explains procedures to the patient/family	Rephrases medical information into lay terms for patient/family as it meets language and cultural variations	Modifies patient teaching based on patient/family response and learning barriers
Laboratory data and diagnostics	Reports laboratory data	Distinguishes between normal and abnormal laboratory data/diagnostic studies	Identifies the relationship of lab data, medications and pathophysiology and how it relates to the care of the patient	Analyzes trends in laboratory values; compares with patient response
Nursing interventions	Performs simple, basic nursing care with prompts	Identifies active patient problem(s) but needs help in selecting intervention(s)	Implements appropriate routine nursing intervention(s) and evaluates effect; may delegate	Implements appropriate nursing intervention plan in timely manner; consistently delegates

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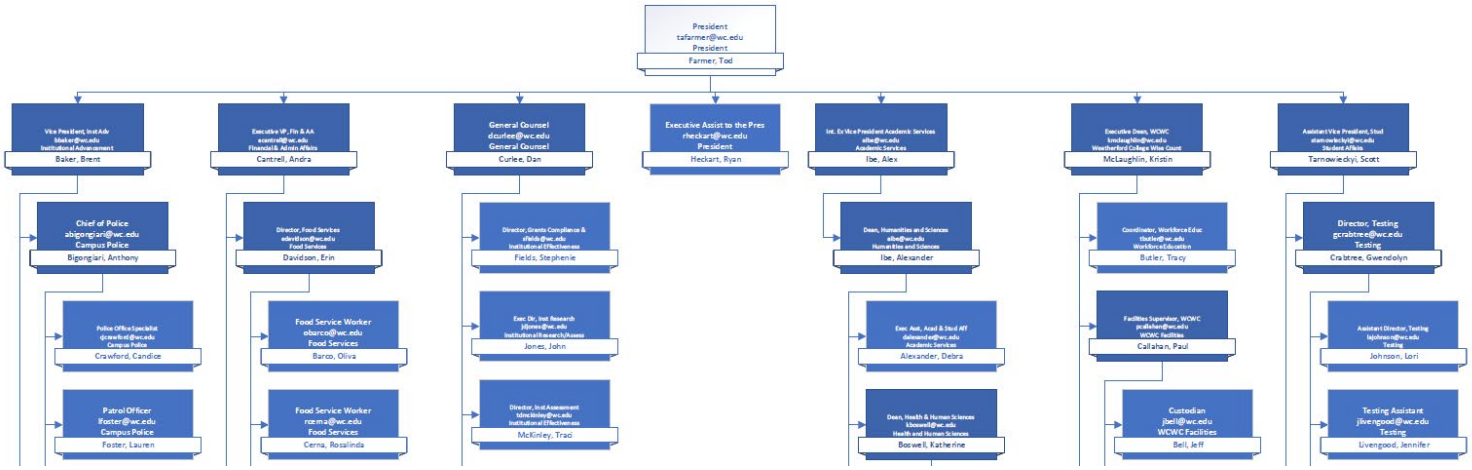
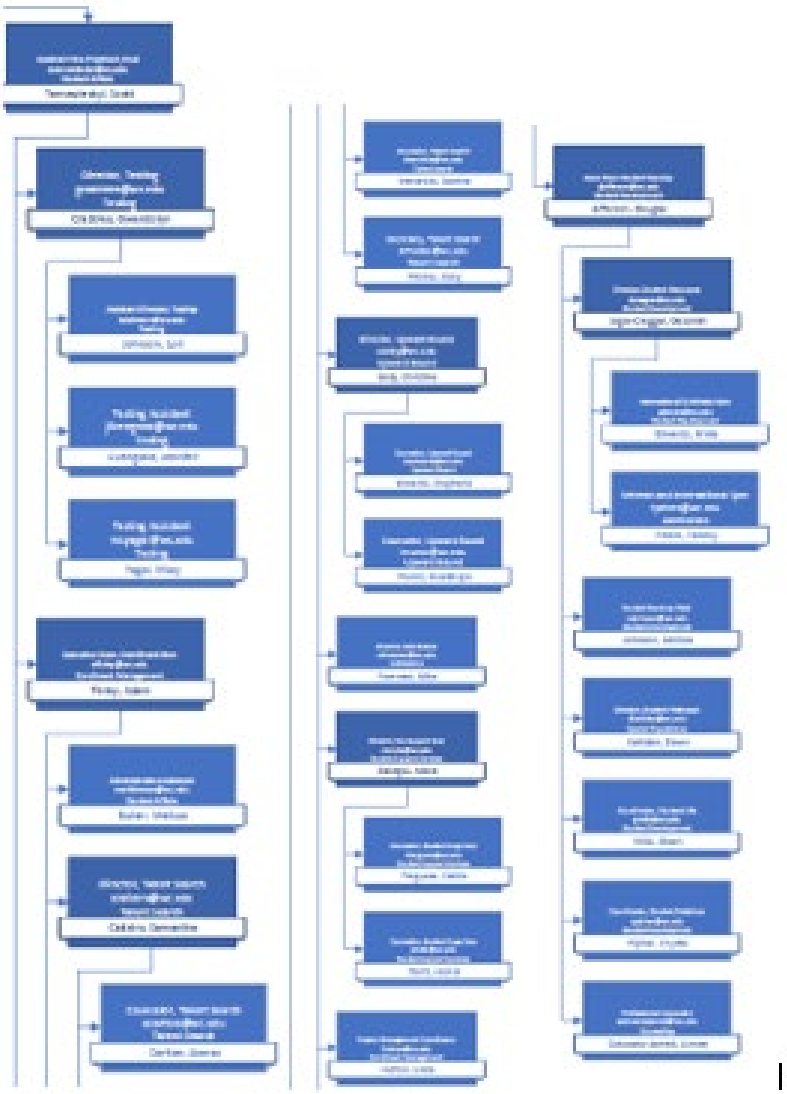
Clinical judgment	Recalls norms in patient condition	Recognizes variations in patient condition but needs help prioritizing; may access resources	Determines priorities in patient care based on varying patient condition; accesses appropriate resources	Carries out care while managing multiple contingencies in concert with healthcare team members
Communication	Repeats basic information with prompting for documentation and/or report to physician and colleagues	Summarizes available information for documentation and discussion with colleagues and/or physician; may use standardized approach	Prioritizes available information for documentation and discussion with colleagues and/or physician; uses standardized form for handoff/report, such as SBAR	Draws conclusions based on available information for documentation and discussion with colleagues and/or physician; uses standardized form for handoff/report
Safety	Uses > 2 identifiers and actively incorporates patient, environment, and procedural safety standards of care. Employs universal precautions, recognizes unsafe equipment or situation and corrects.	Uses > 2 identifiers and actively incorporates patient, environment, and procedural safety standards of care. Employs universal precautions, recognizes unsafe equipment or situation and corrects.	Uses > 2 identifiers and actively incorporates patient, environment, and procedural safety standards of care. Employs universal precautions, recognizes unsafe equipment or situation and corrects.	Uses > 2 identifiers and actively incorporates patient, environment, and procedural safety standards of care. Employs universal precautions, recognizes unsafe equipment or situation and corrects.

Weatherford College Board of Administration Organizational Chart 2026



Student Services Organizational Chart



Health and Humanities Organizational Charts