

**MISSOULA COLLEGE  
ASN REGISTERED NURSING PROGRAM**



**STUDENT HANDBOOK  
FALL 2023**

*Updated 6/6/23*

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# Introduction and Welcome from the Director

On behalf of the faculty and staff of the Missoula College Nursing Program I would like to extend a warm welcome. We are very excited you are here for the Associate of Science in Nursing Program (ASN). You are taking the first steps on a fantastic journey that will be both challenging and rewarding. The nursing faculty are highly qualified to lead you on this journey and to mentor you along the way. Our mission is to create a supportive environment where you can learn the appropriate didactic theory and hands-on skills needed for success as a Registered Nurse. Upon graduation from this program, you will be qualified to sit for the NCLEX-RN (National Council Licensure Examination for Registered Nurses). When the NCLEX-RN is passed successfully, you are granted an RN license and the world of nursing practice will be open to you!

The nursing faculty work hard to offer you real-world examples of nursing practice while ensuring you retain the necessary didactic theory needed to be a successful RN. Our faculty have a combined experience of over 100 years of nursing practice! You will be learning from instructors who currently practice nursing in their area of expertise. We believe this up-to-date practice is incredibly valuable to our students.

Teamwork and collaboration is also very important in healthcare. The Missoula College ASN program offers you a unique opportunity to learn about collaboration with other members of the healthcare team. The nursing instructors work with the faculty of Missoula College's other healthcare programs (Respiratory Care, Radiological Technology, Surgical Technology, and Paramedicine) to offer live simulations of real-world scenarios. Nursing and Allied Health students are able to practice their roles in a safe, simulated environment.

We offer a state-of-the art simulation lab which allows students to practice high-stakes exercises in a safe environment. Instructor-led debriefings after simulation exercises give the entire class the opportunity to learn from the scenarios. The faculty value lab time and are dedicated to working with students until skills are perfected.

This handbook has been carefully compiled to assist you in settling into your role as a student as quickly as possible so that you are able to make the most of your learning experience in our ASN program. It has been created with two objectives:

- To provide clear and thorough guidelines and to serve as a practical, helpful resource during your student experience at Missoula College. The information that you will find in these pages is updated each semester to promote accuracy of information for student use and guidance.
- To inform students of the rules and regulations of classroom, lab, clinical and professional expectations.

In the event a change is made to this handbook, notification will be placed on the MC website and Moodle. Student ambassadors will also be notified, and announcements will be posted on the student information bulletin board located in the Nursing Lab (MC116). This handbook is also available on the MC website electronically.

On behalf of the staff at Missoula College, we welcome you and congratulate you on taking your first step toward that coveted RN license!

Linda Barnes MSN, RN, CNE  
Nursing Program Director  
Missoula College of University of Montana

## Academic Calendar – Fall 2023

Thursday, August 24.....New Nursing Student Orientation

Monday, August 28.....Fall Semester Classes Begin

Monday, September 4 .....Labor Day– No Classes, Offices Closed

Friday, November 10 ..... Veterans Day – No Classes, Offices Closed

Wednesday, November 22 .....Travel Day -- No Classes, Offices Closed

Thursday/Friday Nov. 23/24.....Thanksgiving Holiday, No Classes, Offices Closed

Friday, December 8 .....Last Day of Regular Classes

Monday-Friday, Dec. 11-15 ..... Finals Week

Saturday, December 16 ..... Fall Commencement

# Nursing Faculty and Staff

## Fall 2023 Contact Information

### Nursing Program Faculty:

**Kayleigh Anderson MSN, APRN**

Adjunct Faculty

Office: MC 309 / Office Phone: none

UM Email: [kayleigh1.anderson@umontana.edu](mailto:kayleigh1.anderson@umontana.edu)

Alternate Email: [allonsy.mt@gmail.com](mailto:allonsy.mt@gmail.com)

**Wendy Barker MSN, RNC**

Associate Professor

Office: MC 304 / Office Phone: 406-243-7827

Office Email: [wendy.barker@umontana.edu](mailto:wendy.barker@umontana.edu)

**Tami Caton**

Adjunct Faculty

Office: MC 309

Office Email: [tami.caton@umontana.edu](mailto:tami.caton@umontana.edu)

**Izak Godoy BSN, RN, CMSRN**

Assistant Professor

Office: MC 303

Office Email: [izak.godoy@umontana.edu](mailto:izak.godoy@umontana.edu)

**Ginger Sillars MSN, RN**

Associate Professor

Office: MC 305 / Office Phone: 406-243-7863

Office Email: [ginger.sillars@umontana.edu](mailto:ginger.sillars@umontana.edu)

### Nursing Administration Office:

**Linda Barnes MSN, RN, CNE**

Nursing Program Director, Associate Professor

Office: MC 306 / Office Phone: 406-243-7875

Work Email: [linda.barnes@umontana.edu](mailto:linda.barnes@umontana.edu)

**Robin MacMillan**

Nursing Lab Supervisor

Office: MC 310 / Office Phone: 406-243-7855

Office Email: [robin1.macmillan@umontana.edu](mailto:robin1.macmillan@umontana.edu)

**TBA**

Department Administrative Associate

Office: MC 441 / Office Phone: 406-243-7846

Office Email: TBA

### Health Professions Chairperson:

TBA

## Faculty Office Hours

Faculty office hours are posted on course syllabi, faculty office doors, and the bulletin board located in the Nursing Lab (MC116), as well as at the [Nursing Student Resources webpage](https://www.umt.edu/missoula-college-nursing/nursing-student-resources.php): (<https://www.umt.edu/missoula-college-nursing/nursing-student-resources.php>).



# Section 1 – Program

## General Description

The Associate of Science Nursing Program (ASN) at Missoula College is designed for students to progress to care of the more complex patient with less predictable outcomes. An Associate of Science RN assesses clients, formulates nursing diagnoses, and plans, implements and evaluates nursing care provided in structured healthcare settings. The ASN practices within the ethical, legal and regulatory frameworks of nursing to provide care to individuals, groups, and families. The Associate of Science Nurse works together with other members of the healthcare team to manage the human, physical, financial, and technical needs of the client.

The ASN program is approved through and by the Montana State Board of Nursing and is accredited by the Accreditation Commission for Education in Nursing (ACEN).

## Definitions of Nursing as Defined by Montana State Law

**Mont. Code Ann. § 37-8-102 (9)** "Practice of professional nursing" means the performance of services requiring substantial specialized knowledge of the biological, physical, behavioral, psychological, and sociological sciences and of nursing theory as a basis for the nursing process. The nursing process is the assessment, nursing analysis, planning, nursing intervention, and evaluation in the promotion and maintenance of health, the prevention, case finding, and management of illness, injury, or infirmity, and the restoration of optimum function. The term also includes administration, teaching, counseling, supervision, delegation, and evaluation of nursing practice and the administration of medications and treatments prescribed by physicians, naturopathic physicians, physician assistants, optometrists, advanced practice registered nurses, dentists, osteopaths, or podiatrists authorized by state law to prescribe medications and treatments. Each registered nurse is directly accountable and responsible to the consumer for the quality of nursing care rendered. As used in this subsection (9);

- (a) "nursing analysis" is the identification of those client problems for which nursing care is indicated and may include referral to medical or community resources;
- (b) "nursing intervention" is the implementation of a plan of nursing care necessary to accomplish defined goals.

## Curriculum Goals for Associate Degree Registered Nurse Programs

The Associate Degree graduate shall assess, formulate a nursing diagnosis, plan, implement, and evaluate nursing care provided in structured health care settings. The graduate will practice within the ethical, legal, and regulatory frameworks of nursing and provide care to individuals, groups, and families while utilizing a knowledge base from the natural and social sciences and humanities. The associate degree nurse works together with other members of the health care team to manage the human, physical, financial, and technical needs of the client.

# University & College Mission Statements

## Mission Statement for University of Montana - Missoula

The University of Montana--Missoula pursues academic excellence as demonstrated by the quality of curriculum and instruction, student performance, and faculty professional accomplishments. The University accomplishes this mission, in part, by providing unique educational experiences through the integration of the liberal arts, graduate study, and professional training with international and interdisciplinary emphases. The University also educates competent and humane professionals and informed, ethical, and engaged citizens of local and global communities; and provides basic and applied research, technology transfer, cultural outreach, and service benefiting the local community, region, state, nation and the world.

The University pursues fulfillment of their mission through five Core Themes that drive every aspect of its mission and vision:

1. **Partnering for Student Success** - *The University will help its students succeed academically and personally so they graduate well-prepared for their careers or further education.*
2. **Education for the Global Century** – *UM will offer an educational experience at all degree levels that provides graduates with the foundation to make positive impacts on a world that is increasingly interconnected.*
3. **Discovery and Creativity to Serve Montana and the World** – *The University will transform discovery and creativity into knowledge, applications and experiences in ways that benefit the state, region, nation and world.*
4. **Dynamic Learning Environment** – *UM will enhance its character as a place where people are passionate about learning, discovery and growth.*
5. **Planning-Assessment Continuum** – *The University will model transparency, systematic communication and sound decision-making to ensure that resources are marshaled to achieve UM's mission.*

## Missoula College of University of Montana Mission Statement

The Mission of Missoula College is to create a comprehensive, accessible, student-centered learning environment that fosters individual growth, facilitates workforce development, and provides a foundation for advanced academic achievement.

Missoula College pursues fulfillment of their mission by:

- *Creating a student-centered environment;*
- *Providing college level technical and general education learning opportunities;*
- *Facilitating development of oral and written communication skills, thus providing a foundation for advanced academic skills;*
- *Fostering individual growth through development of critical thinking and problem-solving skills;*
- *Providing the regional workforce with credentialed, skilled, and competent entry-level technicians;*
- *Responsive to emerging workforce needs;*
- *Supporting the development of ethical behavior;*

- *Encouraging students to become responsible members of a global and multicultural society;*
- *Facilitating and promoting lifelong learning.*

## **Missoula College of University of Montana Health Professions Mission Statement**

The Health Professions Department of the University of Montana seeks to prepare students to be health practitioners who are technically competent and who are effective in a variety of clinical, agency and community settings. The Health Professions Department offers four Associate of Applied Science (A.A.S.) Degrees, one Associate of Science (A.S.) Degree, and one certificate program with courses and learning experiences that contribute to understanding the health needs of individuals and society. Clinical affiliations and on-site experiences are essential elements of all programs; local communities, their agencies, and organizations are a valuable resource and provide cooperative learning experiences in health delivery systems.

Missoula College Health Professions pursues fulfillment of their mission by:

- *Providing programs of study which integrate a variety of health-related disciplines to prepare students for careers in health professions;*
- *Contributing to the liberal education of students through courses designed to provide an understanding of human health, fitness and health delivery systems;*
- *Meeting the continuing education needs of health professionals.*

## **Missoula College of University of Montana Nursing Program Mission Statement**

As the guiding principle for the Missoula College Nursing Program, the mission statement is to provide an excellent and dynamic learning environment through creative educational and clinical opportunities. This will prepare graduates for today's practice as competent and caring nurses who assist in meeting the diverse health care needs for local and global communities. The Missoula College Nursing Program pursues fulfillment of their mission through the five UM Core Themes by:

1. **Creating** a supportive environment where students are mentored by knowledgeable faculty and empowered to reach their full potential;
2. **Promoting** the development of knowledge and skills necessary for the intellectual, professional, and personal growth of students;
3. **Developing** partnerships with local and regional healthcare facilities to establish a variety of learning opportunities and provide exposure to diverse populations;
4. **Acknowledging** the necessity for lifelong learning and providing nursing education pathways to BSN or higher; and
5. **Fostering** discovery and creativity, critical thinking skills, and competencies at the associate degree nursing entry level.

## Nursing Program Outcomes

1. Licensure exam (NCLEX-RN) pass rates will be **at least 80%** for all first-time test-takers during the same 12-month period.
2. **At least eighty percent (80%)** of students admitted to the program will graduate within one year of expected graduation date.
3. **At least ninety percent (90%)** of graduates who pass the licensure exam and seek employment as an RN will report being employed.
4. **At least ninety percent (90%)** of the surveys returned by graduates will indicate they are satisfied with their education.

## ANA Code of Ethics for Nurses

Students at Missoula College UM are expected to adhere to the ANA Code of Ethics for Nurses. This requirement establishes the basis for long-term development of professional behaviors and ethical reasoning with regard to client care. Nurses are expected as professionals to provide ethically sound care to all clients regardless of circumstance. Ethics is an integral part of the foundation of nursing. Nursing has a distinguished history of concern for the welfare of the sick, injured, and vulnerable and for social justice. This concern is embodied in the provision of nursing care to individuals and the community. Nursing encompasses the prevention of illness, the alleviation of suffering, and the protection, promotion, and restoration of health in the care of individuals, families, groups, and communities. Nurses act to change those aspects of social structures that detract from health and well-being. Individuals who become nurses are expected not only to adhere to the ideals and moral norms of the profession but also to embrace them as a part of what it means to be a nurse. The ethical tradition of nursing is self-reflective, enduring, and distinctive. A code of ethics makes explicit the primary goals, values, and obligations of the profession.

### The Code of Ethics for Nurses serves the following purposes:

- It is a clear, concise statement of the ethical obligations and duties of every individual who enters the nursing profession.
- It is the professional's nonnegotiable ethical standard
- It is an expression of nursing's own understanding of its commitment to society.

Nursing students of the Missoula College UM are expected to follow the following Nursing Code of Ethics. The provisions listed below come from the [ANA's Code of Ethics for Nurses with Interpretive Statements \(2015\)](https://www.nursingworld.org/coe-view-only) (<https://www.nursingworld.org/coe-view-only>).

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## Provisions

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

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

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

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

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

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

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

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

**Provision 9.** The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

[ANA's Code of Ethics for Nurses with Interpretive Statements \(2015\)](https://www.nursingworld.org/coe-view-only)

(<https://www.nursingworld.org/coe-view-only>)

# Section 2 – Curriculum

## Nursing Program Mission

As the guiding principle for the Missoula College Nursing Program, the mission statement is to provide an excellent and dynamic learning environment through creative educational and clinical opportunities. This will prepare graduates for today's practice as competent and caring nurses who assist in meeting the diverse health care needs for local and global communities. The Missoula College Nursing Program pursues fulfillment of their mission through the five UM Core Themes by:

1. **Creating** a supportive environment where students are mentored by knowledgeable faculty and empowered to reach their full potential;
2. **Promoting** the development of knowledge and skills necessary for the intellectual, professional, and personal growth of students;
3. **Developing** partnerships with local and regional healthcare facilities to establish a variety of learning opportunities and provide exposure to diverse populations;
4. **Acknowledging** the necessity for lifelong learning and providing nursing education pathways to BSN or higher; and
5. **Fostering** discovery and creativity, critical thinking skills, and competencies at the associate degree nursing entry level.

## Nursing Program Philosophy

The nursing faculty, as an integral part of the Missoula College assumes responsibility for maintaining program philosophy and objectives which support The University of Montana and Missoula College philosophies. This includes the belief that the educational process is a dynamic, interactive process in the growth, development, welfare, and economy of the individual, and local, state, and national communities. Faculty members are dedicated to preparing excellent competent and caring nurses to provide holistic care within the scope of practice of the Associate Degree Registered Nurse (RN). The nursing process and critical judgment are the foundations for nursing practice; and these principles are emphasized throughout the curriculum. The faculty supports a nursing career ladder promoting access to multiple entry and exit points to meet the needs of a diverse population. The program also supports and assists students to meet the CAHN goal of 80% BSN nurses nationally by the year 2020. We partner with Montana Tech of the UM for the RN to BSN education transition.

## Nursing Practice

The nursing faculty believes the philosophy of the MC Nursing Program encompasses the concepts of patient centeredness, professionalism, diversity, holism, and caring. This belief is based on the conceptual framework of Virginia Henderson. The primary concept of Henderson's theory revolves around establishing relationships between nurse, patient, faculty and student. These relationships are based on assessing and understanding the individual needs while promoting optimal outcomes. Henderson professes the importance of developing the whole person, validating that the mind and body are interconnected and act as one unit, and that there must be a balance to achieve optimal independence and health for the patient and nurse (Alligood, 2013).

The nursing faculty emulates this philosophy by assisting students to advance in knowledge acquisition, responsibility and accountability through structured guidance in order to develop into increasingly competent, independent, flourishing members of the health care team caring for a diverse population.

## **Core Values**

### **Patient-Centeredness:**

Patient-centeredness refers to individuals, families, communities, and health care teams interacting collaboratively identifying personal preferences, values, traditions, and culture (NLN, p.14), in working toward the common goal of optimum health, healing and recovery with environments across the lifespan. Patient centeredness includes providing care to the patient, family and environment, assisting the patient to direct own health care.

### **Professionalism (Integrity):**

Professionalism (Integrity) refers to having a commitment to compassion, caring and strong ethical values; continuous development of self and others; accountability and responsibility for insightful practice; demonstrating a spirit of collaboration and flexibility” (Girard, Linton, & Besner, 2005, p. 3). It is participating in the advancement of self through education, knowledge, and development to practice within one’s own scope of practice. Professionalism is the utilizing specialized knowledge, derived from the biological, physical, and behavioral sciences performance of holistic patient centered care along with leadership and autonomy to make evidence-based judgment and decisions (RNAO, 2007).

### **Diversity:**

Diversity comprises internal and external contexts and processes that have an impact on people. Diversity includes physical, psychological, social, spiritual and cultural elements, as well as the conceptual space in which nursing is utilized, implemented, and evaluated. Diversity also includes historical, political, and economic conditions through which systems of care evolve. Diversity includes environments of structured and unstructured settings with common, well-defined, advanced, and/or unpredictable complexity of clients and family.

### **Holism:**

Holism is a dynamic state of physical, mental and social well-being, defined in accordance with cultural norms and goals that influence the relationships and interactions of the individual, family, and community. The primary focus is: developing a patient’s independence, through nursing care that aid, nurture and care for clients, assisting the person to reach his/her optimal health status. Health promotion and teaching methods are appropriate to the diverse needs and culture of the client, family and community in order to establish optimal health.

### **Caring:**

Evidence-based and culturally competent healthcare promoting optimal health across the lifespan. Caring for the Associate Degree Nurse is directing and providing care across settings with clear policies and procedures for clients and family, who have conditions which are common, well-defined, advanced and/or of unpredictable complexity, in collaboration with other members of the healthcare team.

## **Contributing Concepts:**

### **National League of Nursing (NLN):**

The seven core values outlined by the NLN are professional content and environment, knowledge and science, ethics, excellence, holism, integrity, and patient-centeredness (NLN, 2011, page 8).

### **American Association of Colleges of Nursing (QSEN):**

The six core competencies outlined by QSEN are: patient-centered care, teamwork and collaboration, evidence-based practice, quality improvement, informatics and safety. (IOM, 2011).

### **Center to Advance Health Care through Nursing (CAHN):**

The Institute of Medicine (IOM) report, *The Future of Nursing: Leading Change, Advancing Health*, recommendation that 80 percent of the nursing workforce be prepared at the baccalaureate level or higher by 2020 (IOM 2011).

## **Statement on Nursing Education**

Missoula College Nursing Program prepares safe, effective nursing care providers who support humankind in all phases of the health-illness continuum. Learning is a dynamic and life-long process which includes faculty/student collaboration and mentorship through supervised experiences. These experiences facilitate holistic healthcare through acquisition and application of specific knowledge, skills, and professional attitudes based upon the scope of practice of the Registered Nurse.

These beliefs are based on Jerome Bruner's Model of life-long learning. Bruner states that learning is an active process where conceptual structures are built on present and past learning (Bates & Poole, 2003). Education occurs in steps as students in the Nursing Program acquire facts and terms to assist them in identifying principles and ideas. This continues with the formulation of concepts and relationships in health care, allowing a student to use gained knowledge to enhance the quality of care and ability to use reasoning and critical judgment (Bates & Poole, 2003).

Nursing faculty supports this constructivist approach to learning by guiding, encouraging caring behaviors, and advancing knowledge in students, preparing them for life-long learning in a diverse health care system. Students are guided to grow in self-awareness, understanding of others, and sensitivity to cultural, moral, ethical, and legal issues, application of critical judgment, and the technical and interpersonal skills fundamental to the practice of nursing.

The faculty believes the associate degree graduate utilizes critical thinking and clinical decision making when functioning in the role of care provider, care manager, and member of the interdisciplinary team leading to optimal patient outcomes. The graduate is prepared to assess, formulate a nursing diagnosis, plan, implement, and evaluate nursing care provided across care settings. The graduate will practice within the ethical, legal, and regulatory frameworks of registered nursing. The RN will provide care to diverse populations while utilizing a knowledge base from the arts and sciences.

(continued on next page)



## References:

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- Girard, F., Linton, N., & Besner J, (June 2005). *Professional Practice in Nursing: A Framework*. Nursing Leadership, 18(2).
- Institute of Medicine. *The Future of Nursing: Leading Change, Advancing Health*. Washington, DC: The National Academies Press, 2011.
- RNAO International Affairs & Best Practice Guidelines Healthy Work Environments; [Professionalism in Nursing Practice \(2007\)](http://rnao.ca/bpg/guidelines/professionalism-nursing) (<http://rnao.ca/bpg/guidelines/professionalism-nursing>).
- National League for Nursing (NLN) (2012). [Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing](http://www.nln.org/professional-development-programs/competencies-for-nursing-education/nln-competencies-for-graduates-of-nursing-programs). New York, New York: NLN (<http://www.nln.org/professional-development-programs/competencies-for-nursing-education/nln-competencies-for-graduates-of-nursing-programs>)

## Regulation and Accreditation

The Associate Degree Nursing program is fully approved by the [Montana State Board of Nursing](http://boards.bsd.dli.mt.gov/nur) (<http://boards.bsd.dli.mt.gov/nur>). The Montana State Board of Nursing contact information is listed below.

- **Montana State Board of Nursing**  
Professional and Occupational Licensing Division  
301 South Park  
PO Box 200513  
Helena, MT 59620-0513  
(406) 841-2300

The Associate Degree Nursing program is also accredited by the [Accreditation Commission for Education in Nursing \(ACEN\)](http://www.acenursing.org) ([www.acenursing.org](http://www.acenursing.org)). The ASN program has been reaccredited through 2024. The ACEN contact information is listed below.

- **Accreditation Commission for Education in Nursing (ACEN)**  
3390 Peachtree Road NE, Suite 1400  
Atlanta, GA 30326  
(404) 975-5000

## Scope and Sequence of Nursing Program Curriculum

- Curriculum for Associate of Science Registered Nurse (ASN) of 73-74 Credits

### ASN Program Course Descriptions

Semester I: 18-19 Credits			
Course Number	Course Name	Credits	
BIOH 201/202	Human Anatomy and Physiology I with Lab	4	
BIOH 211/212	Human Anatomy and Physiology II with Lab	4	
CHMY 121	Introduction to General Chemistry	3-4	
CHMY 122	Introduction to General Chemistry Lab	1	
M 121	College Algebra	3	
WRIT 101	College Writing I	3	
<b>Submit Application to Nursing Program</b>			
Semester II: 11 Credits			
Course Number	Course Name	Credits	Course Description
NRSG 230	Pharmacology for Nursing	3	This course provides the student with an overview of pharmacology with an emphasis of the study of effects, interactions, and nursing considerations of pharmacologic agents on the client population across the lifespan. The course also explores the ethical, legal, cultural and age implications of pharmacologic therapy across diverse populations and the lifespan.
NRSG 231	Pharmacology for Nursing Lab	2	An integration of lab experiences focusing on the basic principles in providing safe medication administration, including intravenous therapy across diverse populations and the lifespan.
NRSG 232	Foundations of Nursing	3	This course provides opportunities to develop competencies necessary to meet the needs of individuals throughout the lifespan in a safe, legal, and ethical manner using the nursing process. Students learn concepts and skills necessary for maintaining standard precautions, physical, psychological and nutritional safety, along with skills needed in therapeutic interventions. Students are introduced to the concepts of professional nursing, patient needs, safety, communication, teaching/learning, critical thinking, ethical-legal, rural nursing, cultural and ethnic diversity, and interdisciplinary patient-centered care.
NRSG 233	Foundations of Nursing Lab	3	An integration of lab experiences focusing on psychomotor nursing skills needed to assist individuals in meeting basic human needs. Application of the nursing process and hands-on learning experiences for nursing skills, patient assessments, nutritional safety, and basic therapeutic skills are practiced and demonstrated.

**Semester III: 14-15 Credits**

<b>Course Number</b>	<b>Course Name</b>	<b>Credits</b>	<b>Course Description</b>
NRSG 256	Pathophysiology for Nursing	3	This course introduces the student to the basic principles and processes of pathophysiology including cellular communication, genes and genetic disease, forms of cellular injury, nutrition, fluid and electrolyte/acid base balance, immunity, stress coping and illness, and tumor biology. Pathophysiology of the most common alterations according to body systems will be discussed as well as the latest developments in research and patient-centered nursing interventions.
NRSG 234	Adult Nursing I	3	This course builds upon the knowledge and skills acquired in Foundations of Nursing, and places them in the context of patient-centered care. Social, cultural, ethical, rural and legal issues, end-of-life and palliative care across diverse adult populations are introduced. Health promotion and prevention throughout the adult lifespan, with specific focus on the geriatric patient, is emphasized. Normal aging, health alterations associated with aging, and their implications are addressed.
NRSG 235	Adult Nursing I Clinical	2	This clinical introduces the student to nursing practice in care of the stable adult patient. This includes care of the adult in a variety of health care settings. Students utilize the nursing process to develop individualized plans of care to prevent illness, promote wellness and maintain or restore health based on patient needs and evidence-based practice.
NRSG 236	Health and Illness of Maternal Nursing	2	In this course, the student applies holistic concepts to the professional nursing care of the childbearing family including conception, prenatal, intrapartum, postpartum and newborn care. Content addresses health and complex alterations, reproduction and menopause, nutrition, therapeutic communication, ethical, legal, cultural and evidenced-based practice.
NRSG 237	Health and Illness of Maternal Nursing Clinical	1	This clinical introduces the student to the role of the registered nurse in the care of the childbearing family. Students will utilize the nursing process to assess and develop individualized plans of care for mother and infant. Emphasis will be placed on patient education to promote healthy mother infant and childbearing family bonding.
PSYX 100S	Introduction to Psychology	3-4	Introduction to the scientific study of behavior in humans and other animals.

**Semester IV: 15 Credits**

<b>Course Number</b>	<b>Course Name</b>	<b>Credits</b>	<b>Course Description</b>
NRSG 244	Adult Nursing II	3	This course builds upon previous knowledge of the nursing process and care of the patient experiencing acute and chronic disease alterations. Pathophysiologic processes are discussed as related to evidence-based nursing interventions. Students apply the nursing process, nutritional therapy, and pharmacological therapy utilizing interdisciplinary practice to promote, maintain, and restore health across the adult lifespan.
NRSG 245	Adult Nursing II Clinical	2	In this clinical experience the student will provide care for individuals and families experiencing acute health alterations, and those associated with chronic disease processes. Students use the nursing process to systematically analyze information to plan and implement nursing interventions which are individualized and founded on evidence-based practice.
NRSG 254	Mental Health Concepts	3	In this course, the student focuses on the nursing concepts utilizing basic human needs, developmental theory, nursing process, therapeutic communication, and nursing interventions to promote and maintain health for clients and families experiencing mental-health issues. The student will examine client responses to stressors across the life span. Tasks of biological-behavioral concepts in psychosocial nursing care, rural and cultural impacts will be addressed.
NRSG 255	Mental Health Concepts Clinical	1	This clinical applies the knowledge of psychiatric and mental health nursing. Students will have mental health focused clinical experiences in a variety of settings.
NRSG 246	Health and Illness of Child and Family	2	In this course, the student applies holistic concepts to the professional nursing care of children and their families in health, illness, end-of-life and palliative care. Emphasis is placed on incorporating growth and developmental principles to facilitate positive health outcomes through health promotion, nutrition and disease prevention.
NRSG 247	Health and Illness of Child and Family Clinical	1	In this clinical, students will utilize the nursing process, to provide nursing care of healthy and high-risk pediatric populations and their families experiencing disruptions in bio/psycho/social/cultural and spiritual needs. Emphasis is also placed on health promotion, health maintenance, and therapeutic communication.
SOCI 101S	Introduction to Sociology	3	Overview of the principles and concepts used in the study of human social interaction, groups, communities and societies.

**Semester V: 14 Credits**

Course Number	Course Name	Credits	Course Description
NRSG 259	Adult Nursing III	3	This course expands on the nursing role in care of patients with complex health alterations. Students utilize evidence-based, interdisciplinary interventions to meet patient and family needs.
NRSG 260	Adult Nursing III Lab	1	In this lab students are introduced to basic electrocardiogram interpretation, advanced concepts of perfusion, ventilation and complex pharmacologic regimens.
NRSG 261	Adult Nursing III Clinical	2	This clinical experience focuses on application of the nursing process and utilization of information to provide comprehensive nursing care to the acutely ill patient experiencing complex health alterations in a variety of settings. Emphasis is placed on prioritization of care and collaboration with other members of the interdisciplinary team to ensure optimal client care.
NRSG 266	Managing Client Care for the RN	2	In this course students examine concepts of leadership and management emphasizing prioritization, delegation, and supervision of nursing care for patients across the lifespan. Topics also include communication techniques, legal and ethical issues, care of the culturally diverse patient, and utilizing change theory. Healthcare policy, finance, and regulatory environment issues are explored and applied to planning, collaborating and coordinating care across the continuum.
NRSG 267	Managing Client Care for the RN Clinical	2	This precepted clinical experience focuses on principles of nursing leadership and management in a variety of settings. Students apply knowledge to provide culturally competent, holistic interventions within the professional nursing role for individuals, communities, and families across the lifespan.
BIOL250/251	Microbiology with Lab	4	Lecture: Infectious diseases, including concepts of virulence, resistance, prevention and control of microbial diseases in the individual and in the community. Lab: Observation of live microorganisms, their characteristics and activities. Experience with microbiological techniques.

Nurses need a broad background of knowledge to succeed in their field; as a pre-nursing student at Missoula College, students take general education courses in Liberal Arts and Sciences. Students initially enroll in pre-nursing courses, must complete those 19 credits, and then apply to the Associate Science Registered Nursing Program. Application can be made when students are completing prerequisites. The Associate Science Registered Nursing coursework is four semesters long, consisting of a total of 53 credits after completing 19 credits of prerequisites.

**Students are strongly encouraged to take corequisite courses PSYX 100S Intro to Psychology, SOCI 101S Intro to Sociology, and BIOM 250/251 Microbiology with Lab) BEFORE entering the scope and sequence of the nursing courses. These courses can be taken before application along with the prerequisites in the progression of the student's choice (as long as taken within 5 years of application). We strongly believe this will set you up for SUCCESS in the ASN program.**

## End of Program Student Learning Outcomes

The Missoula College ASN program has adopted the QSEN (Quality and Safety Education in Nursing) competencies as a framework for our End of Program Student Learning Outcomes. The goal of the QSEN project is to prepare future nurses with the knowledge, skills and attitudes (KSAs) needed to improve the quality and safety of patient care. The six QSEN competencies are: Patient-Centered Care, Teamwork and Collaboration, Evidence-based Practice (EBP), Quality Improvement (QI), Safety, and Informatics. [www.QSEN.org](http://www.QSEN.org)

Upon successful completion of the Associate of Science Nursing Program, the graduate will be able to:

1. Demonstrate compassion and professionalism while delivering personalized and culturally sensitive nursing care.
2. Provide for patient safety through risk reduction and error prevention strategies.
3. Apply effective communication strategies when working with clients, families, and members of the health care team to foster an environment of mutual respect and collaborative decision-making.
4. Apply current evidence-based research to provide quality nursing care.
5. Utilize data to improve health care practices that positively impact patient outcomes.
6. Utilize information and technology to coordinate and deliver safe care.
7. Demonstrate clinical judgment within the nursing process.

# Section 3 – Admission Policies

## Admission Policy and Requirements

Admission to the Nursing Program for MC will be based on objective data and evaluation that includes the following information: Specifics of the application process are posted on the website during application session.

- Cumulative Grade Point Average (GPA) of a minimum of 2.75 (most recent 60 credits).
- Minimum of B grade in BIOH 201/202, Human Anatomy & Physiology I, and BIOH 211/212, Human Anatomy & Physiology II.
- The top 18 students are accepted to the ASN program based on the following:
  - Kaplan Nursing Entrance Exam
  - Interview
  - GPA – Pre-nursing courses only

The Application Committee has the right of final decision to accept a student to the ASN program. Specifics of the application process are posted on the [MC nursing website](https://www.umt.edu/missoula-college-nursing/) (mc.umt.edu/nursing) during application session.

Students accepted into the ASN program must have a transcript audit completed by MC and reviewed by the Nursing Program Director to assure transferability of credits and appropriate courses completed toward graduation. Didactic coursework is delivered by both the traditional classroom setting with an online component added for the blended program students. Clinicals are typically one or two days a week with variances depending on clinical site availability and instructor preference to meet program objectives.

**Changes may occur at any time and these will be posted on the [MC nursing website](https://www.umt.edu/missoula-college-nursing/)** (https://www.umt.edu/missoula-college-nursing/). For fall admission, the application period opens in mid-February with a deadline at the beginning of April; for spring admission, the application period opens in mid-September with a deadline at the beginning of November.

Students must provide official copies of all transcripts from current and previous colleges of attendance and matriculation if health core courses are transferred from other institutions of study. Prerequisite courses may only be repeated once. A Withdraw Pass (WP) or a Withdraw Fail (WF) is counted as an attempt. If the course is not successfully completed on the second attempt, the student is no longer eligible for application to the Nursing program until the first attempt becomes older than the 5 (science) and 10-year rules.

1. Applicants are required to fill out an application form. The student must download the application packet from the webpage when it is available. Dates of availability are one month prior to the application due date.
2. The number of students accepted for the ASN Registered Nursing Program will be a total of 18 each semester. Some exceptions may apply and may vary depending on clinical sites.
3. Applicants must possess certain skills and abilities in areas of intellect, sensory function, communication, fine and gross motor skills, and behaviors for admission into the nursing programs. These are found in the handbook.

4. The Nursing Program reserves the right to deny admission to any applicant based on the best interest of the profession. Failure to disclose previous or pending criminal behaviors may lead to denial of admission or revoked admission. Background checks are requirements of clinical sites. Negative background checks may preclude a student from the clinical setting which will make it impossible for the student to meet the course objectives and the student will fail the course. Falsification will be considered grounds for dismissal from the MC Nursing Program.
5. Admission to or graduation from the nursing program does not guarantee obtaining a license to practice nursing. Licensure requirements are the exclusive right and responsibility of the State Boards of Nursing regulating professional practice.
6. The Kaplan Nursing Entrance Exam test is a 165 minute, 91-question comprehensive test required of our RN program applicants and a minimum score of 65% is required to be eligible to apply to the nursing program. The test covers reading, writing, mathematics, science, and critical thinking and is offered on the Missoula College campus 3-4 times during the application period. The test is only offered online, and documented testing modifications are accommodated (i.e. extra time). Two attempts at taking the Kaplan Nursing Entrance Exam are allowed per application period. There is a 30-day waiting period to retake the exam. Please note that only the most recent attempt will be accepted.
7. All admitted students are subject to the policies of the University of Montana and the Nursing Program.
  - Policies for UM can be located in the [university course catalog](http://catalog.umt.edu/) (<http://catalog.umt.edu/>), [University Operating Policies](http://www.umt.edu/policies) ([www.umt.edu/policies](http://www.umt.edu/policies)), and in the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards) (<http://www.umt.edu/student-affairs/community-standards>).
  - Nursing policies are located in the ***Nursing Programs Policy and Procedure Manual*** located in the Nursing Director's office and on the Missoula College Nursing website under [Nursing Student Resources](https://www.umt.edu/missoula-college-nursing/nursing-student-resources.php) (<https://www.umt.edu/missoula-college-nursing/nursing-student-resources.php>).

## LPN Applicants

A Licensed Practical Nurse (your license must be current and unencumbered), may apply to the ASN program when they have taken all general education courses listed in the MC program. If the LPN graduated from a program other than Missoula College, they must have their transcript evaluated for course equivalency by the registrar.

## Transfer Policy

Students requesting transfer into MC Nursing Programs from other nursing programs are required to communicate with the Nursing Program Director to determine eligibility of transfer and have a transcript review. Students will be required to meet application requirements of MC and comply with application requirements of the MC Nursing Program.

## Readmission

If a student fails a course, they may finish the other courses of the semester, but will have to repeat the failed course. Students may be able to repeat the course the next semester or may have to reapply to the program. Each case will be evaluated on an individual basis depending on clinical availability, reason for the failure and student's successful completion of the action plan contract. Reasons for leaving based on illness or emergencies will be handled by the Nursing



Program Director on an individual basis.

## Employment During School: Considerations

Students are encouraged to carefully consider the time commitment for classes, student, family life, travel, leisure activity and other life responsibilities prior to scheduling outside employment while attending the Missoula College UM Nursing Program. Learning is best achieved when a student is prepared, rested and engaged in the process of learning. Students that must seek employment to maintain personal obligations are cautioned to consider timing of employment obligations in relation to clinical and classroom. **However, there are specific rules regarding working before clinical shifts** – please see Section 5, page 48.

## Requirements Prior to Program Start

**Failure to comply with these requirements could cause you to be removed from the program and an alternate student admitted in your place.**

In order to be prepared to begin classes, lab, and clinical, you need to follow all of the instructions and meet the deadlines listed in your Nursing Program Admission Packet, which is posted on the [Nursing Student Resources webpage](https://www.umt.edu/missoula-college-nursing/nursing-student-resources.php) (<https://www.umt.edu/missoula-college-nursing/nursing-student-resources.php>).

- Basic Life Support (BLS) for Healthcare Providers**
  - Criminal Background Check**
  - Drug Screening**
  - Immunizations / Testing**
    - COVID-19 Vaccinations
    - Hepatitis B
    - MMR (Measles, Mumps, Rubella)
    - TB (tuberculosis) Testing
    - Tdap (Tetanus, Diptheria, Pertussis)
    - Varicella
    - Flu/Influenza
  - From this Student Handbook:**
    - Nursing Handbook Student Agreement from Student Handbook Form #1
    - Confidentiality Agreement from Student Handbook Form #2
    - Social Media Quiz from Student Handbook Form #3
- OPTIONAL FORMS:
- Declination: Hepatitis B Vaccination
  - Declination: Seasonal Influenza Vaccination Statement

# Minimum Skills for Eligibility to Participate in the Nursing Program

The following skills are necessary for successful progression through the Missoula College Nursing Program. Students should be able to demonstrate these abilities with or without the use of compensatory techniques and/or assistive devices.

## Sensory Perception Skills

### Visual

- Observe and discern subtle changes in physical conditions and the environment
- Visualize different color spectrums and color changes
- Read fine print in varying levels of light
- Read for prolonged periods of time
- Read cursive writing
- Read at varying distances
- Read data/information displayed on monitors, computers and equipment

### Auditory

- Interpret monitoring devices
- Distinguish muffled sounds heard through a stethoscope
- Hear and discriminate high and low frequency sounds produced by the body and the environment
- Effectively hear to communicate with others

### Tactile

- Discern tremors, vibrations, pulses, textures, temperature, shapes, size, location and other physical characteristics

### Olfactory

- Detect body odors and odors in the environment

### Communication/ Interpersonal Relationships

- Verbally and in writing, engage in a two-way communication and interact effectively with others, from a variety of social, emotional, cultural and intellectual backgrounds
- Work effectively in groups
- Work effectively independently
- Discern and interpret nonverbal communication
- Express one's ideas and feelings clearly
- Communicate with others accurately in a timely manner
- Obtain communications from a computer

*(continued on next page)*

## **Cognitive/Critical Thinking**

- Effectively read, write, and comprehend the English language
- Consistently and dependently engage in the process of critical thinking in order to formulate and implement safe and ethical nursing decisions in a variety of health care settings
- Demonstrate satisfactory performance on written and computerized examinations, including mathematical computations without a calculator
- Satisfactorily achieve the program objectives

## **Motor Function**

- Handle small delicate equipment/objects without extraneous movement, contamination or destruction
- Move, position, turn, assist with lifting or lift and carry clients without injury to clients, self or others
- Maintain balance from any position
- Stand on both legs
- Coordinate hand/eye movements
- Push/pull heavy objects without injury to client, self or others
- Stand, bend, walk and/or sit for 6-12 hours in a clinical setting performing physical activities requiring energy without jeopardizing the safety of the client, self or others
- Function with hands free for nursing care and transporting items
- Transport self and client without the use of electrical devices
- Flex, abduct, and rotate all joints freely preventing injury to client, self or others
- Respond rapidly to emergency situations
- Maneuver small objects
- Perform daily care and functions for the client
- Coordinate fine and gross motor hand movements to provide safe effective nursing care
- Calibrate/use equipment
- Execute CPR and physical assessment
- Operate a computer

# Section 4 – Student Policies and Progression

## Nursing Program Student Policies and Procedures

1. **Timeliness:** Please be on time for class. Students must be on time to clinical. Time management is reflective of professionalism and accountability and will affect your professionalism grade & final course grade. Any unexcused absences in clinical result in a non-passing grade, therefore a non-passing grade for the course.
2. **Absences:**
  - a. If you know ahead of time you will be absent from class, please let your faculty know via phone or email. (Email is preferred). This is part of your professional grade for each class.
  - b. If you will be absent from clinical, you **must** inform the instructor and charge nurse of the assigned clinical unit two hours prior to the starting time. This is part of your professional grade for clinical. Any unexcused absences in clinical result in a non-passing grade, therefore a non-passing grade for the course.
3. **Immunizations and Testing:** Documented proof of the following must be provided by the date indicated in the acceptance letter.
  - **Criminal Background Check**
  - **10-Panel Urine Drug Screen**
  - **BLS for Health Care Providers**
  - **Immunizations**
    - **COVID-19 Vaccinations:** Documentation of completed vaccination series (Pfizer or Moderna) -or- single dose Johnson & Johnson, OR World Health Organization-approved vaccine series if received outside of the U.S. HOWEVER, pending updated information from our clinical sites, students may have to be “up-to-date,” which may include one or two boosters. Otherwise, an approved exemption must be submitted. **Exemption Process:** Students may request from Linda Barnes, Nursing Program Director, a medical or a religious exemption form. Once fully completed, the form is either approved or denied by the university, then each clinical site has the right to approve or refuse. Please know that if an exemption is approved, your ability to complete the required # of clinical hours may be affected.
    - **Hepatitis B Series (vaccinations **AND** titer):** The series of shots is 2, 3, or 4 doses depending on the manufacturer. Some people have received the series as children so will just need a titer to prove immunity. If you have not yet received the series, you will need to start this ASAP because it can take several months to complete. The titer is the final step after the vaccination series is complete. <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/hep-b.html>
      - Provide proof of your hepatitis B vaccination series (HBV) **AND** a positive titer. (Can be declined, but student must sign declination forms, indicating they understand the full health risk and are taking responsibility if HepB is contracted.)

- **MMR Series (vaccinations OR titer):** This is also a requirement to be a student at UM and most other universities. <https://www.cdc.gov/vaccines/vpd/mmr/public/>
    - Provide proof of the 2-shot series MMR (mumps, measles, rubella) vaccination.
    - **OR** a positive MMR titer. Note that if needing this, the 2-shot series MMR should be administered at least 4 weeks apart.
  - **TB (tuberculosis):** Provide proof of one of the following negative TB tests that was done in the last 12 months. If the test is positive, a chest x-ray is required. (See under How Do You Get Tested for TB? -- <https://www.cdc.gov/tb/publications/factsheets/general/tb.htm>)
    - Two negative TB skin tests that will be “read” 48-72 hours after being administered (this means 4 visits – one for each test and one for reading each of the results). The second of the two tests must be administered 7-21 after the first test.
    - **OR** a Negative Quantiferon TB blood test.
  - **Tetanus with Pertussis, i.e. Tdap:** After initial Tdap vaccine is received, a booster is required every 10 years.
    - Provide proof of current Tdap (tetanus, diphtheria and whooping cough/pertussis). <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/tdap.html>
  - **Varicella (2-dose series OR titer):** Provide proof of Varicella (chickenpox) vaccination series **OR** a titer. <https://www.cdc.gov/vaccines/vpd/varicella/hcp/recommendations.html>
  - **Flu:** Students will be contacted when seasonal flu vaccines are available about this requirement, which is usually in October or November.
  - **Titers & Boosters Explained:**
    - **Titer:** measures the antibodies in your blood to determine if you have immunity to a disease.  
If titer is negative, a vaccination booster or series is required.
    - **Booster:** is an extra administration of a vaccine after an earlier dose. This dose is a re-exposure to the immunizing antigen to insure a later positive titer.
4. **Group Work:** Do not let your classmates down. When group work is underway, pull your weight and share the work. Encourage group participation in an equitable fashion. Off-task chatter is distracting to others and NOT considered participation. Please be respectful of your classmates. This is part of your professional grade for each class.
5. **Academic honesty** is a nursing program and professional expectation. In the event that students are suspected of cheating, plagiarism or otherwise misrepresenting their work, they will be subject to procedural due process as stated in the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards) (<http://www.umt.edu/student-affairs/community-standards>).
6. **Late work**, including exams, will NOT be accepted. **It must be handed in during the first 10 minutes of class on the day it is due**. Emergencies and extenuating occurrences will be handled on an individual student basis. Please speak to the instructor **before** the due date if you suspect you may not be able to complete the work on time. Faculty has the final decision on whether or not to accept late assignments and circumstances must be extenuating.

Multiple requests for assignment extensions may result in loss of points on your professionalism grade.

7. **Children & Pets:** Do not bring children and pets into the classroom. Faculty are aware that emergency situations may occur and would ask that any student who feels compelled to bring “guests” in to the classroom seek the permission of the classroom instructor before doing so.
8. **Cell phones** MUST BE turned off or on vibrate during all class, lab and clinical sessions. Cell phones at the clinical settings are per faculty discretion and must be on vibrate. There is no texting in class. The focus needs to be on learning. If you must accept a call notify the instructor before and please quietly leave the area and limit distractions to a minimum. This is part of your professionalism grade for each class.
9. **Laptop Etiquette:** Laptops are becoming more popular and being used for taking notes and following along with lectures. If faculty feels that student use of a laptop is distracting or a student is “surfing”, checking emails or otherwise not engaged in classroom content during class, the laptop will no longer be allowed in the classroom setting. This is part of your professionalism grade for each class.
10. **Computer Resources:** Students MUST have access to a reliable computer and have good internet connection. There are computers available in the MC computer labs, MC library, and UM library. Not having computer access or an internet connection is not an acceptable reason for late work or exams.
11. **Class Behavior:** There is no emailing or visiting with other faculty in their office during class time. Your focus needs to be on the content being presented in the course you are attending. This will be part of your professionalism grade.
12. **Tobacco Use:** Smoking, e-cigarettes and chewing tobacco are not allowed in the classroom, lab or clinical setting. Students who smell of tobacco will be asked to leave the clinical assignment; this may result in a clinical failure for the day. This is a tobacco free campus!
13. **Substance Use:**
  - a. Students will not be allowed to participate in lab or clinical experiences if under the influence of either prescribed or illegal substances that impair their ability to function effectively and safely. Additionally, no student may participate in lab or clinical while under the influence of cannabis, regardless of the possession of a registered cannabis card. Any concerns should be addressed to the Nursing Program Director prior to lab and clinical experiences.
  - b. Reasonable suspicion of impairment due to substance use may result in further drug testing and potential dismissal from the program.

## Nursing Program Professional Behavior

The nursing profession demands that the individual be responsible, accountable, self-directed and professional in behavior. The process of becoming a professional person begins upon entering a professional education program. **Students demonstrate professionalism by:**

- Attending classes and clinical experiences,
- Exhibiting courteous behavior,
- Being prepared for class/clinical assignments,
- Not meeting with or emailing other faculty during class time
- Turning in assignments and take-home examinations on time,
- Not consistently requesting extensions for due dates and
- Being punctual for class/clinical.

Evaluation of professionalism is graded each semester. Elements evaluated are reflected in the rubric criteria below. This grade makes up five (5) percent of each course final grade. The behaviors encouraged in this component of the course are important skills needed in the profession of nursing: they are crucial for successful employment and they are crucial for respectful interaction towards others in the profession.

Although there is no mandatory policy for class, faculty believes that to be successful in applying content to clinical class attendance is important. We highly suggest that you attend class. Faculty will also not accept meetings with students when they are scheduled to be in a schooled class. This is not showing respect or professional behavior toward the faculty teaching the course the student is missing. These issues are part of the professionalism grades.

## Nursing Program Professional Behavior Rubric

Professional Behaviors	Meets/Exceeds Expectations (2 points)	Does Not Meet Expectations (0 points)
<b>Attendance</b>	<ul style="list-style-type: none"> <li>• Has no more than 1 (one) excused absence where the instructor was notified prior to beginning of class and has no unexcused absences.</li> <li>• Has no more than one tardy.</li> </ul>	<ul style="list-style-type: none"> <li>• Has more than 1 (one) excused absence and/or 1 (one) or more unexcused absences.</li> <li>• Was tardy more than once in the semester.</li> </ul>
<b>Teamwork</b>	<ul style="list-style-type: none"> <li>• Participates in class discussions without prompting.</li> <li>• Participates equally in small group activities and projects.</li> <li>• Questions, comments and responses are thoughtful, insightful, and reflect knowledge of the content covered in the course.</li> <li>• Asks questions that reflect depth and preparation for class.</li> </ul>	<ul style="list-style-type: none"> <li>• Does not participate in discussions and/or small group activities.</li> <li>• Does not participate equally in small group activities and projects.</li> <li>• Questions, comments, and responses are not thoughtful or insightful, and do not show knowledge of the content covered in this course.</li> <li>• Questions do not reflect depth or preparation for class.</li> </ul>
<b>Communication</b>	<ul style="list-style-type: none"> <li>• Open, interactive, and positive.</li> <li>• Good listener.</li> <li>• Does not interrupt.</li> <li>• Accepting of constructive feedback.</li> </ul>	<ul style="list-style-type: none"> <li>• Infrequently open, interactive, or positive.</li> <li>• Poor listener.</li> <li>• Interrupts conversations.</li> <li>• Does not accept constructive feedback.</li> <li>• Does not respond to instructor emails</li> </ul>
<b>Respect for Others</b>	<ul style="list-style-type: none"> <li>• Displays active listening demonstrated by giving full attention during class, being courteous, and showing a positive attitude.</li> <li>• Refrains from talking or whispering while others are talking.</li> <li>• Uses personal technology strictly for class-related activities.</li> </ul>	<ul style="list-style-type: none"> <li>• Engages in disruptive behaviors such as:               <ul style="list-style-type: none"> <li>○ joking during patient/mannequin care;</li> <li>○ talking or whispering while others talk;</li> <li>○ writing unrelated notes to classmates;</li> <li>○ sleeping;</li> <li>○ eye rolling;</li> <li>○ cell phones not turned off or on vibrate;</li> <li>○ doing unrelated work;</li> <li>○ using computer/cell phone for non-class related activities; and</li> <li>○ finishing other class assignments during lecture time.</li> </ul> </li> </ul>
<b>Class/Clinical Preparedness</b>	<ul style="list-style-type: none"> <li>• Comes to class prepared to participate in activities that reflect understandings of the information presented in each chapter.</li> <li>• Completes pre-lecture assignments on time.</li> <li>• Participation in class reflects pre-class preparation.</li> <li>• Submits Immunizations/preclinical paperwork by due date</li> </ul>	<ul style="list-style-type: none"> <li>• Comes to class unprepared to participate in activities that reflect understandings of the information presented in each chapter.</li> <li>• Has more than one late assignment</li> <li>• Has missing or incomplete pre-lecture assignments.</li> <li>• Participation in class does not reflect pre-class preparation.</li> <li>• Does not submit immunizations/preclinical paperwork by due date</li> </ul>



## Expected Clinical and Lab Behavior

Nurses are expected to exhibit professional behaviors. Throughout the MC nursing program, the student will develop and progress in skill level and professionalism. The method of instruction for specific behaviors will vary based on policy, learner needs, and role modeling. Professional behaviors will be assessed and evaluated through direct observation, discussion and documented on the clinical evaluation form during and upon completion of each clinical rotation. Student behavior is directly linked to program outcomes, evaluation tools and the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards/) (<http://www.umt.edu/student-affairs/community-standards/>). Students not meeting program outcomes and “acceptable” criteria according to the evaluation tool and in the Student Conduct Code will be counseled with possible disciplinary action taken as indicated.

When students participate in Nursing Lab, the expectations are the same as those for clinical. Dress code and professional behavior is an expectation in lab.

All students must practice academic honesty. Academic misconduct is subject to an academic penalty by the course instructor and/or a disciplinary sanction by the University. All students need to be familiar with the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards/) (<http://www.umt.edu/student-affairs/community-standards/>).

## Uniform Policy – Lab Settings

The uniform identifies an individual as a student in the Missoula College of the University of Montana Nursing program and is to reflect a positive and professional image of the individual and the school. Clinical institutions also have specific dress code policies which govern student dress code for clinical. The full Uniform Policy is listed in Section 5, pages 56-58; listed here are excerpts that apply to lab only.

1. Uniform will be selected by the MC Nursing Program
2. The maroon uniform may be purchased through the University Bookstore, at area scrub shops, or online.
3. The maroon uniforms shall be clean, neat, pressed, and free of wrinkles and in a good state of repair; reflecting high professional standards at all times. No open-toed or open heel shoes or sandals. No Crocs are allowed at clinical facilities. Duty shoes must be neat and clean and appropriate for the clinical setting.
4. The Missoula College Nursing Program patch must be sewn on the left arm.
5. The maroon uniform is worn during all lab and clinical experiences conducted in agencies where the use of a uniform is required.
6. The name pin includes the student's first and last name, ASN class, and Missoula College title. It is to be worn above the chest pocket.
7. The name pin **MUST** be worn at any time the student is in a lab or clinical setting. For patient safety reasons, you will be asked to leave without this proper identification. This will be considered a lab or clinical absence.
8. Clinical specific name badges **MUST** also be worn at any time the student is in the clinical setting. For patient safety reasons, you will be asked to leave clinical without this proper identification. This will be considered a clinical absence.

9. Variations in the dress code due to the requirements of the clinical setting will be clarified by faculty. \*\*Exceptions to the dress code which are related to cultural or religious beliefs may be granted by the Program Director or a designee, upon written request by the student.
10. Students are expected to always have required supplies during lab and clinical. These include functional stethoscope, working penlight, report sheet, pen, appropriate clinical paperwork
11. Official uniforms and identification must be worn anytime a student is at a lab or clinical site. This includes when choosing a patient.
12. *(not applicable to lab)* When street clothes are worn according to a clinical site policy, they must conform to the dress code of the clinical agency and under the guidelines of Professional or Casual Business Attire. No denim or jeans are allowed at SPH or CMC.
13. Body and hair must be clean and odor free. Hair length longer than shoulder length must be worn off the face, secured behind the shoulders. Unnatural hair color (e.g. bright reds, greens, blues, etc.) is unacceptable and not permitted. Beards and moustaches are permitted, but must be well-trimmed and neat.
14. Fingernails must be short, clean and no longer than ¼” past the fingertip. Artificial nails are not acceptable.
15. Tattoos considered to be offensive must be covered or concealed. Students are allowed only two post earrings and no “plugs.” Earrings must not dangle off of the ear more than ½ inch. One nose stud up to 1/8 inch in size. Students are allowed to wear two rings.

## UM Student Conduct Code – Regulations / Plagiarism / Cheating

According to the University of Montana, The Student Conduct Code, “embodying the ideals of academic honesty, integrity, and human rights and responsible citizenship, governs all student conduct at The University of Montana-Missoula. Student enrollment presupposes a commitment to the principles and polices embodied in this Code”.

Copies of the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards/) (http://www.umt.edu/student-affairs/community-standards/) are available from the offices of the Vice President of Student Affairs, Residence Life and the Associated Students of the University of Montana-Missoula (ASUM).

### Plagiarism

***“Plagiarism is the act of using another person’s ideas or expressions in your writing without acknowledging the source...to plagiarize is to give the impression that you have written or thought something that you have in fact borrowed from someone else.”***

MLA Handbook for Writers of Research papers by Joseph Gibaldi and Walter S. Achert, 3rd edition. New York: The Modern Language Association, 1988. At Reference Desk. PE 1478.G43 1988.

**Plagiarism is** defined in the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards/) (http://www.umt.edu/student-affairs/community-standards/) on page 5 as, “Representing another person's words, ideas, data, or materials as one's own.”

It is a particularly intolerable offense in the academic community and is strictly forbidden. Students who plagiarize may fail the course and may be remanded to Academic court for possible suspension or expulsion. Please see the Student Conduct Code. It further states, “Students must always be very careful to acknowledge any kind of borrowing that is included in their work. This means not only borrowed working but also ideas. Acknowledgment of

whatever is not one's own work is the proper and honest use of sources." Papers are evaluated for plagiarism using an electronic program provided by or approved by the University of Montana. Plagiarism is an unaccepted practice and consequences at minimum will be a failure on the assignment.

## **Cheating**

MC Nursing Program has a No Tolerance Cheating practice. Cheating on any assignment, report, quiz or exam will result in zero (0) points being awarded for that event, is considered gross misconduct, and may be grounds for immediate dismissal from the nursing program with no opportunity for reinstatement, as stated in the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards/) (<http://www.umt.edu/student-affairs/community-standards/>).

## **National Nursing Student Bill of Rights**

### **Bill of Rights and Responsibilities for Students of Nursing**

The National Student Nurse Association (NSNA) Student Bill of Rights and Responsibilities was initially adopted in 1975. The NSNA House of Delegates in San Antonio, Texas (1991) updated the document; and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).

1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
3. Each institution has a duty to develop policies and procedures, which provide and safeguard the students' freedom to learn.
4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.
5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.
6. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
7. Information about student views, beliefs, political ideation, or sexual orientation, which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.
8. The student should have the right to have a responsible voice in the determination of his/her curriculum.
9. Institutions should have a carefully considered policy as to the information, which should be a part of a student's permanent educational record and as to the conditions of this disclosure.
10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.

11. Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.
12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership or representation on faculty committees.
13. The institution has an obligation to clarify those standards of behavior, which it considers essential to its educational mission, its community life, or its objectives and philosophy.
14. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.
15. As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.
16. Students have the right to belong or refuse to belong to any organization of their choice.
17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.
18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.
19. Dress code, if present in school, should be established with student input in conjunction with the school director and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.
20. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.
21. Students should have a clear mechanism for input into the evaluation of nursing faculty  
[NSNA Bill of Rights and Responsibilities for Students of Nursing](https://www.nsna.org/nsna-code-of-ethics.html),  
(<https://www.nsna.org/nsna-code-of-ethics.html>)

## **Student Confidentiality: Family Education Rights and Privacy Act (FERPA)**

### **What is FERPA?**

FERPA, the Family Educational Rights and Privacy Act, as amended, is a federal law passed in 1974 and codified at 20 U.S.C. § 1232g. It is also commonly known as the Buckley Amendment. The law protects the privacy of student educational records and provides rights to students for access to and amendment of those records. FERPA applies to any higher education institution receiving federal funds administered by the U.S. Department of Education (DOE).

## Who is protected under FERPA?

The rights under FERPA apply primarily to eligible students. An eligible student is an individual who is or has been in attendance at Missoula College. Be aware that a student under the age of 18 or 21 is an eligible student under FERPA if he or she is attending or has attended the College. Applicants are not technically students covered under FERPA, but because they may attend the University, MC treats their applications confidentially (See nursing program Policy F22 Family Educational Rights and Responsibility Act).

## Military Deployment

The Missoula College of the University of Montana recognizes the hardships military personnel and their families face at this time of uncertainty. The College understands that military students who are deployed away from their homes or permanent duty stations may experience difficulties with completing the program. The Missoula College encourages service members to continue with their education and assures them that the College will continue to be flexible and responsive to their needs.

Military students who have been accepted into the Associate Degree Nursing program will have their place in the program and degree status held from the point of deployment until their return without penalty. Pending the length of time of their deployment, there may be some courses that will need to be retaken. These will be looked at on an individual basis.

Active-duty personnel who have been deployed from their normal duty stations and National Guard and Reserve personnel called to federal active duty will have their place in the nursing program and degree enrollment extended to the amount of time they served in support of their service operations.

## Nursing Program Student Ambassadors

Student input and involvement is vital to the Nursing Program's ability to maintain insight to student concerns and challenges. Missoula College University of Montana invites students to be involved in the program through ambassadorships. All students are requested to offer evaluations of faculty, clinical and program at the end of the semester.

However, there are challenges students have along the way; therefore, faculty will select and offer to 1 (one) ASN nursing program student from each semester to be an ambassador for the academic year. This student will represent students at advisory council meetings, held one to two times per year, attend faculty meetings monthly as invited by the Director and be a direct link to the Director for communication, concerns and student challenges. Students selected are briefed on expectations and methods of professional conduct in communicating concerns and student insight. If a selected student declines to participate, another will be asked to ensure student placement.

The selected student ambassador understands the purpose and responsibilities are:

- To recommend policies toward recruitment, retention and placement of nursing students.
- Articulate the policies and procedures for the nursing program, faculty and students.
- Recommend curriculum adaptations based on changing competencies, knowledge, skills and attitudes for successful entry into nursing practice at all levels.

- Assist in the identification of resources for educational materials and equipment, clinical practicum and preceptor sites, and support services for students and the nursing program.
- Assist in long-term planning based on changes in the health care industry, assessment of community needs and educational needs of the nurse clinician.
- Attend faculty meetings.
- Attend Nursing Advisory Committee and other meetings as appropriate.

## **Due Process**

Student problems, concerns or grievances related to policies, conduct and waivers should be resolved using campus resources in the following order:

- Instructor
- Director of the Nursing Program
- Health Professions Chair
- Associate Dean
- Dean
- Dean of Student Affairs
- The grievance policy and procedure can be found in the Policy and Procedure Manual. Policy Number S10, titled Grievance and Complaints

## **Use of Social Media**

### **American Nurses Association (ANA) Principles for Social Networking Adapted as Rule for Missoula College**

1. Nursing students must not transmit or place online individually identifiable student, faculty, college, or staff information.
2. Nursing students must observe ethically prescribed professional student-client and student-faculty boundaries.
3. Nursing students must understand that clients, fellow students, institutions, employers, and community members may view postings.
4. Nursing students must take advantage of privacy settings and seek to separate personal and professional information online.
5. Nursing students must bring content that could harm a client, fellow student, faculty, staff or the college's privacy, rights, or welfare to the attention of appropriate authorities.
6. Nursing students should participate in developing institutional policies governing online conduct.

## **Tips to Avoid Social Media Problems Adapted as Rule for Missoula College Nursing Students**

1. Professionalism is the same online as in any other circumstance.
2. **Do not share or post information or photos gained through the school at MC or clinical.**
3. Maintain professional boundaries in the use of electronic media. Online contact with clients blurs this boundary.
4. Do not make disparaging remarks about clients, fellow students, faculty, staff or the college, even if they are not identified.
5. Do not take and post photos or videos obtained in classroom, lab or clinical on personal devices, including cell phones.
6. Promptly report a breach of confidentiality or privacy.

# Guide to the Use of Social Media

## ***White Paper: A nurse's guide to the use of social media.***



August 2011

### **Introduction**

The use of social media and other electronic communication is increasing exponentially with growing numbers of social media outlets, platforms and applications, including blogs, social networking sites, video sites, and online chat rooms and forums. Nurses often use electronic media both personally and professionally. Instances of inappropriate use of electronic media by nurses have been reported to boards of nursing (BONs) and, in some cases, reported in nursing literature and the media. This document is intended to provide guidance to nurses using electronic media in a manner that maintains patient privacy and confidentiality.

Social media can benefit health care in a variety of ways, including fostering professional connections, promoting timely communication with patients and family members, and educating and informing consumers and health care professionals.

Nurses are increasingly using blogs, forums and social networking sites to share workplace experiences particularly events that have been challenging or emotionally charged. These outlets provide a venue for the nurse to express his or her feelings, and reflect or seek support from friends, colleagues, peers or virtually anyone on the Internet. Journaling and reflective practice have been identified as effective tools in nursing practice. The Internet provides an alternative media for nurses to engage in these helpful activities. Without a sense of caution, however, these understandable needs and potential benefits may result in the nurse disclosing too much information and violating patient privacy and confidentiality.

Health care organizations that utilize electronic and social media typically have policies governing employee use of such media in the workplace. Components of such policies often address personal use of employer computers and equipment, and personal computing during work hours. The policies may address types of websites that may or may not be accessed from employer computers. Health care organizations also maintain careful control of websites maintained by or associated with the organization, limiting what may be posted to the site and by whom.

The employer's policies, however, typically do not address the nurse's use of social media outside of the workplace. It is in this context that the nurse may face potentially serious consequences for inappropriate use of social media.

### **Confidentiality and Privacy**

To understand the limits of appropriate use of social media, it is important to have an understanding of confidentiality and privacy in the health care context. Confidentiality and privacy are related, but distinct concepts. Any patient information learned by the nurse during the course of treatment must be safeguarded by that nurse. Such information may only be disclosed to other members of the health care team for health care purposes. Confidential information should be shared only with the patient's informed consent, when legally required or where failure to disclose the information could result in significant harm. Beyond these very limited exceptions the nurse's obligation to safeguard such confidential information is universal.

Privacy relates to the patient's expectation and right to be treated with dignity and respect. Effective nurse-patient relationships are built on trust. The patient needs to be confident that their most personal information and their basic dignity will be protected by the nurse. Patients will be hesitant to disclose personal information if they fear it will be disseminated beyond those who have a legitimate "need to know." Any breach of this trust, even inadvertent, damages the particular nurse-patient relationship and the general trustworthiness of the profession of nursing.

Federal law reinforces and further defines privacy through the Health Insurance Portability and Accountability Act (HIPAA). HIPAA regulations are intended to protect patient privacy by defining individually identifiable information and establishing how this information may be used, by whom and under what circumstances. The definition of individually identifiable information includes any information that relates to the past, present or future physical or mental health of an individual, or provides enough information that leads someone to believe the information could be used to identify an individual.

Breaches of patient confidentiality or privacy can be intentional or inadvertent and can occur in a variety of ways. Nurses may breach confidentiality or privacy with information he or she posts via social media. Examples may include comments on social



networking sites in which a patient is described with sufficient detail to be identified, referring to patients in a degrading or demeaning manner, or posting video or photos of patients. Additional examples are included at the end of this document.

## Possible Consequences

Potential consequences for inappropriate use of social and electronic media by a nurse are varied. The potential consequences will depend, in part, on the particular nature of the nurse's conduct.

### BON Implications

Instances of inappropriate use of social and electronic media may be reported to the BON. The laws outlining the basis for disciplinary action by a BON vary between jurisdictions. Depending on the laws of a jurisdiction, a BON may investigate reports of inappropriate disclosures on social media by a nurse on the grounds of:

- Unprofessional conduct;
- Unethical conduct;
- Moral turpitude;
- Mismanagement of patient records;
- Revealing a privileged communication; and
- Breach of confidentiality.

If the allegations are found to be true, the nurse may face disciplinary action by the BON, including a reprimand or sanction, assessment of a monetary fine, or temporary or permanent loss of licensure.

A 2010 survey of BONs conducted by NCSBN indicated an overwhelming majority of responding BONs (33 of the 46 respondents) reported receiving complaints of nurses who have violated patient privacy by posting photos or information about patients on social networking sites. The majority (26 of the 33) of BONs reported taking disciplinary actions based on these complaints. Actions taken by the BONs included censure of the nurse, issuing a letter of concern, placing conditions on the nurse's license or suspension of the nurse's license.

### Other Consequences

Improper use of social media by nurses may violate state and federal laws established to protect patient privacy and confidentiality. Such violations may result in both civil and criminal penalties, including fines and possible jail time. A nurse may face personal liability. The nurse may be individually sued for defamation, invasion of privacy or harassment. Particularly flagrant misconduct on social media websites may also raise liability under state or federal regulations focused on preventing patient abuse or exploitation.

If the nurse's conduct violates the policies of the employer, the nurse may face employment consequences, including termination. Additionally, the actions of the nurse may damage the reputation of the health care organization, or subject the organization to a law suit or regulatory consequences.

Another concern with the misuse of social media is its effect on team-based patient care. Online comments by a nurse regarding co-workers, even if posted from home during nonwork hours, may constitute as lateral violence. Lateral violence is receiving greater attention as more is learned about its impact on patient safety and quality clinical outcomes. Lateral violence includes disruptive behaviors of intimidation and bullying, which may be perpetuated in person or via the Internet, sometimes referred to as "cyber bullying." Such activity is cause for concern for current and future employers and regulators because of the patient-safety ramifications. The line between speech protected by labor laws, the First Amendment and the ability of an employer to impose expectations on employees outside of work is still being determined. Nonetheless, such comments can be detrimental to a cohesive health care delivery team and may result in sanctions against the nurse.

## Common Myths and Misunderstandings of Social Media

While instances of intentional or malicious misuse of social media have occurred, in most cases, the inappropriate disclosure or posting is unintentional. A number of factors may contribute to a nurse inadvertently violating patient privacy and confidentiality while using social media. These may include:

- A mistaken belief that the communication or post is private and accessible only to the intended recipient. The nurse may fail to recognize that content once posted or sent can be disseminated to others. In fact, the terms of using a social media site may include an extremely broad waiver of rights to limit use of content.<sup>1</sup> The solitary use of the Internet, even while posting to a social media site, can create an illusion of privacy.

1 One such waiver states, "By posting user content to any part of the site, you automatically grant the company an irrevocable, perpetual, nonexclusive transferable, fully paid, worldwide license to use, copy, publicly perform, publicly display, reformat, translate, excerpt (in whole or in part), distribute such user content for any purpose." Privacy Commission of Canada. (2007, November 7). Privacy and social networks [Video file]. Retrieved from <http://www.youtube.com/watch?v=X7gWEgHeXcA>

- A mistaken belief that content that has been deleted from a site is no longer accessible.
- A mistaken belief that it is harmless if private information about patients is disclosed if the communication is accessed only by the intended recipient. This is still a breach of confidentiality.
- A mistaken belief that it is acceptable to discuss or refer to patients if they are not identified by name, but referred to by a nickname, room number, diagnosis or condition. This too is a breach of confidentiality and demonstrates disrespect for patient privacy.
- Confusion between a patient's right to disclose personal information about himself/herself (or a health care organization's right to disclose otherwise protected information with a patient's consent) and the need for health care providers to refrain from disclosing patient information without a care-related need for the disclosure.
- The ease of posting and commonplace nature of sharing information via social media may appear to blur the line between one's personal and professional lives. The quick, easy and efficient technology enabling use of social media reduces the amount of time it takes to post content and simultaneously, the time to consider whether the post is appropriate and the ramifications of inappropriate content.

## How to Avoid Problems

It is important to recognize that instances of inappropriate use of social media can and do occur, but with awareness and caution, nurses can avoid inadvertently disclosing confidential or private information about patients.

The following guidelines are intended to minimize the risks of using social media:

- First and foremost, nurses must recognize that they have an ethical and legal obligation to maintain patient privacy and confidentiality at all times.
- Nurses are strictly prohibited from transmitting by way of any electronic media any patient-related image. In addition, nurses are restricted from transmitting any information that may be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient.
- Do not share, post or otherwise disseminate any information, including images, about a patient or information gained in the nurse-patient relationship with anyone unless there is a patient care related need to disclose the information or other legal obligation to do so.
- Do not identify patients by name or post or publish information that may lead to the identification of a patient. Limiting access to postings through privacy settings is not sufficient to ensure privacy.
- Do not refer to patients in a disparaging manner, even if the patient is not identified.
- Do not take photos or videos of patients on personal devices, including cell phones. Follow employer policies for taking photographs or video of patients for treatment or other legitimate purposes using employer-provided devices.
- Maintain professional boundaries in the use of electronic media. Like in-person relationships, the nurse has the obligation to establish, communicate and enforce professional boundaries with patients in the online environment. Use caution when having online social contact with patients or former patients. Online contact with patients or former patients blurs the distinction between a professional and personal relationship. The fact that a patient may initiate contact with the nurse does not permit the nurse to engage in a personal relationship with the patient.
- Consult employer policies or an appropriate leader within the organization for guidance regarding work related postings.
- Promptly report any identified breach of confidentiality or privacy.
- Be aware of and comply with employer policies regarding use of employer-owned computers, cameras and other electronic devices and use of personal devices in the work place.
- Do not make disparaging remarks about employers or co-workers. Do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments.
- Do not post content or otherwise speak on behalf of the employer unless authorized to do so and follow all applicable policies of the employer.

## Conclusion

Social and electronic media possess tremendous potential for strengthening personal relationships and providing valuable information to health care consumers. Nurses need to be aware of the potential ramifications of disclosing patient-related information via social media. Nurses should be mindful of employer policies, relevant state and federal laws, and professional standards regarding patient privacy and confidentiality and its application to social and electronic media. By being careful and conscientious, nurses may enjoy the personal and professional benefits of social and electronic media without violating patient privacy and confidentiality.

## Illustrative Cases

The following cases, based on events reported to BONs, depict inappropriate uses of social and electronic media. The outcomes will vary from jurisdiction to jurisdiction.

### SCENARIO 1

Bob, a licensed practical/vocational (LPN/VN) nurse with 20 years of experience used his personal cell phone to take photos of a resident in the group home where he worked. Prior to taking the photo, Bob asked the resident's brother if it was okay for him to take the photo. The brother agreed. The resident was unable to give consent due to her mental and physical condition. That evening, Bob saw a former employee of the group home at a local bar and showed him the photo. Bob also discussed the resident's condition with the former coworker. The administrator of the group home learned of Bob's actions and terminated his employment. The matter was also reported to the BON. Bob told the BON he thought it was acceptable for him to take the resident's photo because he had the consent of a family member. He also thought it was acceptable for him to discuss the resident's condition because the former employee was now employed at another facility within the company and had worked with the resident. The nurse acknowledged he had no legitimate purpose for taking or showing the photo or discussing the resident's condition. The BON imposed disciplinary action on Bob's license requiring him to complete continuing education on patient privacy and confidentiality, ethics and professional boundaries.

This case demonstrates the need to obtain valid consent before taking photographs of patients; the impropriety of using a personal device to take a patient's photo; and that confidential information should not be disclosed to persons no longer involved in the care of a patient.

### SCENARIO 2

Sally, a nurse employed at a large long-term care facility arrived at work one morning and found a strange email on her laptop. She could not tell the source of the email, only that it was sent during the previous nightshift. Attached to the email was a photo of what appeared to be an elderly female wearing a gown with an exposed backside bending over near her bed. Sally asked the other dayshift staff about the email/photo and some confirmed they had received the same photo on their office computers. Nobody knew anything about the source of the email or the identity of the woman, although the background appeared to be a resident's room at the facility. In an effort to find out whether any of the staff knew anything about the email, Sally forwarded it to the computers and cell phones of several staff members who said they had not received it. Some staff discussed the photo with an air of concern, but others were laughing about it as they found it amusing. Somebody on staff started an office betting pool to guess the identity of the resident. At least one staff member posted the photo on her blog.

Although no staff member had bothered to bring it to the attention of a supervisor, by midday, the director of nursing and facility management had become aware of the photo and began an investigation as they were very concerned about the patient's rights. The local media also became aware of the matter and law enforcement was called to investigate whether any crimes involving sexual exploitation had been committed.

While the county prosecutor, after reviewing the police report, declined to prosecute, the story was heavily covered by local media and even made the national news. The facility's management placed several staff members on administrative leave while they looked into violations of facility rules that emphasize patient rights, dignity and protection. Management reported the matter to the BON, which opened investigations to determine whether state or federal regulations against "exploitation of vulnerable adults" were violated. Although the originator of the photo was never discovered, nursing staff also faced potential liability for their willingness to electronically share the photo within and outside the facility, thus exacerbating the patient privacy violations, while at the same time, failing to bring it to management's attention in accordance with facility policies and procedures. The patient in the photo was ultimately identified and her family threatened to sue the facility and all the staff involved. The BON's complaint is pending and this matter was referred to the agency that oversees long-term care agencies.

This scenario shows how important it is for nurses to carefully consider their actions. The nurses had a duty to immediately report the incident to their supervisor to protect patient privacy and maintain professionalism. Instead, the situation escalated to involving the BON, the county prosecutor and even the national media. Since the patient was ultimately identified, the family was embarrassed and the organization faced possible legal consequences. The organization was also embarrassed because of the national media focus.

### SCENARIO 3

A 20-year-old junior nursing student, Emily, was excited to be in her pediatrics rotation. She had always wanted to be a pediatric nurse. Emily was caring for Tommy, a three-year-old patient in a major academic medical center's pediatric unit. Tommy was receiving chemotherapy for leukemia. He was a happy little guy who was doing quite well and Emily enjoyed caring for him. Emily knew he would likely be going home soon, so when his mom went to the cafeteria for a cup of coffee, Emily asked him if he minded if she took his picture. Tommy, a little "ham," consented immediately. Emily took his picture with her cell phone as she wheeled him into his room because she wanted to remember his room number.

When Emily got home that day she excitedly posted Tommy's photo on her Facebook page so her fellow nursing students could see how lucky she was to be caring for such a cute little patient. Along with the photo, she commented, "This is my 3-year-old leukemia patient who is bravely receiving chemotherapy. I watched the nurse administer his chemotherapy today and it made me so proud to be a nurse." In the photo, Room 324 of the pediatric unit was easily visible.

Three days later, the dean of the nursing program called Emily into her office. A nurse from the hospital was browsing Facebook and found the photo Emily posted of Tommy. She reported it to hospital officials who promptly called the nursing program. While Emily never intended to breach the patient's confidentiality, it didn't matter. Not only was the patient's privacy compromised, but the hospital faced a HIPAA violation. People were able to identify Tommy as a "cancer patient," and the hospital was identified as well. The nursing program had a policy about breaching patient confidentiality and HIPAA violations. Following a hearing with the student, school officials and the student's professor, Emily was expelled from the program. The nursing program was barred from using the pediatric unit for their students, which was very problematic because clinical sites for acute pediatrics are difficult to find. The hospital contacted federal officials about the HIPAA violation and began to institute more strict policies about use of cell phones at the hospital.

This scenario highlights several points. First of all, even if the student had deleted the photo, it is still available. Therefore, it would still be discoverable in a court of law. Anything that exists on a server is there forever and could be resurrected later, even after deletion. Further, someone can access Facebook, take a screen shot and post it on a public website.

Secondly, this scenario elucidates confidentiality and privacy breaches, which not only violate HIPAA and the nurse practice act in that state, but also could put the student, hospital and nursing program at risk for a lawsuit. It is clear in this situation that the student was well-intended, and yet the post was still inappropriate. While the patient was not identified by name, he and the hospital were still readily identifiable.

### SCENARIO 4

A BON received a complaint that a nurse had blogged on a local newspaper's online chat room. The complaint noted that the nurse bragged about taking care of her "little handicapper." Because they lived in a small town, the complainant could identify the nurse and the patient. The complainant stated that the nurse was violating "privacy laws" of the child and his family. It was also discovered that there appeared to be debate between the complainant and the nurse on the blog over local issues. These debates and disagreements resulted in the other blogger filing a complaint about the nurse.

A check of the newspaper website confirmed that the nurse appeared to write affectionately about the handicapped child for whom she provided care. In addition to making notes about her "little handicapper," there were comments about a wheelchair and the child's age. The comments were not meant to be offensive, but did provide personal information about the patient. There was no specific identifying information found on the blog about the patient, but if you knew the nurse, the patient or the patient's family, it would be possible to identify who was being discussed.

The board investigator contacted the nurse about the issue. The nurse admitted she is a frequent blogger on the local newspaper site; she explained that she does not have a television and blogging is what she does for entertainment. The investigator discussed that as a nurse, she must be careful not to provide any information about her home care patients in a public forum.

The BON could have taken disciplinary action for the nurse failing to maintain the confidentiality of patient information. The BON decided a warning was sufficient and sent the nurse a letter advising her that further evidence of the release of personal information about patients will result in disciplinary action.

This scenario illustrates that nurses need to be careful not to mention work issues in their private use of websites, including posting on blogs, discussion boards, etc. The site used by the nurse was not specifically associated with her like a personal blog is; nonetheless the nurse posted sufficient information to identify herself and the patient.

## SCENARIO 5

Nursing students at a local college had organized a group on Facebook that allowed the student nurses' association to post announcements and where students could frequently blog, sharing day-to-day study tips and arranging study groups. A student-related clinical error occurred in a local facility and the student was dismissed from clinical for the day pending an evaluation of the error. That evening, the students blogged about the error, perceived fairness and unfairness of the discipline, and projected the student's future. The clinical error was described, and since the college only utilized two facilities for clinical experiences, it was easy to discern where the error took place. The page and blog could be accessed by friends of the students, as well as the general public.

The students in this scenario could face possible expulsion and discipline. These blogs can be accessed by the public and the patient could be identified because this is a small community. It is a myth that it can only be accessed by that small group, and as in Scenario 3, once posted, the information is available forever. Additionally, information can be quickly spread to a wide audience, so someone could have taken a screen shot of the situation and posted it on a public site. This is a violation of employee/university policies.

## SCENARIO 6

Chris Smith, the brother of nursing home resident Edward Smith, submitted a complaint to the BON. Chris was at a party when his friend, John, picked up his wife's phone to read her a text message. The message noted that she was to "get a drug screen for resident Edward Smith." The people at the party who heard the orders were immediately aware that Edward Smith was the quadriplegic brother of Chris. Chris did not want to get the nurse in trouble, but was angered that personal information about his brother's medical information was released in front of others.

The BON opened an investigation and learned that the physician had been texting orders to the personal phone number of nurses at the nursing home. This saved time because the nurses would get the orders directly and the physician would not have to dictate orders by phone. The use of cell phones also provided the ability for nurses to get orders while they worked with other residents. The practice was widely known within the facility, but was not the approved method of communicating orders.

The BON learned that on the night of the party, the nurse had left the facility early. A couple hours prior to leaving her shift she had called the physician for new orders for Edward Smith. She passed this information onto the nurse who relieved her. She explained that the physician must not have gotten a text from her co-worker before he texted her the orders.

The BON contacted the nursing home and spoke to the director of nursing. The BON indicated that if the physician wanted to use cell phones to text orders, he or the facility would need to provide a dedicated cell phone to staff. The cell phone could remain in a secured, private area at the nursing home or with the nurse during her shift.

The BON issued a warning to the nurse. In addition, the case information was passed along to the health board and medical board to follow up with the facility and physician.

This scenario illustrates the need for nurses to question practices that may result in violations of confidentiality and privacy. Nurse managers should be aware of these situations and take steps to minimize such risks.

## SCENARIO 7

Jamie has been a nurse for 12 years, working in hospice for the last six years. One of Jamie's current patients, Maria, maintained a hospital-sponsored communication page to keep friends and family updated on her battle with cancer. Jamie periodically read Maria's postings, but had never left any online comments. One day, Maria posted about her depression and difficulty finding an effective combination of medications to relieve her pain without unbearable side effects. Jamie knew Maria had been struggling and wanted to provide support, so she wrote a comment in response to the post, stating, "I know the last week has been difficult. Hopefully the new happy pill will help, along with the increased dose of morphine. I will see you on Wednesday." The site automatically listed the user's name with each comment. The next day, Jamie was shopping at the local grocery store when a friend stopped her and said, "I didn't know you were taking care of Maria. I saw your message to her on the communication page. I can tell you really care about her and I am glad she has you. She's an old family friend, you know. We've been praying for her but it doesn't look like a miracle is going to happen. How long do you think she has left?" Jamie was instantly horrified to realize her expression of concern on the webpage had been an inappropriate disclosure. She thanked her friend for being concerned, but said she couldn't discuss Maria's condition. She immediately went home and attempted to remove her comments, but that wasn't possible. Further, others could have copied and pasted the comments elsewhere.

At her next visit with Maria, Jamie explained what had happened and apologized for her actions. Maria accepted the apology, but asked Jamie not to post any further comments. Jamie self-reported to the BON and is awaiting the BON's decision.

This scenario emphasizes the importance for nurses to carefully consider the implications of posting any information about patients on any type of website. While this website was hospital sponsored, it was available to friends and family. In some contexts it is appropriate for a nurse to communicate empathy and support for patients, but they should be cautious not to disclose private information, such as types of medications the patient is taking.

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Mission: NCSBN provides education, service and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.



National Council of State Boards of Nursing  
111 E. Wacker Dr., Suite 2900 Chicago, IL 60601  
312.525.3600 | Fax: 312.279.1032

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## Nursing Course Examinations, In-class and Moodle

1. Tests are to be taken at the times they are scheduled.
2. All Moodle tests will remain open for student testing no longer than 24 hours as set up per course instructors. Students must make arrangements to be able to take an online Moodle test within the 24 hour date and time as set up. If unable, it must be discussed with the course instructor prior to the test date and time. Final decision of approving a request will be per the course instructor. Please note that the close time is indicative of when the quiz/exam will no longer be available and the student will not be able to log in after the quiz/exam closing time.
3. If a student is unable to take an exam at the scheduled time due to extenuating circumstances, the student must notify the course instructor prior to the scheduled test date and time to discuss their options. Make-up examinations are offered at the discretion of the course instructor for extenuating circumstance. Arrangements for make-up testing will be made with the course instructor.
4. Students are expected to follow established guidelines of test taking in Moodle; any concerns regarding dishonest conduct during test taking will result in a zero for the test and may result in immediate suspension from the nursing program.
5. Exams being administered in Moodle can be taken during school hours or at home dependent on instructor preference. In the event an exam in Moodle is being taken at home students are expected to adhere to the following:
  - Students are expected to have an available working computer. Not having computer access is not an acceptable reason for not completing a Moodle online exam during the allotted time
  - Ensure internet access is working. When internet access at home is not reliable please consider taking the exam in the computer labs or library on campus. Extensions will not be granted for internet problems unless there are extenuating and unusual circumstances that are *verified by your instructor*.
  - If you are locked out of Moodle during an examination you must complete the following:
    - Call or email the professor within 15 minutes of being locked out. The instructor will reset the test.
    - If the lock out occurs after regular working hours, the instructor will make arrangements for communicating how to be contacted and deal with the lock out. You must leave an email within 15 minutes of being locked out that can be verified by the next morning. Also leave a voice mail with the time of the message. The instructor will reset the test based on following the above policy.
      - This reset can occur only once and the test reset may be a different test than the one that locked out.

- If a lock-out occurs a second time, the professor must be notified within the 15-minute rule and then the student is to make an appointment with the faculty for further arrangements.
- If a pattern of lock-outs are occurring, this will be handled under the advisement of the student, instructor, program director and/or Health Department Chair.

If you are unable to find an assigned examination or unable to open an assigned examination, you **MUST** contact the instructor *immediately by email or phone call*. Failure to do so could mean a failure on an examination. The instructor must have proof of the sent message either by email or voice mail:

Faculty understand there can be technical issues when administering tests in Moodle. The following guidelines are designed to assist the student and also protect the integrity of the student and nursing program by guarding against cheating.

## **Moodle Tech Support**

For technical support with online courses or Moodle, contact the [UMOnline Help Desk](https://www.umt.edu/umonline/) (<https://www.umt.edu/umonline/>); phone 406.243.4999. Please have both your UM 790# and your Net ID# available to verify your identity.

## **Guidelines for Taking Tests in Moodle**

The goal of the nursing program is to make learning and assessment as efficient as possible. Students are expected to follow the guidelines and parameters outlined by faculty; failure to do so may result in an exam that is not accepted and may result in a “0” grade.

Nursing courses must be passed with an 80% average for progression to the next semester. Students unable to adhere to set standard of 80% cumulative grades will receive a non-passing grade for the course which is defined as <80%. Faculty is not obliged to “round up”. If you have a cumulative score of 79.9% you may still receive a non-passing grade for the course.

## **Dosage Calculations Policy**

To assist in assuring patient safety and to be in compliance with the learning outcomes of Safety in QSEN, students are required to successfully pass a dosage calculation examination based on the following;

### **For NRSNG 234/235 and NRSNG 244/245 and NRSNG 259/261:**

To promote medication administration safety in the clinical setting, students will be required to earn a minimum of 100% on a dosage calculation quiz prior to starting clinical experiences in NRSNG 235: Adult Nursing I. Students will have two attempts to earn a 100% on the dosage calculations quiz. In the event a student is unable to earn a 100% on the quiz after the initial attempt, the student will meet with the instructor, discuss areas of concerns, and develop a mutual action plan to assist the student in achieving goals of safe medication administration. The final attempt will be scheduled at the discretion of the instructor. In the event students are unable to earn a 100% on the quiz after two attempts, students will not be allowed to pass medications in the NRSNG 235 clinical setting (This could potentially result in a failing grade for the clinical portion of this class). Students may use calculators and are advised to come prepared.



## **For NRSNG 246/247 (Health & Illness of Child & Family Nursing):**

To promote medication administration safety in the clinical setting, students will be required to earn 100% on a pediatric dosage calculation quiz prior to starting clinical experiences. Students will have two attempts to earn a 100% on the dosage calculations quiz. In the event a student is unable to earn a 100% on the quiz after the initial attempt, the student will meet with the instructor, discuss areas of concerns, and develop a mutual action plan which will include a mandatory tutoring session to assist the student in achieving goals of safe medication administration. The final attempt will be scheduled at the discretion of the instructor. In the event students are unable to earn a 100% on the quiz after two attempts, students will not be allowed in the NRSNG 247 clinical setting. Students may use calculators and are advised to come prepared.

## **Kaplan Nursing**

### **What is Kaplan Nursing?**

- Kaplan Nursing is an educational partner that offers resources to increase content learning and test preparation throughout the program.
- The complete program offers multiple assessment and remediation activities. Students are guided through online tutorials, assignments and practice exams that assess strengths and weaknesses and allow students to remediate in weak areas. The combination of the Kaplan program along with the nursing curriculum content assists students to prepare for the workforce and to successfully pass the NCLEX examination.
- Data from student testing and remediation can be used for program's quality improvement and outcome evaluation.
- Kaplan information and orientation resources can be accessed from your student home page. **It is mandatory that you spend time navigating these valuable orientation materials found on your Kaplan student home page.**

### **Integrated Testing:**

Kaplan provides integrated testing in all major content areas. Tests may be assigned during the course and/or as part of active learning/remediation.

### **Focused Review Tests:**

Kaplan offers Focused Review (Practice) tests available to students 24/7. The student can either select from a list of standardized tests or create their own customized focused review. Students can review their results and remediate weaker content areas.

### **Proctored Exams:**

Each course may require an end-of-semester proctored exam to assess course content learning.

## Clinical Resources & Digital Clinical Experiences:

Kaplan and Shadow Health provide a variety of mid-fidelity simulations that offer focused assessments of different clients. The Kaplan modules in their Clinical Resources section guide the student through a Chart Assessment, Physical Assessment, Nursing Diagnosis, Care Planning and Evaluation. Shadow Health's Digital Clinical Experiences guide students through patient interviewing and assessments, and chart documentation.

## NCLEX Prep:

Kaplan offers an NCLEX-RN preparation course that is split into three phases. Phase I contains content and tests to be completed by the student before the face-to-face NCLEX preparation class. Phase II is a live class offered by an NCLEX expert from Kaplan. Phase III is used for final preparation for taking the NCLEX and includes 7 Question Trainers, NCLEX Sample Tests, and a Readiness Test that will give the student a probability of passing the NCLEX.

## Progression in Nursing Program

**In order to continue in the nursing program, the student must:**

- Maintain a grade of B or better in all required nursing courses and maintain a 3.0 cumulative GPA.
- Working LPNs in the ASN program must maintain an unencumbered LPN license in the State of Montana.
- Maintain ability to meet essential functions for nursing with or without reasonable accommodations.
- Maintain current BLS for Health Care Providers, Flu vaccination (during Flu season) and TB testing (these are the vaccinations and tests that must be renewed/updated regularly).
- Complete all nursing courses in the prescribed sequence. If a student withdraws or makes a C or less grade in a nursing course, the student cannot progress in the nursing course sequence until the student has reapplied and been reaccepted into the nursing program.
  - The course must be successfully completed with a B or greater on the second attempt or the student will be removed from the nursing program. Course repetition will be based on instructor availability, clinical site availability, and program resources.

90-100%	=	A
80-89%	=	B
70-79%	=	C
60-69%	=	D
Below 59%	=	F

**Students must successfully complete the program within** approximately 24 months from acceptance into the ASN program.

## Progression Requirements in Lecture/Clinical Courses

Students must pass all nursing classes in order to progress to the next semester. **There is no exception to this rule.** Students must achieve at least 80% in the didactic and lab portion and a “Pass” grade in clinical to pass the course.

All clinical requirements must be completed by the end of the academic term. A course grade of incomplete will only be assigned to students that are in good academic standing in the nursing program and have negotiated an “incomplete” contract with the faculty by the last day of class before finals.

## Progressive Disciplinary Policy

Students may be required, based on conduct, to be placed in a progressive disciplinary mutual action plan or contract. The progression is based on student conduct and need to ensure client safety and the development of professional behaviors and accountability.

Step 1: Verbal Discussion and possible Mutual Action Plan (MAP) or Student Contract, Documentation placed in student file.

Step 2: Mutual Action Plan or Contract, copy to file. Meet with Director if applicable.

Step 3: Dismissal if student is unable to meet Mutual Action Plan or Contract Criteria.

## Dismissal from Nursing Program

The global performance of a student may result in student dismissal when the cumulative picture of a student's behavior is determined unacceptable for the profession. If the overall presentation of the student in the view of the Program Director shows consistent problems, the student will be dismissed from the program. A student may be dismissed from the nursing program for the following reasons:

- Through the progressive disciplinary process whereby a student does not improve or comply; however, students may be removed without progressive disciplinary process in cases of unsafe client care, sentinel events or risk to public safety.
- An unsuccessful attempt (C, D, F, or withdrawal) in a required nursing course.
- A student may only repeat and reapply to the nursing program once. After a course has not been successfully passed the second time, the student is no longer eligible to reapply to the nursing program. All nursing courses may be repeated only once.
- Disciplinary reasons and/or unsafe/unsatisfactory skill performance in lab or client care in the clinical area.

## Appeals

Students wishing to appeal the dismissal action must do so by following the appeals process described in the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards) (http://www.umt.edu/student-affairs/community-standards). Each clinical facility may develop individual institutional policies related to student conduct in cooperation with the Nursing Program Director. A clinical facility may refuse to accept a student or request that a student be withdrawn from the facility after citing cause. This may be a basis for dismissal from the program.

## Miscellaneous Policies

### Withdrawals / Audits / Refunds from Nursing Programs

Withdrawing, failing or not completing a required class will result in the student losing their position on the accepted list, and therefore their place in clinical. **Reapplication to the program must occur if there is no space availability for the next semester.** This decision is based on keeping with the Montana State Board of Nursing regulation 24.159.662 (3) when providing direct patient care, no more than ten students may be supervised at a time by a faculty member.

Students should consult the Registrar's Office to determine the last day for withdrawal. Tuition refund depends upon the time the withdrawal application is filed. Consult the UM Undergraduate Admissions office and the University of Montana Catalog for details. Withdrawals are **NOT** permitted during finals week.

### Address, Phone Number, and Email Changes

Students with a change of address, phone number or email are requested to make these changes to their records and demographics. Changes must be made in Cyberbear. Please make sure to provide your changes to the Nursing Program Administrative Associate as well so that your nursing program records can be updated. Please make changes as quickly as possible to ensure accurate means of communication between Missoula College, faculty, and students.

### Student and Faculty Communication

All communication between students and faculty must be through the University of Montana UMConnect. This can be a direct communication using UMConnect or through a specific Moodle course. Texting (except in clinical) or use of private email accounts is not acceptable.

### APA Format and Citation

The Nursing Department follows the American Psychological Association (APA) citation guidelines. A valuable resource for APA formatting and citation is the *Publication Manual of the American Psychological Association*, 6th Edition, Washington, DC, by the American Psychological Association. This reference guide is available at the Mansfield libraries, local bookstores, and may be [purchased online](http://www.apastyle.org) (www.apastyle.org).

Proper citation of referenced material is required. Not following proper citation guidelines may constitute plagiarism and be subject to academic discipline.

# Graduation

## Graduation Application & Requirements

In order to graduate from the nursing program, all course requirements must be completed as stated in the current MC-UM catalog, including completing all Nursing courses with a grade no less than a B (3.0 GPA).

The semester before you graduate the Nursing Program Director will audit your Cyberbear DegreeWorks file to determine if you are on track for graduation and will notify you if any course requirements are missing. The Program Director will sign the graduation application form and return it to you either via email or in person.

It is your responsibility to completely fill out the form, have signed, and submit to the Missoula College cashier by the deadline along with the application fee. Fees/deadlines are listed on the application. As part of UM policy, noncompliance by the application deadline will mean waiting until the FOLLOWING term to graduate. The result is a delay in taking the NCLEX. [Graduation information/application](https://www.umt.edu/registrar/students/graduation.php) (<https://www.umt.edu/registrar/students/graduation.php>).

## Financial Aid Counseling at Graduation

Financial aid counseling is available upon graduation via [Federal Student Aid](https://studentloans.gov/myDirectLoan/index.action) ([studentloans.gov/myDirectLoan/index.action](https://studentloans.gov/myDirectLoan/index.action)) regarding responsibilities of financial assistance payment plans and can be completed electronically.

## Degree / National Certification Exams

Successful completion of the Associate of Science in nursing coursework leads to an Associate of Science Degree in Nursing. Award of the AS is not contingent upon the student passing any type of external certification or licensure examination.

After the nursing program has been completed, students are eligible to take the national licensing exam (NCLEX-RN). Successful completion of this exam is required for licensure and employment. A graduate may receive a temporary license when they have completed the application to test. This temporary license along with an Employer Sworn Statement is required for employment as a Graduate Nurse, and a graduate is responsible for notifying a prospective employer of their status in this regard. The temporary license is only active for 90 days. The NCLEX exam needs to be completed within this time limit. Upon successful completion of the licensing exam, the candidate receives their permanent license.

It is the **student's responsibility** to contact the registrar's office to obtain transcript release forms and to submit the forms with the required fees to the Board of Nursing of the student's choice.

Once you have successfully passed the NCLEX you will be licensed to practice nursing in the State of Montana or the state of your choice and can then work in anywhere in United States **after** you complete an application with the State Board of Nursing for the State you wish to be employed.

An applicant may be denied a license if he/she has a criminal record including a Minor in Possession (MIP), complete their application fraudulently or withhold information, or fail to meet other standards or requirements established by the Board of Nursing. If a prospective applicant has questions in this area, they should contact the identified state board of nursing or the Montana State Board of Nursing:

## **Montana State Board of Nursing**

(<http://boards.bsd.dli.mt.gov/nur>)

Professional and Occupational Licensing Division  
PO Box 200513 / 301 South Park  
Helena, MT 59620-0513  
(406) 841-2300

## **Employment Opportunities**

Career Services provides quality educational, career, and life-planning services to assist students and alumni in achieving their personal and professional goals. They provide an array of services designed to support the university's academic mission while fostering the out-of-classroom development of the individual. Be sure and pay close attention to [UM Experiential Learning and Career Success Services](http://www.umt.edu/career/) (<http://www.umt.edu/career/>) to learn about career fairs, National Student Employment Week, and employment opportunities after graduation.

# Section 5 – Clinical Experience

## Employment During School: Mandatory Policy Regarding Clinical

Students are encouraged to carefully consider the time commitment for classes, student, family life, travel, leisure activity and other life responsibilities prior to scheduling outside employment while attending the MC Nursing Program.

- **Students MUST have a minimum 8-hour break from any employment prior to starting a clinical shift.**
- Students who appear too fatigued to safely provide client care will be sent home.
- Students who are too tired to participate and sent home will be given an absence for that clinical day.
- Students deemed unsafe to drive will need to make arrangements to get home or have the clinical instructor call a cab for transportation. Students will incur any costs of transportation needed.

## Pregnancy Policy

A student who is pregnant may continue in clinical practice as long as her health status is satisfactory and she is able to complete her clinical assignment without undue risk to herself or the fetus. A note from her health care provider indicating safety of participation in clinical activities may be requested. For the safety of the student who is pregnant, she must not enter where radioisotopes or x-ray therapy is being administered or give certain medications identified as potentially harmful to the fetus if handled by the mother. Students who are pregnant should consult with their faculty member well in advance of their clinical assignment. Clinical agencies may have policies that determine the placement of students during pregnancy; assignments should be made accordingly.

If a student requires bed rest, accommodations will be made to the best of MC abilities; however, students may be required to complete the course after recovery and may/will receive an “Incomplete” with Mutual Action Plan arrangements with faculty and the Director. Criteria and rules regarding use of “Incompletes” must be followed as per University policy.

## Preclinical Entry Requirements

All nursing students are required to have presented documented evidence to the Nursing Program of required BLS for Health Care Providers (HCP), criminal background check, drug screening, immunizations as per Section 3, page 22 prior to initial program start and kept up-to-date throughout the nursing program. The Nursing Program informs the clinical sites of student compliance. The clinical site has the final say on whether a student can or cannot participate in a clinical rotation at their site.

## Professional Liability

As a student nurse, you can face allegations of professional negligence if you do not adhere to the registered nursing standard of care.

## Health / Liability Coverage

Students are expected to provide their own medical insurance. Clinical training facilities are not obligated to provide any medical services free of charge. Malpractice liability insurance is required for each student; coverage is provided and the cost is included in fees for health profession students

## Mandatory Orientations for Clinical

Prior to all clinical courses, students are expected to complete agency-specific competencies. This includes the signing of confidentiality statements for each clinical site along with the following:

- [Community Medical Center \(CMC\) Orientation Manual](https://communitymed.org/student-affiliation-program): scroll down to “Paperwork, Documentation and Requirement Information.”  
(<https://communitymed.org/student-affiliation-program>)
- [Providence Saint Patrick Hospital \(SPH\) Orientation Manual](https://www.providence.org/locations/mt/st-patrick-hospital/health-care-professionals/student-portal): click on “Student Instructions/Forms and scroll through the entire document for all information.”  
(<https://www.providence.org/locations/mt/st-patrick-hospital/health-care-professionals/student-portal>)

Clinical orientation will consist of a tour of the respective facility, including training in EHR (Electronic Health Records), PYXIS (a drug security system), and respective facility policies and procedures.

## Essential Clinical Requirements

Physical, cognitive, psychomotor, affective and social abilities are required in unique combinations to provide safe and effective nursing care. The applicant/student must be able to meet the essential functions with or without reasonable accommodations throughout the program as found in Section 6, pages 64-66 of this document. Admission, progression and graduation are contingent upon the student’s ability to demonstrate the essential functions delineated for the nursing programs with or without reasonable accommodations. The nursing programs and/or its affiliated clinical agencies may identify additional essential functions. The nursing programs reserve the right to amend the essential functions as deemed necessary for patient safety.

Students with documented disabilities may receive reasonable and appropriate accommodations in the clinical setting when officially requested prior to starting the clinical experience. Please be prepared to provide a letter from your DSS Coordinator. For more information, contact [Office of Disability Equity](https://www.umt.edu/disability/) (<https://www.umt.edu/disability/>) 406-243-2243 (voice/text).



## Expected Clinical and Lab Behavior

Nurses are expected to exhibit professional behaviors. Throughout the MC nursing program, the student will develop and progress in skill level and professionalism. The method of instruction for specific behaviors will vary based on policy, learner needs, and role modeling. Professional behaviors will be assessed and evaluated through direct observation, discussion and documented on the clinical evaluation form during and upon completion of each clinical rotation. Student behavior is directly linked to program outcomes, evaluation tools and the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards/) (<http://www.umt.edu/student-affairs/community-standards/>). Students not meeting program outcomes and “acceptable” criteria according to the evaluation tool and in the Student Conduct Code will be counseled with possible disciplinary action taken as indicated.

When students participate in Nursing Lab, the expectations are the same as those for clinical. Dress code and professional behavior is an expectation in lab.

All students must practice academic honesty. Academic misconduct is subject to an academic penalty by the course instructor and/or a disciplinary sanction by the University. All students need to be familiar with the [UM Student Conduct Code](http://www.umt.edu/student-affairs/community-standards/) (<http://www.umt.edu/student-affairs/community-standards/>).

## Student Clinical Role

1. **Personal belongings** (wallets, purses, books, etc.) are discouraged from being brought to the clinical area due to lack of secure areas. Coats are to be hung in the areas provided for nursing staff on each unit.
2. **Gum chewing and tobacco use** are not allowed on the unit. Please avoid crowding staff lounges. Eating and drinking at the nurses’ stations is prohibited by OSHA standards. Do not eat or drink stock foods on the nursing units.
3. **Latex Sensitivity:** There is a possibility that you will encounter latex either in the nursing lab or in clinical. Please follow this protocol:
  - A:** If you think you may have a latex allergy, see a physician, call an allergist, and request a blood test to determine your sensitivity.
  - B:** If it is determined you are sensitive to latex, minimize or avoid contact with latex. Check package labels, avoid powdered gloves, select nitrite or vinyl gloves if appropriate/available and wash hands immediately after wearing gloves.
  - C:** Notify your instructor or primary nurse if you develop a skin rash or have difficulty breathing after using/wearing latex products.
  - D:** Follow any physician recommended treatment or precautions.
4. **Confidentiality and HIPAA compliance is top priority.** HIPAA is a federal mandate that must be followed by facility and students. **Never** discuss a patient with anyone not directly involved with that patient’s care. **NEVER** discuss patients in the cafeteria, elevator, at home or in **any** public area. **Do not write the patient’s name, initials, birth date or any personal identifiers on any of your written assignments, assignment sheet or other notes.** Breach of this confidentiality will result in immediate dismissal from assigned clinical area and completion of a Student Mutual Contract. Repeat offenses may result in probation, suspension, or dismissal from the program. **Never take a photograph in the clinical setting. This is a state and federal offense that can be punishable by fines, jail time, loss of employment and/or license. This action could jeopardize the viability of our nursing**

**program. Any breach of confidentiality will result in disciplinary action up to and including dismissal from the program. THINK BEFORE YOU ACT!**

5. **Patient charts** may not be taken off the nursing units. If the nurses' station is crowded, take the chart to the conference room after leaving a note in the chart holder stating where the chart is and who has it. **No part of a chart may be copied.** Computer copies of lab results, etc. may not be taken off the unit or used in student care plan assignments.
6. **Language** in all areas (including break areas) will be well-modulated, sensitive, and sensible and will not be of a confidential nature. Objectionable language use in any clinical area will not be tolerated. Offenders may be removed from assigned areas and referred to student services. Never discuss your personal problems with patients, visitors, or hospital staff. Be cautious about expressing your opinion without thinking. Do not become involved with the family business of patients.
7. **When answering the phone**, identify the unit and give your title. For example: "Orthopedic Unit, Alex Smith, Student Nurse." Do not take any orders or messages from physicians.
8. **At the completion of your shift**, check to make sure your patient's room is neat and that your patient has fresh water, etc. Remember to pick up after yourself in patient rooms, utility rooms, conference rooms and nurses' stations. Give a detailed written and/or verbal report to your primary nurse of care given, any unusual assessments and care remaining, before leaving each day.
9. **On each assigned unit**, be familiar with the location of the environment of care board, crash cart and the procedures for a code blue. Be familiar with the phone numbers at both hospitals for reporting code situations:
  - Providence Saint Patrick Hospital – 75330
  - Community Medical Center – 2222
  - Other clinical sites – 911
10. **When leaving the nursing unit** for any reason, let your primary nurse and instructor know where you are going and why. You may and should attend all tests and therapies with your patient. Students will not be solely responsible for a patient while accompanying them off the unit and will not substitute for hospital personnel for transport. Students may not accompany patients outside the institution alone. Students are allowed one 30-minute break for each six-hour shift worked and after 8 hours 2 fifteen-minute breaks. Breaks are to be taken off the nursing units but on facility grounds in designated eating areas and must first be approved by your primary nurse. Keep in mind the priority of timely patient care which may at times delay scheduled breaks.
11. **Before discharging a patient**, make final check with the primary nurse: all patients must have IVs discontinued, received needed supplies, medications, prescriptions, personal belongings, discharge instructions and a written discharge order by the physician.
12. **Seek Learning Experiences**: It is your responsibility to seek and find learning experiences such as procedures to perform. Word of warning: Do not let us find you standing around with your hands in your pockets!!! Clues to upcoming procedures include noting NPO signs, special sets and equipment brought to the unit and listening carefully during report. Call your instructor for all procedures. Before performing any tasks or procedures, ask yourself "WHY?" You should be prepared to discuss the rationale and underlying principles for all procedures. **Never assume anything! Find the needed information!!**

13. **Document according to agency and unit policy format.** Documentation varies from facility to facility and from unit to unit. Have all nurses' notes approved by instructor or primary nurse prior to writing them in the chart until you are comfortable with the format. Do not chart on the computers in the nurse's station at SPH. Start notes on scratch paper ***promptly*** after initial patient assessment and update appropriately throughout the shift. Record vital signs, I and O, and medications promptly.
14. **Medications** are to be set up and administered only in the presence of your instructor until designated otherwise by your instructor. Follow exactly the medication administration protocol learned in classroom and lab, as well as facility protocol. Page your instructor 30 minutes before each scheduled medication time (unless previously arranged with the instructor). Know the medications (generic and brand names, usual dosage range, action, side effects, route, dosage and any pertinent nursing implications). If unable to reach your instructor, ask your primary nurse to give the medication.
15. **Demeanor:** Demonstrate an interest in nursing, your patients and others while on duty. Be the first person to smile and say hello to hospital staff members, patients, visitors, etc.
16. **Policy & Procedure Manuals:** When orienting on a nursing unit, be familiar with where the policy and procedure manuals are located on the computer facility website or on the floor. You will be expected to follow them.
17. **Start-of-Shift Protocol - Charts:** Each day prior to report, review patient's chart for any changes or new orders. Make appropriate changes on your daily report sheets and use the information to ask pertinent questions during report. Having thoroughly studied the chart the day before, you need only to check the preceding 24-hours of nurses' notes, doctors' orders, vital signs and other flow sheets, doctors' progress, lab and diagnostic reports and medication administration record (MAR). If the chart is unavailable to you the day before, you are responsible for making time to prepare properly PRIOR to report. If your assigned patient has been discharged, it is your responsibility to notify your clinical instructor and select an alternate patient to care for. Remember as well, if there is identifying information on your report sheet, it may not leave the facility and must be shredded.
18. **Start-of-Shift Protocol – Primary Nurse:** Introduce yourself to your primary nurse on arrival to the unit. You are expected to participate in bedside report on all of the patients assigned to your nurse. Tell him/her what your hours will be and what you will and will not be doing.
19. **Patient Assessments:** On all assigned patients, you will systematically perform assessments that are complete and within the scope of practice for the nursing student. Please be attuned to provider orders. Report questionable or abnormal findings promptly to the clinical instructor and primary nurse.
20. **Taping Patient Reports:** If asked to "audio-tape" a report on your patient, write out the information on scratch paper and have it approved by your primary nurse before recording. Students who tape report must be available to oncoming shifts to answer questions.
21. **Substance Use:** Students are responsible for following all facility work and safety rules and for observing the standards of behavior of our clinical affiliate sites. You are strictly prohibited from using or being under the influence of prohibited substances or alcohol while in clinical. We recognize the use of any drug, legal or illegal, can adversely affect a student's work performance and safety.

The misuse of legal prescriptions is a common form of drug abuse. There are situations where students can safely and efficiently perform their jobs while taking prescribed drugs.

It is your responsibility to ask your provider or pharmacist about the potential effects of your prescription medication(s) before starting clinical. A student must inform the Nursing Program Director of the use of a medically prescribed drug or an over-the-counter drug that might affect, alter or impair behavior, motor functions or physical or mental abilities prior to starting a clinical rotation.

Chemical dependence has been identified as a primary concern of the Montana State Board of Nursing, according to the Executive Director. Complimentary online courses have been developed to help students and nurses to better understand the physical and behavioral signs of chemical dependency. Students are encouraged to access these courses entitled: [“Nurse Manager Guidelines for Substance Use Disorder”](#) and [“Understanding Substance Use Disorder in Nursing”](#). These are self-paced courses from the National Council for State Boards of Nursing, (NCSBN) meant for nurses at all educational levels.

## **22. Practice all Joint Commission National Patient Safety Goals:**

- **Identify patients correctly**
  - Use at least two ways to identify patients. For example, use the patient’s name *and* date of birth. This is done to make sure that each patient gets the medicine and treatment meant for them.
  - Make sure that the correct patient gets the correct blood type when they get a blood transfusion.
- **Improve staff communication**
  - Quickly get important test results to the right staff person.
- **Prevent infection**
  - Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization.
  - Use proven guidelines to prevent infections that are difficult to treat.
  - Use proven guidelines to prevent infection of the blood from central lines.
  - Use safe practices to prevent infection after surgery.
  - Use proven guidelines to prevent infections of the urinary tract that are caused by catheters.
- **Use alarms safely**
  - Make improvements to ensure that alarms on medical equipment are heard and responded to on time.
- **Use medicines safely**
  - Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups and basins. Do this in an area where medicines and supplies are set up.
  - Take extra care with patients who take medicines to thin their blood.
  - Record and pass along correct information about a patient’s medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Make sure the patient knows which medicines to take when they are at home. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.
- **Identify patient safety risks**

- Find out which patients are most likely to try to harm themselves
- **Prevent mistakes in surgery**
  - Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.
  - Mark the correct place on the patient's body where the surgery is to be done.
  - Pause before the surgery to make sure that a mistake is not being made.

## **Clinical Attendance**

Tardiness in clinical is defined as up to 15 minutes late for a clinical assignment. Tardiness past two occurrences will be considered an absence. A student contract will be formulated with a student with attendance and punctuality problems. Personal appointments made during scheduled clinical hours will be considered an absence. An absence in clinical must be excused by documentation from a healthcare provider or must constitute an extenuating circumstance AND must involve prior notification to the clinical instructor and to the primary instructor. Not doing so will result in an unacceptable score for your clinical experience.

## **Supervision During Clinicals**

Students are expected to communicate any issues or concerns that may arise in a professional manner using the appropriate chain of command. In the clinical setting all issues or concerns should be reported to the supervising clinical faculty. Any unresolved issues or concerns should then be reported to the Course Instructor and/or Program Director. The overall responsibility for the Nursing program is with the Program Director at the MC.

## **Clinical Preceptors**

Students may participate in clinical experiences under the direct supervision of a preceptor in some of the courses. The use of preceptors by students must be approved by the clinical faculty. Courses offering a preceptor component may include: NRSG 235, 237, 245, 247, 261 and 267. Facilities utilized for preceptors must have an active affiliate agreement.

The Preceptorship learning experience follows standards to ensure student, facility and preceptor safety and policy compliance. Preceptors are chosen in cooperation with the facility and are supervised by Missoula College Nursing Faculty who are available for consult during the entire clinical experience.

- Each student will be assigned to only one nurse. The student to preceptor ratio is 1:1.
- Orientation and a Preceptor manual are provided to both the student and the preceptor.
- MC faculty make visits (in person or electronically) to the facility during a time when the student is present, two to four times per semester and/or as needed depending on the total hours of the Preceptorship.
- MC faculty is available by phone during the entire time the student is participating in clinical hours. The contact information will be provided to the preceptor.
- MC faculty is available to assist staff in the evaluation of the student.

- Each course that has a preceptor learning experience has a Preceptor Manual available to students and the preceptor. The manual outlines the clinical and course objectives for the student, preceptor, and responsible faculty. It also provides general information about the student and the program.
- Students are not allowed to be in clinical more than three (3) twelve (12) hours shifts in a row, unless preauthorized by faculty. Between classroom and preceptorship hours, fatigue could be a potential patient harm issue; therefore, students must adhere to the time constraint.

Students and/or faculty arrange clinical schedules with the assigned preceptor. Prior to the first day of the preceptorship clinical, the MC faculty must have a copy of the schedule. Any changes in schedule must be communicated with instructor. In NRSG 235 Adult Nursing I, there is opportunity for preceptorship hours at Montana State Prison. NRSG 266 Managing Client Care Clinical, the preceptorship starts at the beginning of the course. In NRSG 245 and NRSG 261, Adult Nursing II and III, there is an opportunity for rural nursing preceptorship clinical. These students apply and are picked by faculty to participate in the program.

## **Clinical Evaluation**

Each clinical instructor may complete a midterm and final written evaluation. Evaluations review mainly the student's psychomotor and affective behaviors during the rotation, and also include evaluation of cognitive skills. These evaluations will be discussed between the student and the clinical instructor. This represents an opportunity to discuss the student's progress and should not be interpreted by the student as undue criticism. Students are asked to accept constructive criticism in a professional, positive manner and to learn from this feedback. It is the student's responsibility to meet with the instructor to review the evaluation.

Clinical paperwork is considered part of the clinical evaluation. Paperwork must be typed with appropriate use of spelling and grammar. Correct use of APA format is an expectation. The paperwork may be returned to be corrected when spelling, grammar and/or APA format is not appropriately followed.

Students have the opportunity to evaluate instructors and clinical sites, if pertinent, at the end of each course via a formal course evaluation form.

## **Travel to Clinical Training Sites**

Students must have available and reliable transportation in order to insure that the student is able to arrive on time, both at local and distant clinical sites. Lack of transportation is not considered a viable reason to miss clinical. Situations related to snow and ice will be considered. As a rule, if The University System cancels face to face classes campus wide due to inclement weather, clinical is also cancelled. Please listen to local radio and television regarding campus closures and late starts.

## **Clinical Site Parking**

Students are expected to abide by the parking policy provided by each facility. Vehicles must be

parked in appropriate areas and may be subject to towing at the student's expense. A parking violation may result in loss of clinical privileges, an unacceptable score for that clinical experience and possible dismissal from program.

### **Providence Saint Patrick Hospital:**

Vehicles must be parked on the streets or in designated student parking lots. Do not park in the designated patient parking areas. Students will be issued citations by Missoula Parking Commission if parked in the wrong areas.

### **Community Medical Center:**

Students are to park in the lots designated for employees. These lots are located in front of the hospital farthest away from main entrance. The front areas are for visitors and clients. In the event a student is noted to have parked in a visitor or client area, clinical privileges may be revoked and students may not be allowed to return to clinical. Please refer to Orientation Module for further clarification.

## **Pre and Post Clinical Conferences**

Pre and post clinical conferences are an integral part of the student's learning. Conferences are informal and interactive; therefore, all students are expected to contribute by sharing clinical experiences related to the learning objectives and focus for the clinical experience. Students are guided to set new goals for their next clinical experience.

***Attendance and participation are mandatory.***

### **Pre-Clinical Conferences**

Pre-clinical conferences last 10-15 minutes, are between an individual student and the clinical instructor, and occur prior to delivering direct patient care. The purpose of the Pre-conference meeting is to:

- a. Present and clarify the objectives for the clinical experience.
- b. Address student questions regarding the assigned patient.

### **Post-Clinical Conferences**

Post-clinical conferences last 30-60 minutes, involve all students assigned to the clinical site and the clinical instructor, and occur at the end of the clinical. Again, attendance is mandatory, and considered part of the scheduled clinical hours. Students are advised not to plan personal appointments during clinical conference, as they will be considered absent from clinical.

The purpose of the post-clinical conference is to:

- a. Analyze clinical experiences and share learning experiences with classmates,
- b. Correlate theory to clinical practice,
- c. Provide an opportunity to identify, clarify and explore nursing problems.
- d. Provide for active participation of each student.
- e. Present assigned patient or other case study.
- f. Practice effective communication using SBAR as a means to "report" and communicate with peers and supervisors.

## Uniform Policy – Clinical Experiences

The uniform identifies an individual as a student in the Missoula College of the University of Montana Nursing program and is to reflect a positive and professional image of the individual and the school. Clinical institutions also have specific dress code policies which govern student dress code for clinical.

1. Uniform will be selected by the MC Nursing Program
2. The maroon uniform may be purchased through the University Bookstore, at area scrub shops, or online.
3. The maroon uniforms shall be clean, neat, pressed, and free of wrinkles and in a good state of repair; reflecting high professional standards at all times. No open-toed or open heel shoes or sandals. No Crocs are allowed at clinical facilities. Duty shoes must be neat and clean and appropriate for the clinical setting.
4. The Missoula College Nursing Program patch must be sewn on the left arm.
5. The maroon uniform is worn during all clinical experiences conducted in agencies where the use of a uniform is required.
6. The name pin includes the student's first and last name, ASN class, and Missoula College title. It is to be worn above the chest pocket.
7. The name pin **MUST** be worn at any time the student is in a lab or clinical setting. For patient safety reasons, you will be asked to leave without this proper identification. This will be considered a lab or clinical absence.
8. Clinical specific name badges **MUST** also be worn at any time the student is in the clinical setting. For patient safety reasons, you will be asked to leave clinical without this proper identification. This will be considered a clinical absence.
9. Variations in the dress code due to the requirements of the clinical setting will be clarified by faculty.

Exceptions to the dress code which are related to cultural or religious beliefs may be granted by the Program Director or a designee, upon written request by the student.

10. Students are expected to have required supplies during clinical at all times. These include:
  - functional stethoscope
  - working penlight
  - report sheet
  - pen
  - appropriate clinical paperwork
11. Official uniforms and identification must be worn anytime a student is at a lab or clinical site. This includes when choosing a patient.
12. When street clothes are worn according to a clinical site policy, they must conform to the dress code of the clinical agency and under the guidelines of Professional or Casual Business Attire. No denim or jeans are allowed at SPH or CMC.
13. Body and hair must be clean and odor free. Hair length longer than shoulder length must be worn off the face, secured behind the shoulders. Unnatural hair color (e.g. bright reds, greens, blues, etc.) is unacceptable and not permitted. Beards and moustaches are permitted but must be well-trimmed and neat.
14. Fingernails must be short, clean and no longer than ¼” past the fingertip. Artificial nails are not acceptable.



15. Tattoos considered to be offensive must be covered or concealed. Students are allowed only two post earrings and no “plugs.” Earrings must not dangle off of the ear more than ½ inch. One nose stud up to 1/8 inch in size. Students are allowed to wear two rings.

### **Professional Business Attire**

- Suit or jacket and pants/ skirt (skirt knee length or below); tailored dress
- Blouse/Shirt
- Shoes – comfortable low heel pumps to complement suit; coordinate with attire, clean and shined
- Stockings or socks– to complement attire
- Jewelry (if applicable) – simple and in good taste i.e. (if applicable) – in good taste to fit the occasion and complement the outfit
- Belt (if applicable) – coordinate with shoes and suit

### **Casual Business Attire**

- Shirt or blouse with collar or polo style
- Slacks
- Chinos or khakis – neatly pressed
- Skirt (knee length or below)
- Blazer or sweater
- Loafers or lace-up shoes – cleaned and shined

Inappropriate attire, including t-shirts, tank tops, jeans, shorts, skirts above the knee, tight fitting or suggestive clothing, flip flops, sneakers, sandals, athletic wear, leggings, bare midriffs or low-cut garments (low-cut necklines or low-rise pants), should not be worn to any clinical placement. No bare legs are allowed at CMC or SPH.

Nursing students should always wear student uniforms when giving nursing care, unless a different policy is specifically defined for the clinical unit (e.g., Mental Health).

## **Communicable Disease / Infection Control Policy**

Students are expected to use sound judgment with regard to preventing communicable disease in the classroom, lab or clinical setting.

The following are guidelines to assist students in their decision making.

- Fever greater than 100.4 F
- Diarrhea
- Contagious rash or undiagnosed rash with drainage
- Cold sores or fever blisters around the mouth
- Shingles
- Antibiotic therapy of less than 24 hours, i.e. strep throat
- Untreated Lice infestation
- Cough with yellow or green sputum
- Vomiting

(continued on next page)

- COVID-19 policy and procedures mandates:
  - Missoula College Nursing Program Policies Procedure Manual, Policy# S37 - see [Nursing Student Resources](https://www.umt.edu/missoula-college-nursing/nursing-student-resources.php/) (https://www.umt.edu/missoula-college-nursing/nursing-student-resources.php)/
  - [University of Montana Official Coronavirus Information](https://www.umt.edu/curry-health-center/corona-virus.php) (https://www.umt.edu/curry-health-center/corona-virus.php).

**Questions:** Students with any questions or concerns regarding clinical attendance and communicable disease or infection control should contact the instructor.

For additional information, please refer to the [Center for Disease Control](https://www.cdc.gov/infectioncontrol/) (https://www.cdc.gov/infectioncontrol/).

## Reporting of Occupational Exposure to Bloodborne Pathogens

### Student Policy on Bloodborne Pathogens, September 20, 2012

Students in any academic, research or occupational program at the University of Montana at risk for blood borne pathogen exposure are required to initiate the Hepatitis B vaccination series prior to their first potential exposure. Exceptions include students who have previously received the complete hepatitis B vaccination series and antibody testing has revealed that the student is immune or the vaccine is contraindicated for medical reasons. Students must also have training comparable to that required in the OSHA Blood borne Pathogen Standard in paragraph (g)(2)(vii)(I) prior to initial placement in a clinical or academic setting where there is reasonable anticipation of a potential blood borne pathogen exposure.

Students who cannot meet this requirement, for personal or health reasons, must have their case reviewed by the Institutional Biohazards Committee (IBC) on an individual basis. Final approval or waiver must be granted in writing, prior to their first potential exposure to human blood or other potentially infectious materials. Records of the waiver or approval shall be kept in the students file within the department.

### Procedure

1. Students who are unable to meet the requirements of documentation of immunity or initiation of the vaccination series, for personal or health reasons must provide written documentation of the reasons, for review by the Institutional Biohazards Committee. Requests for review by the IBC must be made by the student early enough to allow resolution prior to the student's first potential exposure to human blood or other potentially infectious materials.
2. Per CDC guidelines, students who do not respond to the primary vaccine series should complete a second 3-dose vaccine series or be evaluated to determine if they are Hepatitis B surface antigen (Hbs-AG)-positive. Revaccinated persons should be tested at the completion of the second series. Persons who do not respond to an initial 3-dose vaccine series have a 30-50% chance of responding to a second 3-dose series. Persons who prove to be Hbs-AG-positive should be counseled regarding how to prevent HBV infection to others and the need of medical evaluation. Nonresponders to vaccination who are Hbs-AG-negative should be considered susceptible to HBV infection and should obtain Hepatitis B immunoglobulin (HBIG) prophylaxis for any known or probable parenteral exposure to Hbs-AG- positive blood.

3. Effective June, 1996, students are required to present, prior to their first potential exposure to human blood or other potentially infectious materials:
  - a. Documentation of serologic immunity ( $\geq 10\text{mIU/ml}$ ) or
  - b. Documentation of immunization series with plan for final titer and revaccination or booster as indicated (see #2 above) or
  - c. Documentation of completed review by the Institutional Biosafety Committee (IBC) and signed by the IBC Chairperson with statement of exemption from immunization requirement and waiver form signed by the student or
  - d. Documentation of initiation of the immunization series.

Students will NOT be allowed in areas or settings which may present their first potential exposure to human blood or other potentially infectious materials without this documentation.

## Exposures

If a student has an exposure (i.e., eye, mouth, mucous membrane, non-intact skin, or parenteral contact with blood or potentially infectious materials) in a clinical setting, the student is financially responsible for obtaining post-exposure testing. Testing and counseling shall be done at the Curry Health Center whenever possible. If exposure occurs outside of Curry Health Center's hours of operation, the student must report to an Emergency Department to obtain the post-exposure testing. Records of the exposure and follow-up shall be kept in the student's file in the Environmental Health and Occupational Safety Office.

### Procedure for students with an exposure:

1. Immediately inform your clinical instructor and primary nurse.
2. Follow any clinical site policy and procedure.
3. Report to Curry Health Center for evaluation and testing.
4. Expenditures occurred due to an exposure are the responsibility of the student.

## Training

Student training shall be done prior to the student's first potential exposure to blood borne pathogens. The training shall include the requirements of the Blood borne Pathogen Standard, universal precautions and the University of Montana policy. This training is done at new nursing student orientation through the training provided for The University at large at the beginning of each semester. Students will repeat this training in their third semester.

### Standard Precautions

The following safe work practices for health care workers are advocated by the Center for Disease Control. When the term Standard Precautions is used, it will refer to the following set of work practices:

1. All health care workers will use appropriate barrier precautions to prevent skin and mucous membrane exposure when contact with blood or bodily fluids is anticipated.
2. Gloves must be worn when touching blood, bodily fluids, mucous membranes, or non-intact skin.
3. Gloves must be worn when handling items or surfaces contaminated with blood or bodily

fluids.

4. Gloves must be worn while performing venipuncture and other vascular access procedures.
5. Gloves must be changed after contact with each client.
6. Masks and protective eyewear or face shields should be worn during procedures that are likely to generate droplets of blood or other bodily fluids in order to prevent exposures of the mucous membranes of the mouth, nose, and eyes.
7. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or other bodily fluids.
8. Hands and other skin surfaces should be washed immediately and thoroughly with water and antiseptic cleanser if contaminated with blood or other bodily fluids.
9. Hands should be immediately washed after gloves are removed.
10. Healthcare workers must take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during or after medical procedures, when cleaning instruments, and during disposal of used needles.
11. To prevent needle-stick injuries, needles should never be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand.
12. After they are used, disposable syringes, needles, scalpel blades, and other sharp items must be placed in puncture-resistant containers for disposal. These containers should be as close as practical to the area where disposable sharps are used.
13. Mouth pieces, resuscitation bags, or other ventilation devices should be available for use in areas in which the need for resuscitation procedures is reasonably anticipated.
14. Health care workers who have exudative lesions or weeping dermatitis must refrain from handling client and client-care equipment until the condition is resolved.
15. Healthcare workers will use effective hand washing methods BEFORE and AFTER all client contact.

## Clinical and/or Preceptor Sites (may include others)

ALEPH / Winds of Change 1120 Cedar Street Missoula, MT 59802	Frenchtown Family Practice 16862 Beckwith Street, Ste Q Frenchtown, MT 59834	Montana State Prison 400 Conley Lake Road Deer Lodge, MT 59722
The Birth Center 2404 39 <sup>th</sup> Street Missoula, MT 59803	Grant Creek Family Medicine 3075 North Reserve Street, Ste Q Missoula, MT 59808	Partners in Home Care 2673 Palmer Street Missoula, MT 59808
Bitterroot Health 1200 Westwood Drive Hamilton, MT 59840	Head Start Program 1001 Worden Avenue Missoula, MT 59802	Partnership Health Center 401 Railroad Street West Missoula, MT 59802
Cabinet Peaks Medical Ctr 209 Health Park Drive Libby, MT 59923	Lolo School District 7 11395 US-Hwy 93 South Lolo, MT 59847	Providence St. Patrick Hospital 500 West Broadway Street Missoula, MT 59802
Clark Fork Valley Hospital 10 Kruger Road Plains, MT 59859	Mineral Community Hospital 1208 6 <sup>th</sup> Avenue East Superior, MT 59872	Riverside Health & Rehabilitation 1301 East Broadway Street Missoula, MT 59802
Community Medical Center 2827 Fort Missoula Road Missoula, MT 59808	Missoula City-County Health Dept 301 West Alder Street Missoula, MT 59802	St. Luke Community Hospital 107 6th Avenue SW Ronan, MT 59864
Community Medical Services 2415 S Catlin Street Missoula, MT 59801	Missoula Developmental Serv Corp 1005 Marshall Street Missoula, MT 59801	The Village Health & Rehabilitation 2651 South Avenue West Missoula, MT 59804
Consumer Direct Care Network 100 Consumer Direct Way Missoula, MT 59808	Montana State Hospital 300 Garnet Way Warm Springs, MT 59756	West House Adult Crisis Facility Western MT Mental Health Ctr 1404 Westwood Drive Hamilton, MT 59840
Florence-Carlton School 5602 Old Hwy 93 Florence, MT 59833		

# Section 6 – University Student Resources

## Financial Aid

### Office of Financial Aid

The office of Financial Aid is located on the UM 4-year campus, currently in the Emma Lommasson Center on level two. The goal of the Financial Aid office is to assist students who believe their resources are inadequate to attend the MC and wish to request consideration for financial aid. The office can provide or direct students to pertinent information by the U.S. Department of Education, [UM Financial Aid website](https://www.umt.edu/finaid/) (<https://www.umt.edu/finaid/>).

Federal Student Financial Aid provides assistance to students enrolled at least half-time. Federal student financial aid helps to cover educational expenses, including tuition and fees, room and board, books and supplies, and transportation. Most aid is need based. The three types of aid are grants, loans, and work-study. Short-term emergency loans are available for educationally-related expenses. To be considered for Federal Financial aid, students should complete the Free Application for Federal Student Aid.

### FAFSA Application Process

Follow these steps to assure your priority consideration for available funds: Complete and submit the [Free Application for Federal Aid \(FAFSA\)](https://studentaid.gov/h/apply-for-aid/fafsa) (<https://studentaid.gov/h/apply-for-aid/fafsa>) to the federal processor by the posted deadline. You may be asked to submit additional documents; be sure to do so by the deadline date specified in the requesting correspondence.

## Library Resources

### UM and Missoula College Libraries

- [Library Email](mailto:library.instruction@mso.umt.edu) ([library.instruction@mso.umt.edu](mailto:library.instruction@mso.umt.edu))
- [Information Literacy webpage](https://www.lib.umt.edu/services/info-lit/default.php) (<https://www.lib.umt.edu/services/info-lit/default.php>)

Students are expected to utilize library resources and use reliable, valid and evidence-based research references to support written work. Wikipedia is NOT a reliable resource. Written work with unreliable sources will be returned and are not acceptable.

The University of Montana has Mansfield Library has two locations: The Payne Family Library on the Missoula College River Campus at 1205 East Broadway and West Campus at 3639 South Avenue West. The main Missoula College branch is the River Campus located on the River Level; library hours are hours listed below. The Mansfield Library offers 24/7 electronic access to [reference resources](http://libguides.lib.umt.edu/healthprofessions) (<http://libguides.lib.umt.edu/healthprofessions>), including journals, books, and digital holdings.

#### [UM Mansfield Library - Mountain Campus](https://www.lib.umt.edu/) (<https://www.lib.umt.edu/>)

- **Main Phone Line:** 406-243-6866 / **Location:** MLIB 323
- Head Information and Research Services: Tammy Ravas;  
Phone: 406-243-4402 / Email: [tammy.ravas@umontana.edu](mailto:tammy.ravas@umontana.edu)
- [Library Hours](https://www.lib.umt.edu/about/hours) (<https://www.lib.umt.edu/about/hours>)

**Payne Family Library at Missoula College** (<http://www.lib.umt.edu/about/missoula-college.php>)

- **Phone:** 406-243-7820 / **Location:** MC 005 – River Level
- **Email:** [mclibrary@umontana.edu](mailto:mclibrary@umontana.edu)
- **Library Staff:**
  - Annie Weiler, Library Technician: [annie.weiler@umontana.edu](mailto:annie.weiler@umontana.edu)
  - Daniel Vollin, Library Technician: [daniel1.vollin@umontana.edu](mailto:daniel1.vollin@umontana.edu)
- **Library Hours:**
  - Monday – Thursday, 7:30 a.m. – 5:00 p.m; Friday, 7:30 a.m. - 12:00 p.m.
  - Closed Saturday, Sunday, and all legal holidays

**Access to the Mansfield Library’s Health Resources**

**Start at the [library’s home page](http://www.lib.umt.edu)** (<http://www.lib.umt.edu>).

1. For a quick search on any topic, use the search box on the left had side of the screen.
2. For more in-depth research, use the [Missoula College Health Professions Research Guide](https://libguides.lib.umt.edu/healthprofessions) (<https://libguides.lib.umt.edu/healthprofessions>) as your access point to the library’s health information resources. It contains links to databases, library services, and contact information for your librarian. It’s a good idea to bookmark this page.
3. Any time you have a question you can email or chat with a librarian.
  - Use the link at the bottom right side of the screen. If the link displays “Chat with a librarian” versus “Email a Librarian” there is someone who will answer your questions in real time.
  - If the link displays “Email a librarian” you will receive a response to your question via email.
  - You can also always contact your librarian, Kate Zoellner, for research assistance at (406) 243-4421 or via email at [kate.zoellner@umontana.edu](mailto:kate.zoellner@umontana.edu).

**Providence Saint Patrick Hospital / Providence Health & Services**

**Health Library via the Learning Center**

**Medical Librarian:** Dana Kopp:

Phone: 406-329-5711

Email: [Dana.Kopp@providence.org](mailto:Dana.Kopp@providence.org)

**Learning Center**

(<https://montana.providence.org/health-resources/the-learning-center>)

Phone: 406-329-5710

Email: [library@saintpatrick.org](mailto:library@saintpatrick.org)

Location: 500 West Broadway, Missoula, MT 59802

(Broadway Building, street level, and left of the main entrance)

## Office for Disability Equity

The University of Montana assures equal access to instruction through collaboration between students with disabilities, instructors, and the Office for Disability Equity (ODE). If you think you may have a disability that will adversely affect your academic performance, and have not already registered with ODE, please contact them (see information and locations below).

**Please contact your instructors at the beginning of the semester, even if you think you may not use the accommodation for that course.** Nursing faculty will work with you and ODE to provide appropriate accommodations.

### ODE Information & Contacts

- [Homepage](https://www.umt.edu/disability) (https://www.umt.edu/disability)
- [Students' webpage](https://www.umt.edu/disability/Students) (https://www.umt.edu/disability/Students)
- [Contacts & Hours of Operation](https://www.umt.edu/disability/about-us/contact-us.php) (https://www.umt.edu/disability/about-us/contact-us.php)
- [Staff Directory](https://www.umt.edu/disability/about-us/staff-directory) (https://www.umt.edu/disability/about-us/staff-directory)

### ODE Reasonable Accommodations & Making a Request

- [Reasonable Accommodation List](https://www.umt.edu/disability/accommodations) (https://www.umt.edu/disability/accommodations)
- [Request Accommodations](https://www.umt.edu/disability/Students/requesting_accommodations.php) (https://www.umt.edu/disability/Students/requesting\_accommodations.php)

### ODE Locations

Mountain Campus	Missoula College River Campus
University of Montana, Missoula, MT 59812 Lommasson Center, Room EL 154 Appointments made via Mika Watanabe at (406) 243-2243 (voice mail) or (208) 503-3711 (cell)	1205 East Broadway, Missoula, MT 59802 Room MC 129 (main level) Appointments made via Bonnie Kurien at (406) 243-7804 (voice mail) or (406) 209-8870 (cell)

### Reporting Barriers to Accessibility

To notify the Office of Equal Opportunity and Affirmative Action of a campus physical, electronic, or programmatic barrier or to simply to make a comment on accessibility, please go to the [Report Barriers online form](https://www.umt.edu/accessibility/report) (https://www.umt.edu/accessibility/report). You can use the form to make a comment anonymously if you like.

Many classrooms have chairs in them to accommodate persons with a disability. These chairs will display the international disability symbol and are assigned to a particular student. Please refrain from using these chairs or making adjustments to them unless the chair is assigned to you. If you think you may have the need for a special chair, please contact the Office of Disability Equity.

Eligible students with disabilities will receive appropriate accommodations when requested in a timely manner. Speak with the instructor of the course. Be prepared to provide a letter from your ODE Coordinator. For students planning to request testing accommodations, please provide the form for such accommodation to the instructor in advance of the two-day deadline for scheduling.



## Policies on Discrimination, Harassment & Retaliation

Equal opportunity laws, orders, acts, and regulations applicable to Missoula College University of Montana include, but are not limited to:

- [Titles IV, VI, and VII of the Civil Rights Act of 1964](#)
- [34 C.F.R. pt. 100](#)
- [Title IX of the Education Amendments of 1972](#)
- [28 C.F.R. pt. 54](#)
- [34 C.F.R. pt. 106](#)
- [Section 504 of the Rehabilitation Act; 34 C.F.R. pt. 104](#)
- [Age Discrimination Act of 1975](#)
- [34 C.F.R. pt. 110](#)
- [Titles I and II of the Americans with Disabilities Act](#)
- [28 C.F.R. pt. 35](#)
- [Montana Human Rights Act and Governmental Code of Fair Practices](#)
- [Board of Regents Policy 507](#)

The University of Montana, together with our Affiliates, commits to a learning and working environment that emphasizes the dignity and worth of every member of its community that is free from discrimination, harassment, and retaliation based upon race, color, religion, national origin, creed, service in the uniformed services (as defined in state and federal law), veteran status, sex, gender, age, political ideas, marital or family status, pregnancy, physical or mental disability, genetic information, gender identity, gender expression, or sexual orientation (taken together, generally, “protected-class harm”). An inclusive environment is necessary to a healthy and productive University community. The University will take appropriate action to prevent, resolve, and remediate protected-class harm. Source – [University Operating Policies](https://www.umt.edu/policies/browse/personnel/discrimination-harassment-and-retaliation): (<https://www.umt.edu/policies/browse/personnel/discrimination-harassment-and-retaliation>).

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

The essential functions listed below are those deemed necessary by the Missoula College University of Montana Nursing Program. No representation regarding industrial standard is implied. Similarly, any reasonable accommodations made will be determined and applied to the respective nursing program and may vary from reasonable accommodations made by healthcare employers.

These essential functions are necessary for nursing program admission, progression and graduation and for the provision of safe and effective nursing care. The essential functions include but are not limited to these Sensory Perception Skills:

- |               |                              |  |
|---------------|------------------------------|--|
| (1) Visual;   | (4) Olfactory;               | (6) Cognitive / Critical Thinking; and |
| (2) Auditory; | (5) Communication /          | (7) Motor Function                     |
| (3) Tactile;  | Interpersonal Relationships; |  |

Detailed descriptions of these skills are in Section 3, pages 26 and 27, of this handbook under “Minimum Skills for Eligibility to Participate in the Nursing Program.”

## Health Services

Curry Health Center (CHC) provides health services to University of Montana students. The center's telephone number is 243-2122. Services are available on an appointment basis.

### Services

Some services are covered by the Curry Health fee; others are on a fee-for-service basis. Services offered include medical care, counseling/psychological services, dental care, substance abuse intervention, health enhancement services, assault recovery services, and a complete prescription pharmacy.

In addition, students in the Clinical Psychology Program offer a variety of counseling services on a sliding-fee scale. The UM Physical Therapy Clinic also offers a variety of services on a fee-for-service basis.

**Please see the [Curry Health Center website](http://www.umt.edu/curry-health-center) (www.umt.edu/curry-health-center) for a complete list of services offered along with updated details.**

#### Medical

- Flu Season Facts
- Flu Information
- Medical Services Offered
- Medical Withdrawals
- Inpatient
- Medical Specialist
- Travel Planning
- Lab X-Ray

#### Dental

- About Dental
- Making Appointments
- Referrals to other Dentists
- Dental Insurance Billing
- Who can use Dental service
- Cancelling Appointments
- Teeth Cleaned

#### Counseling/Mental Health

- About Counseling
- Referral Info for Faculty/Staff
- Depression
- Grief and Loss
- Appointment & Fees
- Stress Relax

#### Health Enhancement

- CARE (condom access)
- PROS (Peers Reaching Out)
- About Health Enhancement
- Schedule a Presentation
- Safer Sex Resources
- Where to get health information
- Great American Smoke Out

#### Self Over Substance (SOS)

- About Self Over Substance
- University Mandated Referrals
- Legal Mandated Referrals
- Peer Educators
- Scheduling & Cancelling Appointments
- Graduate Student Opportunities and Counselor Education
- SOS Resources

#### Student Assault Resources Center (SARC)

- About Student Assault Resource Center
- Healthy Relationships
- Stranger Rape
- Acquaintance Rape
- Red Flags and Warnings
- How to Party Safe
- Rape prevention vs. Risk reduction
- SARC Support groups
  - For Survivors: Sexual and Relationship violence
  - Relationship violence and stalking
  - Options and Resources
  - How to help
  - Sexual Violence, Harassment, Assault & Rape
  - SARC Services
  - If you have been raped
    - HIV Testing
    - Pharmacy

## Helpful Health Services Phone Numbers

Counseling .....	406-243-4711
Dental Clinic .....	406-243-5445
Wellness.....	406-243-2809
Medical Services .....	406-243-4330
Pharmacy .....	406-243-5171
Self over Substances (SOS).....	406-243-4711
Student Assault Resource Center (SARC) 24 Hour Support Line .....	406-243-6559
Student Assault Resource Center (SARC) Main Office .....	406-243-4429
Student Insurance .....	406-243-2844

# Section 7 – Appendix and Student Forms

## Form 1 – Student Agreement

When you have finished reading the entire Student Handbook, please sign the statement below.

I have read and agree to the requirements of the Nursing Program as defined in the Student Handbook and understand that failure to abide by the policies will be grounds for disciplinary action and possible dismissal from the program.

**STUDENT NAME (PRINTED):** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**STUDENT SIGNATURE:** \_\_\_\_\_

**PROGRAM DIRECTOR:** Linda Barnes MSN, RN, CNE (406) 243-7875

**HEALTH PROFESSIONS CHAIRPERSON:** TBA

## Form 2 – Confidentiality Agreement

Students in the MC UM Nursing Programs will be working with clients and client records in various types of healthcare facilities and in the classroom.

Student use of medical records and confidential information in the educational process requires:

All information about a client, written or verbal, belongs to the client. Any violation of confidential information about a client is punishable in a court of law. Refer to the Health Insurance Portability and Accountability Act of 1996.

The Processional Code of Ethics of the American Nurses Association stipulates that confidentiality of client information is part of professional responsibility and integrity.

The Professional Code of Ethics of the American Nurses Association stipulates that confidentiality of client information is part of professional responsibility and integrity.

Because of these legal and ethical considerations, any student enrolled in Missoula College-UM's Nursing Program who reveals contents of a medical record or information related to a client's private personal status is subject to reprimand and possible dismissal from the MC-UM Nursing Program.

Further detailed information is contained in the University and Nursing Program Handbook.

Having read and understood the above, I \_\_\_\_\_ (printed student name) do hereby agree to maintain confidentiality of all client information to which I am exposed as a Missoula College-UM Nursing Program student.

Date: \_\_\_\_\_ Student: \_\_\_\_\_

Program Director: Linda Barnes MSN, RN, CNE 406-243-7875

MC-UM Nursing Program Representative: \_\_\_\_\_ Date: \_\_\_\_\_

This agreement will remain on file and may be distributed to supervisors at all clinical sites to which students are assigned.

## Form 3 – Social Media Quiz

Student Name (printed) \_\_\_\_\_

After reading the NCSBN's *White Paper: A Nurse's Guide to the Use of Social Media*, please complete the following quiz.

1. Confidentiality means that personal and medical information given to or received by Health Care Professionals will not be disclosed to others unless the client has given informed consent or if withholding the information could result in harm to the client.  
 True  False
2. I have read the NCSBN's *White Paper: A Nurse's Guide to the Use of Social Media*. I understand the information presented in this paper. I agree to and will conduct myself according to the standards for registered nurses. I will not breach client confidentiality or privacy.  
 True  False
3. Privacy refers to the clients' rights and expectations for protection of intrusion of their personal and medical information.  
 True  False
4. Any breach in confidentiality or privacy damages the clients' trust in the nurse, physician, facility, and the nursing profession; thereby, adversely affecting client care and safety.  
 True  False
5. Possible consequences of breaches in client confidentiality and privacy include, but are not limited to: Disciplinary action by the Board of Nursing such as censure of the nurse, issuing a formal letter of concern, placing conditions on the nurse's licensure, licensure suspension or termination.  
 True  False
6. Clients may bring civil suit against the nurse for defamation, invasion of privacy, or harassment.  
 True  False
7. The state and federal government may bring criminal charges against nurses for breach of confidentiality and privacy resulting in fines and/or jail time.  
 True  False
8. Other consequences for breach of confidentiality and privacy may include termination of employment regardless of actions taken by the Board of Nursing, state and federal government, or clients.  
 True  False
9. Breaches of confidentiality and privacy include, but are not limited to, taking photos or videos of clients, parts of clients, unique items belonging to clients, posting anything about the client including pictures, videos, or conversations on social media (even closed groups).  
 True  False
10. Comments regarding co-workers to others or posted on social media during work hours, as well as non-work hours, are unprofessional and are considered a form of lateral violence that may incur numerous consequences.  
 True  False

# MISSOULA COLLEGE

UNIVERSITY OF MONTANA

## 2022/23 Declination: Seasonal Influenza Vaccination Statement Missoula College Nursing Program

The clinical sites of the Missoula College Nursing Program recommended that I receive influenza vaccination to protect the patients I serve.

I acknowledge that I am aware of the following facts:

- Influenza is a serious respiratory disease that kills an average of 36,000 persons and hospitalizes more than 200,000 persons in the United States each year.
- Influenza vaccination is recommended for me and all other healthcare workers to protect our patients from influenza disease, its complications, and death.
- If I contract influenza, I will shed the virus for 24--48 hours before influenza symptoms appear. My shedding the virus can spread influenza disease to patients in this facility.
- If I become infected with influenza, even when my symptoms are mild or non-existent, I can spread severe illness to others.
- I understand that the strains of virus that cause influenza infection change almost every year, which is why a different influenza vaccine is recommended each year.
- I understand that I cannot get influenza from the influenza vaccine.
- The consequences of my refusing to be vaccinated could have life-threatening consequences to my health and the health of those with whom I have contact.**

**Required:** I am choosing to decline influenza vaccination right now:

- Medical Contraindication - severe allergy.
- Provide other reason \_\_\_\_\_

I understand that I can change my mind at any time and accept influenza vaccination, if vaccine is available. I have read and fully understand the information on this declination form.

**I understand by signing this declination form it is the policy of Missoula College clinical sites that that I am to wear a surgical mask or take alternative steps as determined by the specific clinical site's infection prevention policy, while unvaccinated for influenza and within 6 feet of patients during active influenza season.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (print): \_\_\_\_\_

### References:

CDC. Prevention and Control of Seasonal Influenza with Vaccines-Recommendations of ACIP at <http://www.cdc.gov/flu/index.htm>

This document based on form: <http://www.immunize.org/catg.d/p4068.pdf>, Item #P4068 (8/14)

## Missoula College ASN Program Hepatitis B Vaccination Declination

Name \_\_\_\_\_

Student ID# 790 \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

### **Hepatitis B Vaccine Declination**

I understand that due to potential exposure to blood or other potential infectious materials in my classes or training at UM, I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the information about HBV and the HBV vaccination series. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If I subsequently decide to be vaccinated, as a student, I am responsible for the cost of the vaccination series and titer analysis.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Please submit this form to the Nursing Program Director



# At-Risk Student Policy

**Purpose:** To identify students who are at risk of failing the nursing program due to academic, behavioral and/or personal issues. If a student is determined to be at risk, a plan for remediation is initiated. Remediation may be considered when a nursing student:

- does not meet the Student Learning Outcomes (SLOs) as identified on clinical and/or course outcomes
- needs additional time and/or support before completing a course or the nursing program
- does not demonstrate the skills and/or personal attributes necessary to succeed as a nurse

**Philosophy:** The Missoula College Nursing Program faculty are here to guide and teach. We believe that even students who are facing difficult circumstances can successfully complete the nursing program. Nursing students must develop professional, ethical, and behavioral skills to successfully practice nursing. Part of the nursing faculty's job is to help guide and mentor for the development of these skills. Ultimately, it is up to the student to follow through with faculty recommendations, remediation plans, behavioral contracts, and referrals to support services. Our At-Risk Student Policy allows the student to participate in the Remediation and Intervention processes. This policy follows the Nursing Student Handbook.

## Definitions of an At-Risk Student:

- 1) A student who has missed deadlines for required documentation (TB, CPR, vaccines, etc.), or other required orientation materials.
- 2) A student with excessive absences (see Professionalism Rubric) in at least one nursing course per semester.
- 5) A student who is repeating a nursing course or who has been reinstated into the nursing program for any reason.
- 6) A student who is minimally passing or has <80% in one or more nursing courses.
- 7) A student who has been identified by a clinical instructor as unsafe or unprofessional.
- 8) A student who has demonstrated at least one unprofessional and/or unethical behavior while in the nursing program. This applies to the classroom, lab, and clinical settings.
- 9) A student with communication difficulties, whether due to a language barrier, lack of communication with instructors, a lack of socialization/interaction with peers, poor communication with clinical site staff, and/or a lack of engagement in the educational process.
- 10) A student who has extenuating circumstances outside of the nursing program that cause additional stress, such as severe financial stressors, prolonged illness or other health issues, legal issues, death of a loved one, work schedule conflicts, etc.
- 11) A student whose performance and/or behaviors have caused other faculty and/or students to come forward and report their concerns.

## Step 1: Develop a Remediation Plan:

- 1) Once an at-risk student has been identified, the course instructor will complete the "Nursing Student Remediation Plan" document and will review it with the student.
- 2) Since knowledge, skills, and attitudes are learned over time and must be reinforced, at the end of each semester, faculty who have identified an at-risk student

must present their documentation (a copy of their completed “Nursing Student Remediation Plan”, and/or “Warning to the Student of Potential Failure”, and/or any other relevant documentation) to the faculty who will be teaching that student the following semester. This will ensure continuity for the student and the faculty.

3) Students who have displayed unprofessional, unethical, and/or behaviors that are inappropriate will receive a remediation plan that includes an explanation of the behaviors, and may be required to complete additional assignments and/or be required to sign a contract that will extend the duration of the nursing program. Students will be warned in writing if further behaviors could result in dismissal from the program.

4) Students who have verbalized and/or appear to be struggling with personal issues will be provided with resources to improve their chances of success. These resources may include a referral to the Curry Health Center counseling services, information regarding local support groups, a list of outpatient mental health providers, education about scholarship opportunities, crisis hotline phone numbers, Office for Disability Equity, etc.

**Step 2:**

When the “Remediation Plan” does not result in the necessary changes, faculty will also provide the student with a “Warning to the Student of Potential Failure” document. The “Warning to the Student of Potential Failure” document can also be given during step one.

## Remediation Plan

The remediation process is designed to promote the success of students at-risk of failing a course because they have difficulty accomplishing course objectives and/or meeting course requirements. The process is not intended to replace course curriculum or course requirements but to supplement the student's learning.

### **The remediation process is initiated to address the following situations:**

- academic jeopardy (i.e., low quiz/exam scores),
- lack of clinical competency (i.e., failing a clinical or lab competency, unsafe behavior in the clinical environment, medication errors), and/or
- lapses in professional judgment (i.e., tardiness, absenteeism, unprofessional behavior).

The remediation process is initiated by faculty as soon as an at-risk student is identified. The faculty member is responsible for meeting with the student to discuss the identified concerns and develop an individualized remediation plan. The remediation plan must be documented on the form "Nursing Student Remediation Agreement" (see attached) and meet the following guidelines:

- The Remediation Plan must clearly describe the area(s) of deficiency.
- Remediation outcomes must identify specific, measurable goals the student must attain or perform to demonstrate success.
- Remediation activities must be individualized to the student's area of weakness. They may include, but are not limited to, completion of suggested computer-based practice tests, written review materials, practice questions, instructor-developed materials, hands-on laboratory skill practice, or any other materials/methods suggested by the faculty.
- A time frame for completion must be agreed upon and documented in the remediation plan.
- The remediation form must be signed by faculty and student.

### **Examples of Faculty interventions performed/recommended:**

- Review of Professional behaviors
- Review of syllabus/course expectations
- Referral to the Curry Health Center Counseling Center resources and support
- Referral to Office for Disability Equity (ODE)
- Student required to attend open labs to practice skills
- Review of ANA Code of Ethics
- Weekly meeting with course coordinator/instructor
- Review of Clinical Evaluation Form
- Review of Nursing Student Policy Handbook
- Other \_\_\_\_\_

# Nursing Student Remediation Plan and Agreement

Student Name \_\_\_\_\_ Faculty Name \_\_\_\_\_

**Specify area of remediation:**

- Academic jeopardy (minimally passing or <80% in a course)
- Lack of lab or clinical competence
- Lapse in professional judgment
- Other: \_\_\_\_\_

**Describe areas of concern:**

Date Implemented	Remediation Outcome	Remediation Plan	Deadline	Confirmation of Agreement
	The student will:			Student Signature:
				Faculty Signature:

Evaluation Date	Review of Remediation Outcomes	Evaluation of Remediation Plan	
		Successful	Unsuccessful
		Student:	Student:
		Faculty:	Faculty:

## Warning to the Student of Potential Failure

The initial concerns and/or behaviors documented by the faculty on \_\_\_\_\_ are concerning enough to warrant providing a warning of potential failure, in addition to creating a "Nursing Student Remediation Plan."

The "Nursing Student Remediation Plan" that was established on \_\_\_\_\_ has not been successful.

\*You are being warned that continuation of the following may result in dismissal from the Nursing course or the Nursing Program:

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Signature: \_\_\_\_\_ Date: \_\_\_\_\_