Associate Degree in Nursing Student Handbook 2024-2025

Each student has access to the electronic version of the Linn Benton Community College (LBCC) Nursing Student Handbook in Moodle, which they are expected to read.

This Handbook is designed as a guide for LBCC nursing students and includes related college policies and procedures to select, but not all, LBCC Nursing Program situations.

This Handbook does not constitute a contract between you as a student and LBCC. The student is to clarify anything that is unclear and sign the agreement pages at the end of the Student Handbook.

LBCC reserves the right to revise and interpret the language of handbooks and policies when deemed appropriate.

Everything in this Student Handbook is subject to change or deletion at the college's discretion.

Changes will be communicated via your LBCC email, Moodle and/or by distributing copies of any changes that occur during the academic year.

LBCC Nursing Program
2024-2025

Dear Nursing Student,

The nursing faculty and staff of LBCC would like to welcome you to the LBCC Nursing Program! We look forward to getting to know you and helping you reach your goal of becoming a registered nurse.

We recognize that the nursing education experience you are undertaking is challenging and we are here to help you successfully enter the nursing profession. The Nursing Program at LBCC is respected in our community and is known for educating outstanding, top notch nursing graduates.

The faculty and staff of the LBCC Nursing Program strive to prepare our graduates for success in the field of nursing. We encourage you to take advantage of the many resources that are available to you at LBCC including faculty advisors, instructors, student success programs, scholarships, and most importantly, one another.

Nursing is a rewarding career and each one of you brings special talents and strengths that will enhance the profession.

If there is anything that we can do to facilitate your educational experience, please let us know.

We welcome you and look forward to your success and becoming part of our history.

Sincerely,

Your Nurse Administrator, Faculty, and Staff of the LBCC Nursing Program

LBCC Nursing Program
2024-2025

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<u>The following forms are to be reviewed, printed, signed and submitted to the nursing program administrative assistant:</u>

- <u>Acknowledgement of Program Policies/Student Handbook Form</u>
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GENERAL

INFORMATION

PROGRAM CONCEPTUAL FRAMEWORK, PHILOSOPHY AND MISSION STATEMENT

Conceptual Framework

The organizing framework of the LBCC Nursing Program is a systems-based model. Concepts for nursing practice are introduced, revisited and applied, with increasing complexity as students progress through the program of study.

Program Philosophy

The Associate Degree Nursing Program functions within the framework of the mission and goals of Linn-Benton Community College. The philosophy of the nursing department centers on shared success. When success occurs for our students; it occurs for all members of our faculty and staff. Success can only thrive in a culture that encompasses excellence, welcomes diversity, promotes caring, all while upholding integrity. These concepts are reflected in the work of faculty and the work of students.

The Core Themes of LBCC are educational attainment, cultural richness, and economic vitality. The nursing faculty and staff recognize that these themes as well as the College Values of opportunity, excellence, inclusiveness, learning and engagement are reflected in the work they do by creating the culture that is directed to success. Opportunity is created in the engaging learning activities, professional partnerships, and articulation agreements of the program. Excellence is demonstrated in the program's outcomes. Inclusiveness is demonstrated in the diversity of the student population, supported by policies, and the diversity of learning activities. Learning and engagement occur hand-in-hand as students are supported on their path towards success and are demonstrated through student retention and attainment of learning outcomes.

Mission Statement

Linn-Benton Community College supports our students by providing opportunities to engage in an educational experience which enhances their contribution to the vitality and cultural richness of our communities. The LBCC Nursing Program furthers these objectives through educating students in the art and science of nursing. The Program's primary purpose is to develop safe, beginning generalists in nursing. We are committed to assisting students in establishing a foundation for and supporting their pursuit of lifelong learning.

We believe:

Nursing is the art and science of "the protection, promotion and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through diagnosis and treatment of human responses, and advocacy in the care of individuals, families, communities, and populations."(ANA, 2012).

Persons are the recipients of nursing care. They are unique individuals with a variety of physical, developmental, emotional, psychosocial and functional abilities within their own cultural and spiritual framework.

Health is a state of complete physical, mental and social well being, not merely the absence of disease and infirmity. Health is ultimately defined by each individual.

Environment encompasses all conditions affecting persons. There is a continuous interaction between the person and these conditions. This interaction has positive and negative effects on the person's level of health, health care needs and the care they receive (Potter, Perry, Stockert, & Hall, 2021).

Professional Nursing Practice is the provision of person-centered, safe, culturally-competent care while encompassing the ethical/legal principles and concepts of advocacy, integrity, and accountability on which nursing practice is founded.

Mission Statement (Cont'd.)

Learning is a process in which individuals acquire the knowledge and develop the critical thinking skills necessary to deliver quality nursing care. Nursing Faculty and students actively participate in this process. Learning is the primary responsibility of students; it is here that students develop the foundation for lifelong professional learning.

Teaching is the primary responsibility of the Nursing Faculty. Nursing Faculty use a variety of pedagogical methods to deliver information and facilitate, guide, mentor and model Professional Nursing Practice. Nursing Faculty recognize that instruction in Nursing is best achieved in a supportive and nurturing environment.

References

American Nurses Association (ANA) (June, 2021). What is Nursing?
        http://www.nursingworld.org/EspeciallyforYou/What-is-nursing.
Potter, P. A., Perry A.G., Stockert, P.A., & Hall, A.M. (2021). *Fundamentals of nursing*. (10th ed.). Elsevier.

Initiated:
Reviewed: 5/12, 8/19 BL, 10/16/2020
Revised: 11/12; 8/13; 10/13; 5.16; 10.17; 6/2021

STUDENT RIGHTS AND RESPONSIBILITIES

The *Students' Rights, Responsibilities and Conduct Code* is a document established by LBCC for the general student population: *ADMINISTRATIVE RULE NO: 7030-01 | LBCC,* and is applicable to nursing students. In particular, refer to the section entitled "Student Rights, Responsibilities and Conduct Policy." Failure to adhere to this code of conduct may result in dismissal from the Nursing Program and/or LBCC.

The policies delineated in the Nursing Program's Student Handbook supplement LBCC's Students' Rights, Responsibilities and Conduct Code, and are solely applicable to nursing students. Nursing Program policies are reviewed annually and may be changed upon review by the Nursing Program faculty. The policies adhere to requirements inherent in the Nurse Practice Act, promulgated by the Oregon State Board of Nursing. This agency provides approval for the LBCC Nursing Program.

ADDITIONAL NURSING STUDENT RESPONSIBILITIES

As students admitted to the nursing program at LBCC there are additional expectations that will assist students in progressing toward their goal. These expectations are as follows:

1. See your Academic Nursing Faculty Advisor - Each student is assigned to a Nursing Faculty Advisor. In order to provide consistency for the student when possible, the student will remain with the same advisor throughout their duration in the program. The advisor serves as the student's initial point of contact. The advisor is available during office hours and by appointment. Students are highly encouraged to contact their Nursing Faculty Advisor to discuss academic status, clinical difficulties, or other issues impacting their successful academic experience. It is the student's responsibility to monitor their academic progress to ensure they are meeting graduation requirements.

2. Communication is critical - All students are required to utilize their LBCC email accounts for all school related business, and should be responsible for checking this email daily.

3. Classroom environment/engagement (Professional behavior) -
   a. The classroom/laboratory settings must be conducive to learning for all. Students are expected to be respectful of peers, faculty, and guest speakers. Repeated talking or chatting during lectures or presentations is inappropriate and unprofessional behavior, which violates the LBCC *Students' Rights and Responsibilities* and the Nursing Programs Ethic's Policy. The faculty may ask students to leave for continued classroom disruptions, and student will be subject to further actions.
   b. When participating in direct patient care, students are expected to behave professionally with peers, faculty, healthcare team members and clients. Remember that as a student you are a guest of the facility and can be asked to leave at any time. Additionally students are expected to follow all policy of the facilities to which they are assigned.
   c. Cellular phones/electronic or smart devices must be turned to "off" or set to "silent" while in the classroom/skills and SIM laboratory settings. For audio recording lectures, please see the Recording Policy and the Social Media Policy.
   d. Children are not allowed to be on campus without a chaperone. Children are not allowed in the classroom, skills lab or at clinical sites.

4. Written Assignments - Unless otherwise indicated to be a group project, all written work is to be completed individually. The Nursing Program utilizes the most current APA standards for written assignments. Students are highly encouraged to purchase a current APA Manual. Students may request a re-read of a formal written assignment/paper. Refer to the course syllabus for specific information about written assignments.

Initiated:
Reviewed: 05-2012
Revised: 09-2020

ACCESSIBILITY RESOURCES

LBCC Accessibllity Resources provides reasonable accommodations, academic adjustments and auxiliary aids to ensure that qualified students with disabilities have access to classes, programs and events at Linn-Benton Community College. Students are responsible for requesting accommodations in a timely manner. To receive appropriate and timely accommodations from LBCC, please give Accessibllity Resources as much advance notice of your specific needs as possible, as certain accommodations take days to weeks to have in place. Contact the Accessibility Resources Coordinator: Accessibility Resources | LBCC **Phone:** 541-917-4789 **TTY:** 541-917-4703 **Fax:** 541-917-4328 **Email:** accessibility@linnbenton.edu

 *********If you are seeking academic accommodations, YOU NEED TO REGISTER with the Accessibility Resources office and follow their requirements. Each term you will need to communicate with them in order to continue your accommodations.*************

You should meet with your advisor and contact the course instructor during the first week of class if:
1. You have a documented disability and need accommodations; that the instructor needs to be aware of.
2. Your instructor needs to know medical information about you; or
3. You need special arrangements in the event of an emergency.

**********Please be advised that if you are considering whether or not to seek accommodation for testing; such accommodation must be in place prior to graduation in order to apply for testing accommodation for the National Council Licensure Examination (NCLEX) exam.***********

Initiated:
Reviewed: 5/12; 4/13, 6/21
Revised: 5/12; 9/14; 5.17,7/19, 8/19 BL,2/20,7/20 KrT, 2/2022

ACADEMIC ADVISING

Each student is assigned to a Nursing Faculty Advisor. In order to provide consistency for the student, when possible, the student will remain with the same advisor throughout their duration in the program. The advisor serves as the student's initial point of contact. The advisor is available during office hours and by appointment. Students are highly encouraged to contact their Nursing Faculty Advisor to discuss academic status, clinical difficulties, or other issues impacting their successful academic experience. It is the student's responsibility to monitor their academic progress (via DegreeWorks) to ensure they are meeting graduation requirements.

Initiated:
Reviewed: 2012
Revised: 4/13; 4.16, 8/19,7/2021KrT

CLASS/STUDENT REPRESENTATIVES

Two students will be elected for this voluntary position during the Winter term of their first year.
This is a two-year position. Eligibility for serving as class representative:
    The student:
- May not currently be on a GTS.
- If elected and placed on a GTS, the student must meet expected outcomes/demonstrate progression, or step down from the position.

    Student representatives will represent their cohort and:
- Serve as the liaison(s) between the cohorts and faculty
- Attend at least 1 faculty meeting per term
- Assist with planning and organizing the:
  - Fall student picnic
  - Annual Strawberry Festival parade float volunteers
  - Spring pinning ceremony
  - Additional nursing cohort activities

Interested students will email the department chair or faculty POC (point of contact) and provide a picture with a short bio, which will be shared with the class via SNA Moodle. Students will vote for 2 student reps (an alternate will be selected but not announced unless needed).

Initiated: Spring/2020
Reviewed:6/2021,1/2022
Updated:

EPSLOs for the LBCC Nursing Program

The following are the End of Program Student Learning Outcomes (EPSLOs). These outcomes were adopted by the faculty in December of 2021 and implemented starting in the fall 2022 for the class of 2024 and subsequent classes.EPSLO

1. Provide nursing care to diverse individuals and families across the lifespan in a variety of settings, ensuring care is compassionate and culturally and age-appropriate.
2. Engage in multidisciplinary teams to work collaboratively in the provision of safe and evidence-based care.
3. Utilize evidence, clinical judgment, interprofessional perspectives, and patient preferences in planning, implementing, and evaluating outcomes of care.
4. Advocate for and provide nursing care using principles of ethics, quality improvement, patient safety, and leadership.
5. Demonstrate competency using patient care technologies, information systems, and communication devices that support safe, legal and effective nursing practice.

Initiated: 9/22
Reviewed:
Revised:

INCLEMENT WEATHER POLICY FOR STUDENTS

LBCC Inclement Weather Protocol: The LBCC Inclement Weather Policy

Because nursing students often leave and arrive for clinicals prior to the college making decisions regarding campus closures, you may find yourself wondering how you should proceed. The following should direct you in determining a plan of action:

If the college is closed, classes * and clinicals are canceled.

* Live Zoom sessions will be canceled. The instructor of the live session has the option to post an alternate online activity or cancel altogether.

If the college is **open:**
1. Classes and clinicals will commence if faculty and students can safely attend. **Use your own judgment about traveling**.
2. Inform your clinical instructor via phone if you cannot safely get to your destination prior to the start of class or clinical time.

If the college is having a **delayed start** we will plan on clinical starting at 1000 unless otherwise notified (via phone or email) by your clinical instructor or clinical coordinator.

If the college calls for **early release,** follow college policy. If the weather is changing and an early release is necessary for safe travel please notify your clinical instructor.

Initiated: 10/2020
Reviewed: 1/07/2022
Updated: 12/2020

STANDARDS OF CORE PERFORMANCE

The Linn-Benton Community College Nursing Department has the responsibility to society to educate competent health care providers to care for their patients/clients with clinical judgment, broadly based knowledge and competent technical skills at the entry level.   In compliance with state licensing standards and best practices, the program has academic as well as technical standards (non-academic criteria) students must meet in order to successfully progress in and graduate from the program.   The Technical Standards document is provided in order to assure that the students who enter the program know and understand the requirements, and can make informed decisions regarding the pursuit of this profession.

Technical Standards

Linn-Benton Community College provides the following technical standards with examples of learning activities to inform prospective and enrolled students of the skills required in completing their chosen profession's curriculum and in the provision of health care services. These technical standards reflect the performance abilities and characteristics that are necessary for successful completion of the requirements of clinical based health care programs. These standards are not a requirement of admission into the program. Individuals interested in applying for admission to the program should review these standards to develop a better understanding of the skills, abilities and behavioral characteristics required for successful completion of the program.

Students admitted to the Nursing Program are expected to be able to complete curriculum requirements which include physical, cognitive, and behavioral core competencies that are essential to the functions of the entry level professional nurse. These core competencies are considered to be the minimum and essential skills necessary to protect the public. These abilities are encountered in unique combinations in the provision of safe and effective nursing care. Regular consistent attendance and participation is essential to learning, especially for all scheduled clinical experiences.

 LBCC provides reasonable accommodations to qualified students with disabilities. Appropriate accommodations may include academic adjustments or auxiliary aids. Accommodations are not considered to be reasonable if they fundamentally alter the nature of the academic program, jeopardize the health and safety of others, or cause an undue burden.

Students are evaluated on their ability to meet core competencies in the clinical, lab, and classroom settings. Progression in the program may be denied if a student is unable to demonstrate the technical standards with or without reasonable accommodations.

Cognitive
1. Recall, collect, analyze, synthesize, and integrate information from a variety of sources.
2. Measure, calculate, reason, analyze and synthesize data.
3. Problem-solve and think critically in order to apply knowledge and skill.
4. Communicate effectively with individuals from a variety of social, emotional, cultural, and intellectual backgrounds.
5. Relay information in oral and written form effectively, accurately, reliably, and intelligibly, including thorough and accurate use of computers, computer technology and software programs, and other tools, to individuals and groups, using the English language.
6. Effectively collect, analyze, synthesize, integrate, and recall information and knowledge to provide safe patient care for up to a twelve-hour clinical shift.

Examples of learning activities found in the nursing curriculum and related to industry standards:
➢ Process information thoroughly and quickly to prioritize and implement nursing care.
➢ Sequence or cluster data to determine client needs.
➢ Develop and implement a nursing plan of care for clients in acute, long term and community settings.
➢ Discriminate fine/subtle differences in medical word endings.
➢ Report patient data using multiple formats to members of the health care team.
➢ Appropriately interpret medical orders and patient information found in the medical record.
➢ Perform math computations for medication dosage calculations.
➢ Apply knowledge/skills gained through completion of program prerequisites, including requirement for computer proficiency.

Physical

Motor:
1. Coordinate fine and gross motor movements.
2. Coordinate hand/eye movements.
3. Negotiate level surfaces, ramps and stairs.
4. Work effectively and efficiently within a limited space.
5. Effectively manage psychomotor tasks to provide safe patient care for up to a twelve (12) hour clinical shift.

Examples of learning activities found in the nursing curriculum and related to industry standards:
- ➢ Transfer patients/clients in and out of bed from stretchers and wheelchairs.
- ➢ Control a fall by slowly lowering client to the floor.
- ➢ Perform cardiopulmonary resuscitation (CPR)
- ➢ Lift, move, turn, position, push, or pull patients and/or objects and maintain a "medium activity level" as defined by the State of Oregon Department of Insurance Index of occupational characteristics.
- ➢ Place or access equipment such as intravenous fluid bags or catheter bags, within compliance of safety standards.
- ➢ Transport equipment and supplies to the patient bedside.
- ➢ Manipulate small equipment and containers, such as syringes, vials, ampules, and medication packages, to administer medications.
- ➢ Dispose of needles in sharps container.
- ➢ Dispose of contaminated materials in a safe and compliant manner.
- ➢ Complete assigned periods of clinical practice (up to twelve [12] hour shifts, days, evenings, or nights, holidays, weekdays, and weekends).
- ➢ Complete skills tests within assigned time limit.

Sensory:
1. Acquire information from demonstrations and experiences, including but not limited to information conveyed through online coursework, lectures, small group activities, demonstrations, and application experiences.
2. Collect information through a variety of senses and/or using appropriate and approved equipment.
3. Use and interpret information from diagnostic maneuvers; including detecting sounds with a stethoscope.

Examples of learning activities found in the nursing curriculum and related to industry standards:

- ➢ Detect changes in skin color or condition. (pale, ashen, gray, or bluish)
- ➢ Detect a fire in the client care environment.
- ➢ Draw up a prescribed quantity of medication into a syringe.
- ➢ Observe clients in a room from a distance of 20 feet away.
- ➢ Detect sounds related to bodily functions using appropriate equipment, such as a stethoscope.
- ➢ Detect audible alarms generated by mechanical systems such as those that monitor bodily functions, fire alarms, call bells.
- ➢ Observe and collect data from recording equipment and measurement devices used in client care.
- ➢ Communicate with clients and members of the healthcare team in person and over the phone in a variety of settings, including isolation and the operating room where health team members are wearing masks and there is background noise.
- ➢ Detect foul odors of bodily fluids or spoiled foods.
- ➢ Detect smoke from burning materials.
- ➢ Detect unsafe temperature levels in heat-producing devices used in client care.
- ➢ Detect anatomical abnormalities, such as subcutaneous crepitus, edema, or infiltrated intravenous fluids.
- ➢ Feel or note vibrations, such as an arterial pulse, using touch or approved equipment.

Behavioral

1. Demonstrate ability to function effectively under stress and adapt to changing environments to provide safe patient care.
2. Maintain effective communication and teamwork to provide effective patient care.
3. Examine and modify one's own behavior when it interferes with others or the learning environment.
4. Possess attributes that include compassion, empathy, altruism, integrity, honesty, responsibility and tolerance.
5. Accept responsibility for own actions and communicate in a courteous, assertive, non-aggressive, non-defensive manner with instructors, peers, staff and healthcare team members.
6. Integrate feedback into own performance.

Examples of learning activities found in the nursing curriculum and related to industry standards:

➢ Exercise judgment, meet acceptable time frames for client care delivery (acceptable time frames are reflected by ability to carry out the usual client care assignment for a particular point in the program within the allotted clinical time), work effectively under stress, and adapt to rapidly changing patient/client care environments.
➢ Accept accountability for actions that resulted in client care errors.
➢ Deal effectively with interpersonal conflict if it arises; maintain effective and harmonious relationships with colleagues and members of the healthcare team.

These Technical Standards are adapted from and approved by the Oregon Council of Associate Degree Programs.

Initiated:
Reviewed: 5/15,9/19, 7/20, 4/16/2021
Revised: 5/12, 6/15, 7/2021KrT, 6/2022

LBCC

NURSING

PROGRAM

POLICIES

ACADEMIC ALERT POLICY

Purpose: To identify standardized communication that will be sent to a student to identify when the student's academic performance does not meet the standard for retention and/or promotion (see Standards of Student Performance Policy).

Scope: The policy applies to all students enrolled in the nursing program.

Definitions:

Academic Alert	Phrase identifying when student performance is at or below standards for retention and/or promotion (ie. current performance is not passing).
Student	Refers to students accepted into the Nursing Program and enrolled in nursing courses.

Principles:
1. Students have individualized study strengths and weaknesses and individual performance may drop below standards for retention and/or promotion during the term.
2. Students are adult learners who are responsible to track their own progression within course work and for seeking out learning assistance from advisors/faculty as they see fit.
3. Faculty acknowledge that students may not always notice their current standing in a course and may fall below standards for retention and/or promotion.

Policy Statement:
1. A standardized academic alert email will be sent to a student when the student's performance in the classroom falls below the standard for retention and/or promotion. This includes but is not limited to;
   a. Test average at or below 75%
   b. Overall course grade that is below 75%
2. Students are expected to acknowledge receipt of Academic Alert email and respond to the sender within 48 hours, not including weekends.
3. Faculty are under no obligation to send out repeat academic alerts for performance in the same term for the same course, although they may choose to do so.
   a. Faculty will document when any academic alert email was sent to the student within the students nursing advising form and note time and date of student response.

Initiated:8/23
Reviewed:
Revised: 3/11/24

ATTENDANCE POLICY

Purpose: To provide guidance to students regarding attendance within LBCC nursing program courses.

Scope: This policy applies to all students enrolled in the LBCC nursing program.

Definitions:

Direct Patient Care	Healthcare related activities and actions by students delivered to individuals, a family, a community, or population who are in actual need of those activities and actions.
Facility	Generally refers to an individual healthcare institution or agency (i.e. hospital, clinic, home health) where healthcare is delivered or administrated. Facility partners have current affiliation agreements with LBCC and provide experiential educational opportunities for LBCC students that involve direct patient care.
Faculty Member	LBCC faculty member (includes both part-time and full-time instructors) responsible for determining a final course grade for a student enrolled in a course which contains a clinical component of direct patient care. AKA clinical faculty, clinical instructor.
Placement	An experiential education opportunity required as part of a program of study, in which the student works in a practice setting under supervision to deliver direct patient care. This includes but is not limited to: ● Clinical cohort groups with a faculty member ● Practicum experiences ● Cooperative work experiences
Regular attendance	A habitual practice of routinely being physically present for scheduled courses and course activities
Student	An LBCC student enrolled in LBCC nursing program courses

Principles:
1. Regular attendance assures that students have the opportunity to acquire essential nursing information, participate in activities/discussions that promote application of knowledge to clinical situations, and promotes socialization to the role and culture of professional nursing.
2. Regular attendance is a factor in successful completion of the LBCC nursing program.
3. Students are adult learners with freedom to determine when they will/will not attend classes.
4. Faculty have the freedom to track student attendance and participation in class.
5. Students will be notified of those course/class items which require mandatory attendance.

Policy Statements:
1. **Skills and Simulation (SIM) Lab Course work:** Attendance, punctuality and preparation in these laboratory settings is necessary in order to meet course outcomes.
   a. Students are required to make up missed time in order to meet course outcomes and obtain skills necessary to engage in direct patient care experiences.
   b. Faculty track/record all absences/tardies and participation on the ***Attendance and Participation Tool (See tool in appendices).***
   c. Students are required to notify (via email and text message) skill/SIM faculty for absences and obtaining information regarding missed time.
      i. Students who are not attending courses due to illness must report to clinical coordinator and follow the Return to school

2. **Direct Patient Care:** Attendance, punctuality and preparation in direct patient care experiences are necessary in order to meet course outcomes.
    a. Students are expected to attend all scheduled direct patient care experiences in order to show consistent performance in the achievement of the course outcomes.
    b. Students are required to notify clinical faculty (via text message or phone call) and clinical coordinator (via email) for any absence from direct patient care experiences.
    c. Students may be required to make up missed time in order to meet course outcomes.
        i. Additional time may or may not be available as this is at the discretion of the placement and requires available faculty.
    d. Faculty track/record all absences/tardies and participation on the ***Attendance and Participation Tool***
3. **Training which requires mandatory attendance:** A number of mandatory activities take place throughout the course work of the LBCC nursing program. These include trainings required by placement and facility partners which allow students to engage in direct patient care and Assessments which are also identified as tests, quizzes or finals Mandatory attendance activities will:
    a. Be posted on course calendar and marked as mandatory
    b. Attendance will be taken at mandatory activities.
    c. Failure to attend mandatory activities can result in withholding student from engaging in particular or all direct patient care experiences
    d. Because many of these trainings are hosted by placement or facility partners they may opt to not offer alternate training times.
    e. Students who do not attend mandatory activities may be exited from the program (see exit policy- instructor initiated).

Initiated: 9/12
Reviewed: 7/19, 6/21
Revised: 11/12; 8/13; 4/16; 4/19/; 9/20

CELL PHONE POLICY

Purpose: The purpose of this policy is to identify appropriate use of cell phone in direct patient care settings.

Scope: The policy applies to all LBCC Nursing students engaged in direct patient care.

Definitions:

Direct patient care	Definition of term, these should be consistent throughout all the policies. Terms also be in alignment with Nurse Practice Act Div 6 definitions if at all possible.

Principles:
1. Cell phones and other electronic devices can be considered a tool for direct patient care settings.
2. Students are encouraged to use their cell phones and/or electronic devices as a source for their research materials.

Policy Statement:
1. Students must comply with both LBCC Policy and clinical placement facility policies when using any type of electronic devices.
    a. Cell phones should be limited to verbal or text communication between the clinical faculty and the student.
    b. Students communicating with the clinical faculty should do so in an area typically reserved for communicating with the clinical instructor, such as at or near the nursing station and not within a client's room.
    c. Students must, at all times, abide by HIPAA laws and clinical placement facility policies regarding confidentiality (see Documentation Policy 5.a-3).
        i. Refrain from using patient names or other identifying information.
    d. Students asked to turndown, silence, or change ringtones/messaging notifications by clinical faculty instructors or facility staff will comply with this directive.
2. Violations of cell phone policy are include but are not limited to:
    a. Using a camera or recording feature of the cell phone in the direct patient care setting.
    b. Taking patient photo/recordings are prohibited under any circumstances, including if a patient provides consent.
    c. Taking multiple personal calls/texts during scheduled direct patient care experiences.
3. Students who violate any part of this policy or a facilities policy regarding use of personal cell phone will result in one or more of the following actions:
    a. Student may be placed on a Guide to Success and/or
    b. Student may be exited from the Program (See Program Exit Policy).

Initiated 9/10
Reviewed: 5/12, 4/16, 6/18, 7/19, 6/21
Revised 8/31, 9/13, 10/15, 8/24

CHAIN OF COMMAND POLICY

Purpose: The purpose of this policy provides a structure for resolving issues by escalating them to higher levels of authority to ensure that problems are addressed and resolved.

Scope: The policy applies to all LBCC Nursing students enrolled in nursing courses.

Definitions:

Chain of Command	An organizational structure that documents how each member of the organization (in this case the LBCC Nursing Program) reports to one another.

Principles:
1. Conflicts and issues that arise for students during their enrollment in the LBCC Nursing program can be effectively resolved in a timely manner with direct communication and engaging appropriate members of the LBCC Nursing Faculty.
2. Students are encouraged to resolve conflicts by addressing problems in a timely manner, acknowledging the The Standards of Core Performance and upholding the Standards of the Nursing Profession and by mutual conversation in a safe location and manner.
3. This policy is not a replacement or to be used for appeals or complaints against the college for not following LBCC policy and procedures (See Students Rights and Responsibilities and the LBCC Board Policies and Administrative Rules).

Policy Statement:
1. All students should review Table 1. *Who to Contact* and direct questions or problems to the appropriate person for the most timely solution to the problem.
   a. Students are expected to see their assigned Nursing Advisor for any issues impacting their success or progression in the LBCC Nursing Program.
   b. Students are expected to address personal conflicts directly with the person involved.
      i. Students may offer solutions for the conflict and are expected to be open to consider resolutions provided.
      ii. Where no solution is provided or the conflicts/problem/issue is not resolved to the student's satisfaction the student is responsible for requesting a meeting with the next person identified in the chain of command by following the arrow (See Figure 1 below).

Table 1. Who to Contact

Who to contact	Problems/Questions	Who to see next if problem is not resolved
Advisor	Any Issue - Not sure who to go to Personal issues impacting your success Difficulty with performance on exams Concerns about progression within the Nursing Program	Dept Chair or Clinical Coordinator
Content Instructor (person taught content/topic)	Content/Topic questions/ Weekly activity points Learning Guide issues or lecture notes	Academic Team Leader
Skills lab Instructor SIM lab Instructor	All items pertaining to skills or SIM content and evaluation	Clinical Coordinator
Clinical Instructor	Any reason you won't be in clinical on a scheduled shift. Specific expectations for the term. Concerns with personal performance at clinical	Clinical Coordinator
Academic Team Leader	Syllabus or calendars for (101A-202A) Testing issue (technology problem, accommodations, ill on test day etc). Writing assignment associated with core course (101A -202A) Moodle sites (101A-202A) Grade for an assignment not posted	Dept Chair
Clinical Coordinator	Syllabus or calendars for all clinical courses (NUR101B-NUR203B) Clinical requirements necessary (immunizations, trainings etc) Student policy specific to clinical issues Facility partner concerns Moodle sites (101B-203B) Injury or accident at clinical	Nursing Dept Administrator
Dept Chair	SNA moodle site Nursing Student Handbook/Policy Student representation at faculty meetings Information regarding re-entry	Nursing Dept Administrator
Nursing Administrator	Follow appropriate chain of command for all issues before contacting	Dean of Health Occupations

Figure 1. Chain of Command


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                          ┌─────────────┐
                          │   Dean of   │
                          │ Healthcare  │
                          │  Division   │
                          └─────────────┘
                                 ↑
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                          │   Nursing   │
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              ┌─────────────┐        ┌─────────────┐
              │   Nursing   │        │   Clinical  │
              │   Program   │        │ Coordinator │
              │    Chair    │        └─────────────┘
              └─────────────┘          ↗         ↖
                  ↗
      ┌─────────────┐
      │  Academic   │
      │ Team Leader │
      └─────────────┘
   ┌─────────┐  ┌─────────────┐ ┌─────────────┐ ┌─────────────┐
   │ Advisor │  │   Content   │ │   Clinical  │ │  Skills/SIM │
   └─────────┘  │  Instructor │ │  Instructor │ │  Instructor │
                └─────────────┘ └─────────────┘ └─────────────┘
        ↖    ↖     ↗      ↑      ↘
      ┌───────────────────────────────────────┐
      │          Students start here          │
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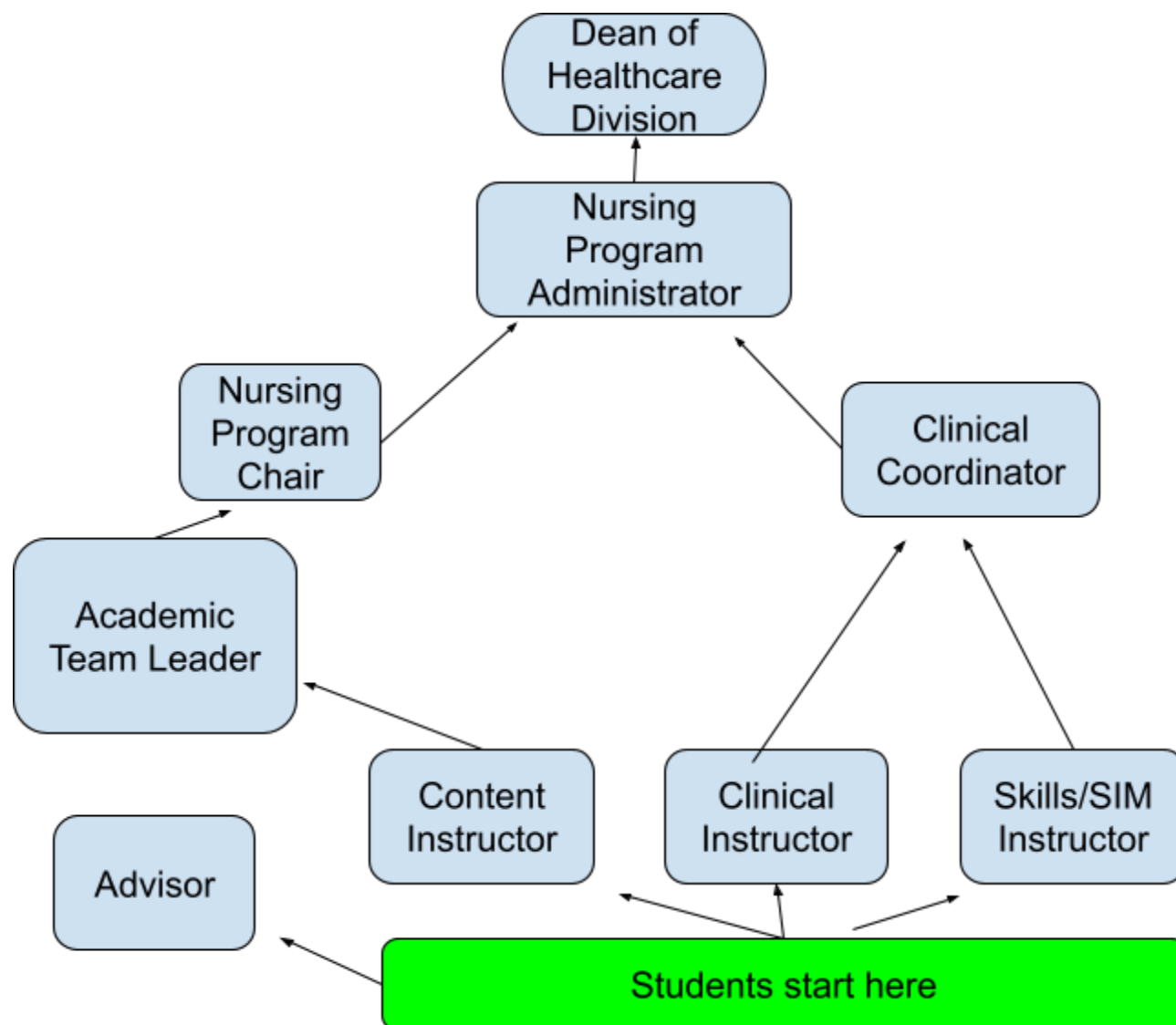
Initiated: 9/24
Reviewed:
Revised:

CLIENT SAFETY AND CLINICAL EDUCATION COURSES POLICY

Purpose: To provide guidance to the faculty of the nursing program regarding the management of risk and protection of the safety of clients who receive services from students in direct patient care.

Scope: This policy applies to courses in which there are direct patient care experiences.

Definitions:

Client	The recipient(s) of services. Depending upon context, the client may be an individual, a family, a community, or population.
Direct Patient Care	Healthcare related activities and actions by students delivered to individuals, a family, a community, or population who are in actual need of those activities and actions.
Faculty Member	LBCC faculty member (includes both part-time and full-time instructors) responsible for determining a final course grade for a student enrolled in a course which contains a clinical component of direct patient care.
Onsite Supervisor	An individual who has onsite supervisory responsibility for one or more of the following: ● direct student supervision ● direct and or indirect authority for safety and care of clients ● organizational leadership within the facility.
Placement	An experiential education opportunity required as part of a program of study, in which the student works in a practice setting under supervision to deliver direct patient care. This includes but is not limited to: ● Clinical cohort groups with a faculty member ● Practicum experiences ● Cooperative work experiences
Scope of Practice	The range of responsibilities (e.g. types of clients, activities, tasks/duties, procedures) and boundaries within which the student is authorized to practice under supervision. Scope of practice is set by legislated regulation, professional association and or established occupational competencies. The student's scope of practice will also be determined by the development of their learning and competencies as they progress through the program.
Student	An LBCC student enrolled in a course which contains a clinical component of direct patient care. This includes but is not limited to: ● Clinical cohort groups with a faculty member ● Practicum experiences ● Cooperative work experiences
Unsafe Practice	Behavior or incident that places the Client in jeopardy and/or at an unacceptable level of risk of physical, psychosocial, or emotional harm. This may include a behavior which constitutes practice outside the Student's current Scope of Practice (i.e. not currently authorized or educated to perform at the time). Also refer to LBCC Student's Rights, Responsibilities, and Conduct (BP 7030 & AR 7030 (01-03) regarding unsafe situations involving violations of student conduct (e.g. endangering the safety of any individual, violence or threats of violence, personal harassment, disruption of the learning/working environment, alcohol or drug related offenses).

Principles:
1. The needs, interest, and safety of Clients are always the first priority in the placement setting.
2. The Student is a learner in the placement setting and mistakes are possible as part of the learning experience.
3. As a professional RN the Faculty Member has an obligation regarding the protection and safety of Clients in the placement setting.
4. The Faculty Member has a responsibility to continually assess the safe practice of the Student in the Placement setting.
5. Students are required to abide by professional/occupational regulations and standards of practice, and practice within the scope of their current learning.

Policy Statement:
1. Protecting Client safety and managing risk in the Placement setting.
    a. The Faculty member, Student and Onsite Supervisor have joint responsibility to manage risk and ensure safe practice in the Placement setting.
    b. Students must work within their current scope of Practice and level of competence.

2. Continuum of Unsafe Practice
    a. Areas of Unsafe Practice include, but are not limited to:
        i. Accountability, professional behavior, and respect (e.g. failure to accept responsibility for one's own actions, dishonesty, breach of confidentiality, performing outside their Scope of Practice).
        ii. Judgment (e.g. impaired judgment due to drugs, alcohol, lack of sleep; poor clinical decision-making).
        iii. Patterns of behavior (e.g. failure to change behaviors based on feedback, failure to demonstrate level of knowledge expected).
        iv. Competencies (failure to perform skills competently).
        v. Communication (e.g. ineffective communication with Clients, healthcare workers, and/or Faculty).
    b. Unsafe Practice occurrences or behaviors can pose differing levels or degrees of risk and/or harm to the Client that can be presented along a continuum from minimal risk (level 1) to unacceptable risk (level 2) to high risk or actual harm (level 3), as described below.
    c. It is recognized that safety of Student practice is a dynamic situation, and the degree of risk may escalate at any time.

3. Levels of Unsafe Practice
    a. **Level 1** Unsafe Practice is a demonstration of, or potential for, Unsafe Practice where an occurrence/behavior/attitude presents minimal risk for Client harm (Examples: single minor incident demonstrating poor judgment; inadequate preparation posing minimal risk to Clients).

    b. **Level 2** Unsafe Practice is an occurrence, event, attitude, behavior, or pattern of behaviors that places the Client or others at an unacceptable risk for harm (physical, emotional, psychosocial). (Examples: repeated medication errors, pattern of inadequate knowledge and/or lack of preparation for Client care, demonstrating a lack of empathic response to challenging Client conditions).

    c. **Level 3** Unsafe Practice is an occurrence, behavior, or pattern of behaviors that compromises Client safety and results in high risk for harm or actually harms the Client or others. (Examples: breach of Client confidentiality/privacy; violent/angry/emotional behavior; practice error or adverse/sentinel event; consistent display of inappropriate/unacceptable level of knowledge/skill impacting the ability to plan and deliver safe client care).

4. Responsibilities in Responding to Unsafe Practice
    a. The Faculty Member is responsible for determining the appropriate response and intervention to address issues of Unsafe Practice. All levels of Unsafe Practice require response and intervention and no sequential progression is implied. Minimal intervention should include the completion of the LBCC Nursing Program Unusual Occurrence Report Form.
        i. **Level 1** Unsafe Practice responses may include discussion, verbal correction/identification of concerns, may also include a written plan to improve performance but is not required (e.g. Guide to Success). Interventions for correction may be completed immediately at the clinical setting and resolved.
        ii. **Level 2** Unsafe Practice must be communicated to the Clinical Coordinator and will require one or more of the following:
    1. Student will be placed on a Guide to Success to identify unsafe practices and ways to improve performance.
    2. Frequent re-evaluation of Students performance in the clinical setting.
    3. Continued periodic communication regarding the Student progress to the Clinical Coordinator.
    4. Options also may include dismissal from the placement site with a return to the placement site after meeting with the Faculty member.
        iii. **Level 3** Unsafe Practice must be communicated to the Clinical Coordinator and requires that the student be immediately dismissed from the placement site. Faculty member, Clinical Coordinator along with the Nursing Program Administrator will meet to determine appropriate actions (e.g. Instructor Initiated Exit - see Program Exit Policy). Student will be required to meet with a Faculty Member and/or Clinical Coordinator, Nursing Program Administrator, prior to returning clinical.
    b. Should the Onsite Supervisor intervene in a situation he/she deems to pose imminent and substantial risk to Client safety, the Faculty Member will take immediate actions consistent with Level 3 Unsafe Practice. Reevaluation by the Faculty Member of the event/unsafe practice for appropriate determination of level will take place later in order to determine appropriate intervention.
    c. In the event that a Student is permanently removed from a Placement, the Faculty/LBCC is not obligated to find an alternative Placement.
    d. A Student may be told to leave the Placement site by the Onsite Supervisor and/or Faculty member to ensure appropriate service to Clients, and to support the Student's learning and success. Examples include but are not limited to: Student Illness, Student being overwhelmed, inadequate preparation for practice. situation. The Student may then be permitted to return to the Placement site as determined by the Faculty Member.
    e. Any dismissal from a Placement site will require the Student to meet with a panel of Nursing Program Staff. This could be for the purpose of initiating a Guide to Success or to inform the student of Instructor Initiated Exit.
5. Student right to Appeal
    a. The Student has the right to appeal any decision arising from this policy, following the relevant LBCC appeal processes for Student Rights, Responsibilities, and Conduct Code.
6. Related Policies, Rules and Forms
    a. LBCC ADN Student Handbook Unusual Occurrence Report Policy.
    b. LBCC Nursing Program Unusual Occurrence Report Form.
    c. LBCC Nursing Program Guide to Success
    d. LBCC Student's Rights, Responsibilities, and Conduct (BP 7030 & AR 7030 (01-03)

Adapted from Vancouver Island University, Faculty of Health and Human Services, Policy: Client Safety and Clinical/Practicum/Practice Experience/Field Education Courses (Feb 4 2016).

Initiated: 6/2022
Reviewed:
Revised:3/2023

CURRICULUM POLICY

Purpose: The purpose of this policy is to familiarize students with general information about the curriculum, explain educational content and expected student requirements with regard to the curriculum.

Scope: The policy applies to all students taking courses within the Nursing Program at LBCC

Definitions:

Check-off	A traditional method of evaluation of the acquisition of nursing hands on skill(s) where the student is alone with one or two faculty evaluators. The student is required to successfully demonstrate the pre-identified skill(s) without help or prompts from the faculty evaluator. The evaluation may include a faculty evaluator asking questions to the student in order to validate knowledge associated with the hands on skill(s).
Course Management Software (CMS)	A collection of software tools providing an online environment for course interactions. A CMS typically includes a variety of online tools and environments such as: an area for faculty posting of class materials, an area for student posting of assignments, a gradebook where faculty can record/post grades and students can view their grade, and email tool allowing all participants to sent email messages to one or more persons in the class, discussion boards, chat rooms.
Direct Patient Care	Consist of students engaging in professional nursing practice with clients (individuals, families or groups) who are currently being seen for health related problems/issues. These take place at a variety of health care settings including acute care facilities, long term care facilities, and community based settings.
Invasive procedures	Skills or tasks which enter a body cavity or picture the skin. Examples include but are not limited to inserting an otoscope into someone's ear for examination, inserting a urinary catheter or giving an injection.
Learning Guide	Document produced by a nursing faculty member for use by the student. This document contains information about the topic to be covered within a course, objectives, key terms, required reading, and materials necessary to students to master the content.
Quick Write	Brief essay, summary or reflection, handwritten or typed generally assigned within class but can be at the completion of class. Utilized as part of class points activities.
Skills/Skills Curriculum	Refers to hands on performance of particular nursing actions, such as giving an injection or administering a medication. Each "skill" has particular criteria for successful completion. The selected "skills" taught during the LBCC Nursing Program make up the skills curriculum.
Simulation	Refers to a simulated clinical practice environment designed to promote clinical problem solving and contribute to skill acquisition within a context of a patient care scenario.
Ticket to class	Assignment (generally small in nature and given well in advance of class) that when completed, acts as an admission ticket to attend class. May be utilized as part of class points activities.

Associated policies include the following: Progression Retention Policy and Testing Policy.

Principles:
1. LBCC Nursing Program Faculty is responsible for the curriculum and to bring to life the individual course of the curriculum. This dynamic curriculum is made up of many elements and in combination these elements are focused to bring about the end goal of creating beginning nurse generalists.
2. A variety of learning resources are utilized to engage students with the curriculum and learning which includes but is not limited to textbooks, professional nursing journals, software programs and websites.

3. The overall curriculum with the Nursing program is cumulative and requires that students learn, retain and apply concepts from a course in order to learn, retain and apply concepts in the next course.
4. The LBCC Nursing Program of study (curriculum) can be divided into two categories; the "thinking" or theory/knowledge based aspects of nursing, which takes place in the classroom environments and the "doing" or clinical which takes place in skills laboratory, Simulation laboratory, and direct patient care healthcare facilities.
5. Each course has identified course outcomes which are listed on each course syllabus. Students are responsible for meeting all course outcomes to progress within the program (See Progression Policy). A variety of assessment/evaluation methods are used to evaluate theory based courses which will result in a letter grade (A-F) and clinical courses result in a Pass or No-Pass grade.
6. In compliance with state licensing standards and best practices, this program has academic as well as technical standards (non-academic criteria) students must meet in order to successfully progress in and graduate from the program. The technical standards document is available in the Information section of this Handbook and titled Standards of Core Performance.

Policy Statement:
1. Each course within the Nursing Program is supported with course management software (CMS). so that students are able/required to access all course information online and is available for students to access no later than the first day of the scheduled class for that course.
    a. Students are required to access course information online via the CMS.
    b. Students may be required to submit assignments, completed forms, documents and other required items via the CMS.
    c. Specific items of course content will be available to students as followed:
        i. The syllabus and course calendar will be posted/available no later than the first day of course.
        ii. Learning guides will be posted/available no later than 1 week prior to the lecture for that content.
        iii. Lecture notes/PPT slides of the faculty will be posted/available no later than 1 hr prior to scheduled class session
2. Textbooks and other resources for student learning are identified by the Nursing Faculty and include both required and recommended items.
    a. Required and recommended textbooks will be identified for students prior to the start of their first nursing course. Additional texts may be required in subsequent courses and will be identified prior to the start of the course.
    b. Assessment Technologies Institute (ATI) is an online service/product that the LBCC Nursing Program utilizes to enhance our nursing education program and assist the faculty in evaluating our students. Information about ATI is available in the Appendices. Student utilization of ATI products/services is required within specific courses of the LBCC Nursing Program.
        i. Testing software with the LBCC Nursing Program is all conducted through the ATI software (see Testing Policy).
    c. Other products or online services which require student use may include but are not limited to:
        i. Turnitin (online submission depository for identified written assignments)
        ii. Lexicomp (online drug information)

3. Students are required to register for nursing courses to which they are assigned by the Clinical Coordinator, Nursing Dept Chair and/or other nursing faculty.
    a. Student assignments are based on clinical partner availability and balancing all elements of scheduled classes with the learning needs of all students enrolled in the Nursing Program.
        i. Theory courses take place at the Lebanon Health Occupations Center.
        ii. Clinical courses consist of a variety of elements that include hours within the Skills lab, Simulation Lab, and Direct Patient Care experiences primarily conducted off-campus at a variety of healthcare facilities.
        iii. Students are responsible for providing their own transportation to all classes/course required activities.
        iv. Students are expected to attend classes to which they are registered.
4. Theory courses are designed to assist the student to acquire knowledge of nursing science. Students are expected to actively engage in class while supporting an environment conducive to learning. While attendance is not required it is linked with greater ability to succeed in this program.
    a. Achievement of course outcomes are evaluated by testing approximately every two weeks during the course of the term. Other assignments for evaluation of meeting outcomes may include but are not limited to written work, classroom assignments (see Testing Policy for information about testing and Course Syllabus for specifics about any course assignment or written work).
    b. Theory courses will provide students with a calendar indicating due dates/times for assignments and content to be covered on specific days of class.
    c. Grades for Theory courses are determined by test average and total points achieved (See Progression and Retention Policy and Test Policy).
        i. Classroom Points Activities may be assigned at any time during the course of the academic term. These activities are designed to assist the student in preparing for the lecture and/or upcoming tests. The actual activity will be designed at the discretion of the faculty content expert. These activities are worth 0-3 points as determined by faculty content expert.
        ii. Because class attendance is not required, it is expected that students will notify the faculty content expert of their pending absence at least one hour prior to class and if an activity will be offered for points and the student will be absent, it is the discretion of the faculty content expert to accept it.
5. Skills Laboratory curriculum is designed to assist the student to acquire new nursing skills and safely perform them. Successful skill acquisition is part of the course outcomes.
    a. Students are required to:
        i. Review materials (information will be posted on the CMS) prior to their skills experience. This may include reading, viewing demonstrations, completing assigned and unassigned testing, reviewing healthcare institutional or Nursing Program Policies.
        ii. Actively engage in practice of skills and contribute to peer evaluation of skill acquisition.
        iii. Acquire new nursing skills and safely perform them within the skills lab as evaluated by a nursing faculty member after practice.
    b. If a student is not satisfactorily performing a skill/skills the student will be required to demonstrate the skill/skills for a faculty member on a 1-on-1 basis (traditional Check-off format). All efforts by the faculty will be made to schedule this demonstration prior to a students Simulation experience.
        i. Successfully completion of skill post check-off will result in placing a student on a Guide to Success and progression within the course.

  ii. Failure to be successful will result in a Guide to Success and a scheduled second check-off demonstration for the student. In such cases where a student is deemed unable to successfully demonstrate the skill the student will schedule an exit appointment with the Nurse Administrator.

6. Simulation (SIM) Laboratory curriculum is designed to promote clinical problem solving and further validate the safe and effective utilization of skills (acquired in the skills laboratory) by the student
   a. Students are required to:
      i. Review materials (information will be posted on the CMS) prior to their SIM experience. This may include reading, viewing demonstrations, completing assigned and unassigned testing, reviewing healthcare institutional or Nursing Program Policies.
      ii. Engage with peers and faculty in a variety of roles (you may be observing and evaluating your peers or they may be observing/evaluating you).
      iii. Demonstrate safe, consistent skills(s) and develop critical thinking and priority management skills.
   b. If a student is not able to satisfactorily demonstrate safe and effective nursing care with appropriate clinical judgment and/or priority setting for the specific situation on their scheduled SIM experience one or more of the following options will be taken by the SIM faculty, the student will:
      i. Be placed on a Guide to Success
      ii. Attend remediation practice for skill acquisition with performance of a skill Check-off (as described in this policy 4.b.i-ii)
      iii. Perform more focused SIM experience(s) that specifically target area of concern (safe skill acquisition, or priority setting etc).
      iv. In such cases where a student is deemed unable to successfully demonstrate the skill/criticalthinking/priority setting the student will schedule an exit appointment with the Nurse Administrator.

7. Direct Patient Care experiences are held in a variety of settings/facilities and consist of students engaging in professional nursing practice with clients who are currently being seen for health-related problems/issues. Regardless of the setting/facility student are required to:
   a. Abide by the policy of the facility to which they are assigned
   b. Behave respectfully and professionally with peers, nursing faculty, and all members of the healthcare team.
   c. Engage in nursing practice to the level of their training and knowledge under the supervision of their clinical nursing instructor (NUR101B-NUR202B) or under the supervision of a registered nurse preceptor (NUR203B)
   d. Communicate clearly when you are not sure/uncomfortable or unclear on how to proceed or have not completed something independently before.
   e. Request supervision when completing a skill for the first time within direct patient care.
   f. Validate orders for skills/tasks that require one.
   g. NEVER assume that you are independent to complete a task, discuss your abilities and request permission to clarify your independent status with each skill/task.
   h. Recognize that your role as a student requires additional communication with staff and communicate clearly if you will or will not be able to complete specific tasks.
   i. NEVER take any type of order from a prescriber with ANY direct patient care setting.
   j. NEVER engage in any skill/tasks that you have not previously practiced and accomplished in the skills or simulation laboratory setting.

8. Independent Practice - ALL Students are encouraged to practice or "walk-through" skills independently during scheduled open skills lab hours. Non-invasive procedures (procedures which do not enter a body cavity or puncture the skin) may be safely practiced in order to refine technique.
    a. It is STRICTLY PROHIBITED to complete invasive procedures for practice on a living being without direct faculty supervision and/or outside of the educational/clinical setting.
9. Evaluation of Clinical Course work - Each clinical course identifies specific outcomes that students must achieve in order to progress to the next term. Nursing Clinical Faculty instructors are responsible for evaluating your ability to demonstrate achievement of the course outcomes (identified per course Syllabus) while also adhering to technical standards (See Standards of Core Performance included in General Information of the LBCC Nursing Student Handbook). Failure to meet clinical course outcomes should never come as a surprise to a student. If you do not know how you are doing, ASK your clinical instructor for feedback.
    a. Evaluation at NUR101B
        i. The student will meet with their assigned clinical instructor at the end of the term for a FINAL clinical evaluation. During these meetings discussion will take place regarding achievement of the course outcomes with regard to performance in Direct Patient Care experiences and may include discussions of performance in Skills Lab, SIM Lab. Students are required to sign an attestation form that they have met for this meeting.
        ii. 36 clock hours of instructional time and laboratory practice is dedicated to comprehensive physical assessment at the start of NUR101B. Near the end of NUR101B the student will be scheduled to perform a 30-minute, graded, comprehensive physical assessment.
            1. Students must complete the comprehensive Physical Assessment with a minimal score of 75% according to the rubric provided (posted on the NUR101B CMS site).
            2. If the student is unsuccessful in achieving a minimal score of at least 75% , the student will be afforded a second attempt. Prior to a second attempt the student is encouraged to:
                a. Meet with the faculty evaluator for feedback and discussion of areas of concern.
                b. Practice repeatedly to develop competency.
            3. The second attempt may take place outside of regular course hours. Two nursing faculty (neither will have previously evaluated the student for this demonstration) will each individually score the students performance. The average score will be derived from the two evaluators and used as the student final score for the second attempt.
                a. If the student is successful in achieving a minimal score of at least 75%, this information will be added to all aspects of the clinical evaluation and if meeting all other course outcomes will receive a PASS grade (See Progression and Retention Policy).
                b. If the student is not successful in achieving a minimal score of at least 75%, one of the course outcomes is not met and the student will receive a "No Pass" for the course (See Progression and Retention Policy).

b. Evaluation at NUR102B-NUR202B
  i. The student will meet with their assigned clinical instructor at midterm and at the end of the term for a final clinical evaluation. During these meetings discussion will take place regarding achievement of the course outcomes AND ongoing performance of previously demonstrated NUR course outcomes with regard to performance in Direct Patient Care experiences and may include discussions of performance in Skills Lab, SIM Lab. Students are required to sign an attestation form that they have met for these meetings.
    1. If the student is not meeting outcomes at midterm the student will be placed on a Guide to Success with identified behaviors and actions specified to assist the student in meeting the outcomes. Student is encouraged to:
        a. Attend independent practice sessions in the skills lab.
        b. Meet regularly with your clinical nursing instructor for feedback and progress reports.
        c. See your Nursing Advisor for additional help.
    2. If the student is not meeting outcomes at week 7 of the term the Dept Chair, clinical instructor or advisor will attempt to contact you for a meeting to identify options you might take.
    3. At Final evaluation the student will be notified if they met or not met the course outcomes. IF the student meets all course outcomes they will be issued a Pass grade, and if not meeting all course outcomes they will be issued a No Pass grade (See Progression and Retention Policy).

c. Evaluation at NUR203B
  i. The student will meet with their assigned nursing faculty contact at midterm and at the end of the term for a final clinical evaluation. During these meetings discussion will take place regarding achievement of the course outcomes AND ongoing performance of previously demonstrated NUR course outcomes with regard to performance in Direct Patient Care experiences. Students are required to sign an attestation form that they have met for these meetings.
    1. Additional feedback by the students assigned RN Preceptor will be taken by the students nursing faculty contact and when deemed appropriate will be added to the clinical evaluation.
    2. All course outcomes must be met at the Final evaluation to meet End of Program Student Learning Outcomes and progress to graduation.

DOCUMENTATION POLICY

Purpose: The purpose of this policy is to provide guidance to the students regarding appropriate documentation within a clients health record.

Scope: This policy applies to courses in which there are direct patient care experiences.

Definitions:

Client	The recipient(s) of services. Within this context, the client will always be an individual.
Direct Patient Care	Healthcare related activities and actions by students delivered to individuals, a family, a community, or population who are in actual need of those activities and actions.
Documentation	" . . . a key communication strategy that produces a written account of pertinent patient data, clinical decisions and interventions, and patient responses in a health record" (Kerr, 2021, pg 365).
Facility	Generally refers to an individual healthcare institution or agency (i.e. hospital, clinic, home health) where healthcare is delivered or administrated. Facility partners have current affiliation agreements with LBCC and provide experiential educational opportunities for LBCC students that involve direct patient care.
Faculty Member	LBCC faculty member (includes both part-time and full-time instructors) responsible for determining a final course grade for a student enrolled in a course which contains a clinical component of direct patient care. AKA clinical faculty, clinical instructor.
Health Record	The legal documentation that consists of all information entered and presents the best holistic evidence of the clients total medical status. The record can be electronic, paper or both.
Narrative Notes	A format of documentation that consists of a story like format to bring forth data and findings. It generally consists of free text entry or menu selected items within electronic medical records (Kerr, 2021).
Placement	An experiential education opportunity required as part of a program of study, in which the student works in a practice setting under supervision to deliver direct patient care. This includes but is not limited to: ● Clinical cohort groups with a faculty member ● Practicum experiences ● Cooperative work experiences
Student	An LBCC student enrolled in a course which contains a clinical component of direct patient care. This includes but is not limited to: ● Clinical cohort groups with a faculty member ● Practicum experiences ● Cooperative work experiences

Principles:
1. Documentation within a medical record is a responsibility of all nurses.
2. The Student is a learner in the placement setting and documentation is a learned skill requiring time and practice.
3. The health record is a legal document. Students need to understand that the health record (including their documentation) can be used as evidence in a court of law to demonstrate whether nursing standards of practice were or were not met.

4. As a professional RN the Faculty Member has an obligation to assess the documentation within the health record that is completed by students.
5. Students are required to abide by professional/occupational regulations and standards of practice, practice within the scope of their current learning, and practice the policies of the specific Placement setting to which they are assigned.

Policy Statement:
1. **Preparation for Documentation:** Students are required to demonstrate knowledge presented in NUR101A which identify basic information about documentation. Students are required to apply knowledge of and document accordingly on health records.
2. **Access to Health Records**
   a. All students are required to access health records according to the facility policy.
   b. Students are to complete required training by partnering facilities that give access to electronic health records (EHRs) and health care information systems (HISs) that are individually password protected.
   c. Students are required to maintain the security of their access and passwords to EHRs, and HISs, failure to do so is grounds for instructor initiated exit.
3. **Documentation Procedures**
   a. Students are to complete documentation in a timely manner on all actions/interventions which they complete for a client.
   b. The following activities/findings are documented at time of occurrence, including but not limited to:
      i. Vital signs
      ii. Pain assessment
      iii. Administration of medications
      iv. Admission, transfer, discharge or death of a client
      v. Sudden change in client status
   c. All documentation should reflect correct use of terminology and represent the most complete and accurate picture of the client's health status.
   d. It is required (in NUR101B) and recommended (NUR102B-203B) that students validate findings of assessments with primary RN prior to documentation of these findings in order to maintain accuracy of documentation
      i. Discrepancies should be explored by student with guidance from clinical faculty and clarified prior to documenting in the health record
   e. Students are encouraged to utilize narrative notes to describe any routine data in greater detail when a change in status occurs
   f. Students are strictly forbidden from copying a column from a previous assessment that was entered by another health care provider, and pasting into their own assessment data entry.
   g. Any use of the "last filed" function should follow all legal and ethical documentation requirements, i.e.
      i. Students should only document on fields that they have personally assessed. Areas not assessed should be left blank; consider leaving a note if appropriate.
      ii. The last filed data should be used to compare current assessment findings to the previous assessment.

        iii.   Any and all data included in the "last filed" section should be thoroughly reviewed. If and only if the student assessed that area and agrees with all selections, may they utilize the last filed hyperlink. Otherwise, they should individually select the terms they personally assessed to be true and accurate.

   h. When needed students are to utilize the following credentials after signature for proper identification: LBCC SN

4. **Limitations of Documentation and Co-signatures:** Partnering facilities may restrict access to specific areas of an EHR or may limit student documentation by policy.

   a. Students are further restricted from documenting on the following even when given access:

        i.   Prescribers orders or signing off on orders

        ii. Signing off on validating the following

            1. Blood products for infusion

            2. Narcotic counts

   b. Many actions may require students to obtain one or more co-signatures to validate accuracy, those items include but are not limited to:

        i.   Any medication administered to pediatric clients

        ii. Insulin administration

        iii. Wasting narcotics/controlled substances

5. **Maintaining HIPAA compliance:** All students are required to abide by the standard of the Health Information Portability and Accountability Act (HIPAA). Additionally, students are required to abide by all privacy policies in place at their placement.

   a. Photocopying, downloading, or electronic transfer of medical records is strictly forbidden.

   b. All client prep, clinical paperwork is to exclude patient identifiers or any information which could be linked to that particular clinical paperwork.

   c. Use of the cell phone/smart device for taking pictures within the placement setting, any client, or health record is strictly forbidden.

   d. Violations of HIPAA compliance or a facilities privacy policy may result in one or more of the following actions:

        i.   Student may be placed on a Guide to Success and/or

        ii. Student may be exited from the program (see instructor initiated exit)

        iii. Student may be issued civil fines and/or jail terms.

   e. Students who are employed at a Placement facility are advised that failure to uphold employer privacy policies and procedures that result in disciplinary action of no further access to employer site medical records may result in inability of the student to progress in the program.

6. **Reporting Documentation Errors:**

   a. Any of the following discrepancies in Student documentation within a health record would require a verbal report to the primary RN, Supervisory RN of the facility, Faculty member and an LBCC Occurrence Report:

        i.   Omission of data or did not document

        ii. Documentation within the wrong health record

        iii. Documentation that utilized judgemental, biased language, do not use abbreviations, lay jargon, spelling errors.

        iv. Falsifying data with a health record or change of shift written reports.

   b. Students and Faculty will follow the Unusual Occurrence Reporting Procedures as published in the LBCC ADN Student Handbook.

References

Kerr, N.M. (2021). Informatics and documentation. In P.A. Potter, A.G. Perry, P.A. Stockert, &
[1]A.M. Hall (Eds.), Fundamentals of nursing (10th ed. Pp. 365-383). Elsevier.

Initiated 5/23
Reviewed:
Revised: 5/24

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[1] Updated 5/31/24

DRUG TESTING AND NOTIFICATION POLICY

Purpose: The purpose of this policy is to describe general information and requirements for nursing students prior to direct patient care clinicals as well as outline student notification and cooperation with drug testing while enrolled within the LBCC Nursing Program.

Scope: The policy applies to all students who have accepted admission into the LBCC nursing program as well as students fully enrolled in LBCC Nursing Program course work.

Definitions:

Direct Patient Care	Consist of students engaging in professional nursing practice with clients (individuals, families or groups) who are currently being seen for health related problems/issues. These take place at a variety of health care settings including acute care facilities, long term care facilities, and community based settings.
No-tolerance	Means any result on a drug screen/test that indicates any drug or substance is measured in the students urine sample violates a clinical partner facilities policies and results in the student not allowed to engage in direct patient care in that facility.

Principles:
1. The LBCC Nursing Program fully adheres to OAR 409-030-0100 - 409-030-0250 which are rules establishing standards for administrative requirements for health professional student placements in clinical training settings within the state of Oregon.
2. The Nursing Program requires students to work in settings with actual patients (direct patient care) and/or patient records. In order to ensure patient safety, it is critical that students working in such settings are substance-free.
3. Students should be advised that marijuana and derivatives are not federally approved prescription drugs and many clinical partner facilities have a "no-tolerance" policy regarding marijuana.

Policy Statement:
1. Students who are taking prescribed medications that may impair judgment must report this prescription to their clinical faculty instructor prior to any direct patient care.
2. Urine drug testing must be completed BEFORE a student begins their clinical rotation and may be further required of the student at any time during the program when there is reasonable suspicion that the student may be impaired.
3. Admission to the nursing program constitutes implied consent for initial and random drug testing of the student. Failure to comply with initial or random drug testing requests/requirements will be considered as grounds for Instructor Initiated Exit (See Program Exits Policy).
   a. Students are responsible for the cost of the drug screen; additional charges will apply if the screen is not clear.
   b. Initial Drug Screening:
      i. Students will be given instructions and notified of the date(s) and location of initial drug screening.
      ii. Students must comply with aspects of the drug testing process: timing, location, specimen quality, specimen temperature, etc.
      iii. If the student is found in violation of the process, the student may be required to provide a second sample, prior to leaving the site, under direct observation.
   c. Random Drug Testing:
      i. Cooperation with drug testing policies of any work experience, clinical partner facility or cooperative teaching site is a condition for continued enrollment in course(s) and/or related academic program. Students are required to comply with the non-LBCC instructional site's drug test policy.
      ii. Testing may be random and unannounced or conducted when a reasonable belief that work-behavior may be the result of the presence of a substance.
         1. Students must comply with aspects of the drug testing process: timing, location, specimen quality, specimen temperature, etc.

4. Compliance with the drug testing protocol and procedure, and the production of a negative result, are requirements for continuation in the program.
    a. The presence, as determined by a testing laboratory testing procedures, of prescription, non-prescription drugs, or controlled substances, for other than legal and legitimate uses will result in immediate dismissal from the clinical site and Instructor Initiated Exit (See Program Exits Policy) AND
    b. The student may be subject to appropriate disciplinary action for violating the "Standards of Student Conduct" as outlined in the LBCC Student's Rights and Responsibilities.
    c. Students taking ordered prescription drugs may test positive; if so
        i. The results should be in the expected range for the ordered prescription, AND
        ii. May not impair clinical performance.
5. The college reserves the right to require additional drug testing whenever a clinical site or clinical faculty instructor has suspected a student of drug use, or at any other time when drug use is suspected.
    a. Compliance and testing results must be consistent with section 4 of this policy.

References:

- [Oregon Administrative Rule (OAR) 409-030-0100 - 409-030-0250](#) (rev. 12-28-2023)

Initiated: 10.15(NA)
Reviewed: 5/12; 10.18; 6/21, 4/23
Revised: 8/13; 9/13; 9/14; 8/15; 9.15; 4.17, 8/19,11/19,1/20,9/20, 9/24

ENGLISH LANGUAGE LEARNERS (ELL)/
MLL MULTI-LANGUAGE (MLL) LEARNERS POLICY

Purpose: The purpose of this policy is to assist English Language Learners (ELLs)/Multi-Language Learners (MLLs) in meeting their academic and professional goals.

Scope: The policy applies to any student enrolled in the LBCC Nursing Program who self identifies as ELL/MLL.

Principles:
1. The LBCC Nursing Faculty understand that written tests may pose specific barriers to students who identify as ELL/MLL and may need additional time or assistance with word translations to assist in their success.

Policy Statement:
1. Students must self-identify their request to take advantage of any aspect of this policy to the academic team leader each term as being due to their status as ELL/MLL.
    a. Students may utilize a translation dictionary (hard copy only) that is word only (no definitions of the words) during tests for all courses offered by the nursing program.
        i.   Students are responsible for obtaining this dictionary and may be asked to present this to the faculty at test time for inspection.
    b. Students may request additional time with testing which may require that the student be proctored for tests in one of the LBCC testing centers.

Initiated: 9/12
Reviewed: 6/20, 6/21
Revised: 8/13; 9.15; 1.16, 8/19, 6/20,7/20, 3/23, 11/23, 9/24

ETHICS POLICY

Purpose: The purpose of this policy is to introduce to the student the ethics for the nursing profession and to identify the students explicit obligations, values and ideals they must embrace and uphold in order to engage in ethical nursing practice.

Scope: The policy applies to all students enrolled and auditing nursing courses.

Definitions:

Autonomy	"Rational self-legislation and self-determination that is grounded in informedness, voluntariness, consent, and rationality" (ANA, 2015, pg. 41).
Beneficence	"The bioethical principle of benefiting others by preventing harm, removing harmful conditions, or affirmatively acting to benefit another or others, often going beyond what is required by law" (ANA, 2015, pg. 41).
Confidentiality	"A right to have one's private, intimate, or secret information kept undisclosed to a third party unless permission is granted for disclosure" (ANA, 2015, pg. 42).
Fidelity	"The ethical principle that requires loyalty, fairness, truthfulness, advocacy, and dedication in relationships. It includes promise-keeping, truth-telling, and fulfilling commitments" (ANA, 2015, pg. 43).
Nonmaleficence	The bioethical principle that specifies a duty not to inflict harm and balances unavoidable harm with benefits of good achieved" (ANA, 2015, pg. 44).

Principles:
1. The faculty of LBCC Nursing Program strive to guide nursing students in developing a set of professional ethics in order to guide their practice.
2. Faculty recognize that through repetition the student has the opportunity to develop and internalize the ethical behaviors of autonomy, beneficence, nonmaleficence, veracity, confidentiality, justice, and fidelity.
3. This policy whose foundation is principled from the The ANA Code of Ethics (2015), is to be understood as normative or prescriptive statements expressing expectations of ethical behavior.

Policy Statement:
1. It is the exception that the student will uphold the following standards of professional conduct, (whether in academic clinical or other settings) including but not limited to:
    a. Confidentiality: Respecting and maintaining the privacy of patients and privileged information.
    b. Accountability: Answering for one's own actions to self, patients, the profession, and the institution.
    c. Responsibility: Fulfilling duties association with one's role.
    d. Integrity: Keeps their word and acts in accordance with what is right even when no one is watching
    e. Policies and procedures: Adheres to institutional, program, and facility policy, procedure, training and guidelines.
    f. Honesty: Displaces truthfulness and fairness.
    g. Punctuality: Present on time for all classroom and clinical experiences.
    h. Dependable: Demonstrates reliability and trustworthiness.
    i. Respect: Treats others, and self, with consideration and courtesy.
    j. Legal: Operates within the standards and practices of the Oregon Nurse Practice Act while in the role of a student.
    k. Safety: Minimizes risks for physical, psychological, or emotional injury or damage to self, patients, and others.
    l. Civility: Contributes to a positive learning environment by exhibiting respectful, courteous, and empathetic behaviors to classmates, faculty, staff, and those in the clinical setting.

2. Failure to to uphold the standards of professional conduct outlined in 1.a-l of this policy, and/or student conduct derogatory to the standards of professional conduct may result in one or more of the following:
   a. Placed on a Guide to Success.
   b. Reported to the LBCC Office of Student Conduct and Retention
   c. Instructor Initiated Exit from the Nursing Program.

3. Student conduct derogatory to the standards of professional conduct may include, but is not limited to:
   a. Plagiarism
   b. Cheating on exams
   c. Improper use of internet
   d. Improper use of electronic devices for or during exams
   e. Improper use of electronic devices in the clinical or classroom setting
   f. Unauthorized collaboration
   g. Forgery and falsification
   h. Lying
   i. Facilitating academic dishonesty
   j. Unfair competition
   k. Infringement of the rights of others
   l. Assault
   m. Destruction or defacement of property
   n. Theft
   o. Disruption or obstruction of LBCC Nursing Program events such as classes, meetings, or other events,
   p. Any action or uncivil behavior which violates the professional standard set forth above.
   q. Any violation of the LBCC AR 7030-01 Students Rights, Responsibilities, and Conduct or Nursing program policy.

References:
ANA (2015). Code of Ethics for Nurses with Interpretive Statements.

LBCC AR 7030-01 (4/7/22) Student Rights, Responsibilities, and Conduct Code.
https://www.linnbenton.edu/about-lbcc/administration/policies/board-policies-and-administrative-rules/7000-series-student-services/ar-7030-01.php

Initiated: 2011
Reviewed: 5/12; 1.16; 6.18, 7/20, 4/28/23
Revised: 4/13; 9/13, 7/19 BL, 7/20 KrT, 7/21

EXPOSURE: INJURY OR HAZARDOUS

Purpose: The purpose of this policy is to identify and describe procedures for handling all personal injuries or hazardous exposures during any clinical activities.

Scope: The policy applies to all students taking nursing courses

Definitions:

Hazardous waste	Waste that must be handled properly to avoid damaging human health or the environment.

Principles:
1. Students should recognize that in engaging in clinical activities they may encounter risk of personal injury and/or exposure to hazardous waste(s).
2. Students should take proper precautions to protect themselves and others from personal injury and/or exposure to hazardous waste(s) (See Student Safety Policy).

Policy Statement:
1. Students are required to attend an orientation session prior to any clinical activity.
    a. At orientation to clinical activity students are to validate that they have received, have in their possession at clinical activities, or have access to at any clinical facility the Nurse Pulss 24/7 on-call center phone number.
2. Students are required to call Nurse Plus 24/7 before seeking medical treatment for any clinical related injury or illness AND at any time you develop symptoms that MAY be related to a clinical activity. This includes but is not limited to the following injuries:
    a. Falls, lifting injury, needle sticks, exposure to blood or body fluids, any clinical related illness or injury.
    b. IF an evaluation with a physician is warranted, the 24/7 hotline nurse will contact an occupational medicine physician and arrange an appointment for you.
        i. Students are responsible for payment of these services.
        ii. Students may request to see their own physician for these services.
3. IN CASE OF EMERGENCY: Get help - call 911 or institute facility appropriate code measures.
4. Process for reporting injury/hazardous exposure and/or discuss the need for medical attention the student is to take the following steps:
    a. Notify their LBCC clinical nursing faculty instructor of the injury/exposure.
    b. Call the Nurse Plus 24/7 on call center @ 1-866-209-7711
5. Any student treated for a clinical activity-related injury/hazardous exposure is required to take the following steps
    a. Contact LBCC Human Resources by the Next business day and
    b. Complete the workers' compensation claim form and other required forms as instructed by LBCC Human Resources.

Initiated:
Reviewed: 6.18, 8/19, 1/20, 4/22
Revised: 5/12, 12/20

IMMUNIZATIONS AND CPR REQUIREMENTS POLICY

Purpose: The purpose of this policy is to identify immunization and CPR requirements.

Scope: The policy applies to students who have been admitted into the LBCC Nursing Program.

Definitions:

Clinical Facility Partners	Location off LBCC campus where direct patient care clinical activities occur.
Declination Form	Document that validates students' acknowledge and understanding that they have declined to be vaccinated for a particular disease/illness. Requires a student's signature.

Principles:
1. The LBCC Nursing Program will adhere to administrative requirements as outlined by the Oregon Health Authority for health professional student placements in clinical training settings within the state of Oregon (see Oregon Administrative Rule 409-030-0100-409-030-0250).
2. In order to process information/file documents and ensure maintaining working relationships with clinical placement partners the LBCC Nursing Program will determine deadlines for student required elements.
3. Immunization and Cardiopulmonary Resuscitation (CPR) status is shared with clinical facility partners and clinical instructors in order for students to attend and engage in direct patient care activities within established clinical facility partner policy
4. Students are advised to keep a copy of all immunization and CPR records for personal and professional reasons.
5. The LBCC Nursing Program recognizes that sudden and unexpected changes may impact student requirements with reward to immunization requirements. All efforts will be made to communicate changes in regulations and requirements for students quickly and clearly.

Policy Statement:
1. Upon admission the the LBCC Nursing Program students will be required to provide documentation of proof of required immunizations and CPR in order to retain your admission status in the LBCC Nursing Program.
   a. Students are required to meet deadlines for this requirement. Failure to have all required documentation submitted by deadline will result in students forfeiture of admission into the LBCC Nursing Program.
   b. Cost for obtaining these required items is a student responsibility.
2. Students are required to update immunization records and CPR prior to their expiration dates and provide documentation of proof.
   a. Students are required to provide this proof of maintaining currency with these items. Failure to provide proof of currency will result in students being withheld from attending clinical activities and may jeopardize the students progression in the LBCC Nursing Program.
   b. Cost for obtaining/maintaining these required items is a student responsibility.
3. Immunizations/Screening requirements prior to clinical placement and ongoing updates.
   a. Proof of Hepatitis B positive surface antibody titer OR Hepatitis B negative surface antibody titer after documented proof of ALL of the following:
      i. Initial 3 vaccine series of HepB vaccine AND
      ii. Hepatitis B negative surface antibody titer dated post initial series AND
      iii. Revaccination of 3 vaccine series of HepB Vaccine AND
      iv. Hepatitis B negative surface antibody titer dated post revaccination series.
   b. Proof of Measles, Mumps Rubella (MMR) positive antibody titers for all three OR 2 vaccine series.
   c. Proof of Tetanus, Diphtheria and Pertussis (Tdap) vaccine. One does dated within the last 10 years.
      i. Requires student to update if expires (immunization greater than 10 yrs old) while student is still currently progressing in the LBCC Nursing Program
   d. Proof of Varicella (Chicken Pox) positive antibody titer OR 2 vaccine series.

    e. Tuberculosis Screening Requires ONE of the following:
- i. Proof of Negative Tuberculosis (TB) Screening by either of the following:
    1. Negative TB Blood Test (Quantiferon Gold) OR
    2. Negative 2-step TB Test (2 separate Negative TB skin tests completed 1-3 weeks apart; completed within the last 12 months.
- ii. Proof of Positive Tuberculosis screening by either of the following methods listed in 3.e of this policy AND proof of no active disease via Chest X-ray.
- iii. May require updating to participate in some clinical placement facilities.

4. Recommended Immunizations/Vaccinations. Some clinical facility partners may require specific vaccines in order to be placed within their facility.
- a. Students will be required to fill out a Declination Form if they choose not to receive/provide evidence of proof of the COVID-19 Vaccine and the annual Flu vaccine.
- b. Covid-19 Vaccination and or Booster(s):
    - i. Initial vaccine proof of 1 dose of updated bivalent vaccine OR 2 monovalent vaccines and/or booster(s) as indicated by CDC guidelines.
- c. Flu Vaccine:
    - i. Proof of annual flu vaccine
- d. Polio:
    - i. Positive antibody titers OR 3 doses.

5. Cardiopulmonary Resuscitation (CPR) Certification requirements:
- a. Only "American Heart Association's (AHA) Basic Life Support (BLS) Healthcare Provider CPR Certification" will be accepted as proof of meeting this requirement. Course must include one and two person CPR, child and infant CPR.
    - i. Other CPR certifications, even other certification through AHA or if they claim to use AHA guidelines but are not actually the BLS certification through AHA, will be denied.
- b. Students must be current for the duration of the enrollment in the program and are responsible for the cost of this requirement.

6. Documentation and Submission of Immunization and CPR requirements:
- a. Students are required to submit initial documents at post admission/previous to clinical placement to the online records management program (currently this is Castle Branch). Students are required to maintain/submit updated immunizations/screenings and CPR while enrolled in the LBCC Nursing Program.
- b. Students are responsible for the cost in utilization of this online records management program.
- c. Students may also be required to submit documents directly to the nursing program.
- d. The following information should be included on health care providers official letterhead (or be a copy of an original immunization document);
    - i. Students name and date of birth
    - ii. Agency or provider administering the vaccination/screening/test etc.
    - iii. Name of vaccination/screening/test and results if applicable.
    - iv. Date of vaccination/screening/test and expiration if applicable.

Initiated:
Reviewed: 5/12
Revised: 9/20, 8/21, 6/22, 8/24

INFECTION CONTROL AND PREVENTION POLICY

Purpose: The purpose of this policy is to inform students of their responsibilities and requirements for maintaining infection control and to prevent the spread of infection.

Scope: The policy applies to all students enrolled and auditing LBCC Nursing Program courses.

Definitions:

Term	Definition of term, these should be consistent throughout all the policies. Terms also be in alignment with Nurse Practice Act Div 6 definitions if at all possible.
Highly Infectious Diseases	These are diseases identified as the following: ● Severe Acute Respiratory Syndrome (SARS) ● Middle East Respiratory Syndrome (MERS) ● Coronavirus Disease 2019 (COVID-19; SARS-CoV-2) ● Avian Influenza ● Other Pathogens, as directed by Infection Control at Samaritan Health services (SHS)
Special Contact/Droplet Precautions	A term defined by SHS used specifically for COVID and COVID persons under investigation (PUIs)

Principles:
1. All health care persons are responsible for maintaining infection control practices and preventing the spread of infection.
2. Standard precautions are to be followed by all healthcare providers regardless of their rank or role (students, faculty).

Policy Statement:
1. All students engaging in nursing course work including but not limited to direct patient care experiences have a responsibility to follow facility guidelines for infection prevention and control which include, bur are not limited to:
    a. The practice of good personal hygiene
    b. Maintaining sound personal health
    c. Proper disposal of infectious waste, linen, or non-reusable supplies
    d. Wearing appropriate personal protective equipment (PPE)
    e. Wearing a laundered, wrinkle-free clinical uniform only in the clinical settings
    f. Stay home when you are sick
2. Prior to caring for or being assigned to care for a client with a highly infectious disease the student is required to:
    a. Complete all necessary actions to be properly fitted for an appropriate respirator mask (N95).
    b. Read and understand the clinical placement facility policy on Infectious Diseases and any related policy on infection control/prevention (i.e., Samaritan Health Services High Consequence Infectious Diseases Policy).
    c. Demonstrate Competency in the skills lab with donning and doffing PPE utilizing a combination of Droplet Isolation + Airborne Isolation + Contact Isolation + Eye Protection witnessed by a Nursing Faculty/Clinical Instructor.
    d. Should a student not be successful in achieving any of the items listed in 2.a.-c of this policy, the student is not to engage in the care of clients needing special contact/droplet precautions.
3. Each clinical day that a student assignment includes caring for a client requiring Special Contact/Droplet Precautions will require a face to face discussion with their clinical nursing instructor.
    a. The Nursing Faculty/Clinical Instructor has the authority to pull the student from the assignment at any point and for any reason.

    b. Upon the student's first assignment that requires these special contact/droplet precautions the student will notify the Nursing Faculty/Clinical Instructor when they are ready to don PPE for the first time.

        i. The Nursing Faculty/Clinical Instructor is required to witness this first donning and doffing of PPE.

        ii. The Nursing Faculty/Clinical Instructor will have the authority to release the student for independent donning and doffing when they determine the student is competent.

Initiated:
Reviewed:
Revised: 5/12, 1/16, 6/18, 8/19, 7/20, 621, 1/22

MEDICATION ADMINISTRATION POLICY

Purpose: The purpose of this policy is to provide guidance for students regarding the safe administration of medications to clients that are under their care.

Scope: This policy applies to courses in which there are direct patient care experiences.

Definitions:

Client	The recipient(s) of services. Within this context, the client will always be an individual.
Controlled Substance	Term used for DEA (Drug Enforcement Administration) schedule II-IV drugs that have an elevated risk for abuse or diversion.
Direct Patient Care	Healthcare related activities and actions by students delivered to individuals, a family, a community, or population who are in actual need of those activities and actions.
Facility	Generally refers to an individual healthcare institution or agency (i.e. hospital, clinic, home health) where healthcare is delivered or administrated. Facility partners have current affiliation agreements with LBCC and provide experiential educational opportunities for LBCC students that involve direct patient care.
Faculty Member	LBCC faculty member (includes both part-time and full-time instructors) responsible for determining a final course grade for a student enrolled in a course which contains a clinical component of direct patient care. AKA clinical faculty, clinical instructor.
Placement	An experiential educational opportunity required as part of a program of study, in which the student works in a practice setting under supervision to deliver direct patient care. This includes but is not limited to: ● Clinical cohort (1-8 students) with a faculty member ● Practicum experiences ● Cooperative work experiences
Student	An LBCC student enrolled in a course which contains a clinical component of direct patient care. This includes but is not limited to: ● Clinical cohort groups with a faculty member ● Practicum experiences ● Cooperative work experiences
Waste/Wasting	Term commonly used to describe the actions of disposing of part or all of a controlled substance in the presence of a qualified witness.

Principles:
1. The administration of medications is a common nursing intervention that involves risks to clients.
2. The Student is a learner in the placement setting and mistakes are possible as part of the learning experience.
3. Because an essential responsibility in
4. nursing is to prepare and administer medications, Students need to be vigilant in preventing medication errors.
5. As a professional RN the Faculty Member has an obligation to assess the safe practice of medication administration among Students in the Placement setting.
6. Students are required to abide by professional/occupational regulations and standards of practice, practice within the scope of their current learning, and practice the policies of the specific Placement setting to which they are assigned.

Policy Statement:

1. **Clinical Skills Preparation**: All students in the first year of the nursing program will attend practice/learning experiences within the skills lab and simulation lab that include demonstration of competency of medication administration prior to administration of medications to clients within direct patient care.

    a. Table 1 - Curricular Schedule of Skills acquisition

Term of instruction	Medication Administration Skill	Competency measured in
NUR101	PO medications (other non-parenteral medications) Instruction Competence validated in skills lab, repeated in Sim lab	NUR102B demonstrate multiple safe PO medication administrations with instructor present. NUR103B consistent demonstration of safe PO medication administration with instructor present, Student may be released for independent administration of PO medications based on safe performance. NUR201B & 202B Student is re-evaluated for validation of safe PO medication administration
NUR102	SQ and IM injections PO medication via an NG Tube	NUR102B-NUR201B demonstrate multiple safe administrations with instructor present. NUR202B Student may be released for independent administration based on safe performance
NUR103	IV flush, IV primary bag , IVPB, IV push Medications	NUR103B may engage in IV flush, IVPB and IV primary bag demonstration with instructor present. NUR201 & NUR202B consistent demonstration of safe all IV medication administration skills with instructor present NUR202B Student MAY be deemed independent with IV flush, IV primary bag, IVPB. ***Students are not released to complete IV push meds independently until NUR203B*** under the supervision of their RN preceptor.
		NUR203B RN preceptors are advised to supervise all skills to determine safe independent practice.

2. **Medication Distribution Systems**
   a. All students are required to safely utilize medication distribution systems.
   b. Students are to complete required training by partnering facilities that give access to automated drug distribution devices (ADDDs) that are individually password protected.
   c. Students are required to maintain the security of their access and passwords to ADDDs, failure to do so is grounds for instructor initiated exit.

3. **Medications Administration Procedure**
   a. When enrolled in NUR102B-NUR202B the student will be evaluated by a faculty member for PO medication administration safety. Independence will not be granted for PO medication administration to any student until NUR103B *AND* a consistent performance of safety with regards to this skill has been demonstrated. The faculty will discuss the specific limitations of independent release for medication administration with the student. Within NUR201B and NUR202B faculty will re-evaluate students for continued consistent safety with regards to PO medication administration.
      i. Students are not expected to be released for independent practice with SQ or IM injections, although this may occur within NUR201B or NUR202B if a consistent performance of safe medication administration is observed by the faculty.
      ii. *LBCC clinical Faculty must be present at all times when a student is administering any IV solution or medication until the faculty grants permission to a particular student to perform this procedure independently.*
      iii. *IV PUSH medications must be supervised by an LBCC clinical nursing faculty through NUR202B.*
   b. Students who will be administering medications are required to pull all medications (from ADDDs, medication drawers, etc) which they plan to administer.
   c. Students released for any independence with medication administration have verbalized and demonstrated to faculty a consistent, safe level of knowledge and skill of the medication to be administered including purpose of the medication, route, dosage, therapeutic effects, adverse effects, incompatibilities, appropriate client teaching and documentation.
   d. With medications in hand the students will complete two medication checks (that include the 7-rights of medication administration) against the Medication Administration Record (MAR) outside of the Client room and complete any calculations necessary at that time.
   e. Students will complete one final medication check in the presence of the client.
      i. Students will identify the client using two identifiers (verabally ID client by name and DOB-validated this information against the client's name band, AND Scan the clients wrist band)
      ii. Scan the medication to bring up the Medication documentation form and complete final medication check against this form, prior to administration.
      iii. Students will document all necessary elements of data on the Medication documentation form.
      iv. Students are not to hit "accept" UNTIL the Medication documentation form has been completed and the client has been administered the medication.
   f. Placements which do not include electronic systems for identification of client or medication will complete processes for medication administration to as closely resemble the process as described in 3e.i-iv.

4. **Medication Limitations**
   a. Medications that must always be cleared with LBCC clinical Faculty (or assigned Preceptor RN in NUR203B) and verified with 2 RNs:
      i. All pediatric medications
      ii. Insulin subcutaneous
      iii. Delivery of any PCA medications
   b. ***Under no circumstances will a student:***
      i. Administer any medication that they have not independently accessed
      ii. Leave (unobserved) any medication at a client's bedside/possession
      iii. Administer any cytotoxic drugs

       iv.   Independently access a central line
       v.   Actively participate in narcotic counts at end of shift
       vi.   Titrate medications for client conditions
       vii.   Administer any local or general anesthetic or medication given for the purpose of conscious sedation. This would include but is not limited to any of the following medications:
              1.   Propofol
              2.   Midazolam
              3.   Ketamine
       viii.   Manage/administer/adjust IV infusions of any of the following medications:
              1.   Heparin
              2.   Insulin
              3.   Vasopressors
              4.   TPN/Lipids
              5.   Pitocin/oxytocin
              6.   Epidural medications

5. **Reporting Medication Errors**
    a.   Should an error occur the primary responsibility of the Student and Faculty is to take care of the client's immediate needs, and notify the client's primary RN. Errors include but are not limited to the following:
       i.   Administering the wrong medication (any medication not prescribed for the client)
       ii.   Administering the medication by route not prescribed for the client
       iii.   Administering the medication at a time that violates the scheduling policy of the facility or LBCC Medication Administration Policy.
       iv.   Any "near miss" situation that involves medication.
    b.   After the client's needs have been met, the student and Faculty will report and complete the facility's required internal documentation as per the facilities policy.
    c.   Student and Faculty will follow the Unusual Occurrence Reporting Procedures as published in the LBCC ADN Student Handbook.

6. **Controlled Substances/Wasting**
    a.   Students are to strictly follow specific placement/facility policies that address student handling/administration/wasting of controlled substances prior to engaging in administering any controlled substance.
    b.   If allowed by facility/placement policy, students engaged in wasting controlled substances must:
       i.   Notify Clinical instructor:
              1.   to observe students with RN present to witness, wasting in first year clinicals. (Faculty do not witness or document waste).
              2.   of wasting PRIOR to the waste in NUR201B and NUR202B, thus allowing clinical instructor to be present if they so choose.
       ii.   Wasting of a controlled substance shall take place with at least one staff RN present to witness this action.
    c.   Documentation of waste must take place on electronic systems only, students are to refrain from any documentation of a waste on paper.
    d.   Students are NEVER to engage in any of the following actions:
       i.   acting as a witness for another healthcare professional who needs to waste a controlled substance.
       ii.   engage in inventory and count maintenance (shift count) or document the inventory and count maintenance of controlled substances.

NURSE INTERN POLICY

Purpose: To identify good standing (eligibility) and steps students must take with the LBCC Nursing Program in order to seek Nurse Internship license with the Oregon State Board of Nursing.

Scope: This policy applies only to fully admitted nursing students that have successfully completed at least one academic year with at least one term/quarter of the LBCC Nursing Program who are either seeking Nurse Internship license or maintaining Nurse Internship license status

Definitions:

Nurse Intern	As defined by Oregon State Board of Nursing in ORS 678.010 Section 7. *(5) "Nurse intern" means a person who holds a nurse internship license issued under section 2 of this 2022 Act.* A person who holds a nurse internship license that was issued to the person by the Oregon State Board of Nursing.
FInal practicum experience	The final clinical term consists of 180 total direct patient care hours in which the student is assigned with an RN preceptor.
Good standing	Status defined student who meets all criteria of eligibility (as identified in this policy 1.a-g) to apply for nurse internship license. Term is synonymous with "meets eligibility".

Principles:
1. The LBCC Nursing Program is approved by the Oregon State Board of Nursing (OSBN) and will work with the OSBN to aid students who wish to pursue Nurse Internship license status.

Policy Statements:
1. Students eligible to apply for nurse internship and maintain nurse internship must:
   a. Hold a cumulative test average in the NURA courses (NUR102A, NUR103A, NUR201A, or NUR202A) of at least 75%
   b. Passing grade in NUR268 course.
   c. If applicable, current passing grade in NUR 203A, NUR 222.
   d. Be identified as progressing to meet all outcomes in any clinical course (NUR102B, NUR103B, NUR201B, NUR202B or NUR203B)
   e. Hold no more than 4 demerits on any previous or current term as recorded on the students Attendance and Participation Tool
   f. Have not been issued a Guide to Success at any time during the program.
   g. Obtain a written recommendation from your assigned advisor and from your current clinical faculty. If the student's nursing advisor is also their current clinical faculty, then they must obtain a recommendation from another full-time nursing faculty.
   h. Meet with the Nurse Administrator *prior* to applying for a nurse internship license with the OSBN (see 4.b. Of this policy).
2. Students who hold Nurse Intern Licensure are expected to:
   a. Notify the OSBN and their employer for any change in their academic status which no longer meets eligibility as per 1.a-g in this policy or should they be no longer fully enrolled in the LBCC Nursing Program.
   b. Abstain from wearing anything that represents Linn-Benton Community College or its Nursing Program while working as a Nurse Intern. This includes but is not limited to:
      i. School issued ID badge
      ii. School clinical uniform and LBCC patch
   c. Abstain from wearing any employee issued ID badge that recognises them as a Nurse Intern when attending clinical courses

3. The LBCC Nursing Program will
    a. Limit students to complete course work (ie clinical) on units and/or facilities where they are not employed as a Nurse Intern, this includes the students final practicum experience.
    b. NO LBCC course credits will be awarded for hours worked as a Nurse Intern.
4. The Nurse Administrator is required to approve/sign off on nurse intern status each term/quarter. In order for this to take place the following conditions must be met by the student:
    a. Student must maintain good standing (eligibility) requirements .
    b. Students will schedule a meeting with the nurse administrator prior to Thursday of finals week of term preceding desired placement as nurse intern..
    c. Nurse Administrator is under no obligation to complete/sign forms not submitted by deadline.

Statements of Disclaimer:

1. Students who obtain nurse intern status are solely responsible for understanding and practicing within his/her/their scope as a nurse intern as described by Div 41 of the Nurse Practice Act for the State of Oregon.
2. Should you be under investigation or disciplined by the OSBN while in practice as a nurse intern, your ability to obtain further licensure as an RN may be jeopardized.
3. Students who are fired from employers who are also LBCC facility partners may be denied clinical placement.
    a. Students who are denied clinical placement may be exited from the LBCC Nursing Program

Reference:

OAR 851-0041-0000 through 851-0041-0080 (1/1/2023)

Division 41 STANDARDS FOR THE NURSE INTERN: LICENSURE AND FUNCTIONS

Initiated: 5/31/23 BL
Revised:
Reviewed:

PROGRAM ADHERENCE POLICY

Purpose: The purpose of this policy is to identify state regulations & laws as well as other documents produced by the Oregon Counsel of Associate Degree Programs (OCAP) that the LBCC Nursing program adheres to in the administration of the LBCC Nursing Program.

Scope: The policy applies to all students admitted to the LBCC Nursing Program and/or enrolled for courses within the LBCC Nursing Program

Policy Statement:
1. LBCC Nursing Program will follow Health Profession Student Clinical Training Standards as set forth by the Oregon Health Authority in Oregon Administrative Rule (OAR) 409-030-0100 - 409-030-0250.
    a. This law requires students to submit documentation of particular items which are required for students to engage in direct patient care.
    b. Failure to provide documented proof of identified items in the OARs to the LBCC Nursing Program by identified deadlines will result in student's loss of admission to the LBCC Nursing Program.
2. LBCC Nursing Program will abide by Oregon's Nurse Practice Act which is comprised of Oregon Revised Statutes, Chapter 678.010-678.455 (laws) and Oregon Administrative Rules, Chapter 851 (rules).
    a. All students are required to abide by the laws and rules set forth by the Oregon Nurse Practice Act.
    b. Failure to abide by the laws and rules set forth by the Oregon Nurse Practice Act may result in any of the following:
        i. Loss of Admission status to the LBCC Nursing Program
        ii. Student may be placed on a Guide to Success and/or
        iii. Student is subject to Instructor Initiated Exit (see Program Exit Policy)
3. LBCC Nursing Program as a participating partner in the Oregon Counsel of Associate Degree Programs has adopted and follows the Standards of Core Performance (See Standards of Core Performance located in General Information) which has been approved by the Oregon State Board of Nursing.
    a. Students must meet technical standards identified in the Standards of Core Performance in order to successfully meet course outcomes, progress and graduate from the LBCC Nursing Program

References:

Oregon Health Authority - OAR 409-030-0100 - 409-030-0250 (rev. 12-28-2023) Health Profession StudentClinical Training Standards

Oregon Revised Statues - ORS Chapter 678.010 - 678.410 (rev. 3-27-2024) Nurses ; Long Term Care Administrators

Oregon State Board of Nursing - OAR Chapter 851

Initiated:9/24
Reviewed:
Revised:

PROGRAM EXITS POLICY

Purpose: The purpose of this policy is to identify processes for students exiting the LBCC Nursing Program which may be initiated by either an LBCC Nursing Faculty member or a student.

Scope: The policy applies to all fully enrolled students in the LBCC Nursing Program.

Principles:
1. Patient safety is of paramount concern to LBCC, and our partners who operate clinical facilities and other patient care facilities. The Criminal Background check Release process requires that permission be given to college officials to discuss any criminal background history with our partnering agencies.

Policy Statement:
1. **Instructor Initiated Exit:**
    a. Reflects the judgment of the LBCC Nursing Faculty, and is only employed in circumstances where the student academic and/or clinical performance clearly reveals that they lack the knowledge, skills or judgment to safely become a professional nurse. These exits may include but are not limited to the following reasons:
        i. Gross negligence and /or major safety error such as Level 3 Unsafe Practice (See Client Safety and Clinical Education Courses Policy).
        ii. Arrest or conviction of a crime where such crime bears demonstrable relationship to the practice of nursing. At any time alleged criminal activity, even without conviction, may result in a disruption in your progress through the program. All clinical sites dictate compliance with agency rules regarding Criminal Background Checks.
        iii. Use of any controlled substance or intoxicating agent to an extent, or in a manner dangerous or injurious to the student or others, or to an extent that such use impairs the ability to safely conduct nursing practice.
        iv. Conduct derogatory to the standards of nursing (See Oregon Administrative Rules, Board of Nursing Chapter 851, Division 45).
        v. Physical or mental condition that makes the student unable to deliver safe patient care.
        vi. Academic and/or clinical failure.
    b. The Nursing Faculty may warn, fail, place on probation, suspend, or exit AND deny readmission to any student who violates the LBCC Standards of Student Conduct and the LBCC Associate Degree Nursing Ethics Policy.
    c. Instructor Initiated Exit does not necessarily result in suspension, termination, or exclusion from LBCC.
2. **Student Initiated Exit:**
    a. Students are expected to notify a member of the nursing faculty of their intent to withdraw from course(s) or not return after successfully completing any courses
    AND
    b. Schedule a meeting with the Nursing Program Chair or Nursing Program Administrator to discuss program return options.

3. Exit Appeals Process
    a. The student may appeal the decision in accordance with the LBCC Administrative Rule No:7030-01, Section 9 or 11, as outlined in the college's Students Rights, Responsibilities and Conduct Code.

Initiated:
Reviewed: 5.12, 8/19 BL, 1/2022
Revised: 8.13; 12.15; 7/20, 3/2022, 5/202

PROGRESSION AND RETENTION

Purpose: The purpose of this policy is to inform students regarding progression in the Nursing program.

Scope: The policy applies to all students taking courses within the Nursing Program at LBCC

Definitions:

Academic Courses	Includes: NUR 'A' courses,i.e. NUR 101A, 102A, 103A, 201A, 202A, 203A; NUR268 series (A-D), NUR 222
Clinical Courses	NUR 'B' courses, i.e. NUR 101B, 102B, 103B, 201B, 202B, 203B
Outcomes	Evaluation criteria identified for each course
Progression	Advancement to the subsequent term; moving toward graduation
Retention	Maintaining enrollment for subsequent terms

Principles:
1. Students must pass all required courses in a given term.
2. Criteria varies based on the type of course, as explained below.
3. Failure to pass any required nursing (NUR) course will prevent progression in the program.
4. As stated in the Standards of Core Performance, LBCC provides reasonable accommodations to qualified students with disabilities (and/or as identified in the English Language Learners policy).Students are evaluated on their ability to meet core competencies in the clinical, lab, and classroom settings. Progression in the program will be denied if a student is unable to demonstrate the technical standards with or without reasonable accommodations.
5. Students who successfully complete all nursing courses and who meet all the requirements listed in the Linn-Benton Community College General Catalog will qualify to graduate with an Associate of Applied Science Degree in Nursing.

Policy Statement:
1. Nursing courses must be completed in sequence.
2. A minimum grade of "C" must be achieved in all academic nursing courses as reflected in the syllabi, (NUR 101A, 102A, 103A, 201A, 202A, 203A, 222, & the 268 series).
3. Nursing courses utilize the following grade scale to assign course grades:
   a. 92.00 - 100 = A
   b. 83.00 - 91.99 = B
   c. 75.00 - 82.99 = C
   d. 67.00 - 74.99 = D
      i. In addition, nursing students must complete all NUR A courses, (with the exception of NUR 203A) with a cumulative test point average (all post tests and final) of 75% (without rounding).
      ii. Students identified as at risk for meeting the minimum test average requirement will be placed on an Academic Alert (see corresponding policy) and are encouraged to meet with their faculty advisor to develop an individualized plan for success.
      iii. Students who have a testing average less than 75% at the conclusion of the course will receive no higher than a "D" grade in those courses regardless of the number of total points they have earned during the course.
4. Students must also meet all clinical outcomes for the concurrent clinical (NUR 'B') course (see Clinical Curriculum policy).
   a. Students who do not meet clinical outcomes will receive a "no-pass" grade for the clinical course. In order to progress to the next term, students must pass both academic and clinical courses simultaneously.

5. Math Competency: Students are required to achieve a score of 100% on a nursing math competency test in Nursing 268C and Nursing 268D.
    a. Each student will be given two opportunities within the first three weeks of NUR 268C and NUR 268D 202A to meet the math competency.
    b. If a student fails to meet the standard for the competency demonstration (100% accuracy), on the second attempt, the student will need to arrange with the team coordinator for times and dates to demonstrate competency.
    c. If a student fails to meet the standard for the competency demonstration (100% accuracy), on the third attempt, the student will be placed on a guide to success with recommendations for remediation of math concepts not yet mastered.
    d. If the student cannot demonstrate competency prior to the end of week seven, the student may withdraw from the course or receive a grade of "F".
6. Options for Incomplete: If a student experiences a disruptive life event (illness, death in the family etc.) near the end of the term, they may request or be offered an "incomplete" in any or all courses. An incomplete allows the student to finish the coursework after the end of the term, by a predetermined deadline, as agreed upon by the faculty team.
    a. Incompletes are given at the faculty's discretion. Faculty take various factors into consideration when deciding whether or not to award incompletes, such as the amount of work completed and current standing in the class.
    b. For clinical courses, the student must be on track to meeting course outcomes.
    c. Once course work is completed by said deadline, the earned grade will be awarded, and retention standards will apply according to course standards (see above).
    d. Failure to meet the aforementioned deadline for completing coursework will result in the grade determined by coursework completed.
    e. If the student has not completed a substantial portion of the term, is not on track to meet course outcomes, or is not able to begin the next course in the sequence, the student will be unable to progress.
    f. Prior to the end of week 7, the student may choose to withdraw from the course(s). If the student does not meet criteria for progression or an "incomplete", they will be exited from the program.
7. Students who fail to meet these retention and promotion standards of performance cannot continue in the nursing program and should meet with the Department Chair prior to their exit to review return options (See Returning Student policy).
8. Graduation: Students must meet the graduation requirements which are in effect at the time of entrance into the Nursing Program.
    a. Students must complete the "Application for Graduation" process, completing all forms and meeting all deadlines. The Application for Graduation is available on the LBCC Admissions and Registration website.

Initiated: 9/2024
Reviewed:
Revised:

RECORDING POLICY

Purpose: The purpose of this policy is to identify appropriate times and reasons to audio record class instruction.

Scope: The policy applies to all students enrolled in nursing courses.

Principles:
1. Many students find audio recording lectures and listening to them during private study beneficial to their learning and LBCC Nursing Faculty are supportive of this endeavor.

Policy Statement:
1. Students are free to audio record Nursing Faculty lecture presentations.
    a. Student discussions within the context of a Nursing Faculty lecture must have student consent for audio recording.
2. Students MUST ask permission to audio record guest lectures. Please recognize that guest presenters are under no obligation to agree to have their presentations audio recorded.
3. All audio recordings are to be used for personal study and/or shared only with another student enrolled in the class.
4. Students explicitly DO NOT have permission or consent to post audio recorded lectures on any type of digital/electronic platform or social media (See also Social Media Policy).
5. Students DO NOT have permission:
    a. To visually record activities in any learning environment without specific permission to do so by the instructor and any other party in the recording.
    b. Or consent to record any conversation with faculty or staff outside of lecture (as a caution, any person who records the conversation of another must have permission to do so).

Student Rights, Responsibilities, and Conduct | LBCC

Initiated: 9.13
Reviewed: 1.17, 4/22
Revised: 9.15, 9/19, 7/20

RETURNING STUDENT POLICY

Purpose: The purpose of this policy is to identify the processes and responsibilities for students who wish to return to the LBCC Nursing Program.

Scope: The policy applies to students who have exited the program due to failure or withdrawal.

Principles:
1. LBCC Nursing Program may accept returning students into the program on a space available basis and in accordance with the following procedures.

Policy Statement:
1. Eligibility: Prospective students must have satisfactorily completed AT LEAST NUR101A, NUR101B and NUR268A in the LBCC Nursing Program.
   a. Applicants will NOT be eligible for returning to the nursing program for any of the following:
      i. Absent from the program for longer than 1 year
      ii. Safety violations , harm to patients or abusive behavior (Level 3 unsafe practice, see Client safety and Clinical Education Courses Policy).
      iii. Inability to comply with policies and procedures.
      iv. Two documented failures and/or withdrawal.
      v. One documented audit failure.
2. Student applicants must take the following steps to be eligible for return to the LBCC Nursing Program:
   a. Notify the Nursing Program Administrator via email the term prior to auditing of intent to audit and return to program. A decision will be made to grant or deny permission by the Nursing Program Administrator.
   b. Student must have an active unencumbered Oregon CNA certificate prior to auditing or readmission.
   c. Students are responsible to register for the classes (audit status) and pay the appropriate fees; no credit will be received for the audited classes. Students must audit the NUR A course and the NUR B courses simultaneously.
      i. Auditing students are not formally enrolled or admitted in the nursing program and as such are not allowed to participate in any direct patient care clinical activities of the NUR B course work, but will be required to participate in the on-campus clinical experiences for the term.
   d. The student must achieve grades for all course work during audit that meet the standards for progression and retention (See Progression and Retention Policy). This will be achieved by the following:
      i. Students are required to take all exams in the NUR A course and pass with a cumulative minimum of 75% test average.
      ii. Students are required to achieve satisfactory skill and SIM lab performance.
      iii. Students are also required to complete any requisite competencies or assessments.
      iv. Students are encouraged to attend all lectures and complete class assignments and activities as this helps with reinforcing necessary course content knowledge.
      v. The student must complete the physical assessment examination (on a real person) with a minimum score of 75%. This examination will be scheduled at the discretion of the nursing faculty.
      vi. The student must satisfactorily demonstrate all designated skills. Auditing students must fully participate in the on campus clinical application portion of the course (skills and simulation) for the term they are auditing.
      vii. The student must pass all math competency exams.
3. Students who are successful in auditing all required courses for the term will be considered for full admission into the nursing program for the following term based on space availability and order of admission based on the following when there are more students than spots available:
   a. The test average will be added to the score attained on the physical assessment exam to determine an overall score.
   b. The students with the highest overall score will be placed into the class first.

    c. The final decision for admission will be made by the Nurse Administrator and is based on the recommendation of the faculty.

    d. The final decision may be appealed which includes discussion with the Nurse Administrator as the first step. If no satisfactory resolution is obtained the second step is to appeal to the Dean of Healthcare.

    e. Upon acceptance into the new cohort, all post-admission requirements must be met.

Initiated: 5/7/2020
Reviewed:
Updated: 12/11/20, 2/25/2021, 6/4/2021, 4/1/2022

SICK CALL PROCESS AND RETURN TO SCHOOL/CLINICAL POLICY

Purpose: The purpose of this policy is to provide guidance to students and faculty of the nursing program regarding a sick call process and how soon they are allowed to return to school/clinical after an illness.

Scope: This policy applies throughout the program and return to work standards can be superseded by facility partners who have more restrictive return to work policies for students or faculty assigned to those facilities for direct patient care clinicals.

Definitions:

Client	The recipient(s) of services, depending on context, the client may be an individual, a family, a community, or population.
Faculty	LBCC faculty member (includes both part-time and full-time instructors) responsible for determining a final course grade for a student enrolled in a course which contains a clinical component of direct patient care.
School activities	Activities that generally take place on LBCC property that do not include direct client care. Includes but is not limited to: classroom lectures, skills lab, simulation lab.
Student	An LBCC student enrolled in a course which contains a clinical component of direct patient care. This includes but is not limited to: ● Clinical cohort groups with a faculty member ● Practicum experiences ● Cooperative work experiences
Placement	An experiential education opportunity required as part of a program of study, in which the student works in a practice setting under supervision to deliver direct patient care This included but is not limited to: ● Clinical cohort groups with a faculty member ● Practicum experiences ● Cooperative work experiences
Clinical activities	Activities that generally take place in placement and include direct client care. IIncludes standardized patient simulations.

Principles:
1. The needs, interests and safety of clients are always the first priority in the placement setting.
2. Infection prevention/control measures are to be followed in all learning environments (placement, skills laboratory, simulation laboratory, and classrooms).
3. All professional healthcare workers, including students and faculty have an obligation to engage in infection prevention measures, regulations and standards to protect others from the spread of infectious organisms.
4. Students are expected to engage in all clinical course work consistent with the Standards of Core Performance.

Policy Statement:
1. Implementation
   a. Students and faculty are to be excluded from placement and school/work activities whenever they contract or develop symptoms of infectious diseases.
   b. Students and faculty are expected to self-identify onset of symptoms of infectious diseases and are required to avoid attendance at placement, school or work activities.
      i. Infectious symptoms may include, but are not limited to:
         ● Fever, without the use of fever-reducing medications
         ● Open, moist or actively draining lesions
         ● Obvious purulent drainage

- Vomiting
- Diarrhea
- Known exposure to infectious disease with development of symptoms
- Symptoms indicative of COVID-19

2. **Communicating sick call process**
   a. **Students are required to notify:**
      i. **Faculty instructor and report illness prior to a clinical shift, or campus classroom attendance AND**
      ii. **Clinical Coordinator and report illness, symptoms, onset, plan for return to school clinical should this be a covid illness.**
   b. **Clinical coordinator will communicate back to the student and will confirm the student's plan or will give the student additional instructions based on the student's reported information.**
3. Return to school/clinical guidelines for Diagnosed Infectious Disease
   a. LBCC Nursing program will follow the guidelines/policy of our primary clinical partners for determining students ability/timelines to return to clinical activities for diagnosed infectious diseases.
   b. LBCC Nursing program will default and use LBCC's published guidelines/policy (which is consistent with the Oregon Health Authority) for determining students ability/timelines to return to school/campus activities for diagnosed covid infections.
   c. Student should not return to clinical until they are well enough to safely complete assigned/required student nurse duties.
4. For medical condition which may alter the standards of core performance by the student which are considered to be the minimum and essential skills necessary to protect the public, the clinical coordinator may require one or more of the following:
   a. Student may be required to see a primary care provider for diagnosis/evaluation/completion of additional Nursing Physical Exam form (See appendices).
   b. Student may be required to complete testing to identify or rule out a particular infection.
   c. Student may be required to provide additional information about the course of illness/infection in order to determine appropriate actions.
5. The Clinical Coordinator can withhold a student from clinical activities until infectious symptoms have resolved OR the student has obtained a clearance to attend clinical activities by a primary care provider.

Initiated: 10/2022
Reviewed:
Updated:9/20/2023,8/24

SOCIAL MEDIA POLICY

Purpose: The purpose of this policy is to (state who this is for and what it is supposed to do) should be just a sentence or two long. This entire document is in 11pt Ariel font.

Scope: The policy applies to (indicate under what circumstances this policy is in effect)

Principles:
1. Social media often serves as a location for students to connect and discuss topics in nursing and the LBCC Nursing Program.
2. Individuals who choose to participate in social media that was created for an individual student or for a group of students are expected to understand that posting any information to even a closed group in social media is rarely kept private and that individuals rarely have control with maintaining privacy (Brookshire,2017).
3. Social media can be a valuable tool for students when used wisely.
   a. Students should recognize that building good relationships with peers can contribute to their success in nursing schools.
   b. Students should be aware that they will create a professional social media impression as they post information.
4. Potential employers may question a student applicant's ability, judgment, and deem them unsuitable for jobs based on perceptions from the students social media postings (Edge, 2017).

Policy Statement:
1. It is expected that student users of social media WILL NOT POST any materials that fall into the following categories:
   a. Postings which defame, abuse, harass, slander, stalk, threaten or otherwise violate the legal rights (such as rights of privacy and publicity) of others.
   b. Upload, copy or attach files, emails, or publish information that contains materials which are the intellectual property of others without permission. Some examples of this would include but are not limited to: recorded lectures presented in class, emails sent to an individual or groups of students by a faculty or staff member.
   c. Postings (including pictures which violate confidentiality, HIPAA, copyright law.
2. Any violation may result in:
   a. The student being placed on a Guide to Success and/or dismissal from the program.
   b. Civil fines up to $250,000 and/or jail terms up to 10 years for violations of HIPAA.

References:

Brookshire, B. (August 24, 2017). On social media, privacy is no longer a personal choice. *ScienceNews: Magazine of the Society for Science & the Public*. http://www.sciencenews.org/blog/scicurious/social-media-privacy-no-longer-personal-choice

Edge, w. (2017). Nursing professionalism: Impact of social media use among nursing students. Journal of Healthcare Communications. 2(3). DOI: 10.4172/2472-1654.100068

Initiated: 5-19
Reviewed: 1/2022
Revised: 7/10/19,9/19

STUDENT EMPLOYMENT

Purpose: The purpose of this policy is to clarify responsibilities of the LBCC nursing students during employment within healthcare facilities and during direct patient care experiences.

Scope: The policy applies to enrolled LBCC Nursing students who are employed with clinical facilities in which students are expected to be placed for engagement in direct patient care.

Definitions:

affiliated partnering facility	Healthcare facility that is under a contractual agreement with the LBCC Nursing program to provide clinical learning experiences of direct patient care.

Principles:
1. LBCC Nursing Faculty acknowledges that many students are required to work while enrolled in the Nursing Program and that conflicting priorities may impact the students progress in the program.
   a. Students are strongly encouraged to minimize their outside employment while in the nursing program.

Policy Statement:
1. When engaging in direct patient care as part of clinical course work and in the role of student, the student is to perform only those duties and assignments expected of them as a student. The student while in the role of the nursing student, may not:
   a. Engage in activities for the employer
   b. Engage in activities at the requisition
   c. Engage in actions/tasks/roles pertaining to that of their employment status.
2. When engaged in employment, one is not permitted to engage in roles/actions/tasks that pertain to their Nursing Student role unless those identified roles/actions/tasks are listed as part of their employment duties.
3. Students who are employed shall not engage in direct patient care more than 12.5 hours per 24 hour period and no more than 12.5 hours consecutively (this includes any combination of clinical required course time AND work related time).
   a. Faculty cannot impact the number of hours the student is employed in order to meet this requirement, but Nursing faculty may restrict the number of clinical hours the student may attend in order to do so.
      i. Such a restriction may impair the students ability to demonstrate achievement of the course outcomes (progress successfully to the next term or to timely complete all requirements for graduation).
   b. Students enrolled in NUR203B final practicum experience, who undertake outside employment, must provide a copy of their employment schedule from the facility to their assigned Clinical Faculty Instructor prior to the commencement of final practicum experience.
4. Students who are terminated from employment at an affiliated partnering facility and identified by the facility as not allowed to return may be restricted from the facility as a student and "not cleared" to engage in direct patient care clinical activities.
   a. Terminations of this nature often included but are not limited to the following:
      i. Violations of confidentiality or HIPAA
      ii. Rude, disrespectful, unprofessional behavior
      iii. Criminal conduct
      iv. Various policy violations
   b. LBCC Nursing Program is not obligated to find subsequent or other clinical partnering facilities in order to furnish the student with opportunities to complete their course work.

Initiated:
Reviewed: 2/17, 9/19, 8/20, 6/21
Revised: 5/12, 5/13, 3/15, 3/18, 9/20

STUDENT SAFETY POLICY

Purpose: Safety measures used to decrease the risk of injury in health care environments not only decrease risk for clients, but also for caregivers. The purpose of this policy is to provide guidance to students of their responsibility to manage their risk and engage in safety measures during all clinical activities.

Principles:
1. The Student is a learner and faces risks for safety hazards as part of the learning experience, this is especially true in clinical activities that involve direct patient care.
2. Students are required to abide by all policy, procedure, professional/occupational regulations and standards of practice, and practice within the scope of their current learning.
3. The Faculty Member has a responsibility to continually assess the safe practice of the Student in the Placement setting.

Policy Statement:
1. Managing self safety and risk
    a. Students are to engage in clinical activities within their current scope of practice and level of competence.
    b. Students are to review hazards and controls for all tasks and actions that could possibly pose risk to themself or others. Those hazards include but are not limited to:
        i. Infectious diseases and the use of PPE (infection control)
        ii. Slips, trips, and falls (trip hazards)
        iii. Working with sharps (accidental needle stick injuries)
        iv. Lift injuries
        v. Poor lighting
        vi. Chemical exposures
        vii. Violent Clients
    c. Students are to engage in proper controls to avoid injury and maintain safety. Those controls include but are not limited to the use of:
        i. Hand hygiene
        ii. Proper body mechanics
        iii. Use of PPE based on standard and transmission-based precautions
        iv. Using retractable needles or needless systems
        v. Remain knowledgeable about steps to take with regard to emergency procedures
        vi. Communicate and report risks that pose a hazard to others
    d. Students are to maintain education, knowledge and trainings to be able to respond safely in expected and emergent situations. Those include but are not limited to:
        i. Complete annually required trainings by LBCC Nursing Program
        ii. CPR (American Heart Association Healthcare Provider BLS)
        iii. Remain current with agency policy and trainings.
        iv. Attend required safety trainings prior to Mental Health rotation.
2. Student Injury or Hazardous Management
    Any student injury or hazard that occurs is to be handled according to the LBCC Nursing Student Handbook Exposure: Injury or Hazardous Policy

Reference:
Matz, M.W. (2008). Understanding hazards and controls in healthcare. In D. Fell-Carlson (Ed.), Working safely in health care (pp.26-49). Delmar Cengage Learning.

Initiated: 6/2022
Reviewed:
Revised: 5/2024

TESTING POLICY

Purpose: The purpose of this policy is to familiarize students with general information regarding testing, including methods, expectations and evaluation.

Scope: The policy applies to all students taking courses within the Nursing Program at LBCC

Definitions:

Learning Guide	Document containing the learning objectives related to specific topics.
On-site	Face-to-face, i.e. on an LBCC campus
Proctored	Testing that is monitored by an authorized program and/or individual for additional test security
Remote	Varied locations; students are not required to be on-site
Standardized assessment	Nationally benchmarked exams which help identify current knowledge of content and areas for active learning or recommended remediation. Lower stakes testing; does not apply to testing average.
Unproctored	Testing that is not required to be monitored by an authorized program and/or individual

Principles:
1. The primary method of theory evaluation is testing. Testing throughout the program progresses from simple recall and comprehension, to more complex application, analysis and synthesis.
2. Test items address the learning objectives identified on the course and/or topic learning guides, which align with course outcomes..
3. A variety of methods may be used for testing, including on-site or remote, proctored, or un-proctored.
4. Tests (to include any exam: post-tests, quizzes, competencies, assessments, finals) will be taken at pre-arranged dates and times according to the course schedule or syllabus.
5. As stated in the Standards of Core Performance, LBCC provides reasonable accommodations to qualified students with disabilities, and/or as identified in the English Language Learners/Multilingual Learners policy.

Policy Statement:
1. Testing will be utilized throughout the academic courses in the nursing program, and all general student expectations apply to all testing.
    a. Each term, tests must be taken as scheduled;
        i. If a student is unable to attend any test due to health reasons or for an emergency, they must contact the team coordinator prior to the individual's testing time via email, phone or voice mail.
        ii. An alternative testing date and time will then be arranged for the student.
            1. Tests missed for an excused absence (instructor notified prior), must be made up within one week.
            2. Students may be given a different version of the exam than the one administered to the class.
            3. Students can receive full credit for their first make-up test.
            4. The highest grade that can be received on any subsequent make-up test during a term is 80%.
    b. Students are expected to arrive on time.
        i. Students will not be admitted to the exam 10 minutes past the start time, and will receive a zero on that exam.

    c. Students who have particular needs during a test must identify for the faculty proctoring the test what adaptations they are requesting; proctoring faculty will have discretion to make reasonable adaptations upon student request.

2. Students must abide by the LBCC Academic Integrity and Honesty policy & Student Rights, Responsibilities and Conduct Code.

3. Test security must be maintained at all times.
   a. Students will be provided secure logins for computer-based or online testing; they are required to keep these confidential and not to share personal usernames or passwords.
   b. Under no circumstances should any nursing student discuss the contents of any test until all students have completed the test.
   c. No smart devices (cell phones, smart watches, etc.) are allowed.
   d. In addition, the following apply for **on-site** testing:
      i. Students must wear their LBCC ID badge to be admitted to the exam.
      ii. Items allowed in the exam room are limited to: LBCC ID badge, care keys and a pen or pencil
         1. No personal items, including cell phones will be permitted in the testing room.
         2. No personal items are to be left unattended outside the testing rooms; these should be stored in a secure location.
      iii. A piece of scratch paper will be provided to students during the exam, and this must be returned to the proctor prior to exiting the testing room.
      iv. Students are not permitted to wear hats, heavy coats or hoods during testing.
   e. Students may be required to complete exams or other assessments remotely. In addition to the general expectations above, the following apply for **remote** testing:
      i. Students may be proctored via webcam or utilizing various proctoring software with popup blockers.
      ii. Unless otherwise specified by the instructor/proctor, any and all resources should be put away, including books, notes, or smart devices.
      iii. Students should stay in the room until the exam is completed.
      iv. No other individuals should enter the room and students will not contact anyone during the exam.
      v. No pictures or screenshots are to be taken.
      vi. Students will refrain from discussing any content or format of the exam, including questions and answers, with classmates either verbally or through electronic means.

4. Exams or assessments which are not proctored should still be completed with integrity and are still applicable to the same academic honesty policies.

5. All exams (excluding standardized assessments) are reviewed by faculty prior to being administered to students, and statistically analyzed following the exam.
   a. Student scores may be adjusted following statistical analysis.
   b. Posted scores indicate the review is complete.

6. Once scores have been posted, students with a testing score <75% have until the next scheduled exam to contact their faculty advisor and request a **test review** with either the advisor and/or the content expert. Final exams are not eligible for review.
   a. Measures will be taken during a review to maintain test security, similar to during an exam.
   b. No phones, smart devices, writing utensils or paper will be allowed in the possession of the student during the review.
   c. Students should refrain from asking questions during the review.

7. Students have a right to an **exam item (question) review**, and should follow the prescribed process if there is a concern regarding a particular item.
   a. Students should not contact the team coordinator or members of the academic team until the test analysis is complete, and grades are posted.
   b. The Student Exam Item Review form (found in the appendices) may be completed and submitted to the content expert or the academic coordinator prior to the next scheduled exam.

    c. The academic team will review the exam item and convey a decision to the student within 96 hours of form submission.

    d. If a student, after careful consideration, decides to pursue further review of a particular exam item/question, it must be:
        i. Made in writing to the Department Chair
        ii. Be accompanied by all supporting written evidence the student would like to be considered.

    e. The Department Chair will review the submitted material and make recommendations to the academic team for further discussion.

    f. The Department Chair will convey the decision of the team to the student(s).

    g. If a student or the team seeks further review, materials may be submitted to the Nurse Administrator. This request must be:
        i. Made within 72 hours of the Department Chairs communication of the decision.
        ii. Review requests not made within 72 hours shall be deemed as waived.

    h. Change of an exam item as a result of the Exam Item Review process will be recorded on the corresponding academic team agenda by the academic coordinator, and appropriate changes to the gradebook will be made.

Initiated:9-24
Reviewed:
Revised:

UNIFORM AND DRESS CODE POLICY

Purpose: The purpose of this policy is to identify the uniform and dress code requirements for clinical activities.

Scope: The policy applies to all students fully admitted into the nursing program.

Principles:
1. Uniform color and style will be prescribed by the nursing faculty.
2. The entirety of the uniform includes equipment that students must bring to all clinical activities
3. Students and Faculty of LBCC are considered guests of the clinical partnering facilities, and it is our responsibility to present a professional appearance.

Policy Statement:
1. All students will purchase uniform scrubs for clinical learning experiences. Students in the first year of the program are required to wear NAVY colored scrubs, and those students in the second year of the program must wear WINE colored scrubs.
2. Tops should be standard tunic style, V-neck, short-sleeved scrub top, with matching scrub pants.
3. A minimum of ONE uniform in the prescribed style and color each year is required per nursing student. A uniform jacket in the prescribed style and color is optional for all students. All uniforms must meet the following standards:
    a. Freshly laundered, wrinkle-free for each clinical shift and free of all odors including:
        i. Tobacco
        ii. Perfume
        iii. Body odor
    b. Solid white short or ¾ length sleeved shirt may be worn under the uniform top.
    c. Properly fitted in appearance.
        i. Scrub tops must overlap the top of pants when bent over and must assure there is no visible cleavage.
        ii. Scrub pants must be loose fitting, and must not be rolled down in order that they may be worn at the waist. Straight leg to cover socks and not drag on the floor. No joggers.
    d. LBCC Student Nurse Patches must be sewn to the left shoulder of all uniform tops and jackets.
4. Shoes must be clean and constructed of material that is impervious to liquid and is resistant to puncture.
    a. Shoes must look professional with the uniform and can be either white, gray or black in color.
    b. Shoes must be completely closed (no open toe or heel), quiet soled, slip resistant, flat, and in good condition.
        i. No open shoes of any kind, no platform or chunky soled shoes, no high-heels.
    c. Shoes must be worn with socks or hose at all times in patient care areas.
5. The following miscellaneous tools and items as part of the required uniform and must be worn or present with the student at all clinical related activities:
    a. LBCC student nurse patch (sewn to left upper sleeve of uniform tops and jackets).
    b. Photo ID name badge
        i. Students will obtain these during the first week of classes. This badge acts as both your clinical ID name badge and your campus ID for check out library materials, using the testing center, etc.
        ii. The LBCC name badge is to be worn in the labs and in the direct patient care settings only when in the role of a nursing student.
        iii. No other unapproved ID badges are to be worn concurrently when you are in the clinical setting as a student.
        iv. Name badges shall be clipped or pinned to the tunic above the waist and are not to be dangling.
    c. Watch with a sweeping second hand.
    d. Stethoscope
    e. Bandage scissors
    f. Hemostat
    g. Pen light

6. Dress code and grooming
   a. Students are expected to appear be well groomed and look professional at all times in the clinical settings:
      i. Students may be sent home if the clinical instructor deems a student's appearance, demeanor, and/or odor is inappropriate (i.e., hats, outlandish hairstyle, gum chewing, makeup, or clothing).
      ii. Hair must be kept clean, pulled up and back and secured off the face and off the shoulders (this is for infection prevention and safety). All hair , including bangs must be controlled.
         1. Clinical partners require hair to be "a naturally occurring color"
      iii. Facial hair: no facial hair on clinical days in order to properly fit an N95respirator.
      iv. Fingernails: should be short and clean. Any polish must be in good repair.
      v. Jewelry: body piercings (other than small earrings and mini nose stud) will not be visible. Bracelets, necklaces, and dangling earrings are prohibited.
      vi. Tattoos: Students are required to cover tattoos unless, as deemed by the clinical faculty, covering the tattoo presents an infection control issue.
      vii. NO gum chewing.
      viii. Head coverings are prohibited in clinical sites EXCEPT for approved surgical caps that match the scrubs, and in cases where the head covering is for medical or religious reasons.
   b. LBCC policy allows students to maintain very casual dress attire in the classroom. However specific programs/departments with speciality areas may set specific dress codes to maintain a safe, professional environment.
      i. NO scrubs are to be worn in the classroom for lectures. Students who will be participating in the lab should plan to change from their regular clothes into their uniform attire.
7. Skills and Simulation Labs
   a. The nursing labs are considered as clinical areas and students will be expected to comply with Dress Code and Uniform requirements when in the clinical areas.
   b. Clinical areas of the Healthcare Occupations Center are defined as the second floor classrooms such as the skills lab, simulation lab, nursing assistant lab,medical assistant lab and other rooms as identified by nursing program staff.
8. LBCC Nursing Program requires all students to wear the full uniform when engaging in direct patient care at any clinical partnering site. The full uniform consists of the following:
   a. A colored tunic with matching pants, with LBCC patch sewn on left shoulder.
   b. Substantially white, gray or black shoes
   c. LBCC photo ID name badge
   d. Pen with black ink
   e. Watch with a sweeping second hand.
   f. Stethoscope
   g. Bandage scissors
   h. Hemostat
   i. Pen light
9. Alterations to Uniform requirements
   a. Some clinical partners request students dress in other than the full uniform. Any alteration from the full uniform must meet the approval of LBCC faculty. The following is considered appropriate attire in these situations:
      i. Scrub uniform of the unit to which the student is assigned provided by the facility
      ii. Casual or dress pants (absolutely no jeans of any color, spandex, leggings, shorts, sweatpants of any color or non-LBCC uniforms).
      iii. Skirts/dresses that are near the knee or below.
      iv. School name badges and/or facility-issued photo ID in clear view.

10. Students found in violation of the uniform and dress code policy will be subject to the following:
    a. Student will be sent home from clinical and placed on a Guide to Success
    b. Repeated violations will result in a student being subject to disciplinary action including but not limited to Instructor Initiated Exit (See Program Exit Policy).

Initiated:
Reviewed: 5/12,9/19,9/20, 2/24
Revised: 8/13; 9/13, 6/14, 10.15; 1.17; 2.17; 6.17, 1.19, 9/19,11/19,9/20, 6/22, 2/24

UNUSUAL OCCURRENCE REPORTING POLICY

Purpose: The purpose of this policy is to identify the procedure and form utilized for facilitating and infestation of concerns or issues that may arise during any direct patient care clinical activity by collecting all data that will identify and or verify opportunities for improvement in quality of service, education and curriculum, and individual performance.

Scope: The policy applies to all students fully enrolled in the LBCC Nursing Program

Definitions:

Unusual Occurrence	Any event or action that results in injury or potential harm to the patient, patient's family or staff member. Includes but is not limited to: ● Medication error ● Fall (does not need to be witnessed) ● Error in documentation ● Procedural or system processes ● Death ● Permanent or temporary loss of function of a body part ● Activation of rapid response or any CODE ● Sexual or physical assault or allegations thereof

Principles:
1. Documentation principles (factual information regarding events, avoiding jargon or judgemental language) are essential for appropriate reporting with Unusual Occurrences.

Policy Statement:
1. The LBCC Unusual Occurrence (UO) report form is to be completed for any and all events that pose a safety risk (actual or potential) to any patients, healthcare worker, or student.
   a. The UO report process provides identification of areas for process or systems improvement to prevent future events by identify what happened, why it happened and possible changes necessary to mitigate future events of the same nature.

Procedures
1. The UO report is to be completed as soon as possible within the clinical shift by a student who committed or discovered the event.
2. The completed form is to be reviewed for clarity and completeness by the clinical instructor at the clinical site, with the student present
3. The clinical instructor will review with the student areas of concern and/or provided feedback regarding personal performance as applicable, document this review on the form and report the UO to the clinical coordinator.
4. The UO should be delivered by the student to the Health Occupations Center (HOC)on the next working day
   a. The student will place the report in a sealed envelope addressed to "Nursing Program Administrator" and hand deliver the completed form to the LBCC (HOC entry reception desk.
   b. Clinical Instructor also has the option to hand deliver the report to the Nursing Program Administrator.
5. Form completion Instructions for Students: Fill out form printing clearly using permanent ink.
   a. Complete top portion of the first page of the form identifying specific times, dates, locations, and persons involved (this does not and should never identify any patient or patient identifying information).
   b. Complete the explanation of the occurrence in a narrative form.
      i. This should be presented in a factual and chronological order explaining all factors that led to the occurrence. Use additional blank pages if necessary.
      ii. Identify any additional persons involved.
   c. Complete the self reflection and include a plan of action for how to prevent future occurrences.
   d. Sign and print your name, and date the form.

6. Form Completion Instructions for Clinical Instructors: Fill out form printing clearly using permanent ink
   a. Complete the faculty comments section identifying a summary of the conversation you had with the student and advice given to them regarding the prevention of future issues of this nature.
7. Nursing Administrator or Clinical Coordinator may require students or faculty to meet to review events that occurred in regards to the UO and may require students or faculty to rewrite UO for clarity and/or accuracy.

Initiated: 3/2022
Reviewed:
Revised 8/24

ACKNOWLEDGEMENT OF THE POLICIES OF THE ASSOCIATE DEGREE NURSING STUDENT HANDBOOK

Review, sign, and submit to the Nursing Program Administrative Assistant

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As a student of the LBCC ADN Nursing program, it is my responsibility to read and understand the contents of the Associate Degree Nursing Student Handbook. I understand that faculty review and may update any portion of this handbook throughout the year. I understand that the faculty will provide timely notice of any revision or update so that I may read and review them and that it is my responsibility to do so.

Furthermore, I understand that I shall read the Associate Degree Nursing Student Handbook at the beginning of each academic year that I am in the program. My signature on this form certifies that I have read and understand the information contained within the Associate Degree Nursing Student Handbook, and that if I have any questions about any item contained therein, it is my responsibility to bring those questions to my Faculty Advisor or the Nurse Administrator.

_____   _____

Student's Printed Name   Student's LBCC ID Number

_____   _____

Student's Signature   Date

Initiated: 5/12
Reviewed: 7/20
Revised: 9/12; 9/14, 9/17,6/21

RELEASE OF INFORMATION FORM

Review, sign, and submit to the Nursing Program Administrative Assistant

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I hereby authorize Linn-Benton Community College and its agents to assist me in obtaining employment, scholarships, etc. Linn-Benton Community College is authorized to, at its discretion, release such information about my performance as a student, including grades, transcripts, progress reports, and instructor references, and other such information that the College or its agent may deem appropriate and have cause to be true and factual. I understand this authorization constitutes written consent and waives any disclosure rights provided by the General Education Provisions Act until I provide the College with written notification of termination of this consent; otherwise, this release will be in effect until one year following completion of the Program of study in the LBCC Nursing Department.

_____ _____

Student's Printed Name   Student's LBCC ID Number

_____ _____

Student's Signature   Date

Initiated:
Reviewed: 5/12; 1/14/2021
Revised: 8/15; 9/15

LBCC PHOTO/WORKS RELEASE FORM

Review, sign, and submit to the Nursing Program Administrative Assistant

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I hereby authorize Linn-Benton Community College to record my likeness and/or works; and at their discretion to use and authorize others to use my likeness and/or works for student recruiting, fundraising and publicity purposes, without compensation.

I also hereby give permission to Linn-Benton Community College to use my name, image, likeness, recording, works and/or speech in publications, video, advertising, online and other media for the purpose of college communication, fundraising, publicity and promotion. I understand my image may be used to promote a variety of initiatives or aspects of the college that I may not have direct personal involvement with, and that text may be used in conjunction with my image that does not represent my personal words or views. My name, image, likeness, recording, works and/or speech may be used in a very public, widely distributed way. I do not require payment for these uses.

I also understand that if a photo or recording is taken of a crowd or group of people where there is no expectation of privacy, no release is needed. If the individual covered in this release is a minor, their parent or guardian may sign the release giving permission in accordance with above.

I hereby acknowledge that I am 18 years of age or older and have read and understood the terms of this release OR, if I am 17 years of age or younger, that my parent or guardian has signed below.

_____   _____

Student's Printed Name   Student's LBCC ID Number

_____   _____

Student's Signature   Date

Initiated: 8/2021
Reviewed:8/21
Revised:

AUDIOVISUAL RECORDINGS CONSENT

Review, sign, and submit to the Nursing Program Administrative Assistant

A portion of the curriculum in the LBCC Nursing Program is designed to assist the student to acquire new nursing skills, safely perform skills and promote clinical problem solving. One mechanism used to provide the student the opportunity to demonstrate and self-evaluate performance as well as provide faculty with ability to validate student performance is recording student or student groups. Recordings can be utilized for return demonstrations of skills or physical assessments, Standardized Patient Experiences, Simulation activities, or other performances as identified by the instructional faculty. All students are required to sign the Student Audiovisual Consent prior to engaging in learning activities that are audio visually recorded.

Student Audiovisual Consent
The Audiovisual Consent Form is to authorize participation in practical exams, demonstration and/or studies to be recorded or filmed by audio and/or video equipment.
The purposes of the recordings are for Student performance assessment, classroom assignments, and instruction while enrolled in the LBCC Nursing Program.
Procedures that may be utilized:

- Videotaping
- Audio taping
- Students involved in a group that is audio/visually recorded will not be permitted to distribute such recordings. I authorize that I may be the subject of audio and visual recordings associated with demonstrations for the purpose of evaluating my performance.
- Recording will be fully disclosed prior to such activity and may include: photography, audio recording, and audiovisual recording.
- Recordings will be stored and maybe held for future instructional purposes. They will not be distributed or published beyond the classroom unless permission is given from the individuals involved.
- Access to the recording will include the instructors of the course and individuals of the group involved.

_____   _____
Student Print   Date

_____
Student Signature

This consent is active upon signing and will terminate upon students graduation or exit from the LBCC Nursing Program.

Appendices

Appendix A: ATI Assessment and Review Information

Appendix B: Attendance and Participation Tool

Appendix C: Physical Examination Form

Appendix D: Student Feedback Form

Appendix E: Unusual Occurrence Report Form

Appendix F: Student Exam Item Review Form

Appendix G: Staff Contact Information

Appendix A:

LBCC NURSING STUDENT ATI ASSESSMENT AND REVIEW
Assessment= exam, test, quiz

The comprehensive ATI review program offers the following to students:

- A comprehensive, assessment-driven review program designed to enhance student NCLEX® success.

- Multiple assessment and remediation activities. These include assessment indicators for academic success, critical thinking ability, and learning styles. Additionally, online tutorials, online practice assessments, and proctored assessments are provided and span major content areas in nursing. These ATI tools, in combination with the nursing program content, assist students to prepare effectively, helping to increase their confidence and familiarity with nursing content.

- ATI Orientation resources, such as the ATI Plan, which may be accessed from the "My ATI" tab. It is highly recommended that you spend time navigating through these orientation materials.

REVIEW MODULES/EBOOKS

ATI provides Review Modules in eBook formats that include written and video materials in key content areas. Students are encouraged to use these modules to supplement course work and reading. Instructors may assign chapter reading either during a given course and/or as part of active learning/remediation following assessments.

TUTORIALS TO SUPPORT ASSESSMENT AND REMEDIATION PROCESS

ATI Pulse introduces new predictive capabilities that build on existing Pulse functionality by generating dynamic predictions of the likelihood of students to achieve at least a Level 2 proficiency on the first attempt for each Content Mastery Series (CMS) proctored assessment – providing faculty and students with even earlier insights into future performance on the proctored assessments that ultimately are used to predict NCLEX success, as well as earlier warning for students not on track to succeed. Predictions of likelihood to succeed will generate as students complete coursework and practice assignments within each of the CMS areas, before they even attempt the proctored exam. Additionally, ATI Pulse provides prescriptive, data-backed recommended ATI learning activities for students to improve their likelihood of proctored CMS assessment success.

For example, ATI offers unique tutorials that are designed to teach nursing students how to think like a nurse, how to take a nursing assessment, and how to make sound clinical decisions. Nurse Logic is an excellent way to learn the basics of how nurses think and make decisions. Learning System offers practice quizzes in specific nursing content areas that allow students to apply valuable learning tools from Nurse Logic. ATI is committed to increasing student confidence by providing students with experience answering NCLEX-style questions in a variety of quizzing formats. With Learning System, students can assess their knowledge through pre-set quizzes, build a customized quiz that focuses on specific categories, or test their category-specific comprehension in an adaptive quizzing environment.

ASSESSMENTS

The Content Mastery Series Assessments (CMS) provide essential data regarding a student's mastery of concepts in relation to specific nursing content areas, including a series of Targeted Medical Surgical assessments that address individual body systems to provide formative evaluation of content prior to the final medical surgical course. There are practice assessments available for students as well as standardized proctored assessments that may be scheduled during courses. These assessments will help students identify what they know, in addition to areas requiring remediation (called Topics to Review).

FOCUSED REVIEWS/ACTIVE LEARNING/REMEDIATION

ATI Focused Review facilitates the post CMS assessment remediation experience for students. This personalized learning experience uses a student's performance on the CMS practice and proctored assessments to drive focused student learning. Once the student has completed a CMS practice assessment, Focused Review automatically assesses the student's learning gaps and generates a personalized learning experience. Focused Review provides ATI Review Module content in an eBook experience while highlighting the specific elements of content that a student should review. The forms of content include text, image, sound, and video. When the student has completed their first round of remediation (practice assessments only), they can take a post-remediation quiz that provides similar questions on identified content gaps. Upon completion of the quiz, the student can review their knowledge gaps and study updated eBook content. The post-remediation quiz is intended to provide feedback on remediation impact. If the student has completed a CMS proctored assessment, Focused Review provides ATI Review Module content in an eBook experience that is viewed by chapter versus a specific highlighted presentation. There is no post-remediation quiz generated for **proctored** assessments

ATI Assessments Grading Rubric for Course Points
(Subject to change per faculty discretion)

Practice Assessment 2 points			
Remediation: *4 points*			
● **Minimum** 1 hour Focused Review on initial attempt* ● For each topic missed, complete an Active Learning Template or 3 Critical Points form as part of the required remediation process.			
Standardized Proctored Assessment			
**Proficiency Levels			
Level III = *4 points*	Level II = *3 points*	Level I = *1 point*	< Level I = *0 points*
Remediation= *10 points*	Remediation = *10 points*	Remediation = *10 points*	Remediation = *10 points*
Minimum **1 hour** Focused Review*	Minimum **2 hour** Focused Review*	Minimum **3 hour** Focused Review*	Minimum **4 hour** Focused Review*
● Complete the **minimum hours** of Focused Review ● For each topic missed, complete an Active Learning Template or 3 Critical Points form.			
Points earned			
20/20 points	*19/20 points*	*17/20 points*	*16/20 points*
Proctored Assessment Retake Recommended?			
No retake required	No retake required	Retake recommended	Retake recommended

Initiated: 10/2020 Updated: 6/2022
* *Each student's focused review materials are created based upon the questions the student missed.*
**Each proficiency level depends on the assessment:

Proctored Assessment	Level III	Level II	Level I
Fundamentals *(60 items)*	81.7%	65.0%	50.0%
Adult Medical Surgical *(90 items)*	82.2%	68.9%	56.7%
Mental Health *(60 items)*	85.0%	66.7%	56.7%
Pharmacology *(60 items)*	86.7%	71.7%	53.3%
Maternal Newborn (60 items)	81.7%	66.7%	55.0%
Nursing Care of Children (60 items)	78.3%	65%	51.7%

per ATI Content Mastery Series Proficiency Levels   6/2022

LBCC NURSING STUDENT ATI ASSESSMENT AND REVIEW(Cont'd.)

RUBRIC EXAMPLE for Course points

1. Students take the ATI Practice Assessment and receive **2 pts.**

2. Students remediate depending on the ATI recommendations r/t their individualized practice assessment score to receive **4pts**.

● ***Continue to remediate until the Standardized Proctored assessment is available (usually 1 to 2 weeks after).***

3. Students take the ATI Proctored Assessment and the points awarded depend on their score (see rubric above--eg. a student received 82% on their Fundamentals exam--they met the level III benchmark and will receive 4 points.) up to **4 pts**.

4. Students can then receive **10** additional points for remediating regardless of their proctored assessment score; however, required remediation time depends on how well you scored. **10 pts**

5. Recommended **re-**take of the Proctored Assessment depends on how well you scored, this is not mandatory--just recommended (See instructor for this).

For this example, the student took the **practice** assessment:	**2pts**
Remediated (time based on ATI recommendations):	**4 pts**
Then took the Proctored Fundamentals Assessment scoring a 82%:	**4 pts**
The student **did not** remediate:	**0 pts**
Total points for ATI Course Points:	**10 pts**
The student **did** remediate and completed a focused review :	**10 pts**
Total points for ATI Course Points:	**20 pts**

Initiated:6/2022
Reviewed:
Revised:

Appendix B:

Attendance & Participation Tool

Demerits will accrue as noted below. Tardiness and Absence occurrences are measured per term. Unprofessional and Unsafe Behaviors *will accumulate* throughout the *entire* nursing program at the discretion of the faculty. This tool is to assist the faculty/student to identify problem areas and determine Guide to Success initiation.

Criteria (Please indicate the appropriate score)	**Fall Term 1st Year**	**Winter Term 1st Year**	**Spring Term 1stYear**	**Fall Term 2nd Year**	**Winter Term 2nd Year**	**Spring Term 2nd Year**
Tardiness (Regardless of reason; includes IPE) 1 – 5-14 minutes late to clinical activities 5- greater than 5 minutes late to exam without faculty notification						
Absence 2- Rescheduled exams after the first occurance. 2 – Absence from professional appointments (IPE, appointments with faculty, required skills/Sim lab remediation). 2– Absence from clinical (less than 50% of the clinical assignment; includes skills and simulation)– Instructor was notified at least one hour prior to the clinical start time. 4 – Absence from clinical (greater than 50% of the clinical assignment). Instructor was notified at least one hour prior to the clinical start time. 5 – No call/ No show/ or student notified instructor within one hour prior to the clinical/ exam start time.						
Unprofessional Behavior 2 – First occurrence of late and/or incomplete assignment (more than minor omissions). 3 – Not following the clinical dress code. 3- Fails to examine and modify one's own behavior when it interferes with others, the learning environment, or the patient care environment. 3- Fails to integrate feedback into performance. 5 – Unapproved or unauthorized use of cell phone/computer. 5– Impolite/disrespectful behavior to faculty, peers, partner site staff, patients and/or family. 5 – A pattern of tardiness (3 or more for clinical or professional appointments). 5 – A pattern of absences (2 or more for clinical or professional appointments). 5-A pattern of late clinical assignments (2 or more). 6 – HIPAA violations						

7- Fails to accept responsibility for own actions and fails to communicate in a courteous, assertive, non-aggressive, non-defensive manner with instructors, peers, staff and healthcare team members.						
Unsafe Behavior 6 – Actions that create potential harm through negligence or willfulness; includes proceeding with patient care *without* proper clinical preparation, or clinical instructor's authority or knowledge. 9 – Lying, covering up, or knowingly failing to report a mistake in the clinical setting. Falsifying any documentation.						
Total Demerits						

5 or Greater: Student will meet with the appropriate faculty member (clinical/lecture/advisor) and if needed the Program Administrator to implement a **Guide to Success** designed to enhance the student's ability to successfully complete the term. All attempts will be made for this meeting to occur within 7 days of accruing a score of 5 or greater.

Click to go to Table of Contents

Appendix C:

ASSOCIATES OF APPLIED SCIENCE IN NURSING
PHYSICAL EXAM FORM

Student Name: _____ **Date of Birth:** _____ .
                (Print Full Legal Name Clearly)

TYPICAL PHYSICAL DEMANDS AND WORKING CONDITIONS FOR NURSES:

Physical/Motor:
1. Coordinate fine and gross motor movements.
2. Coordinate hand/eye movements.
3. Maintain balance from any position.
4. Negotiate level surfaces, ramps and stairs.
5. Function with both hands free for performing psychomotor tasks.
6. Maneuver in small areas.
7. Lift or move (turn, position) clients or objects, pull or push objects, weighing up to 35 pounds and maintain a "medium activity level" as defined by the State of Oregon Department of Insurance Index of occupational characteristics.
8. Attend to cognitive and psychomotor tasks for up to 12 hours.

Sensory:
1. Acquire information from demonstrations and experiences, including but not limited to information conveyed through online coursework, lecture, small group activities, demonstrations, and application experiences.
2. Collect information through observation, listening, touching, and smelling.
3. Use and interpret information from diagnostic maneuvers; including detecting sounds with a stethoscope.

Cognitive:
1. Recall, collect, analyze, synthesize, and integrate information from a variety of sources.
2. Measure, calculate, reason, analyze and synthesize data.
3. Problem-solve and think critically in order to apply knowledge and skill.
4. Communicate verbally, and through reading and writing, with individuals from a variety of social, emotional, cultural, and intellectual backgrounds.
5. Relay information in oral and written form effectively, accurately, reliably, and intelligibly, including thorough and accurate use of computers and other tools, to individuals and groups, using the English language

Behavioral:
1. Demonstrate emotional stability to function effectively under stress and adapt to changing environments.
2. Maintain effective, mature, and sensitive relationships with others.
3. Examine and modify one's own behavior when it interferes with others or the learning environment.
4. Possess attributes that include compassion, empathy, altruism, integrity, honesty, responsibility, and tolerance.
5. Accept responsibility for own actions and communicate in a courteous, assertive, non-aggressive, non-defensive manner with instructors, peers, staff and healthcare team members.
6. Integrate feedback into own performance.

Page 1 of 2
BOTH pages of this document must be thoroughly discussed with your healthcare provider,
filled out completely, signed by a licensed independent practitioner,
and submitted together by the record submission deadline

There are prolonged periods of standing and walking which require reaching, stooping, bending, kneeling, crouching, stretching, and squatting. Participation in this program requires the ability to distinguish letters and symbols, corrected normal vision and normal hearing to distinguish changes in a patient's condition. Additionally, the student will be subject to stressful conditions, both mentally and physically; subject to assaultive patients; exposed to toxic chemicals and medical preparations; exposed to biohazards such as communicable diseases and radioactive substances; and subject to many interruptions.

- -
IMPORTANT: The section below must be completed by a licensed independent practitioner.

Name and Title of M.D., D.O., or APRN: _____ .

I, the above-mentioned student's healthcare provider, hereby verify that I have discussed the above information with the student and to the best of my ability validate that the student is fit to meet the working conditions and demands listed above.

_____   _____ .
 M.D., D.O., or APRN's Signature   **Date**

~ OR ~

I, the above-mentioned student's healthcare provider, hereby verify that I have discussed the above information with the student. To the best of my ability, I **CANNOT** validate that the student is fit to meet the working conditions and demands listed above.

_____   _____ .
 M.D., D.O., or APRN's Signature   **Date**

Page 2 of 2
BOTH pages of this document must be thoroughly discussed with your healthcare provider,
filled out completely, signed by a licensed independent practitioner,
and submitted together by the record submission deadline

Appendix D:

STUDENT FEEDBACK FORM

The purpose of this form is to offer students an opportunity to provide meaningful, positive or negative, feedback to faculty and/or staff. Students may complete one of these forms at their discretion and give a hard copy to the Nursing Administrative Assistant. Please also see the LBCC Student Rights, Responsibilities, Conduct & Complaint Process.

Today's Date: _____ Name: _____

Is this a curriculum issue? (Circle One) Yes   No   If yes, please skip to "Please describe…"
Faculty/staff member: _____
Was the encounter/interaction: (Circle One)   Positive   Negative
Where did the encounter/interaction take place: (Circle One)
Classroom   Skills Lab   Clinical   Advising   Other_____

Please describe the encounter/interaction/issue:_____
_____
_____
_____

Have you discussed this matter with the faculty/staff member? Yes   No
Have you discussed this matter with your faculty advisor?   Yes   No
Have you discussed this matter with the program chair? Yes   No

If this is a situation that requires a solution, what do you envision? _____
_____
_____
_____

Administrative Use
Date received: _____   Email confirmation sent: Yes No Disposition: _____
Comments:_____
_____

Initiated: 2010
Reviewed: 7/21/19,7/20, 6/21
Revised: 9/13, 7/21/19, 7/20/2020, 6/2022

Appendix E:

Unusual Occurrence Report Form
LINN-BENTON COMMUNITY COLLEGE
Nursing Department

THIS IS A CONFIDENTIAL DEPARTMENT REPORT
This document is to be completed by the student, reviewed by a clinical faculty member, signed, and then must be hand delivered by the student (DO NOT EMAIL) to the nursing department within 24 hrs.

Student Name:_____   Course:_____

Institution where incident occurred: _____

Today's Date _____   Time: _____

Clinical Faculty: _____

Nurse working with the student: _____

Attending Physician:_____

Notified by whom:_____   Date:_____   Time:_____

Explanation of the occurrence: (include all factors surrounding the occurrence, use additional paper or the back of the form if extra space is needed).

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Person(s) involved: (Example: Staff nurse involved, physician, CNA, etc.):

_____
_____
_____
_____
_____
_____
_____

PAGE 1 of 2

Self-reflection of the event, by the student, and plan of action to prevent future occurrence:_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Student Signature:_____ Printed Name:_____ Date: _____

Faculty Comments:

_____
_____
_____
_____
_____
_____
_____

Faculty Signature_____ Printed Name_____ Date:_____

Nurse Administrator Plan/Actions/Comments:

_____
_____
_____
_____
_____
_____

Nurse Administrator Signature _____ Date:_____

Nurse Administrator Printed Name: _____ Date _____

Initiated:
Reviewed: 7/19; 4/22
Revised:

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Appendix F:

Linn-Benton Community College

Nursing Department

Student Exam Item Review Form

Name: _____   Date: _____

Course/Exam: _____ Instructor: _____

I am requesting to review the following exam item:

Rationale (explain why you believe your exam item answer is correct):

References (list up to three classroom resources):

Initiated: 2/20
Reviewed: 1/21, 18/22
Revised:

Appendix G:

Associate Degree Nursing Faculty and Staff Contact Information
2024-2025

Linn-Benton Community College Healthcare Occupations Center
300 Mullins Drive
Lebanon, OR 97355
541-917-4511

Nurse Administrator
Heather Peacock   541-917-4519   peacoch@linnbenton.edu

Department Chair
Caitlyn Terrell - Clinical/Lecture   541-917-4526   terrelc@linnbenton.edu

Faculty
Tashia Abbott - Clinical/Lecture   541-917-4925   abbottt@linnbenton.edu
Gwendy Beer - Clinical/Lecture   541-917-8841   beerg@linnbenton.edu
Danielle Drake - Clinical/Lecture   541-918-8843   draked@linnbenton.edu
Briget Ferguson - Clinical/Lecture   541-917-4517   fergusb@linnbenton.edu
Katie Grotberg - Clinical/Lecture   541-918-8842   grotbek@linnbenton.edu
Emily Middleton - Clinical/Lecture   541-917-4928   middle@linnbenton.edu
Meagan Riley - Clinical/Lecture   541-918-8836   rileym@linnbenton.edu
Emily Rose - Clinical/Lecture   541-917-4523   rosee@linnbenton.edu
Marcy Shanks - Clinical Coordination/Lecture   541-917-4518   shanksm@linnbenton.edu

Nursing Program Admin Assistant
Tonia Benham   541-917-4513   benhamt@linnbenton.edu