

# **QUINSIGAMOND COMMUNITY COLLEGE**

## **NURSE EDUCATION DEPARTMENT**



## **ASSOCIATE DEGREE PROGRAM NURSING STUDENT HANDBOOK**

**FALL 2024/SPRING 2025/SUMMER 2025**

<https://www.qcc.edu/academics/healthcare/nurse-education>

Reviewed & revised June 2024

## TABLE OF CONTENTS

<b>Topic/Policy</b>	<b>Page</b>
<i>Welcome</i>	5
<i>Diversity, Equity, and Inclusion Statement</i>	6
<i>Purpose and Philosophy</i>	7-8
<i>Organizing Framework, Integrating Concepts, Theories, Outcomes, Curriculum</i>	
• Organizing Framework/ Quilt/ Conceptual Model Explanation/ Integrating Concepts	9-10
• Orem Self-Care Theory /Orem Glossary of Terms	11-12
• NANDA Nursing Diagnoses	13-18
• Erikson/Kolb/Bloom Theories	19-20
• Program Outcomes/Student Learning Outcomes	21
• Curriculum Hours for NUR/NUE, NUL, NUP	22-25
<a href="#"><u>Massachusetts Board of Registration in Nursing (MABORN) Required Policies</u></a>	
• Admission Policy	26
• Academic and Professional Integrity <ul style="list-style-type: none"> <li>○ Plagiarism/False Information/Cheating</li> <li>○ Sharing &amp; Copyright Infringement</li> </ul>	26-27
• Advanced Placement Policy	27
• Attendance Policy <ul style="list-style-type: none"> <li>○ Classroom Attendance</li> <li>○ Clinical/Lab/Simulation Attendance</li> <li>○ Make-Up</li> <li>○ School Cancellation, Delays, and Clinical Snow Day Policy</li> </ul>	27-29
• Course Exemption Policy	29
• Educational Mobility Policy	30
• Good Moral Character Policy	30
• Graduation Policy & Licensure <ul style="list-style-type: none"> <li>○ Graduation Requirements/Program Completion</li> <li>○ Licensure Eligibility &amp; Process</li> </ul>	30-31
• Incivility Policy	31
• Military Policy: Transfer or Advanced Placement of Military Education, Training or Service for a Military Healthcare Occupation	32
• Program Warning Policy	32
• Progression Policy <ul style="list-style-type: none"> <li>○ Retention/Progression in Program</li> </ul>	32-33
• Readmission Policy <ul style="list-style-type: none"> <li>○ Denial of Admission to Healthcare Programs</li> </ul>	33-34
• Social Media Policy	34-35
• Student Rights and Grievances <ul style="list-style-type: none"> <li>○ Participation in Governance of Program</li> <li>○ Request for Documents</li> <li>○ Request for Second Reader/Review</li> <li>○ Student Records Policy</li> <li>○ Student Rights and Grievances Policy</li> </ul>	36-37
• Transfer Policy	37
• Withdrawal Policy <ul style="list-style-type: none"> <li>○ Call to Active Military Duty</li> <li>○ Administrative Withdrawal Policy</li> </ul>	37-38
<a href="#"><u>Classroom Policies</u></a>	
• Cell Phones and Electronic Devices	39

• Classroom Etiquette	39
• Course Information	39
• Course Evaluations and Surveys	39
• Disruptive Behavior	39
• Methods of Instruction/Teaching Procedures	40
• Religious Accommodations	40
• Remote/Online Learning and Technology <ul style="list-style-type: none"> <li>○ Electronic Signatures</li> </ul>	40
• Standardized Testing/Kaplan	41
• Student Accessibility Services	41-42
• Testing Policy <ul style="list-style-type: none"> <li>○ Guidelines for Taking Examinations</li> <li>○ Computerized Testing Through Blackboard</li> <li>○ Exam Reviews</li> <li>○ Remote Testing Policy</li> </ul>	42-45
• Use of Audio Recording Devices	45
• Visitors in the Classroom	45
<u><a href="#">Nursing Lab Policies</a></u>	
• Lab Experiences Definitions	46
• Lab Kits	46
• Lab Policies and Etiquette	46
• Latex Allergy Policy	46-47
• Open/Practice Labs	47-48
• Preparation for Lab	48
• Psychomotor Skill Competency Evaluation	48
• Refresh your Skills	48
• Required Purchases	49
• Scheduled Skills Labs	49
<u><a href="#">Clinical Policies</a></u>	
• Centralized Clinical Placement and Clinical Agency Requirements	50
• Change in Health Status	50
• Clinical Experiences Definitions	50-51
• Clinical Performance Evaluation <ul style="list-style-type: none"> <li>○ Evaluation Process</li> <li>○ Clinical Warning</li> <li>○ Clinical Failure</li> <li>○ Clinical Dismissal</li> </ul>	51-53
• Clinical Area without Instructor	53
• Clinical Site Information	53
• Computer Access at Clinical	53
• CORI/SORI and National Background Registry Check	53-54
• Drug Screening/Fingerprinting Policy	54
• Health Policy	54-55
• Illness Policy	55
• Infection Control Guidelines	56
• Injury or Illness in Clinical Area	57
• Leaving the Clinical Facility	57
• Medication Administration Policy	57
• Nursing Math Competency Testing Policy	57-59

• Patient Contact and Risk of Exposure	59
• Returning to Nursing Skills Laboratory	59-60
• Simulation Lab	60-61
• Smoking/Vaping Policy	61
• Technical Performance Standards	61
• Title IX	61
• Unanticipated Exposure to Communicable/Infectious Disease	62
• Uniform/Dress Code Policy	62
<u><a href="#">Student Resources</a></u>	
• Academic Advising	63
• Academic Counseling	63
• Honors and Awards	63
• Library Resources	63
• National Student Nurses' Association	63
• Nurse Aid Training Waiver	64
• Nurse Pinning	64
• QCC Foundation Scholarships	64
• Student Support Services Policy	64-65
<u><a href="#">References</a></u>	65-66
<u><a href="#">Appendices/Forms</a></u>	
A. Academic Clinical Success Form	67-68
B. Nursing Student Request for Audio Recording Lectures	69
C. Nursing Skills Lab Referral for Remediation Form	70
D. Statement of Confidentiality	71
E. Photograph/Video (Film)/Audio Release	72
F. Statement of Understanding Regarding Clinical and Theory Process	73
G. Indemnification / Hold Harmless Agreement	74
H. Clinical Site Information	75
I. Statement of Agreement/Student Signature/Acknowledgment	76

### Nurse Education Program Contact Information

Role	Name	Phone	Email
Program Chair/ Administrator	Patricia Creelman	508-854-2735	<a href="mailto:pcreelman@qcc.mass.edu">pcreelman@qcc.mass.edu</a>
NUR Program Coordinator	Sheri Boisseau	508-854-7405	<a href="mailto:sboisseau@qcc.mass.edu">sboisseau@qcc.mass.edu</a>
NUE/NUL/NUP Program Coordinator	Meredith Stone	508-854-4537	<a href="mailto:mstone@qcc.mass.edu">mstone@qcc.mass.edu</a>
Clinical Coordinator	MaryEllen Nietupski	508-751-7977	<a href="mailto:mnietupski@qcc.mass.edu">mnietupski@qcc.mass.edu</a>
Lab Coordinator – Day	Keara Holmes	508-791-7984	<a href="mailto:kholmes@qcc.mass.edu">kholmes@qcc.mass.edu</a>
Lab Coordinator – Eve	Betty Ann Warner	508-751-7906	<a href="mailto:bwarnar@qcc.mass.edu">bwarnar@qcc.mass.edu</a>
Program Assistants/Clerks	Stefanie Parker Sophie Werner	508-751-7966 Option#2	<a href="mailto:nurseeducation@qcc.mass.edu">nurseeducation@qcc.mass.edu</a>
Health Compliance	Rick Banks	508-751-7966 Option#1	<a href="mailto:healthcompliance@qcc.mass.edu">healthcompliance@qcc.mass.edu</a>

# ***WELCOME***

Welcome to the Nursing Education Program at Quinsigamond Community College. The faculty hope that this experience will be a rich and rewarding one for you. This student handbook has been developed to provide you with information relative to the Associate Degree (A.D.) Nursing Program and its policies. It will serve as an ongoing resource as you proceed through the program. The policies and guidelines included in the handbook are applicable to all nursing courses.

Quinsigamond Community College (QCC) A.D. Nurse Education Program is approved by the Massachusetts Board of Registration in Nursing (MABORN) Department of Public Health Bureau of Professional Licensure 250 Washington St. Boston, MA 02108-4619 and accredited by the Accreditation Commission for Education in Nursing, Inc. (ACEN), 3390 Peachtree Road, NE, Suite 1400, Atlanta GA 30326, phone 1-404-975-5000.

QCC is accredited by the New England Commission of Higher Education, Inc. (NECHE). QCC is an affirmative action/equal opportunity employer and does not discriminate on the basis of race, color, national origin, sex, disability, religion, age, veteran status, genetic information, gender identity or sexual orientation in its programs and activities as required by Title IX of the Educational Amendments of 1972, the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964, and other applicable statutes and college policies. The College prohibits sexual harassment, including sexual violence. Inquiries or complaints concerning discrimination, harassment, retaliation or sexual violence shall be referred to the College's Affirmative Action and/or Title IX Coordinator, the Massachusetts Commission Against Discrimination, the Equal Employment Opportunities Commission or the United States Department of Education's Office for Civil Rights. Liz Woods, Dean for Compliance and Education Title IX, can be reached at 508-854-2791 (Room 421A). The College's Affirmative Action Officer is Sara Simms, Executive Director of Human Resources/Affirmative Action Officer, who can be reached at 508-542-2757 (Room 222A).

In addition to the Nurse Education Student Handbook, please refer to the Quinsigamond Community College Catalog and Quinsigamond Community College Student Handbook for the current academic year.

Quinsigamond Community College  
School of Healthcare

## ***Diversity, Equity, and Inclusion Statement***

The Quinsigamond Community College (QCC) School of Healthcare is open to all individuals. We are committed to inclusive and equitable opportunities, and we do not discriminate against applicants, students, or employees based on age, race, sex, gender identity, ability, religious convictions, socio-economic status, national origin, ethnic heritage, sexual orientation, and/or veteran status. Any inquiries or issues concerning compliance with this policy should be brought to the attention of the QCC Dean for Compliance and Education, Liz Woods or Human Resources Assistant Director and Affirmative Action Officer for Employees, Sara Simms (<https://www.qcc.edu/human-resources/title-ix-and-affirmative-action>). QCC will respond to all inquiries in a timely and effective manner with the goal of promoting equitable treatment.

The School of Healthcare promotes educational equity by recruiting, enrolling, retaining and matriculating a diverse and inclusive student body. We prepare students to join the work force to reduce barriers and promote access to health care in our community. The School of Healthcare is strongly committed to ensuring that its learning and working environments are free of harassment and discrimination and supports respect for every person's inherent dignity, worth, and unique attributes.

We want to acknowledge that we gather as QCC on the traditional land of the Nipmuc, past and present. While a land acknowledgment statement is an important initial step and not enough, it is a necessary decolonial practice that promotes indigenous visibility and social justice, reminding us that we are on settled indigenous land. We condemn the unjust deeds done in the past and honor with gratitude the land itself and the indigenous people who have stewarded it throughout the generations. We commit to continuing to work for peace and reconciliation and to be better neighbors and caretakers of the land we inhabit.



## Nurse Education Department

### *Purpose/Philosophy*

#### **Purpose**

The purpose of Quinsigamond Community College, Nurse Education unit, is congruent with the Mission Statement of the College. The Nurse Education Unit provides a high quality education that is accessible and affordable to a diverse student population. The program in nursing serves the learner, the community and the nursing profession. At the completion of each program, the graduate is prepared to write the National Council Licensure Examination for Registered Nurses, (NCLEX-RN) and the National Council Licensure Examination for Practical Nurses (NCLEX-PN) and to assume an entry level nursing position.

#### **Philosophy**

We believe:

**Nursing** is a caring, theory-based discipline focused on assisting the patient and significant support person(s) to achieve an optimal level of self-care, while protecting and promoting patient dignity. The science of nursing is a distinct, constantly evolving body of knowledge that encompasses rational and scientific principles upon which nursing interventions are based. Plan of care is flexible, patient centered, cost effective, attentive to patient diversity, and occurs within the context of the patient's family and environment. Nurses utilize the nursing process, open, civil and therapeutic communication, critical thinking, evidence-based information while working collaboratively with members of the health-care team. Nurses function within the standards of practice, demonstrating safe, competent, legal ethical practice.

The **individual** is a valued, complex and unique being that has a dynamic capacity for self-care. The individual is understood as an integrated and whole being who functions biologically, psychologically, socially, spiritually and developmentally. The individual has the potential to make choices that will meet his/her own needs for self-care and lead to ongoing growth as human beings.

**Environment** – Individuals are best understood in the context of their environment. The environment consists of evolving, dynamic, culturally diverse conditions, which are influenced by family, specific living conditions, political, social, demographic, and economic factors.

**Health** is a state of physical, social, emotional, and spiritual well-being and not merely the absence of illness. Health status exists on a continuum and varies because of interactions between the patient and the environment.

**Teaching/Learning** is an active, dynamic, continuous and creative process of attaining and sharing knowledge, involving the patient, significant support person(s) and the health care team. As educators, nurses assist the patient/families by supporting self-care activities, while facilitating informed decision and achievement of positive outcomes.

**Nursing education/scholarship** occurs within a system of higher education and is a planned approach to the acquisition of knowledge. Nursing education progresses from the simple to the complex, facilitates the development of cognitive, psychomotor and affective knowledge and provides for multiple points of entry into the profession. The outcome of nursing education, at all levels, is to

prepare a graduate who accepts professional responsibility and accountability. Nursing education supports participation in professional organizations. Cultural diversity within the classroom is valued and promotes appreciation and respect for differences within the college and beyond. The role of the faculty is to guide, support, facilitate learning, and model professional practice, while instilling commitment to lifelong learning. Faculty also strive to instill a sense of professional empowerment including commitment to social justice and community service. The role of the student is to translate classroom learning into nursing practice through the spirit of inquiry, evidence-based and reflective nursing practice.

**Licensed Practical Nurse (LPN)** provides quality patient-centered, evidenced-based care to vulnerable multicultural/diverse groups across the health care continuum, particularly among older adults and other population clusters that need long-term, community-based chronic care. The Practical Nurse cooperates and collaborates with health team members, patients and families and delegates the nursing care provided by unlicensed personnel. The Licensed Practical Nurse uses scientific knowledge and technical skills to continually assess the physical, emotional and social status of their clients and they work with patients and their families to devise care plans for each situation in accordance with best nursing practice.

**The Associate Degree Nurse** advances the nursing process to implement nursing actions in varied complex settings, and assist patients in meeting or maintaining self-care needs. The associate degree nurse cooperates and collaborates with other members of the health care team to give direct care to patients, families, and community groups. The associate degree nurse is also responsible for the delegation of nursing action.



# Associate Degree Nurse Education ***ORGANIZING FRAMEWORK AND INTEGRATING CONCEPTS***



## **ASSOCIATE DEGREE NURSING CONCEPTUAL MODEL EXPLANATION**

The nursing program conceptual model, “The Quilt”, was created by faculty to incorporate all integrated concepts relevant to the QCC Associate Degree Nursing curriculum. The quilt reflects the merging of the nursing theorist Orem, psychoanalyst Erikson, and integrating concepts in alignment with the National League for Nursing competencies for Associate Degree Programs in Nursing and other influences. In the center of the quilt resides the patient, who serves as a reminder of the focus of those completing this program. The faculty believes that this conceptual model is appropriate to the level of the learner and the role that will be assumed upon completion of the Associate Degree Nursing program of studies.

## **INTEGRATING CONCEPTS**

The Associate Degree in Nursing curriculum integrates professional standards and competencies from the National League for Nursing (NLN), Quality and Safety Education for Nurses (QSEN), Massachusetts Nurse of the Future Initiative, the Massachusetts Board of Registration in Nursing (MABORN) and Accreditation Commission for Education in Nursing (ACEN). Each of these has contributed to the Mission and Philosophy of the Associate Degree in Nursing program and ultimately the end of program student learning outcomes. The following define the concepts that are integrated across the curriculum of the program.

**Nursing Process/Theoretical Foundations** - An outcome based problem oriented approach to the delivery of nursing care based on established theoretical foundations. This process involves assessment, nursing diagnosis, planning, implementation and evaluation to promote the health of patients within a family and community context.

**Teamwork/Collaboration/Communication** - To function effectively within nursing and inter-professional teams, fostering open dialogue between patients, families and health care professionals, mutual respect, and shared decision making. Interactions may take place via verbal, nonverbal, written, and electronic means.

**Professional Identity/Evidence-Based Practice** - To implement one's role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring and advocacy.

**Nursing Judgement/Quality and Safety** - Making practice decisions, substantiated with evidence, that integrate nursing science in the provision of safe, quality care. Health care services are provided consistent with current professional knowledge; minimize the risk of harm and increase the likelihood of desired health outcomes.

**Relationship-Centered Care** - Positions caring, therapeutic relationships with patients, families, and communities. To integrate respect for the dignity of others, valuing diversity, mutual trust, empathy, civility, the capacity for grace, and empowerment.

**Systems Based Practice/ Leadership and Management** - Influences the behaviors of individuals or groups of individuals by incorporating an awareness of and responsiveness to the larger context and system of health care. Effectively utilize system resources to provide care that is of optimal quality and value.

**Human Flourishing/Diversity** - Advocate for patients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings. Recognizing the differences among people, ideas, values and ethnicities while affirming the uniqueness of each to promote health, healing, and hope.

**Spirit of Inquiry/Teaching/Learning** - Examine the evidence that underlies nursing practice to challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for patients, families, and communities.

## **OREM'S SELF-CARE THEORY**

Orem's self-care theory identifies several components essential to the delivery of nursing care. The theory identifies self-care requisites as those activities and universal needs common to all individuals and health deviations that can occur due to illness. A self-care deficit arises when a patient cannot meet self-care requisites, thereby requiring nursing care. Orem further describes the role of nursing and the degree of involvement in providing those activities which are necessary to restore patient health.

## **OREM GLOSSARY OF TERMS**

**Self-Care:** Activities personally initiated and performed by individuals/families on their own behalf (or behaviors of individuals directed toward) maintaining life, health and well-being.

**Deliberate action:** The behavior or activity that is involved to achieve a result which is preceded by reflection and judgment.

**Self-care agency:** The complex acquired ability to meet one's continuing requirements for care that regulates life processes, maintains or promotes integrity of human structure and functioning and human development, and promotes well-being. The capacity to engage in self-care.

**Therapeutic self-care demand (TSCD):** A set of established requisites which assist a person to maintain present states of health or to move toward more desirable states of health (universal, health deviation and developmental requisites).

**Universal self-care requisites:** Requisites that are universally required by humans. Seven categories are: air, food and water, excrements, activity/rest, balance between solitude and social interaction, prevention of hazards to life, and normalcy.

**Developmental self-care requisites:** Particularized in events of maturational and situational changes, e.g. pregnancy, separation, loss and related developmental processes.

**Health-deviation requisites:** Required only in event of illness, injury or disease. For example, changes in human structure, physical functioning, behavior and habits of daily living.

**Self-care deficit:** An inability to engage in self-care; occurs when there is an inability to meet the therapeutic self-care demand.

**Nursing Agency:** The power of the nurse to engage in nursing actions. Involves the capacity of the nurse to utilize the nursing process to develop and initiate a set of assisting actions which compensate for the deficit between a person's self-care agency and the therapeutic self-care demand.

**Basic Conditioning Factors:** Identified variables that are judged to have an effect on the concrete values of the therapeutic self-care demand and/or the self-care agency of individuals. These include: age, sex, developmental state, conditions of living, family system factors, sociocultural orientations, patterns of living, health state and health care system factors.

**Nursing Systems:** The approaches nurses use to assist people with deficits of self-care.

**Wholly compensatory system:** The nurse compensates for the patient's inability to engage in self-care and totally supports and protects the patient.

**Partly compensatory system:** The nurse and the patient/family participate together in meeting self-care demands.

**Supportive-Educative:** The nurse facilitates the patient's ability to meet his/her own self-care demands through education, support and consultation.

**Methods of helping:** Actions nurses utilize to assist patients in meeting therapeutic self-care demand. These include doing for or acting for another, guiding and directing another, providing physical support, providing psychological support, providing an environment that supports development, and teaching.

# NANDA NURSING DIAGNOSES

## **OREM Requisite I**

### **The maintenance of sufficient AIR.**

- Airway clearance, ineffective
- Aspiration, Risk for
- Breathing, Ineffective pattern
- Gas exchange, Impaired
- Suffocation, Risk for suffocation
- Ventilation, Impaired spontaneous ventilation
- Ventilatory weaning response, Dysfunctional
- Ventilatory weaning response, Dysfunctional adult

## **OREM Requisite II:**

### **The maintenance of sufficient intake of WATER.**

- Electrolyte Imbalance, Risk for electrolyte imbalance
- Fluid Volume, Deficient fluid volume
- Fluid Volume, Excess fluid volume
- Fluid Volume, Risk for deficient fluid volume
- Fluid Volume, Risk for imbalanced fluid volume

## **OREM Requisite III**

### **The maintenance of sufficient intake of FOOD.**

- Imbalanced Nutrition: less than body requirements
- Readiness for Enhanced Nutrition
- Blood glucose, Risk for unstable
- Breast Milk Production, Insufficient
- Breastfeeding, Ineffective Breastfeeding
- Breastfeeding, Interrupted Breastfeeding
- Breastfeeding, Readiness for Enhanced Breastfeeding
- Eating dynamics, Ineffective Adolescent
- Eating dynamics, Ineffective Child
- Eating dynamics, Ineffective Infant
- Hyperbilirubinemia, Neonatal
- Hyperbilirubinemia, Risk for Neonatal hyperbilirubinemia
- Infant suck-swallow response, ineffective
- Metabolic syndrome: Risk for metabolic syndrome
- Obesity
- Overweight
- Overweight, Risk for
- Swallowing, Impaired

## **OREM Requisite IV**

### **The provision of care associated with ELIMINATION processes and excrements**

- Constipation
- Constipation, Risk for constipation
- Constipation, Perceived constipation
- Constipation, Chronic functional constipation
- Constipation, Risk for chronic functional constipation
- Diarrhea
- Gastrointestinal motility, Dysfunctional
- Gastrointestinal motility, Risk for Dysfunctional
- Incontinence, Impaired bowel continence
- Incontinence, Disability associated urinary incontinence
- Incontinence, Urinary Stress Incontinence
- Incontinence, Urinary Urge Incontinence
- Incontinence, Risk for Urinary Urge Incontinence
- Urinary, Impaired Urinary Elimination
- Urinary Retention
- Urinary Retention, Risk for urinary retention

## **OREM Requisite V**

### **The maintenance of balance between ACTIVITY and REST**

- Activity, Decreased tolerance
- Activity, Risk for decreased tolerance
- Blood pressure, Risk for unstable
- Breathing pattern, Ineffective
- Cardiac output, Decreased
- Cardiac output, Risk for decreased
- Cardiovascular function, Risk for impaired function
- Cerebral tissue perfusion, Risk for ineffective
- Disuse Syndrome, Risk for
- Energy field, Imbalanced
- Fatigue
- Impaired Sitting
- Impaired Standing
- Impaired Transfer Ability
- Impaired Walking
- Insomnia
- Mobility, Impaired Bed
- Mobility, Impaired Wheelchair
- Mobility, Impaired Physical
- Self-care deficit Bathing
- Self-care deficit Dressing
- Self-care deficit: Feeding

- Self-care deficit: Toileting
- Self-care: Readiness for enhanced
- Self-neglect
- Sleep, Deprivation
- Sleep, Readiness for Enhanced
- Sleep, Disturbed pattern
- Tissue perfusion, Risk for decreased cardiac
- Tissue perfusion, Risk for ineffective cerebral
- Tissue perfusion, Ineffective peripheral
- Tissue perfusion, Risk for ineffective peripheral
- Thrombosis, Risk for
- Wandering

## **OREM Requisite VI**

### **The maintenance of balance between SOLITUDE and SOCIAL INTERACTIONS**

- Attachment, Risk for Impaired Attachment
- Decisional conflict
- Decision making, Readiness for enhanced decision making
- Decision making, Impaired emancipated decision-making
- Decision making, Risk for impaired emancipated decision-making
- Decision making, Readiness for enhanced emancipated
- Family identity, Disturbed family identity syndrome
- Family identity, Disturbed family identity syndrome, Risk for
- Family processes, Dysfunctional Family Processes
- Family processes, Interrupted Family Processes
- Family processes, Readiness for Enhanced Family Processes
- Moral Distress
- Parenting, Impaired parenting
- Parenting, Risk for impaired parenting
- Parenting, Readiness for enhanced parenting
- Relationships, Ineffective relationships
- Relationships, Risk for ineffective relationships
- Relationships, Readiness for enhanced relationships
- Role conflict, Parental role conflict
- Role performance, Ineffective role performance
- Role strain, Caregiver role strain
- Role strain, Risk for caregiver role strain
- Social interaction, Impaired social interaction

## **OREM Requisite VII**

### **The prevention of HAZARDS to human life, functioning and well-being**

- Airway Clearance: Ineffective airway clearance
- Aspiration: Risk for aspiration
- Bleeding: Risk for bleeding
- Dentition: Impaired dentition
- Dry eye: Risk for dry eye

- Dry eye: Ineffective dry eye self-management
- Dry mouth: Risk for dry mouth
- Falls: Risk for adult falls
- Falls: Risk for child falls
- Hyperthermia: Risk for hyperthermia
- Hypothermia: Risk for hypothermia
- Hypothermia: Neonatal hypothermia
- Hypothermia: Risk for neonatal hypothermia
- Hypothermia: Risk for perioperative hypothermia
- Injury: Risk for injury
- Eye: Risk for corneal injury
- Nipple: Nipple-areolar complex injury
- Nipple: Risk for nipple-areolar complex injury
- Urinary tract injury: Risk for urinary tract injury
- Positioning injury: Risk for perioperative positioning injury
- Thermal injury: Risk for thermal injury
- Mucous membranes: Impaired oral mucous membrane
- Mucous membranes: Risk for impaired oral integrity
- Neurovascular: Risk for peripheral neurovascular dysfunction
- Physical trauma: Risk for physical trauma
- Vascular Trauma: Risk for vascular trauma
- Pressure injury, Adult pressure injury
- Pressure injury, Risk for adult pressure injury
- Pressure injury, Child pressure injury
- Pressure injury, Risk for child pressure injury
- Pressure injury, Neonatal pressure injury
- Pressure injury, Risk for neonatal pressure injury
- Risk for shock
- Skin Integrity, Impaired skin integrity
- Skin Integrity, Risk for impaired skin integrity
- Self-mutilation
- Self-mutilation: Risk for self-mutilation
- Suicide: Risk for suicidal behavior
- Risk for sudden infant death
- Risk for suffocation
- Self-mutilation
- Self-mutilation: Risk for self-mutilation
- Suicide: Risk for suicidal behavior
- Surgical recovery: Delayed surgical recovery)
- Surgical recovery: Risk for delayed surgical recovery
- Thermoregulation: Ineffective thermoregulation
- Thermoregulation: Risk for ineffective thermoregulation
- Tissue integrity: Impaired tissue integrity
- Tissue integrity: Risk for impaired tissue integrity
- Violence: Risk for other-directed violence
- Violence: Risk for self-directed violence



## **OREM Requisite VIII**

### **The PROMOTION OF NORMALCY of human functioning and development within social groups**

- Activity, Ineffective activity planning
- Activity, Risk for ineffective activity planning
- Acute substance withdrawal syndrome
- Acute substance withdrawal syndrome: Risk for acute
- Autonomic dysreflexia
- Anxiety
- Anxiety, Death anxiety
- Comfort, Impaired comfort
- Comfort, Readiness for enhanced comfort
- Community health: Deficient community health
- Coping, Compromised family coping
- Coping, Defensive coping
- Coping, Disabled family coping
- Coping, Ineffective coping
- Coping, Ineffective community coping
- Coping, Readiness for enhanced community coping
- Coping, Readiness for enhanced coping
- Coping, Readiness for enhanced family coping
- Decisional conflict
- Decision making, Readiness for enhanced decision making
- Decision making, Impaired emancipated decision-making
- Decision making, Risk for impaired emancipated
- Decision making, Readiness for enhanced emancipated
- Denial, Ineffective denial
- Development: Delayed child development
- Development: Risk for delayed child development
- Development: Delayed infant motor development
- Development: Risk for delayed infant motor development
- Elopement: Risk for elopement attempt
- Exercise: Readiness for enhanced exercise engagement
- Fear
- Frail elderly syndrome
- Frail Elderly: Risk for frail elderly syndrome
- Grieving, Maladaptive grieving
- Grieving, Readiness for enhanced grieving
- Grieving, Risk for maladaptive grieving
- Health literacy: Readiness for enhanced health literacy
- Sedentary lifestyle
- Health maintenance behaviors: ineffective health
- Health self-management: Readiness for enhanced health
- Health self-management: Ineffective family health self

- Home maintenance: Ineffective home maintenance behaviors
- Home maintenance: Risk for ineffective ... behaviors
- Home maintenance: Readiness for enhanced home...behaviors
- Mood, Impaired mood regulation
- Moral Distress
- Nausea
- Pain: Acute pain
- Pain Chronic pain
- Pain Chronic pain syndrome
- Pain Labor pain
- Post trauma syndrome
- Post trauma syndrome, Risk for post trauma syndrome
- Power, Readiness for enhanced power
- Powerlessness
- Powerlessness, Risk for powerlessness
- Protection: Ineffective protection
- Rape-trauma syndrome
- Religiosity, Impaired religiosity
- Religiosity, Risk for impaired religiosity
- Religiosity, Readiness for enhanced religiosity
- Relocation stress syndrome
- Relocation stress syndrome, Risk for
- Resilience, Impaired resilience
- Resilience, Readiness for enhanced resilience
- Resilience, Risk for impaired resilience
- Risk for loneliness
- Risk-prone health behavior
- Risk for complicated immigration transition
- Sexual dysfunction
- Sexual pattern, ineffective sexual pattern
- Social isolation
- Sorrow, Chronic sorrow
- Spiritual distress
- Spiritual distress, Risk for spiritual distress
- Spiritual Well-Being, Readiness for enhanced spiritual well-being
- Stress, Stress overload

## **ERIKSON'S PSYCHOSOCIAL DEVELOPMENT THEORY**

Erikson's Psychosocial Development Theory proposes that individuals progress through several distinct stages of development throughout life. His theory suggests that these stages are universal to all individuals and must be successfully resolved in order to proceed to the next stage of psychosocial development. When an individual is unable to successfully pass through a particular stage of development, conflict will result and the person will not proceed to the next stage of development (regardless of chronological age) until the conflict is resolved. Nurses can assist individuals with unresolved conflict by providing empathetic, compassionate care, while guiding the individual towards achieving optimal psychosocial development.

### **Erikson's Eight Stages of Development**

<b>Stage</b>	<b>Age</b>	<b>Central Task</b>	<b>Indicators of Positive Resolution</b>	<b>Indicators of Negative Resolutions</b>
Infancy	Birth-18 mos	Trust versus Mistrust	Learning to trust others. Sense of trust in self	Mistrust, withdrawal, estrangement
Early Childhood	18 mos to 3 yrs.	Autonomy versus shame and doubt	Self-control without loss of self-esteem, Ability to cooperate and express self	Willfulness and defiance
Late childhood	3-5 yrs	Initiative versus Guilt	Learning the degree to which assertiveness and purpose influence the environment. Beginning ability to evaluate one's own behavior	Lack of self-confidence. Pessimism fear of wrongdoing. Over control and over restriction of own activity
School Age	6-11 yrs.	Industry versus Inferiority	Beginning to create, develop, and manipulate. Developing sense of competence and perseverance.	Loss of hope, sense of being mediocre, Withdrawal from school and peers
Adolescence	12-18 yrs	Identity versus Role Confusion	Coherent sense of self. Plans to actualize one's abilities.	Confusion, Indecisiveness
Young Adulthood	19-39 yrs	Intimacy versus Isolation	Intimate relationships with another person. Commitment to work and Relationships.	Interpersonal relationships. Avoidance of relationship career or life-style commitments
Adulthood	40-64 yrs	Generativity versus stagnation	Creativity, productivity, concern for others.	Self-indulgence, self-concern, lack of interests and commitments
Maturity	65+ yrs	Integrity versus despair	Acceptance of worth and uniqueness of one's own life. Acceptance of death	Sense of loss, contempt for others

## **KOLB'S EXPERIENTIAL LEARNING THEORY**

Kolb's Experiential Learning Theory explores how students understand and process information through experiences geared towards different learning styles. Learning progresses through stages supported by activities that allow for concrete experience, reflective observation, abstract conceptualization, and active experimentation. Application and integration of Kolb's theory can assist the learner in developing problem-solving and critical thinking abilities.

## **BLOOM'S TAXONOMY AND THEORY OF MASTERY LEARNING**

Bloom's Theory of Mastery Learning refers to using a variety of teaching methods to help students succeed, along with regular feedback, specific remediation strategies, and enrichment activities. This theory was developed in order to provide a framework for curriculum and promote thinking that begins with the simplest cognitive processes (knowledge) and progresses to the most complex processes (evaluation). In addition, three domains of learning activities were identified as cognitive, affective, and psychomotor and are essential skills for learning acquisition.

### **Action Words for Revised Bloom's Taxonomy**

<b>Remembering (Knowledge)</b>	<b>Understanding (Comprehension)</b>	<b>Applying (Application)</b>	<b>Analyzing (Analysis)</b>	<b>Evaluating (Synthesis)</b>	<b>Creating (Evaluation)</b>
Copy	Ask	Act	Analyze	Appraise	Adapt
Define	Associate	Administer	Appraise	Argue	Anticipate
Describe	Categorize	Articulate	Attribute	Assess	Arrange
Discover	Cite	Change	Calculate	Check	Assemble
Duplicate	Clarify	Chart	Categorize	Choose	Collaborate
Enumerate	Classify	Choose	Classify	Compare	Collect
Examine	Compare	Complete	Compare	Conclude	Combine
Identify	Convert	Compute	Conclude	Consider	Compile
Label	Describe	Demonstrate	Connect	Convince	Construct
List	Differentiate	Determine	Contrast	Coordinate	Design
Listen	Discover	Develop	Correlate	Criticize	Develop
Locate	Discuss	Employ	Criticize	Critique	Devise
Match	Distinguish	Establish	Deduce	Debate	Facilitate
Memorize	Estimate	Examine	Devise	Decide	Formulate
Name	Explain	Execute	Diagram	Defend	Generalize
Observe	Generalize	Implement	Differentiate	Detect	Generate
Omit	Give examples	Interpret	Distinguish	Discriminate	Hypothesize
Quote	Group	Interview	Divide	Evaluate	Infer
Recall	Identify	Judge	Estimate	Find errors	Intervene
Recognize	Indicate	List	Explain	Grade	Justify
Record	Match	Manipulate	Focus	Judge	Manage
Repeat	Observe	Modify	Illustrate	Measure	Modify
Reproduce	Paraphrase	Operate	Integrate	Monitor	Negotiate
Remember	Predict	Practice	Order	Order	Plan
Retrieve	Represent	Prepare	Organize	Persuade	Prepare
Select	Research	Produce	Outline	Predict	Produce
State	Restate	Record	Plan	Rank	Propose
Tabulate	Review	Relate	Prioritize	Rate	Reorganize
Tell	Rewrite	Report	Question	Recommend	Revise
Visualize	Summarize	Show	Select	Summarize	Simulate
	Translate	Teach	Separate	Support	Solve
	Understand	Transfer	Structure	Test	Speculate
		Use	Survey	Weigh	Substitute
		Write	Test		Validate

**Quinsigamond Community College  
Associate Degree Nursing Program**

**PROGRAM OUTCOMES**

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

**STUDENT LEARNING OUTCOMES**

At the completion of the program, the graduate will:

1. Use the nursing process and other theoretical concepts in the comprehensive planning and delivery of nursing care to patients\* throughout the life cycle.
2. Collaborate to effectively communicate with patients and inter-professional teams verbally, in writing, and electronically to achieve quality patient care outcomes.
3. Assume the role of the nurse in ways that reflect integrity, responsibility, ethical practice and an evolving identity as a professional nurse committed to evidence-based practice, caring, patient advocacy, and safe quality care for diverse patients in various settings.
4. Make judgments in nursing practice, based on evidence, that integrate nursing science in the provision of safe, quality care and promote the health of patients.
5. Employ relationship-centered interventions that are caring, compassionate, nurturing, protective, therapeutic and respectful of human differences.
6. Manage patient care through planning, organizing, directing and delegating with an emphasis on system effectiveness to provide quality health care and a safe environment for patients and workers.
7. Advocate for patients and oneself to retain or develop new pathways which encompass one's uniqueness, dignity, diversity, and freedom toward a holistic well-being.
8. Participate in a spirit of inquiry to help promote and maintain health and reduce risks for patients by challenging the status quo, questioning underlying assumptions, and offering new insights to improve quality of care.

*\*Patients (clients) are defined as the individual, family or group, including significant others and population.*

Revised and Approved 9/18, Reviewed 2021, 2023

**NURSE EDUCATION ASSOCIATE in SCIENCE (NUR and NUE)**  
**CURRICULUM PRIOR TO SEPTEMBER 2023**  
**SUMMARY OF COURSE HOURS IN TERMS**

<u>Course</u>	<u>Semester 1</u>	<u>Class</u>	<u>Laboratory</u>	<u>Simulation/Clinical</u>	<u>Total</u>
BIO 111 Anatomy & Physiology I	4 cr	45	45	0	90
ENG 101 English Composition & Literature I	3 cr	45	0	0	45
Total Hours in Term		90	45	0	135

<u>Course</u>	<u>Semester 2</u>				
BIO 112 Anatomy & Physiology II	4 cr	45	45	0	90
PSY 101 Introduction to Psychology	3 cr	45	0	0	45
NUR 103 Current Concepts in Nursing and Health Care I	1 cr	15	0	0	15
NUR 104 Fundamentals of Nursing	7 cr	60	30	105	195
Total Hours in Term		165	75	105	345

<u>Course</u>	<u>Semester 3</u>				
PSY 121 Survey of Life Span Development	3 cr	45	0	0	45
BIO 232 Medical Microbiology	4 cr	45	45	0	90
NUR 105 Medical Surgical Nursing I/ Maternal Newborn	8 cr	60	24	156	240
Total Hours in Term		150	69	156	375

<u>Course</u>	<u>Semester 4</u>				
ENG 102 English Composition & Literature II	3 cr	45	0	0	45
HST History Elective	3 cr	45	0	0	45
SOC 101 Introduction to Sociology or SOC 111 Social Problems & Change	3 cr	45	0	0	45
NUR 201 Medical Surgical Nursing II/ Pediatric	10 cr	75	0	225	300
Total Hours in Term		210	0	225	435

<u>Course</u>	<u>Semester 5</u>				
HUM Humanities Elective	3 cr	45	0	0	45
NUR 203 Current Concepts in Nursing And Health Care II	2 cr	30	0	0	30
NUR 202 Adv. Medical Surgical Nursing III/Mental Health	10 cr	75	0	225	300
Total Hours in Term		150	0	225	375

**NURSE EDUCATION ASSOCIATE in SCIENCE DAY (NUR) and EVENING (NUE)**  
**CURRICULUM *EFFECTIVE SEPTEMBER 2023***  
**SUMMARY OF COURSE HOURS IN TERMS**

<u>Course</u>	<u>Semester 1</u>	<u>Class</u>	<u>Laboratory</u>	<u>Simulation/Clinical</u>	<u>Total</u>
BIO 111 Anatomy & Physiology I 4 cr		45	45	0	90
ENG 101 English Composition & Literature I 3 cr		45	0	0	45
Total Hours in Term		90	45	0	135

<u>Course</u>	<u>Semester 2</u>				
BIO 112 Anatomy & Physiology II 4 cr		45	45	0	90
PSY 101 Introduction to Psychology 3 cr		45	0	0	45
NUR 106 Introduction to Nursing Concepts & Health Care 1 cr		15	0	0	15
NUR 107 Fundamentals of Nursing 8 cr		60	84	0/96	240
Total Hours in Term		165	129	96	390

<u>Course</u>	<u>Semester 3</u>				
PSY 121 Survey of Life Span Development 3 cr		45	0	0	45
BIO 232 Medical Microbiology 4 cr		45	45	0	90
NUR 108 Medical Surgical Nursing I/Maternal Newborn 9 cr		75	24	18/138	255
Total Hours in Term		165	69	156	390

<u>Course</u>	<u>Semester 4</u>				
ENG 102 English Composition & Literature II 3 cr		45	0	0	45
HST History Elective 3 cr		45	0	0	45
SOC 101 Introduction to Sociology or SOC 111 Social Problems & Change 3 cr		45	0	0	45
NUR 204 Medical Surgical Nursing II/ Pediatric 9 cr		75	12	24/144	255
Total Hours in Term		210	12	168	390

<u>Course</u>	<u>Semester 5</u>				
HUM Humanities Elective 3 cr		45	0	0	45
NUR 205 Advanced Medical Surgical Nursing III/Mental Health 9 cr		75	12	24/144	255
NUR 206 Advanced Nursing Concepts & Transition to Practice 2 cr		30	0	0	30
Total Hours in Term		150	12	168	330

**NURSE EDUCATION ASSOCIATE in SCIENCE ADVANCED PLACEMENT LPN (NUL)**  
**CURRICULUM *EFFECTIVE SEPTEMBER 2023***  
**SUMMARY OF COURSE HOURS IN TERMS**

<u>Course</u>	<u>Semester 1</u>	<u>Class</u>	<u>Laboratory</u>	<u>Simulation/Clinical</u>	<u>Total</u>
BIO 111 Anatomy & Physiology I 4 cr		45	45	0	90
ENG 101 English Composition & Literature I 3 cr		45	0	0	45
Total Hours in Term		90	45	0	135
<u>Course</u>	<u>Semester 2</u>				
BIO 112 Anatomy & Physiology II 4 cr		45	45	0	90
PSY 101 Introduction to Psychology 3 cr		45	0	0	45
Total Hours in Term		90	45		135
<u>Course</u>	<u>Semester 3 (FALL)</u>				
NUR 101 Advanced Placement Nursing I (Oct-Dec) 1 cr.		7.5	22.5	0	30
NUR 888 Upon successful completion of NUR 101 (with a grade of C+ or higher) and current License as a Practical Nurse, eight credits credentialed.					
Total Hours in Term		7.5	22.5	0	30
<u>Course</u>	<u>Semester 4 (SPRING)</u>				
PSY 121 Survey of Life Span Development 3 cr		45	0	0	45
BIO 232 Medical Microbiology 4 cr		45	45	0	90
NUR 108 Medical Surgical Nursing I/Maternal Newborn 9 cr		75	24	18/138	255
Total Hours in Term		165	69	156	390
<u>Course</u>	<u>Semester 5 (SUMMER 1)</u>				
ENG 102 English Composition & Literature II 3 cr		45	0	0	45
HST History Elective 3 cr		45	0	0	45
SOC 101 Introduction to Sociology <b>or</b> SOC 111 Social Problems & Change 3 cr		45	0	0	45
NUR 204 Medical Surgical Nursing II/ Pediatric 9 cr		75	12	24/144	255
Total Hours in Term		210	12	168	390
<u>Course</u>	<u>Semester 6 (FALL)</u>				
HUM Humanities Elective 3 cr		45	0	0	45
NUR 205 Advanced Medical Surgical Nursing III/Mental Health 9 cr		75	12	24/144	255
NUR 206 Advanced Nursing Concepts & Transition to Practice 2 cr		30	0	0	30
Total Hours in Term		150	12	168	330



**NURSE EDUCATION ASSOCIATE in SCIENCE ADVANCED PLACEMENT PARAMEDIC  
(NUP) CURRICULUM *EFFECTIVE SEPTEMBER 2023*  
SUMMARY OF COURSE HOURS IN TERMS**

<u>Course</u>	<u>Semester 1</u>	<u>Class</u>	<u>Laboratory</u>	<u>Simulation/Clinical</u>	<u>Total</u>
BIO 111 Anatomy & Physiology I 4 cr		45	45	0	90
ENG 101 English Composition & Literature I 3 cr		45	0	0	45
Total Hours in Term		90	45	0	135
<u>Course</u>	<u>Semester 2</u>				
BIO 112 Anatomy & Physiology II 4 cr		45	45	0	90
PSY 101 Introduction to Psychology 3 cr		45	0	0	45
Total Hours in Term		90	45		135
<u>Course</u>	<u>Semester 3 (FALL)</u>				
NUR 100 Paramedic to AD Bridge (Sept-Oct) 1cr		8	10	12	30
NUR 101 Advanced Placement Nursing I (Oct-Dec) 1 cr		7.5	22.5	0	30
NUR 888 Upon successful completion of NUR 100 and NUR 101 (with grade of C+ or higher) and successful completion of state or national Paramedic exam, seven credits credentialed					
Total Hours in Term		15.5	32.5	12	60
<u>Course</u>	<u>Semester 4 (SPRING)</u>				
PSY 121 Survey of Life Span Development 3 cr		45	0	0	45
BIO 232 Medical Microbiology 4 cr		45	45	0	90
NUR 108 Medical Surgical Nursing I/Maternal Newborn 9 cr		75	24	18/138	255
Total Hours in Term		165	69	156	390
<u>Course</u>	<u>Semester 5 (SUMMER 1)</u>				
ENG 102 English Composition & Literature II 3 cr		45	0	0	45
HST History Elective 3 cr		45	0	0	45
SOC 101 Introduction to Sociology <b>or</b> SOC 111 Social Problems & Change 3 cr		45	0	0	45
NUR 204 Medical Surgical Nursing II/ Pediatric 9 cr		75	12	24/144	255
Total Hours in Term		210	12	168	390
<u>Course</u>	<u>Semester 6 (fall)</u>				
HUM Humanities Elective 3 cr		45	0	0	45
NUR 205 Advanced Medical Surgical Nursing III/Mental Health 9 cr		75	12	24/144	255
NUR 206 Advanced Nursing Concepts & Transition to Practice 2 cr		30	0	0	30
Total Hours in Term		150	12	168	330

# ***MASSACHUSETTS BOARD OF REGISTRATION IN NURSING (MABORN) REQUIRED POLICIES***

## **ADMISSION POLICY**

See the QCC College Catalog <https://www.qcc.edu/catalog> and the program website for the admission process and program admission requirements.

Expedited admission is available to students who successfully complete a health certificate program at QCC or apply to QCC from a pipeline institution. The student must first apply to and qualify for the program with the admissions office. Once qualified, the student can schedule an appointment with the Health Careers Academic Coordinator to discuss qualification for expedited admission. The deadline to request expedited admission is April 15<sup>th</sup> for fall and November 15<sup>th</sup> for spring semester. Later requests will be considered based on space availability and clinical site requirements. Priority acceptance is given to students who have completed all other courses required for the program and QCC health program graduates who are currently certified/licensed.

## **ACADEMIC AND PROFESSIONAL INTEGRITY POLICY**

The faculty of the Nurse Education Program promote the holistic development of the prospective nurse, including ways in which personal values influence the development of professional values. In keeping with the American Nurses' Association (ANA) *Code of Ethics for Nurses* and MA Board of Registration in Nursing; honesty and integrity is expected of all students. The Nurse Education Program abides by and adheres to the *Code of Ethics for Nurses*, as it relates to the professional conduct of nurses. The website for the Nursing Code of Ethics can be viewed here: <https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/code-of-ethics-for-nurses/>

In clinical practice areas, the nursing student is expected to act in ways which safeguard the patient and the public at all times. As described in the Quinsigamond Community College Student Handbook, academic dishonesty includes "cheating, plagiarism, or knowingly furnishing false information". Plagiarism is the representation of another's work as one's own. Students found in violation are subject to the QCC Student Code of Conduct Policy <https://www.qcc.edu/student-handbook/student-code-conduct>.

### **Plagiarism/False Information/Cheating**

Plagiarism means taking someone else's ideas or words and presenting them as one's own. The offense can take many forms including cheating on a test, passing in a paper taken from the internet or from another student, using artificial intelligence, or failing to properly use and credit sources in an essay. Sometimes the issue is subtle, involving getting too much help on an assignment from someone else. In every instance, plagiarism means cheating both oneself and the owner of the source. Since the cheating sabotages a student's learning experience, consequences range from no credit for the assignment to failure for the course and possible expulsion from the college. Any student considering plagiarism should recognize the consequences and consider alternatives. Students uncertain about what constitutes plagiarism may request help from faculty or from appropriate college services.

Some course assignments may be submitted to Turnitin, an online program that tracks student papers for similarity with internet, published sources, and other student papers in the service's database, in addition to probability that artificial intelligence was used in the writing of the paper. The similarity and artificial

intelligence reports show if source material was copied without proper citation and/or if artificial intelligence (AI), such as ChatGPT, was used in the writing of the assignment. Use of online resources to improve or correct the wording of papers, such as Grammarly, may result in a higher AI score and can adversely affect a student's grade. Use of spellcheck and minor word change suggestions are acceptable and will not affect AI score.

Examples of policy violation: failing to cite the source of information, submitting a paper written by another person, submitting a paper used in a previous semester, using artificial intelligence such as ChatGPT to generate answers to discussion boards or write a paper, copying or sharing answers to a test or case study, reporting that you completed a task or assignment that you did not complete, etc.

Consequences for plagiarism and/or providing false information and cheating, including use of artificial intelligence to complete course assignments without faculty approval, will result in college disciplinary action including receiving a zero for the assignment, course or clinical failure, program warning, and/or dismissal from the program. See the QCC Code of Conduct Policy.

### **Sharing and Copyright Infringement**

Any handouts, faculty developed educational materials, or postings related to course content is the intellectual property of QCC faculty and cannot be shared by any means to other students or outside entities without written faculty permission. In addition, the posting/sharing of proprietary content from book publishers, testing companies, and other sources without authorization is considered a violation of academic integrity and a behavior inconsistent with the nursing profession.

Examples of policy violation: posting a faculty developed PowerPoint or handout to a website such as CourseHero, sharing Kaplan questions/content with a friend or website such as Quizlet, etc.

Consequences for sharing and copyright infringement include receiving a zero for the assignment, course or clinical failure, program warning, and/or dismissal from the program. In addition, posting/sharing of propriety content is subject to the policies of the owner of the content.

## **ADVANCED PLACEMENT POLICY**

Advanced Placement occurs in the NUL and NUP program options. Advanced Placement occurs when students complete NUR100 (for Paramedics) and/or the NUR101 (for LPNs and Paramedics). Students who complete the one credit course(s) successfully with a C+ grade or better are granted advanced placement into the NUR108 course. This is designated on the college transcript as NUR888 for the appropriate number of credits.

## **ATTENDANCE POLICY**

### **Classroom Attendance**

Students are expected to attend all classroom activities. Refer to the course syllabi.

### **Clinical /Lab/Simulation Attendance**

- To enable the student to achieve a competent skills level in clinical nursing practice, a standard number of hours of instruction is required. Therefore, each student is expected to be present and punctual for all clinical/lab/simulation experiences.
- Based on patient and student safety needs, students are not allowed to work the night shift (11pm-7am) prior to scheduled day clinical/lab/simulation.

- Students are responsible for transportation to/from the clinical sites as well as any parking fees.
- Notification: A student must notify the clinical/lab/simulation faculty of tardiness or absence via phone, text, or email *prior to the start* of a clinical/lab/simulation experience.
- Absence from clinical/lab/simulation:
  - Failure to notify the clinical faculty of an absence *at least 30 minutes in advance* of the clinical/lab/simulation experience will result in a written warning for failure to provide proper notification (no call/no show). Second occurrence will result in clinical failure.
  - *Unexcused* absence consequences:
    - 1<sup>st</sup> absence: conference summary
    - 2<sup>nd</sup> absence: clinical warning
    - 3<sup>rd</sup> absence: clinical failure
  - *Excused* absence: an absence may be excused for the circumstances below if the student submits the proper notification and documentation to the Program Coordinator (and other QCC offices if indicated). The student is required to make up the missed time. If the student is going to miss three or more clinical/simulation/lab days then the student will meet with the Program Coordinator to determine if make-up is feasible, course withdrawal is warranted, or an incomplete/repeat (I/R) grade is appropriate:
    - Title IX: communicate with Program Coordinator and Title IX Coordinator. Provide documentation from health care provider to participate in clinical related to pregnancy/birth – see *Change in Health Status Policy* and *Title IX policy*.
    - Military deployment: provide copy of orders to Program Coordinator and QCC Veteran Affairs Office
    - Bereavement: submit statement including name of the deceased, date of services, and relationship to the student
    - Mandated court appearance: provide copy of summons or court document
    - Religious observance: submit statement including the date of the religious observance at least two weeks prior to the planned missed day
- Tardiness:
  - Students must notify faculty of tardiness *before the start time* of the clinical/lab/simulation.
  - If a student is going to be *more than 30 minutes late*, regardless of notification, they should not attend and are subject to the absence section of the attendance policy.
  - Consequences: The following applies regardless of notification if a student arrives *late but within 30 minutes* of the start time:
    - 1<sup>st</sup> tardiness: verbal warning
    - 2<sup>nd</sup> tardiness: conference summary
    - 3<sup>rd</sup> tardiness: clinical warning
    - 4<sup>th</sup> tardiness: clinical failure due to inability to meet clinical objectives
- Course faculty will track all tardiness and absences based on clinical faculty reports. Course faculty will work with the clinical faculty to determine make up days/times for each student.
- All documents (conference summary, clinical warning, clinical failure) are copied or cc'd to the Program Coordinator and given to the Program Assistant/Clerk for filing in the student record.

**Make-Up: All missed clinical, lab, and simulation experiences will be made up**

- The format of the missed clinical, lab, or simulation includes virtual or face-to-face lab, simulation, and/or on-site clinical at the clinical site and will be comparable to the time missed.
- Make-ups will occur during the semester (if feasible) or after the final course exam if needed.
  - If make up is required after the final course exam the student must be in good academic standing (have a passing grade). If the student is not in good academic standing the

missed clinical/lab/simulation will not be made up since it is not possible for the student to pass the course.

- The student in good academic standing will receive an 'Incomplete' grade after the final course exam until make-up is completed per college policy.

**Group absence make-up:**

- One written or virtual makeup is allowed for each clinical rotation due to weather related cancellation or group absence. Group absence occurs for reasons including, but not limited to, faculty illness or clinical site cancellation, and is not related to individual student absences.
  - If a course has more than one clinical rotation (medical surgical plus a specialty rotation), one written or virtual assignment is allowed for each rotation.
  - In courses without a specialty, only one written or virtual makeup is allowed.
  - The make-up assignment will be determined by the course faculty and submitted to the clinical faculty within one week of the missed clinical. The clinical faculty is responsible for collecting the assignment and providing feedback to each student.
- If additional days are missed due to weather related cancellation or group absence, in-person makeup is required.

**School Cancellation, Delays, and Clinical Snow Day Policy. Refer to the Quinsigamond Community College Student Handbook and the QCC Inclement Weather Information:**

<https://www.qcc.edu/alerts/inclement-weather>

Official school closings will be announced by the college via radio, television, mobile text alert, QCC website, or by calling QCC number 508-854-4545. Without an official school announcement, the faculty will make an internal decision. Students are responsible for making their own decisions according to local weather conditions.

- The student is responsible for notifying faculty if unable to travel because of inclement weather conditions.
- In the event of a college delay, the clinical day will commence when the college opens *if at least half a shift is possible*.
- If the instructor cancels the clinical day, they will notify the clinical agency and contact the students responsible for initiating the telephone chain of communication.
  - The instructor must also notify the course faculty and Clinical Coordinator in the event of clinical cancellation.
- See Make-Up: Group absence make-up section of the Attendance Policy.

**COURSE EXEMPTION POLICY**

Course exemption only occurs when students either request to transfer to QCC (see Transfer Policy) or when applying to the NUL or NUP program options. Course exemption only occurs for NUR106 Introduction to Nursing Concepts and Health Care (one credit) and NUR107 Fundamentals of Nursing (8 credits) courses – see Advanced Placement Policy.

Course substitution occurs upon approval of a Course Petition request submitted by the student to the Registrar's Office.

## **EDUCATIONAL MOBILITY POLICY**

Students are encouraged to pursue advanced education upon completion of program of study at QCC. The student should contact the program of their choice for specific considerations. Most schools will expect that pre-requisite courses are completed prior to admission to nursing courses.

Information relative to articulation agreements can be obtained by visiting the Transfer Office at 508-854-4404 or <https://www.qcc.edu/services/transfer/transfer-agreements>

## **GOOD MORAL CHARACTER**

The Massachusetts Board of Registration in Nursing has a Good Moral Character (GMC) policy. In the Commonwealth, Massachusetts Laws (MGL) Chapter 13, section 13, 14, 14a, 15 and 15D and Chapter 112, section 74 through 81 C authorize the Board of Registration in Nursing to regulate nursing practice and education. Pursuant to these laws, the Mass. Board of Registration in Nursing issues licenses to qualified individuals. Misdemeanor and felony convictions, and discipline by a licensure/certification body are evaluated by the Massachusetts Board of Registration in Nursing to determine licensure applicant compliance with the “good moral character” licensure requirement established in the Massachusetts General Laws, Chapter 112, section 74 and 74A. Nursing graduates are evaluated for GMC in accordance with MA BORN regulations. <https://www.mass.gov/info-details/good-moral-character-requirements-for-nursing-licensure>

The Board has the authority to deny or revoke nursing licensure for an individual who has been found guilty of committing a felony or an act that does not conform to the accepted standards of the nursing profession. A student who wishes/needs to discuss this is encouraged make a private appointment with the Program Administrator at any point in the program.

## **GRADUATION POLICY AND LICENSURE**

### **Graduation Requirements/Program Completion**

Students must satisfy all course and program requirements including regulations related to attendance and conduct, in order to be eligible for graduation. In addition, students must complete an *Intent to Graduate* form with the Registrar’s Office.

### **Licensure Eligibility & Process**

**Eligibility** - All students must have a Certificate of Graduation signed by the Program Administrator and validated through the QCC Registrar’s Office in order to apply for licensure. In addition, a copy of the student’s transcript is provided with the Certificate of Graduation.

**Review Course** - Completion of a NCLEX-RN review course and coursework is required prior to licensure applications being forwarded for processing. See Program Coordinator or Program Administrator for further information.

**Fees** - There are fees associated with licensure including application, licensure, passport photo, etc. These fees currently total approximately \$450 and are the responsibility of the student (prices may increase).

**Good Moral Character** - A graduating student may be denied the opportunity to take the NCLEX exam based on information obtained through the CORI/SORI report completed with the MA Board of Registration in Nursing.

**Child Protective Services** – A graduating student may be denied the opportunity to take the NCLEX exam based on information obtained through a Child Protective Services report completed with the MA Board of Registration in Nursing.

**Registering to take the NCLEX-RN exam** – A social security number is required to apply for licensure. Instructions for registering for the NCLEX-RN exam will be provided by the Program Coordinator or Program Administrator prior to graduation. Students in the last semester of the program should visit the National Council of State Boards of Nursing (NCSBN) website for the Candidate Bulletin, NCLEX-RN Test Plan, and other useful information: <https://www.ncsbn.org/nclex.htm>

**Accommodation Requests** - Testing accommodations for qualified candidates is provided only with the authorization of the Massachusetts Board of Registration in Nursing (MABORN).

Student who wish to request testing accommodations should:

- Request information from the MABORN concerning its requirements for receiving testing accommodations. This should be done before submitting your NCLEX registration to Pearson VUE.
- Make a written request for accommodations to the MABORN.
- Send their request to the MABORN as early as possible so that, if approved, the testing accommodations can be made in a timely manner.
- Do not schedule an appointment to take the NCLEX until you have received written confirmation of your accommodations and your Authorization to Test (ATT) email listing the granted accommodations.
- Candidates approved for testing with accommodations must schedule their testing appointment by calling Pearson VUE NCLEX Candidate Services at the telephone number listed on their ATT and asking for the NCLEX Accommodations Coordinator.
- Candidates with accommodations cannot cancel their accommodations at the time of their appointment.
- Candidates who seek to test with accommodations cannot schedule their appointment through the NCLEX Candidate website.

### **INCIVILITY POLICY**

The QCC nursing program aims to create an ethical environment and culture of civility, treating all with dignity and respect. Incivility includes acts or behaviors such as: Repeated speech or conduct directed at another person with the intent of causing physical or emotional harm (including intimidation), infringing upon educational rights, disrupting the education process or orderly operations of the program, and/or creating an objectively hostile environment. Anyone who commits acts or displays behaviors defined as incivility will be subject to the college code of conduct policy and disciplinary action including clinical failure, program warning, and/or dismissal from the program.

## **MILITARY POLICY: TRANSFER OR ADVANCED PLACEMENT OF MILITARY EDUCATION, TRAINING OR SERVICE FOR A MILITARY HEALTH CARE OCCUPATION**

Veterans are welcome and encouraged to attend the Nurse Education Program. Students who are veterans and/or eligible for veteran's benefits are encouraged to contact the QCC Veteran's Affairs Office located in 125A (Administration Building), email [veteranaffairs@qcc.mass.edu](mailto:veteranaffairs@qcc.mass.edu) or call 508-854-4290.

QCC does not provide training specific to the military, however the Nurse Education Program can prepare graduates for a nursing career in the military upon graduation and licensure.

Applicants who have military health care education, training, or service may be eligible for credit for prior learning or transfer of previously completed general education course credit.

Due to the variety of opportunities for military health care occupations; education, training or service can vary. Therefore, each applicant will be considered on a case-by-case basis. Materials that may be required to determine credit for prior learning or transfer include, but may not be limited to: transcripts; course descriptions; skills checklists; and/or evaluations. Credit for Prior Learning provides opportunities to earn credit for learning acquired through life experiences: including work, the military and non-collegiate training programs. Refer to the Career Services regarding Credit for Prior Learning: [https://theq.qcc.edu/ICS/Student\\_Services/Credit\\_for\\_Prior\\_Learning\\_\(CPL\).jnz](https://theq.qcc.edu/ICS/Student_Services/Credit_for_Prior_Learning_(CPL).jnz)

## **PROGRAM WARNING POLICY**

Nursing students are expected to behave in an ethical, professional, safe, and collegial manner, and adhere to published policies while in the program. If a student exhibits behavior in violation of these expectations, faculty will formally address the behavior with the student by completing a program warning. Thereafter, faculty will collaborate with the Program Coordinator and/or Program Administrator to determine subsequent actions. This may include completion of a QCC Student Incident Report such as in cases of academic dishonesty, plagiarism, copyright infringement, sharing or posting of faculty or proprietary materials, social media violation, incivility, discrimination, and other student code of conduct violations.

The Program Warning remains active throughout the student's enrollment in the program. Two or more program warnings will be brought to the Associate Degree Faculty Organization (ADFO) for review and decision. Outcome options may include continuation in the program, clinical failure, counselled to withdraw, and/or immediate dismissal through Administrative Withdrawal by the Dean of the School of Healthcare (see Withdrawal Policy-Administrative).

## **PROGRESSION POLICY**

The curriculum of the Associate Degree Nursing Program is planned according to the faculty belief that:

- Learning shall reflect the accumulation of knowledge.
- Clinical performance must reflect consistent application of both fundamental and advancing theory and skills.

### **Retention/Progression in Program**

In order to progress to the next nursing course, the student must achieve a grade of "C+" (77%) or better in theory. The course grade is rounded at the end of the semester (for example 76.5% rounds up to 77%,



and 76.4% rounds down to 76%) and the student must achieve a passing evaluation of performance in lab/clinical/simulation practice (including math competency). Each nursing course must be completed in sequence in order to continue in the program. To continue in the next nursing course, the student must receive a grade of “C” (73%) or better in the *science courses*. All courses must be successfully completed according to the curriculum grid to progress to the next nursing course. Failure to successfully complete required courses, including pre and co-requisites, will result in dismissal from the program, and the student will need to reapply or request readmission – see Readmission Policy.

**A failure in Clinical Practice/Lab in any clinical rotation will constitute a failure (“F”) for the course and the student will not be allowed to continue in clinical practice.**

### **READMISSION POLICY**

Readmission includes students who left the program due to withdrawal (except as noted in the Withdrawal Policy), failure to progress due to not completing pre or co-requisites, or academic failure.

NUR100 and NUR101 Request for Readmission:

- Students requesting readmission to either of these courses must schedule an appointment with the Program Coordinator to complete the Request for Readmission form.
- Readmission requirements and documents must be completed by April 15 if readmission is requested for the fall semester.

NUR106 and/or NUR107 Request for Readmission:

- Students seeking readmission must complete an Application for Admission form with the Admissions Office at the West Boylston campus or online via the Q. The Admissions Office will review the student’s academic record to ensure the current admission requirements for the program are met, and if so, will mail a qualification letter to the student.
- Once the student receives the qualification letter from the Admissions Office, the student must contact the Program Coordinator to schedule an appointment to request readmission. Alternatively, the student can decide to remain on the waitlist and begin the program as a new student, rather than using the one-time Readmission policy.
- The student must bring the qualification letter to the meeting with the Program Coordinator in order to complete the Request for Readmission form.
- Readmission requirements and documents must be completed by April 15 if readmission is requested for September, and November 15 if readmission is requested for January of the following year.
- Students accepted for readmission must attend the program orientation prior to the start of the semester.
- Students who are denied readmission will remain on the wait list.

NUR108, NUR204, NUR202/205, and NUR203/206 Request for Readmission:

- Students requesting readmission to any of these courses must schedule an appointment with the Program Coordinator to complete the Request for Readmission form.
- Readmission requirements and documents must be completed as follows:
  - Day Program NUR108, NUR204, NUR202/205, and NUR203/206: by April 15<sup>th</sup> for priority consideration for fall semester; and by November 15<sup>th</sup> for priority consideration for spring semester. Late requests will be considered up to one week after the semester ends.

- Advanced Placement/Evening Program NUR108: by November 15; NUR204: by January 10; NUR205 and NUR206: by June 30.
- NUR202/205 and NUR203/206 requests for readmission are exempt from meeting the current admission criteria to qualify for readmission.

*General Information for All Students Requesting Readmission:*

- Students must request readmission within one year of withdrawal or failure. If the student does not apply for readmission within one year, the student is ineligible for readmission and can apply to the program as a new student. Any nursing courses taken more than one year prior must be repeated even if a passing grade was previously earned.
- Readmission is based on space availability. Students returning to the program after a qualified withdrawal receive priority if space is limited. When there are multiple eligible candidates for readmission, the following criteria will be used:
  1. Time away from the program
  2. Grade/status in last enrolled or completed nursing course
  3. QCC overall GPA
- The Nurse Education Readmission Committee (Program Coordinators and Nurse Administrator) will review all requests for readmission to determine ranking according to the criteria, if necessary due to space limitations.
- If not accepted, the student must repeat the process the following semester to be considered for readmission.
- If the student failed due to a clinical failure or policy violation, the Associate Degree Clinical Failure Committee will determine eligibility for readmission.
  - The committee will review the request for readmission, interview the applicant, and determine eligibility for readmission based on factors such as patient safety, professionalism, and code of conduct.
  - Readmission is not guaranteed. If readmission is denied, the applicant can reapply to the program as a new student with the admissions office, or the applicant may be denied readmission to any healthcare program (see *Denial of Admission/Readmission to Healthcare Programs* policy).
  - Clinical failure due to math or lab skills competency failure, and clinical failure due to the attendance policy do not require committee review for approval
- There is a **one-time readmission policy** for the Nurse Education Program.
- Readmission request consideration is based on current published policies.
- Refer to the QCC College Student Handbook ‘Academic’ section *Readmission for Health Programs* policy: <https://www.qcc.edu/information/current-students/student-handbook>

**Denial of Admission/Readmission to Healthcare Programs**

Students who have been dismissed or administratively withdrawn from a program within the School of Healthcare at Quinsigamond Community College for reasons of “clinically unsafe practice/behavior” or who violate the College’s Student Code of Conduct or Policy on Affirmative Action are not eligible for admission/readmission to any Healthcare program.

**SOCIAL MEDIA POLICY**

Social networking/email/texting regarding patients, faculty/staff, clinical affiliates, and student nurse peers is prohibited and will result in disciplinary action, up to and including program or clinical warning, clinical failure and/or administrative withdrawal.

*These behaviors are grounds for disciplinary action:* Posting, sharing, emailing, texting, etc. of:

- Images or disparaging remarks about other students, faculty, staff, or clinical affiliates, even if identifying information appears to have been removed.
- Student or faculty images without permission of all involved parties.
- Any content or images that could in any way compromise the safety, emotional well-being, reputation and/or professional image of the Nursing Department, staff, faculty or students.
- Disrespectful, inappropriate, lewd, offensive, violent, potentially threatening, derogatory or discriminatory content while identifying oneself as a nursing student.

### **Tips for Using Social Media**

Social networks and the internet provide unparalleled opportunities for rapid knowledge exchange and dissemination among many people, but this exchange does not come without risk. Nurses and nursing students have an obligation to understand the nature, benefits, and consequences of participating in social networking of all types. Online content and behavior have the potential to enhance or undermine not only the individual nurse's career, but also the nursing profession.

### **Social Media Principles**

- *Be aware of your audience.* Make sure that the content of your posts is appropriate for the people who will be seeing it and may share it with others. Nurses should understand that patients, colleagues, institutions, and employers may view postings.
- *Maintain your professionalism.* Avoid posting anything that could be considered unprofessional or inappropriate, such as photos or videos of patients. Nurses must not share any individually identifiable patient information. Nurses must observe ethically prescribed professional patient — nurse boundaries.
- *Know your social media policy.* Familiarize yourself with the social media policy and adhere to it across all the social media platforms. Participate in developing institutional policies governing online conduct.
- *Secure your social media profiles.* Review and set-up the respective privacy settings for the social media platforms that you choose to use. Seek to separate personal and professional information online.
- *Share credible information only.* The dissemination of credible and reliable information protects the health and well-being of the public.
- *Engage with respectful content.* Do not share content that is harmful, disparaging, racist, homophobic, or derogatory. Nurses should bring content that could harm a patient's privacy, rights, or welfare to the attention of appropriate authorities.

American Nurses Association (n.d.). *Social media principles*. <https://www.nursingworld.org/social/>

### **Tips to Avoid Problems**

- Remember that standards of professionalism are the same online as in any other circumstance.
- Do not share or post information or photos gained through the nurse-patient relationship.
- Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.
- Do not make disparaging remarks about patients, employers or co-workers, even if they are not identified.
- Do not take photos or videos of patients on personal devices, including cell phones.
- Promptly report a breach of confidentiality or privacy.

## **STUDENT RIGHTS AND GRIEVANCES**

### **Participation in Governance of Program**

Each class elects two representatives (one representative and one alternate) who serve on the faculty organization. Students can self-nominate or be nominated by a peer for the student representative role, with a class majority vote determining the outcome if more than two students are nominated. Students will also elect representatives to serve on select committees as the need arises in a non-voting capacity. The faculty organization will ask for student recommendations regarding agenda items. The student representative will bring forward to faculty members issues and concerns related to the nurse education program. Course concerns need to be brought to each course faculty team. Refer to the current Quinsigamond Community College Student Handbook.

### **Request for Documents**

Students may request copies of the documents they require which are maintained by the nursing program, in writing to the Program Coordinator. Requests take approximately two weeks to process. Requests for documents maintained by other offices at the college should be directed to the relevant office. See Student Records Policy in this section.

### **Request for a Second Reader/Review**

A student can request a second reader/review for the evidence-based practice (EBP) paper if the student receives less than 77% or a zero on any section of the EBP grading rubric. The student can request the second review in writing within two weeks of receiving the grade. The Evidence Based Practice Hearing Committee (comprised of three nursing faculty) will review the student's paper to determine a grade according to the grading rubric. The assigned grade for the paper will be an average of the initial grade and the grade determined by committee and will be provided to the student within two weeks.

### **Student Records Policy**

It is the policy of Quinsigamond Community College to retain academic transcripts of the students and graduates in perpetuity. Student records are retained both on campus and in an off-campus storage facility. For details see the Records Directory section (in Academics) of the QCC Student Handbook. In addition to records maintained by college offices, student files are maintained in the Nursing Education Department. These files contain information related to clinical evaluation and academic performance contracts, as well as documents indicating receipt of Nursing Education policies. The student records maintenance schedules can be found in the Nurse Education Department Records Maintenance and Retirement Policy. Immunization and health records are maintained in the Castle Branch system.

### **Student Rights and Grievances Policy**

Student Rights can be found in the QCC Student Handbook 'Student Code of Conduct' section. If a student has a concern with regard to the Associate Degree Nursing Program, Faculty, examinations, policies or procedures, the following steps must be followed:

The student must document the concern or issue in writing to the appropriate personnel in the order listed below and request a meeting to discuss the concern. Meetings to discuss concerns will be scheduled as follows, and if not satisfied with the outcome the student can proceed to the next step:

1. Professor/Clinical/Simulation/Lab faculty
2. Course Nursing Team
3. Program Coordinator
4. Nurse Education Department Chair (Administrator)

If satisfaction is not met after discussion with the Nurse Education Department Chair (Administrator), the student may begin Level I of the Grievance Procedure as detailed in the QCC Student Handbook: <https://www.qcc.edu/student-handbook/college-policies-procedures>

### **TRANSFER POLICY**

Students interested in transferring from QCC can find more information on the Transfer Services page <https://www.qcc.edu/admissions/transfer>. See the Educational Mobility Policy.

Students interested in transferring to QCC nursing programs can find more information on the Admissions page <https://www.qcc.edu/admissions>. A student may seek a transfer of credit from another approved institution, provided that a passing grade has been earned in all previous nursing courses and the completed course work is comparable to the course(s) offered at QCC. Transfer credit will be considered for NUR106 and NUR107 only if the student has not been away from the program for more than one year and meets the current admission requirements of the QCC nursing program. Interested students should send official transcripts to the QCC Registrar's Office and apply with the Admissions Office to qualify for the nursing program. Once qualified, the student can request consideration for transfer of nursing course credit by submitting prior course syllabi, lab competency documentation, and other relevant documentation to the Program Coordinator. See the QCC College Catalog for additional information, transfer is not guaranteed.

Students who wish to request transfer from one QCC nursing program to another QCC nursing program must meet with the Program Coordinator of the most recently enrolled program to review the process. The student must meet the admission requirements of the prospective program. Transfer is not guaranteed.

### **WITHDRAWAL POLICY**

Students who wish to withdraw from the program must follow the college withdrawal procedure found in the QCC College Catalog. Students dismissed/withdrawn from the program per the progression policy must make an appointment to see the Program Coordinator to complete an exit interview and discuss plans for readmission, if applicable. Students who withdraw from the program, or any nursing courses within the program, may request readmission as specified in the Readmission Policy.

Certain student situations warranting separation from the Nurse Education program prior to course completion for reasons related to the US Department of Labor Family and Medical Leave Act, will not be processed as a readmission, but rather as a return to the program. The criteria include:

- The birth of a child or placement of a child for adoption or foster care to bond with the child
- To care for student's spouse, child, or parent who has a qualifying serious health condition as confirmed by health care provider
- Student's qualifying serious health condition as confirmed by health care provider that makes the student unable to perform requirements of the program
- For qualifying exigencies related to the foreign deployment of a military member who is the student's spouse, child or parent

In addition, these criteria also apply:

- Military deployment of the student
- Title IX
- Death of a significant person/immediate family member (i.e. parent, spouse/partner, or child)

- Community/state emergency
  - Within 4 weeks of declaration
  - If previously declared, within 4 weeks of the start of the semester

Documentation required to qualify for return rather than readmission: Within 30 days of withdrawal the student must submit relevant documentation such as a health care provider statement, court document, bereavement statement, or military orders to the Program Coordinator. The request for reentry must be submitted to the Program Coordinator within one (1) year of the date of separation from the program (*see Readmission Policy*).

**Please note: Withdrawing from one or more courses can impact course sequencing, pre-requisites, financial aid, and/or family medical insurance.**

### **Call to Active Military Duty**

Please refer to the Students Called to Active Military Duty policy in the QCC Student Handbook.

### **Administrative Withdrawal Policy**

The Dean of Healthcare can administratively withdraw a student from the program for reasons of “clinically unsafe practice/behavior”, violation of the College’s Student Code of Conduct or Policy on Affirmative Action, and/or failure to comply with program policies including health requirements, drug testing for clinical attendance, and CORI/SORI status. Additionally, if a student has failed the course (including math competency and/or clinical) before the final exam period, faculty can request administrative withdrawal of the student. Administrative withdrawal appears as ‘WA’ on the academic record. If administrative withdrawal is not requested or processed, the student will receive a failure (F) for the course.

# ***CLASSROOM POLICIES***

## **CELL PHONES AND ELECTRONIC DEVICES**

Use of cell phones and electronic devices in any mode are subject to faculty and clinical facility guidelines. Use of electronic devices during class must be restricted to class related matters only. Devices must be on silent mode; texting and/or email activity during class is not permitted.

## **CLASSROOM ETIQUETTE**

It is expected that all members of the class are respectful of each other and the learning environment. Students are expected to arrive on time. Seating is on a first come, first served basis and is not guaranteed. Certain seats may be reserved by faculty for students with approved accommodations.

Students are required to adhere to the Student Code of Conduct delineated in the QCC Student Handbook. <https://www.qcc.edu/information/current-students/student-handbook>

## **COURSE INFORMATION**

At the start of each nursing course, the following information will be reviewed with the students by faculty:

1. Criteria for course evaluation and grading policy
2. Course syllabus and day-by-day projection
3. Clinical performance evaluation tool
4. Academic Clinical Success Form
5. Nursing Student Handbook
6. Nursing Math Competency Testing Policy
7. Introduction to technological resources

## **COURSE EVALUATIONS AND SURVEYS**

At the completion of each course, students are required to evaluate the course, lab, and clinical (if applicable). In addition, students will be asked to complete online evaluations and surveys for the Nurse Education Program and/or the College. This is an opportunity for students to offer suggestions and recommendations for the continued growth and development of the nursing program. Students are asked to complete these evaluations and surveys in a timely manner.

## **DISRUPTIVE BEHAVIOR**

Refer to the Classroom Etiquette and Incivility policies and the Quinsigamond Community College Student Code of Conduct Policy <https://www.qcc.edu/information/current-students/student-handbook>

## **METHODS OF INSTRUCTION/TEACHING PROCEDURES**

Faculty will use a variety of methods of instruction including lecture, class discussion, critical thinking/judgment exercises, guest presentations, case studies, NCLEX-RN review assignments, textbook reading, journal, videos, written assignments, discussion board forum, group activities, student presentations, laboratory skill demonstration and practice, clinical conferences, clinical experiences, clinical simulation, and clinical seminars. Please refer to the course syllabus for assigned readings and learning activities for each topic/module/unit.

## **RELIGIOUS ACCOMMODATIONS**

Students who are requesting religious accommodations must notify the course faculty prior to the first two weeks of the start of classes of any potential scheduling conflicts. The faculty will make efforts to provide a reasonable accommodation of a student's sincerely-held religious belief.

## **REMOTE/ONLINE LEARNING AND TECHNOLOGY**

Faculty communicate with students via email, utilize an online learning platform (Blackboard) for announcements, course documents, tests, assignments, grades, etc., and assign learning activities utilizing web-based resources. There is currently one blended course in the AD nursing program, NUR203/206-F1. All students are required to meet the technology requirements of the program.

Remote/online learning and/or assessment may be required in the event of community emergency and other unanticipated situations. This includes testing using Blackboard, Respondus Lockdown Browser/Monitor, Zoom and/or other testing and proctoring tools.

In the event of a community emergency affecting face to face learning, remote/online learning and assessment of learning will be required for program and clinical orientation, class, lab, clinical, and/or simulation. Regardless of the method of learning, students are expected to be present and engaged. Remote/online learning sessions (including lecture, lab, and clinical) may be recorded by faculty for viewing by students in the course. Students may be required to be present on camera for lab/clinical/simulation. Faculty may request students to upload videos of themselves performing lab skills to demonstrate competency.

Students are responsible for self-testing the functionality of their computer, web cam, microphone, and internet connectivity a minimum of two days prior to remotely proctored exams, lab, or clinical. If the student anticipates or discovers a technology issue, they must notify the course faculty immediately.

### **Electronic Signatures**

An original student signature is preferred on documents, however there may be circumstances warranting an electronic signature or typed signature as confirmation of receipt. Verification of the student electronic or typed signature is confirmed if the document is sent using the student's QCC email and/or if submitted through Blackboard.



## **STANDARDIZED TESTING/KAPLAN**

**Comprehensive Assessment and Review Program:** This is a combination of e-books, on-line NCLEX-RN style tests, content outlines, webinars, case studies, and videos designed to help prepare students for the NCLEX-RN exam. This program helps with test taking skills and content mastery and is used throughout the nursing program and following graduation. Each semester students receive access resources related to the content learned in class. Each course will require students to complete specific standardized tests, which are included in the course grade. In addition, an NCLEX-RN review course, study plan, and testing resources are offered upon graduation. This resource is included in the student fees.

### **Kaplan Testing Requirements**

Students are required to complete Kaplan testing as part of the requirements for the nursing program. Kaplan provides focused review tests and integrated tests with comprehensive remediation resources to help students address any weaknesses in application of knowledge as they improve test taking and critical thinking skills.

- **Focused Review Tests:** Students must complete assigned Focused Review Tests with a score of 90% or above and document remediation to sit for the scheduled Kaplan Integrated exam(s). The student is responsible for submitting documentation of completion of the Focused Review Tests remediation to faculty by the designated deadline using the designated form. Confirmation of student testing and remediation are reviewed by faculty using the submitted forms and the Kaplan website.
- **Integrated (Proctored) Tests:** Students must complete assigned Integrated Tests each semester. A mastery score attainment at or above the national benchmark for each individual exam is recommended to be successful on the NCLEX-RN exam. Percentile ranking provides the student with additional information regarding their performance in comparison to other students nationally. Students must complete remediation and submit documentation to faculty prior to taking the course final exam. See course syllabus for remediation form. Confirmation of student testing and remediation are reviewed by faculty using the submitted forms and the Kaplan website.

## **STUDENT ACCESSIBILITY SERVICES**

Refer to the Quinsigamond Community College Student Accessibility Services website:

<https://www.qcc.edu/services/student-accessibility-services>

Students with documented disabilities who encounter any barrier in the course material may contact Student Accessibility Services to request an accommodation and begin the interactive process to determine effective and reasonable accommodation solutions while maintaining the course policies and learning outcomes. Students may request accommodations at any time before or during the semester, which begin upon receipt of an approved Accommodation Form (accommodations are not retroactive). Students approved for testing accommodations must notify course faculty by emailing a copy of the approved Accommodation Form no later than two weeks prior to the exam date that they will be testing with Student Accessibility Services. The student is responsible for informing Student Accessibility Services of upcoming exam dates and if the exam requires use of a computer. If a student has accommodations in place and decides

not to use the accommodations (i.e. decides to test in the classroom/with the class), the student must email the course faculty and Student Accessibility Services at least 24 hours before the start of the exam.

## **TESTING POLICY**

### **Guidelines for taking examinations**

1. Students are expected to be present and on time for all exams, including Kaplan and course exams. In the event of illness or an emergency, students must notify the faculty via phone, text, or email, before the start of the examination.
2. Student absence on a scheduled test day: There will be no loss of points the first time a student is absent for a scheduled exam. Any additional absences on a scheduled test day will result in a loss of 5 points for each test that requires a make-up.
  - a. The only exceptions to this policy are approved Title IX, military deployment, mandated court appearance, religious observance, and bereavement absence (see Program Coordinator for exception).
3. Tardiness is defined as any student **later than 5 minutes** from the start of the exam. Students who are tardy for exams will not be admitted into the testing room and will be considered absent. The student will need to reschedule the exam with faculty - see guideline #2 for loss of point criteria for absences.
4. Make up exams: In most cases, the make-up exam will be given on the next scheduled class day or within one week. The student must contact the faculty team to arrange a date and time for the make-up exam. Faculty reserve the right to change the exam questions and format for any makeup or re-take exam. The make-up test may be multiple choice, essay, oral, short answer, fill in the blank, etc. or a combination of formats.
5. In all test-taking settings, books, purses, backpacks, cell phones, hats, cups, bottles, and all electronic devices, including translators and smart watches, will not be allowed in the testing room and must be placed in a faculty-designated area and remain there during the exam.
6. All cell phones and electronic devices must be turned off and removed from the test taking area for the benefit of all students.
7. Students will be provided with an exam cover sheet with instructions for accessing the test. This sheet is also the student's scrap paper and must be handed to the proctor before leaving the testing room.
8. Students are not allowed dictionaries or personal calculators for tests. Calculators are available within some online testing programs, or alternatively faculty will provide a calculator to each student for testing purposes.
9. Students are allowed to use soft non-electronic ear plugs for testing in the classroom. These can be brought in by the student and are subject to inspection by the proctor.
10. Any behavior identified as cheating will be subject to immediate action (failure on exam) and dismissal from the program – see Academic Integrity policy.

### **Computerized testing through Blackboard**

1. Technology issues occur in all settings. We ask students to be flexible and understanding. If a technology issue arises during a test, students are to remain quiet and maintain the testing environment. Students need to follow instructions from the proctor until the issue is resolved or the test is rescheduled.
2. Students will only be allowed to access the password protected exam through lockdown browser from testing rooms at scheduled testing times.

3. Students will be recorded using Respondus Monitor, which is a software system that automatically records the student while taking the exam, flags any suspected violation, and provides faculty with brief video clips and screenshots if a suspected violation occurs.
4. If a student needs assistance, signal this to the test proctor with a raised hand.
5. Instructors/proctors have the right to assign seating for every test.
6. Students may have a pen or pencil at their desk. One sheet of paper at a time will be provided to the student. Students must put their names on all papers and submit to the proctor at the end of the exam.
7. The length of time for each test will be stated by the proctor. Stop time will be determined when the test begins.
8. Students are not allowed to access any other website while in the testing room.
9. Backtracking is not allowed, and students must save each answer before proceeding to the next question, otherwise the question will be scored as incorrect.
10. When a student has completed the test, log out of the computer, gather belongings and leave the test room. After completing the test, students may not re-enter the testing room.
11. Gathering in the hallway outside the testing room and talking loudly enough to disturb those still taking the test is not allowed.
12. If a student has questions about a test question, make an appointment with the content instructor in a timely manner to discuss the content of the question and the rationale for the best answer.
13. Under no circumstance should the content of the test be discussed or shared with other students.
14. If a student sees an open/available proctored test on the testing site and it is not a test day/time, contact the instructor and do not look at the test.
15. Students may not keep or copy any portion of the exam. Any copying, sharing, photograph/video recording, or discussion of the examination is considered cheating and subject to the Academic and Professional Integrity Policy.

### **Exam Reviews**

1. Exam reviews are held at the discretion of the faculty, and in all cases take place within two weeks from the exam date. Exams will not be reviewed after this time unless extenuating circumstances exist such as school closure due to inclement weather.
2. Exam reviews are conducted in a quiet environment where students are encouraged to review the exam items, and to determine problematic areas to assist them with identifying topics for further study.
3. All pens, pencils, books, notebooks, tote bags, backpacks, cell phones, hats, cups, bottles, and electronic devices will be placed in a faculty designated area and remain there during the review.
4. No note taking or recording of any kind will be allowed during the review.
5. In the case of paper exams, only the exam sheet may be on the student's desk during the review. The exam will be retained by faculty.
6. If a student wishes to clarify an exam question, it must be presented in a professional and respectful manner, in writing within 2 weeks of the exam, to the appropriate faculty member.
7. The faculty reserves the right to stop a test review for any issues related to student conduct.
8. The final exam will not be reviewed.

### **Remote Testing Policy**

Students may be required to complete course tests/exams remotely in the event of a community

emergency. The technology requirements of the program include a laptop or desktop computer with a microphone and webcam, internet capability, and internet access.

Students will be required to download:

- Google Chrome on their laptop/desktop computer: <https://www.google.com/chrome/>
- Zoom on their smart phone or iPad/tablet: from the Apple Store, Google Play store or <https://zoom.us/download>
- Respondus LockDown Browser *QCC version* for NUR course tests: <https://download.respondus.com/lockdown/download.php?id=936751450>
- Respondus LockDown Browser *Kaplan version* for Integrated Tests: log in to the Kaplan student website, click on the Integrated Testing tab, and download the Windows or Mac version following the prompts.

*Test Preparation/Student Responsibility:* Students are required to acknowledge the Testing and Academic Integrity Policies prior to the start of an exam. Similar to classroom test settings, students must have a clear desk/testing area with only items approved by course faculty such as a sheet of blank paper for notetaking (if allowed). Student identity must be established using a QCC ID or an official driver's license/picture ID. No watches of any type are allowed to be worn during the testing. If allowed by faculty, cell phones can be brought to the testing environment to allow for contacting faculty in the event of technical difficulty. Cell phones should be stored out of view, face down and silenced, unless being used for Zoom proctoring. If a sheet of paper for notetaking is allowed by faculty, the student must show both sides of the paper to the camera at the start of the exam to demonstrate it is blank.

*During the Test:* Students are responsible for establishing and maintaining a quiet, well-lit environment without interruption for the duration of the testing time. Students must use Respondus Lockdown browser at the designated test time and need to test their microphone and webcam for the purposes of Respondus Monitor. Respondus is a software system that automatically proctors students throughout the examination. The system records the student while taking the exam, flags any suspected violation, and provides faculty with brief video clips and screenshots if a suspected violation occurs. In addition, faculty require the use of Zoom to live proctor exams, in case of questions or difficulties during the exam.

Students may not use headphones or earbuds of any type unless approved by faculty. If the student has a question or encounters a problem during the exam, announce this to the camera, then retrieve your cell phone to text/call faculty or start a private chat with faculty through Zoom.

Students (including those who exercise their right to use accommodations) must adhere to all policies regarding remote testing, including academic honesty and integrity.

*Remote Testing Violations:*

- Privacy violations (another person in the room/on the phone with the student)
- Facial obstruction/suspicion (no masks or hats)
- Outside noise/sound
- Opening additional computer applications/windows
- Leaving the exam room without permission and/or without announcing on video, or excessive time away

- Having multiple monitors or devices in the room (including cell phones/tablets/smart watch)
- Having resources in the testing area such as open textbooks, notes, etc.

Any violation of the remote testing policy will be considered an academic integrity violation and subject to disciplinary action.

*After the Test:* If scrap paper was used, the student must slowly show both sides of the entire paper to the camera and then shred/destroy the paper while still on camera/Zoom.

### **USE OF AUDIO RECORDING DEVICES**

Each student must request in writing a faculty member's permission to use an audio recording device in class *for personal use only* by completing a request form -see Appendix B. Students are not allowed to record until permission is granted. Instructions regarding recording will be provided by faculty. No recording devices are allowed in clinical, simulation, or lab settings. Recordings are to be destroyed at the completion of the course. Students with approved accommodations may audio record from the date the accommodation form is submitted to faculty and must follow all other policies related to audio recording in the classroom.

### **VISITORS IN THE CLASSROOM**

Any student bringing a visitor (adult or child) to class must request approval by the faculty in advance of the class. See the Children on Campus Policy in the QCC Student Handbook.

# ***NURSING LAB POLICIES***

Nursing Skills Laboratory is a required component of the nursing program and attendance is required at each scheduled lab (see Attendance Policy). It provides a safe learning environment for students to practice and demonstrate basic competency in essential skills required to provide safe and effective nursing care. Faculty and lab instructors are available to facilitate learning. The student is expected to come to each Skills Lab session prepared with a basic knowledge and understanding of the specific content area, gained by the completion of self-tutorial assignments. The lab is equipped with a variety of equipment that can be found in clinical settings, as well as manikins on which many nursing skills can be practiced such as blood pressure, pulse, lung sounds, heart sounds, and bowel sounds.

## **LAB EXPERIENCES DEFINITIONS**

Nursing Skills Laboratory: An on-campus setting designed to look, feel and/or function as a real-world practice environment, offering learning experiences which includes the use of low to moderate fidelity simulation equipment. Students utilize the nursing skills laboratory setting for skills practice and competency evaluation.

## **LAB KITS**

Students are provided with a Lab Kit which contains supplies that are necessary for practice. Students are required to bring the Lab Kit to all labs and competency testing (or the applicable supplies from the kit).

## **LAB POLICIES AND ETIQUETTE**

Students are expected to demonstrate professional comportment in the lab sessions. All cell phones and electronic devices are to be shut off. Sitting on beds or leaning on over-bed tables is not permitted. No food or drink is allowed in the Skills Labs or Simulation Lab at any time. Equipment cannot be removed from the Labs. Static manikins are to be treated with care, according to guidelines posted in the labs. Students are responsible for appropriate handling and disposing of sharps and syringes. No manikin should be moved unless directed by lab staff. Students are required to return the lab to an orderly condition at the conclusion of each session. The labs are not latex free environments (see Latex Allergy Policy).

## **LATEX ALLERGY POLICY**

*If a student has a latex allergy or sensitivity, they must complete the Latex Sensitivity/Allergy Student Disclosure/Release Form (see Faculty or Lab Coordinator) and submit it to the Nursing Skills Lab Coordinator and Nursing Course Faculty each semester.*

Latex products are common in the medical environment. Allergic responses to latex can range from irritation and allergic contact dermatitis to the possibility of life-threatening anaphylactic shock. Guidelines have been established at Quinsigamond Community College to provide information to nursing program students and staff who are sensitive to latex.

Latex free environments are seldom available in either clinical or academic settings. Therefore, an individual with a latex allergy/sensitivity wearing alternative vinyl or nitrile gloves is still exposed to latex residue of others working in the area or to latex present in the equipment, models and mannequins. Although latex gloves are the most prominent source of latex allergens, many other products can contain latex including, but not limited to:

- Blood pressure cuffs, medication vials, syringe connectors and wound drains
- Stethoscopes, catheters, respirators, and goggles
- Oral and nasal airways, surgical masks, and electrode pads
- Endotracheal tubes, syringes, IV tubing, and tourniquets

Any student who has or develops symptoms consistent with latex allergy/sensitivity is advised to consult a qualified allergist for evaluation prior to enrollment in the Health Programs at Quinsigamond Community College. All such evaluations are at the student's expense. If it is determined that a student suffers from a latex sensitivity/allergy and the student desires an academic adjustment, including auxiliary aids or service, or reasonable accommodation due to this condition, the student must contact the College Student Accessibility Services at 508-854-4471.

As with all matters related to one's health, the utmost precautions should be taken by the student to reduce the risk of exposure and allergic reactions. This includes the carrying of an epinephrine auto-injector (Epi-Pen) by the individual or other precautions as advised by the student's health care provider. It is the responsibility of the student with a latex sensitivity to understand and acknowledge the risks associated with continued exposure to latex during a clinical education and healthcare career, even when reasonable accommodations are made and to regularly consult with his/her health care provider.

In an effort to minimize the presence of latex in the College's lab facilities, Quinsigamond Community College will provide latex-free and powder-free gloves in all College lab facilities. Should a clinical agency site NOT provide latex-free gloves, the College will provide latex-free gloves for clinical use. Additionally, the College is taking the following steps to minimize latex in its lab facilities: 1) replacement of all gloves in use by faculty and students with nitrile or vinyl gloves; 2) maintaining an inventory of all products/equipment and supplies in the School of Healthcare that contain or could contain latex; and 3) future purchase of latex-safe supplies and equipment whenever possible.

As with all students in the Healthcare Programs, a student with a latex sensitivity or allergy is required to satisfactorily complete all requirements and technical performance standards of the program to which they have been accepted.

### **OPEN/PRACTICE LABS**

Practice labs may be scheduled throughout the semester. Students are encouraged to attend the practice labs, when scheduled, prior to competency testing. Students are required to wear casual business attire and name pin to practice lab. Practice labs are not mandatory, but successful return-demonstration of psychomotor skills is dependent upon practice. Students are responsible for coordinating their schedules to include time to practice skills. Students must sign up for practice labs in advance on the schedules posted on the bulletin board outside of lab. Students

who sign up for a practice lab are expected to attend. If you are unable to attend, cross your name off the sign-up sheet in advance, so that another student can sign up. A Lab Instructor is available in the lab during practice labs. Students are expected to pair up with a lab partner and critique each other's performance using the appropriate text and skills checklist for the course, which students are required to bring to labs.

### **PREPARATION FOR LAB**

Specific requirements related to lab are described in course materials. Students are required to prepare for all labs in advance, by completing assignments.

### **PSYCHOMOTOR SKILL COMPETENCY EVALUATION**

The clinical component of the nursing curriculum requires each student to demonstrate an ability to satisfactorily perform learned psychomotor skills. Specifically, the curriculum of NUR107, and NUR108 require that each student must demonstrate competency of designated psychomotor skills in the laboratory setting before performing the skill in the clinical area. Students are evaluated at the end of each Learning Module for skill competency. Students are required to report for all competency evaluations in full uniform, with name pin and supplies required from their lab kit (if applicable). Evaluations are based on criteria contained in the Nursing Skills Checklists book. Students are provided with three opportunities to demonstrate each competency and must pass by the third attempt in order to receive a satisfactory clinical evaluation. Return demonstration of skills must be completed without prompting and passed by a designated deadline. If a student fails an initial and/or second competency evaluation, a practice session is required prior to being assigned an appointment for re-evaluation. Re-testing must be completed within 7 days. If a third competency is required, this will be completed with two faculty (including at least one full time faculty). The student can request the third competency test is recorded by faculty for the student, faculty, and program coordinator to review by appointment. The recording is optional and will be deleted/destroyed following review. Failure to achieve competency on the third attempt will constitute a clinical failure.

**A failure in Clinical/Lab in will constitute a failure ("F") for the course and the student will not be allowed to continue in clinical practice.**

If competency evaluation is missed for any reason, it is the responsibility of the student to contact faculty and the Lab Coordinator and complete the evaluation within 7 days, according to the availability of lab faculty. Any student who fails to meet this deadline will be referred to the course faculty and will be given an opportunity to present the reason for the missed deadline. A no call/no show for any competency evaluation constitutes a failure attempt for the competency.

### **REFRESH YOUR SKILLS**

Scheduled Refresher Practice Labs may be made available prior to the start of each semester for all nursing students. Stations are set up for the practice of previously learned skills for which students have already been evaluated for competency.



### **REQUIRED PURCHASES**

Students are required to purchase a dual-head stethoscope and adult size manual blood pressure cuff prior to the first scheduled lab. The stethoscope and blood pressure cuff are required to be brought to all scheduled lab and clinical experiences (blood pressure cuff is required for clinical only as specified by faculty).

### **SCHEDULED SKILLS LABS**

Attendance in the scheduled skills labs is mandatory. Students are expected to be on time and labs will begin promptly at the designated times. Any issues or problems in lab will be discussed with the student, documented, and communicated to faculty. Students are required to wear the full QCC nursing student uniform, white lab coat and name pin to all scheduled skills labs. Facial jewelry is to be removed and hair off the collar – see Uniform/Dress Code Policy.

# ***CLINICAL POLICIES***

## **CENTRALIZED CLINICAL PLACEMENT AND CLINICAL AGENCY REQUIREMENTS**

The Centralized Clinical Placement (CCP) is an online clinical orientation, training, and scheduling resource available to facilitate nursing education clinical placements with local health care organizations. Each semester students will be provided with information needed to access the system to complete required modules prior to clinical placement. In addition, there are documentation and trainings specific to the health care organization(s) where the student is assigned to attend clinical. Completion of the modules is required at least annually and updated each semester with changes in clinical faculty and placement. Student clinical placements occur during the day, evening, and weekends and a specific placement is not guaranteed due to clinical site availability.

The clinical paperwork collection deadline will be published by course faculty. Students must complete the clinical site paperwork, CCP ticket, CORI/SORI, and health requirements by the published deadlines to be eligible for clinical placement in the course. Failure to complete these requirements will result in inability to attend the clinical site and is subject to the attendance policy.

## **CHANGE IN HEALTH STATUS**

Students are encouraged to disclose a change in health status and/or the ability to meet the Technical Performance Standards to the Program Coordinator. In order for a student to continue in lab/clinical when student health status has changed, the student must provide documentation from a health care provider that clearly states the limitations or the ability of the student to fully participate in all activities. If limitations are indicated, this will impact the student's ability to participate in lab/clinical and the student will be referred to Student Accessibility Services (or the Title IX coordinator if indicated) to discuss accommodations or reasonable modifications. In addition, students must adhere to facility policy regarding return to clinical.

Health status changes include, but are not limited to:

- Injury/Surgery
- Pregnancy/Delivery (see Title IX policy)
- Change in physical or mental health
- Unprotected exposure to communicable disease
- Splint/brace/cast/sling, etc.
- As required by clinical site, clinical coordinator, and/or program coordinator

## **CLINICAL EXPERIENCES DEFINITIONS**

### **Clinical Experiences**

Direct, hands-on planned learning activities with patients across the lifespan, interaction with the interprofessional team and interaction with the patient's family that are sufficient and appropriate to achieve the end-of-program student learning outcomes, program outcomes and/or role specific

professional competencies and are overseen by qualified faculty who provide feedback to students in support of their learning.

### **Practice Learning Environments**

Commonly known as “clinical” and held in settings that facilitate students’ application of knowledge, skills and behaviors in the care of patients and support the end-of-program student learning outcomes and program outcomes.

### **Clinical Learning Modalities**

*Face-to-Face Clinical:* Experiential learning based on work done with live patients in diverse health settings with pre and post conferences and personalized feedback. Settings may include, but are not limited to, acute care and specialty hospitals, long term care facilities, school settings, ambulatory care and other office settings.

*Computer Based Simulation:* The modeling of real-life processes with inputs and outputs exclusively confined to a computer, typically including a monitor, keyboard, and/or other simple assistive device. May include virtual simulations, case studies and/or online resources.

*Virtual Simulation:* Simulations that use a variety of immersive, highly visual, 3D characteristics to replicate real-life simulations and or nursing procedures. These incorporate three dimensional images of patients and care environments for the development of nursing knowledge and skills.

*Face to Face Clinical Simulation Learning:* An on campus educational modality that creates a situation or environment to allow persons to experience a representation of a clinical scenario for the purpose of practice, learning, evaluation, testing or to gain an understanding of systems or human actions using low to high fidelity simulation equipment.

Regardless of clinical modality being offered, students are expected to adhere to the clinical uniform/dress code policy.

## **CLINICAL PERFORMANCE EVALUATION**

### **Evaluation Process**

The primary outcome of the evaluation process is to provide the student and the instructor with a formal opportunity to assess student’s mastery of the theoretical knowledge and clinical skills identified in the currently enrolled course. A secondary outcome is to ensure that all theoretical knowledge and clinical skills acquired in previous nursing courses (if applicable) has been retained and demonstrated with competence in the currently enrolled course.

The student is encouraged to seek out the instructor’s guidance regarding his/her ongoing performance. To be successful, there must be mutual respect and trust between the student and instructor. Students must also demonstrate the ability to assume responsibility, complete all assigned work, including written assignments on time, and consult with the instructor if he/she has a problem with the clinical requirements.

Failure to complete and submit written assignments by the instructor’s designated deadline will result in an unsatisfactory (U) grade on the evaluation. Late assignments will jeopardize the student’s clinical evaluation and the completion of the nursing course/program.

At the completion of each clinical area, the student will receive written evaluation of his/her clinical, simulation, and/or remote clinical performance. Clinical behaviors and student strengths/action plan for areas needing improvement are evaluated in the evaluation tool (see course materials). If it is determined that unsatisfactory (U) performance is occurring, a clinical warning/failure will be issued to the student (see clinical warning and clinical failure policies).

The entire course team will review any unsatisfactory (U) or more than two needs improvement (NI) performance and determine the student status within the course (warning/pass/fail). To pass clinical at the summative evaluation, students must obtain all Satisfactory (S) or Needs Improvement (NI) with no Unsatisfactory (U).

#### Definitions:

- Clinical Evaluation – A continuous, ongoing process designed to evaluate the student's performance in the clinical setting.
- Formative Evaluation – Identifies a student's strengths and weaknesses in order to help the student learn. Formative evaluation occurs formally during student/instructor discussions, and during the clinical experience.
- Summative Evaluation – Determines clinical competence and occurs at the end of the course.
- Satisfactory (S) - The student demonstrates consistent and progressive mastery of the clinical objective/behavior.
- Needs Improvement (NI) - The student demonstrates weakness or inconsistent mastery of the clinical objective/behavior.
- Unsatisfactory (U) - The student demonstrates inability to master the clinical objective/behavior.

#### Clinical Warning

Conduct that is unethical, unprofessional, and/or unsafe so as to affect or potentially affect the well-being of the patient will result in immediate suspension from the clinical rotation pending the initiation of the student discipline process as outlined in the QCC Student Code of Conduct policy.

A student will be placed on clinical warning for failure to perform at a satisfactory level. A student who receives a clinical warning during the clinical rotation must bring their clinical performance to a satisfactory level based on clinical guidelines. A student who receives a warning at the end of a clinical rotation must bring their level of clinical performance to a satisfactory level by the end of the course. Clinical warnings will not be transferred from one course to another. A student must have passing performance in the clinical area at the end of each semester. If a student receives a warning in the last clinical experience, the outcome (pass/fail) will be determined by the course faculty team.

The instructor will communicate this warning in writing to the student, team members, to the next clinical instructor (if necessary), and to the Program Coordinator. The student must make an appointment to see the Program Coordinator within seven days of receiving the warning.

### **Clinical Failure**

Clinical failure will be determined by the team. A student may receive a failure in the clinical practice area at any point in the program. A clinical failure will be clearly documented on the clinical evaluation form and will clearly state behaviors (with examples) which indicate unsafe, unethical and/or unprofessional clinical practice. Refer to the Nursing Math Competency Testing Policy. *Clinical failure for unsafe, unethical, and unprofessional clinical practice can occur without a prior clinical warning.*

**A failure in Clinical Practice/Lab in any clinical rotation will constitute a failure (“F”) for the course and the student will not be allowed to continue in clinical practice.**

### **Clinical Dismissal**

If an instructor deems a student as being unable to perform satisfactorily in the clinical area, i.e. the student is not prepared to carry out assignment responsibilities for the day or arrives late, it is faculty responsibility to dismiss that student from the clinical area. This dismissal will constitute a clinical absence. Satisfactory performance is defined by the behaviors identified by the course clinical evaluation tool. The instructor will notify the Program Coordinator and the Clinical Coordinator of the incident immediately. The nursing team will discuss the incident within one week and decide if the incident constitutes grounds for clinical warning or failure.

### **CLINICAL AREA WITHOUT INSTRUCTOR**

Students cannot be in a clinical area without a QCC clinical instructor present in the facility. An assigned clinical/observational experience will be under the direction of a QCC clinical instructor e.g. Worcester Public Schools. Students may not remain or return to clinical facilities outside of regularly scheduled clinical experience hours.

### **CLINICAL SITE INFORMATION**

Clinical site information is located in Appendix H.

### **COMPUTER ACCESS AT CLINICAL**

Student computer access at the clinical facility is limited to scheduled clinical hours only and limited to their assigned patient. Students cannot access their own medical record. If a student possesses computer access via employment, it is never to be utilized in a student role. Breach of employer/employee computer access policy requires the instructor to report the incident to the clinical facility and the Clinical Coordinator. Patient identifying information cannot be removed from the clinical facility. Specific confidentiality/user access agreement will be signed by student per clinical agency requirements, and as requested by clinical partners' contracts student sensitive information (date of birth, social security number, etc.) may be shared.

### **CORI/SORI AND NATIONAL BACKGROUND REGISTRY CHECK**

Criminal Offender Record Information (CORI), Sex Offender Registry Information (SORI), and National Background checks are required for all students accepted into the Nurse Education Program. Readmitted students will have to redo when they are readmitted. CORI/SORI checks are completed every semester, and the National Background Registry check is done annually as

required by our clinical contracts. Students should be aware that individual clinical agencies may refuse to accept anyone into their clinical facilities based upon the CORI/SORI/National Background results. An issue with CORI/SORI and/or the National Background Registry check could prevent a student from participating in a clinical rotation, which could result in dismissal from the program, and ineligibility for the licensure exam.

### **DRUG SCREENING/FINGERPRINTING POLICY**

Finger printing and drug testing are required in the Nurse Education Program as specified by clinical agencies. Finger printing and drug testing results must meet clinical requirements. An issue with finger printing and/or drug testing could prevent a student from participating in a clinical rotation, which could result in dismissal from the program.

Information regarding testing will be given to students by the Health Compliance Officer. Students may request a copy of their drug testing results by contacting [healthcompliance@qcc.mass.edu](mailto:healthcompliance@qcc.mass.edu) or Castle Branch customer support at (888)723-4263.

A student will be removed from clinical for any reason related to Code of Conduct issues (i.e. impairment or issue with drug testing) and the student will be responsible for all expenses incurred including transportation and testing, if required. It is the responsibility of the student to notify faculty of a clinical absence if they cannot attend due to a Code of Conduct issue. Refer to the college policies on Alcohol and Other Drugs and the Student Code of Conduct policy: <https://www.qcc.edu/student-handbook/student-code-conduct>.

### **HEALTH POLICY**

Prior to being eligible for clinical placement in the Nurse Education Program, all students must show evidence of compliance with health requirements as defined by the college, the Nurse Education Department, the Massachusetts Department of Public Health, and clinical affiliates. Additional health requirements may include, but are not limited to, influenza and COVID-19 vaccination.

The college utilizes Castle Branch, a web-based health documentation database. The required information must be submitted to the Castle Branch website by the assigned date (including evidence of healthcare provider level BLS/CPR certification). Information about how to upload documents to Castle Branch is provided upon acceptance to the program. In addition to submitting data prior to entering the program, students must ensure health compliance is maintained while in the program.

Non-compliance with QCC health requirements will prevent a student from participating in clinical, which will result in conference summary, clinical warning, clinical failure, and dismissal from the program per the Attendance Policy.

Students are not to call clinical facilities regarding health requirements. Questions about health requirements can be directed to the QCC Healthcare Compliance Officer via email [healthcompliance@qcc.mass.edu](mailto:healthcompliance@qcc.mass.edu)

If a student is unable to receive a specific vaccine for medical or religious reasons, they can complete an exemption request form available from QCC Healthcare Compliance. The completed exemption request form will be forwarded by the program clinical coordinator (or designee) to the assigned clinical site for review and determination of clinical eligibility. The program will make every effort to provide the student with the response from the clinical site at least two weeks prior to the start of the semester. There is no guarantee that exemptions will be approved by clinical sites.

## **ILLNESS POLICY**

Students/faculty attending on-campus activities and/or attending clinical, need to follow the requirements of QCC and clinical sites related to training, screening, testing, reporting, and vaccinations if required. Failure to comply with QCC and clinical site policies will result in the student/faculty being unable to attend on-campus and/or clinical site activities. This can impact the student's learning experience and ability to complete the program. All missed lab, simulation, and clinical sessions must be made up. See *Attendance Policy*.

All students/faculty must take responsibility to protect themselves by following the guidelines for use of personal protective equipment (PPE), appropriate hand hygiene, infection control practices, and distancing when applicable.

Students/faculty have an ethical obligation to report if they have been exposed to a communicable illness or are exhibiting signs of illness and stay home when not feeling well to protect others from potential exposure. If a student/faculty has unprotected exposure to a person with known infectious disease or develops symptoms of illness they must:

- Stay home
- Notify the course/clinical faculty and Program Coordinator
- Complete an *Illness Intake* form on the Q: <https://www.qcc.edu/illness-intake-form>
- Follow-up with the QCC health and wellness team before returning to campus/clinical

Symptoms of illness may include:

- Fever
- Sore throat
- Cough and/or shortness of breath
- New muscle aches
- Unexplained loss of taste or smell
- Vomiting and/or diarrhea
- Unexplained rash
- Headache accompanied by at least one other symptom

The QCC health and wellness team (and/or Program Coordinator) will determine the appropriate action to take for each occurrence based on current guidelines from these entities: Centers for Disease Control and Prevention, Massachusetts Department of Public Health, and Massachusetts Department of Elementary and Secondary Education. Clearance to return (from the QCC health and wellness team and/or Program Coordinator) will be required prior to resuming in-person educational activities.

## INFECTION CONTROL GUIDELINES

<b>Standard Precautions: FOR ALL PATIENTS</b>	<ul style="list-style-type: none"> <li>• Clean hands with alcohol-based hand rub or soap and water before and after patient contact, after removing gloves and upon exiting room</li> <li>• Clean hands after contact with patient environment and equipment</li> <li>• Clean equipment with disinfectant between each patient use</li> <li>• Wear gloves when it can be reasonably anticipated that contact with blood or other potentially infectious materials, mucous membranes, non-intact skin, or potentially contaminated intact skin (e.g., of a patient incontinent of stool or urine) could occur</li> <li>• Anticipate need and use for other protective barriers including gowns, mask, and eye protection</li> </ul>	
<b>Precautions</b>	<b>Implementation of Precautions</b>	<b>Associated Disease or Condition(s)</b>
<b>Contact</b>	<ul style="list-style-type: none"> <li>• Private room</li> <li>• Gloves</li> <li>• Gown for close contact</li> <li>• Hand Hygiene (before and after, foam in foam out)</li> <li>• Disinfect equipment</li> </ul>	<ul style="list-style-type: none"> <li>• Abscess, Major Draining</li> <li>• Adenovirus</li> <li>• Pressure Ulcer (Major)</li> <li>• Multidrug-Resistant Organisms</li> <li>• <i>Escherichia Coli</i> (E-Coli)</li> <li>• <i>Respiratory Syncytial Virus</i> (RSV)</li> <li>• Rotavirus</li> </ul>
<b>Droplet</b>	<ul style="list-style-type: none"> <li>• Private Room</li> <li>• Mask</li> <li>• Hand Hygiene (before and after, foam in foam out)</li> <li>• Disinfect equipment</li> </ul>	<ul style="list-style-type: none"> <li>• Adenovirus</li> <li>• Influenza (flu)</li> <li>• Meningococcal Pneumonia</li> <li>• Meningococemia</li> <li>• Mumps</li> <li>• <i>Respiratory Syncytial Virus</i> (RSV)</li> <li>• Streptococcus Group A</li> <li>• Pneumonia, Pharyngitis</li> <li>• Pertussis</li> <li>• Rubella</li> </ul>
<b>Airborne</b>	<ul style="list-style-type: none"> <li>• Negative Pressure Private Room</li> <li>• N-95 Mask</li> <li>• Hand Hygiene (before and after, foam in foam out)</li> <li>• Disinfect equipment</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Active Pulmonary Tuberculosis</i> (TB)</li> <li>• <i>Varicella</i> (Chicken Pox)</li> <li>• Rubeola (Measles)</li> <li>• Smallpox</li> </ul>
<b>Contact Plus</b>	<ul style="list-style-type: none"> <li>• Private Room</li> <li>• Gloves</li> <li>• Gown</li> <li>• Hand Hygiene (before and after, foam in foam out)</li> <li>• Hand Hygiene <u>exception</u> - <b>wash hands with soap &amp; water for C-Diff and Norovirus</b></li> <li>• Disinfect equipment with <b>BLEACH</b></li> </ul>	<ul style="list-style-type: none"> <li>• Norovirus</li> <li>• Clostridium Difficile (C- Diff)</li> <li>• Diarrhea with environmental soiling</li> </ul>
<b>Neutropenic</b>	<ul style="list-style-type: none"> <li>• Private Room</li> <li>• Gloves</li> <li>• Gown for close contact</li> <li>• Hand Hygiene (before and after, foam in foam out)</li> <li>• Disinfect equipment</li> <li>• Screen staff and visitors for illness</li> <li>• No plants or flowers in the room</li> </ul>	<ul style="list-style-type: none"> <li>• Patient is Neutropenic</li> </ul>
<b>Herpes Zoster-Shingles (Varicella Zoster)</b>	<ul style="list-style-type: none"> <li>• Private Room</li> <li>• Gloves</li> <li>• Gown for close contact</li> <li>• Hand Hygiene (before and after, foam in foam out)</li> <li>• Disinfect equipment</li> <li>• Cover Lesions</li> <li>• Do not enter if you have not had Chicken Pox/Varicella</li> </ul>	<ul style="list-style-type: none"> <li>• Only people that have had Chicken Pox should enter the room</li> <li>• Herpes Zoster Virus (Shingles) with open lesions</li> </ul>

*Reviewed 5/24*



## **INJURY OR ILLNESS IN CLINICAL AREA**

In the event of injury/illness in the clinical area/campus, students will be referred for treatment by the clinical instructor/faculty based on the policy of the affiliating agency. The student is responsible for payment of services rendered. In case of injury, the student and the clinical instructor/faculty must report the incident to the Clinical Coordinator in a timely manner. The student must contact Campus Police at 508-854-4221 to notify them of the occurrence.

## **LEAVING THE CLINICAL FACILITY**

Students are not allowed to leave the clinical facility during the assigned clinical time without prior arrangements with the clinical instructor. If an emergency arises, students leaving the clinical facility must notify the instructor.

## **MEDICATION ADMINISTRATION POLICY**

Students cannot access and/or administer any medication by any route without the clinical instructor present. Medications are never to be administered by a student with a staff nurse. Students may not administer medications until competency has been satisfactorily demonstrated in the skills lab and successful completion of the math competency test in each course (see Nursing Math Competency Policy).

## **NURSING MATH COMPETENCY TESTING POLICY**

Purpose: To facilitate measures for the safe preparation and administration of medication in the clinical area.

General Guidelines:

1. All pharmacology/math competency exams will be selected and administered by faculty teaching in the course.
2. Students will be notified on Blackboard of the initial exam date/time prior to the start of each course.
3. Students will be notified regarding learning activities available to prepare for the exam on Blackboard prior to the start of each course.
4. Students must successfully pass the test within 4 weeks of the initial test with a maximum of 3 total attempts.
5. Students who are unable to achieve the passing percentage for each course are unable to meet the clinical objectives, which constitutes a clinical failure.
6. The grade for the pharmacology/math competency exam is based on the initial attempt.
7. The initial attempt grade will be worth:
  - 5% of the course grade in NUR107
  - 2.5% of the course grade in NUR108, NUR204, and NUR202/205.

NUR 107				
COMPETENCY	PREPARATION	PROCESS	REMEDIATION	FAILURES
<b>Math Competency Exam</b> Basic math calculations including metric conversions.  <b>Medication Lab Competency</b> *Reading medication labels *Medication measures *Dosage calculations *Syringe calculations *Preparation and administration of oral and parenteral medications	Students are advised to: *Review dosage calculation texts and pharmacology texts *Use practice pharmacology/math tests posted on Blackboard prior to start of course. *Complete standardized focused math review	<b>Math Competency Exam</b> Students must achieve a passing score of <b>80%</b> .  <b>Medication Lab Competency</b> Students must pass this competency.  Students may not administer medications on their assigned clinical unit until they have successfully passed the Math Competency Exam and Medication Lab Competency.	Student must review exam with faculty. In addition, students may: *Review dosage calculation in pharmacology texts and course textbook as they relate to content covered *Use computer assisted instruction /on-line program standardized focused math review *Utilize nursing and math tutors *Repeat Blackboard posted practice pharmacology/math test	<b>Math Competency Exam</b> Students unable to achieve an <b>80%</b> or greater within 3 attempts are unable to meet the clinical objectives, which constitutes a clinical failure.  <b>Medication Lab Competency</b> Students unable to pass the Medication Lab Competency within 3 attempts are unable to meet the clinical objectives, which constitutes a clinical failure.
NUR 108				
COMPETENCY	PREPARATION	PROCESS	REMEDIATION	FAILURES
<b>Math Competency Exam</b> *Medication dosage calculation for all routes of administration *Measurement conversions *IV flow rate calculations in ml/hr & drops/minute *IV infusion completion times in ml/hr & drops/minute  <b>IV Medication Lab Competency</b> *IV flow rate calculations in ml/hr & drops/minute *IV infusion completion times in ml/hr & drops/minute *Preparation and administration of IV fluids and medications	Students are advised to: *Review dosage calculation texts and pharmacology texts *Use practice pharmacology/math tests posted on Blackboard prior to start of course. *Complete standardized focused math review	<b>Math Competency Exam</b> Students must achieve a passing score of <b>80%</b> .  <b>IV Med Lab Competency</b> Students must pass this competency.  Students may not administer medications on their assigned clinical unit until they have successfully passed the Math Competency Exam and IV Med Lab Competency.	Student must review exam with faculty. In addition, students may: *Review dosage calculation in pharmacology texts and course textbook as they relate to content covered *Use computer assisted instruction /on-line program standardized focused math review *Utilize nursing and math tutors *Repeat Blackboard posted practice pharmacology/math test	<b>Math Competency Exam</b> Students unable to achieve an <b>80%</b> or greater within 3 attempts are unable to meet the clinical objectives, which constitutes a clinical failure.  <b>IV Med Lab Competency</b> Students unable to pass the IV Medication Lab Competency within 3 attempts are unable to meet the clinical objectives, which constitutes a clinical failure.

NUR 204				
COMPETENCY	PREPARATION	PROCESS	REMEDIATION	FAILURES
<b>Math Competency Exam</b> *Medication dosage calculation for all routes of administration *Measurement conversions *IV flow rate calculations in ml/hr & drops/minute *IV infusion completion times in ml/hr & drops/minute *Pediatric weight-based dosage calculations	Students are advised to: *Review dosage calculation texts and pharmacology texts *Use practice pharmacology/math tests posted on Blackboard prior to start of course. *Complete standardized focused math review	Students must achieve a passing score of <b>90%</b> .  Students may not administer medications on their assigned clinical unit until they have successfully passed the Math Competency Exam.	Student must review exam with faculty. In addition, students may: *Review dosage calculation in pharmacology texts and course textbook as they relate to content covered *Use computer assisted instruction /on-line program standardized focused math review *Utilize nursing and math tutors *Repeat Blackboard posted practice pharmacology/math test	Students unable to achieve a <b>90%</b> or greater within 3 attempts are unable to meet the clinical objectives, which constitutes a clinical failure.
NUR 202/205				
COMPETENCY	PREPARATION	PROCESS	REMEDIATION	FAILURES
<b>Math Competency Exam</b> *Medication dosage calculation for all routes of administration *Measurement conversions *IV flow rate calculations in ml/hr & drops/minute *IV infusion completion times ml/hr & drops/minute *IV infusion titration calculations	Students are advised to: *Review dosage calculation texts and pharmacology texts *Use practice pharmacology/math tests posted on Blackboard prior to start of course. *Complete standardized focused math review	Students must achieve a passing score of <b>90%</b> .  Students may not administer medications on their assigned clinical unit until they have successfully passed the Math Competency Exam.	Student must review exam with faculty. In addition, students may: *Review dosage calculation in pharmacology texts and course textbook as they relate to content covered *Use computer assisted instruction /on-line program standardized focused math review *Utilize nursing and math tutors *Repeat Blackboard posted practice pharmacology/math test	Students unable to achieve a <b>90%</b> or greater within 3 attempts are unable to meet the clinical objectives, which constitutes a clinical failure.

### **PATIENT CONTACT AND RISK OF EXPOSURE**

Students will have contact with patients, which increases the risk for exposure to communicable diseases. Students will be educated about common communicable diseases in the clinical setting, guidelines for the prevention of unprotected exposure, universal precautions, and the use of personal protective equipment (PPE). Students who have a known unprotected exposure (needle stick or other incident) must notify their clinical instructor immediately and follow the policies of the affiliating agency. The student must contact Campus Police at 508-854-4221 to notify them of the occurrence. In addition, the Clinical Coordinator must be notified of the incident.

## **RETURNING TO NURSING SKILLS LABORATORY**

Students who are unable to competently perform skills previously demonstrated in the nursing lab will be referred back to the nursing lab by clinical faculty for remediation of skills.

- The clinical instructor completes a *Nursing Skills Lab Referral for Remediation* (see Appendix C). Students shall not be referred to the skills lab without the proper documentation. Referral documentation shall include:
  - List of skills the student has been unable to successfully perform
  - Whether instruction and/or re-testing for competency is required
  - Date and signature of the clinical instructor and student
- Student directions contained on the form are explained by the clinical instructor, which include:
  - Student must contact the lab coordinator to arrange an appointment
  - Remediation must be completed within seven days of notice, unless otherwise documented on the referral form and arranged with the lab coordinator
  - Student must bring the referral form to the lab on the date of appointment
- Upon completion of successful remediation, a copy of the *Nursing Skills Lab Referral for Remediation* and a *Remediation Summary* are given to the student to present to the clinical instructor upon return to the clinical area.
- If remediation is not accomplished within 7 days, the lab coordinator shall notify the clinical faculty, course faculty, and program coordinator.
- Original copies of the *Nursing Skills Lab Referral for Remediation* and *Remediation Summary* will be filed in the student's record.

## **SIMULATION LAB**

The use of clinical simulation is an educational method designed to provide a realistic working environment. The learner is to demonstrate skills, techniques, decision making, and critical thinking. The purpose of simulation is an attempt to recreate scenarios, as seen in clinical practice by multiple disciplines, by utilizing low and high-fidelity mannequins.

### **General Lab Conduct/Policies**

- There is no eating, drinking, smoking, or using electronics in the simulation laboratory.
- No pens or markers are allowed, use pencils only. Pens and markers stain the mannequins.
- Betadine is not allowed in the simulation lab because it will stain the mannequins.
- Only use 24g or smaller needles for mannequin injections and IVs.
- Professionalism is expected at all times. If unsafe, unethical, or unprofessional conduct is witnessed, those involved will be dismissed from the laboratory.
- Do not infringe upon the rights, privacy, privileges, health, or safety of other simulation lab users.
- The mannequins are to be treated with respect as they represent real patients. You must handle them gently and with great care as if they are live humans. Do not move the mannequins unless permission is granted by the simulation coordinator or specialist.
- All personal belongings are to be left in the designated classroom where the class originates.
- All students will be oriented to the clinical simulation lab by faculty or the lab coordinator.

- Professional clinical attire is required for all simulation activities.
- Students are not allowed in the clinical simulation lab without a trained faculty, instructor or simulation coordinator present.

### **Confidentiality**

All simulation scenario sessions involving students and/or recordings are considered confidential. All mannequins should be treated as real patients. Discussion of the scenarios and participant performance outside of the simulation and debriefing sessions is prohibited.

### **Clean Up**

Everyone involved in laboratory time is responsible for leaving the labs clean and orderly before departing. Mannequins should be left in the beds. All equipment must be turned off and placed in the appropriate storage location unless coordinated with the simulation specialist.

### **Media**

The QCC clinical simulation laboratory is capable of utilizing audio and video equipment. There are cameras and microphones set up in each simulation bay with the capability of recording the activity. All recordings are saved on a data drive or in DVD format. Recordings are for educational purposes and debriefing discussions. Students are to sign the *Statement of Confidentiality* and *Photograph / Video (Film) / Audio Release* (see forms in the Appendices) prior to participating in simulation activity. This protects privacy and discourages inappropriate discussion of the video contents or the student's performance in the simulation. Any viewing or publication of such content outside of the classroom, on public social media, is unacceptable and unethical and will result in disciplinary action. Students should conduct themselves in a professional manner since all interactions can be recorded.

## **SMOKING/VAPING POLICY**

All QCC campuses are smoke free. Students are expected to adhere to the smoking policy at each facility. Students may not smoke or vape while in uniform.

## **TECHNICAL PERFORMANCE STANDARDS**

Students must be in compliance with all QCC health requirements prior to attending clinical and must meet the Technical Performance Standards of the program: [www.qcc.edu/catalog/technical-performance-standards](http://www.qcc.edu/catalog/technical-performance-standards)

Students who cannot meet the Technical Performance Standards must contact the Student Accessibility Services Office or the Title IX Coordinator for consultation about accommodations or reasonable modifications.

## **TITLE IX**

Title IX is a federal civil rights law that prohibits discrimination in educational programs or activities on the basis of sex, sexual orientation, sexual characteristics, stereotypes, and gender identity. This includes pregnancy and pregnancy related conditions (see the Change in Health Status policy), and lactating students.

Please see the Title IX and Affirmative Action resource page for more information:  
<https://www.qcc.edu/about-qcc/administration/human-resources/title-ix-and-affirmative-action>

Students who have questions or concerns related to Title IX can contact Liz Woods, Dean for Compliance and Education, via email at [lwoods@qcc.mass.edu](mailto:lwoods@qcc.mass.edu) or by phone at 508.854.2791

### **UNANTICIPATED EXPOSURE TO COMMUNICABLE/INFECTIOUS DISEASE**

Upon notification of exposure, the Program Coordinator, Clinical Coordinator or Dean of Healthcare shall contact the Clinical Instructor and students impacted by unanticipated clinical exposure to a communicable/infectious disease to determine follow-up action. Participation in clinical activities at the clinical agency may be suspended, while an investigation is pending. The decision to suspend clinical activities during this time rests with the Program Coordinator, Clinical Coordinator, or the Dean of Healthcare.

The Program Coordinator, Clinical Coordinator or Dean of Healthcare must also report this exposure to the college Health Consultant, who will report to the QCC Chief of Police within the same time frame. When available, full demographic, clinical and epidemiologic information must be included.

### **UNIFORM/DRESS CODE POLICY**

Students must conform to the uniform policy of the cooperating clinical agencies.

- Nursing student attire will be burgundy scrub uniform from \*McGill's with monogrammed insignia and a white lab jacket with appropriate color undergarments (a plain white or black shirt only), school insignia on the left sleeve, and A.D.N. student rocker above the school insignia. All students are required to wear a name pin purchased from McGill's.
- Shoes must be all white or black non-canvas, closed toe shoes with no print. Clogs are permitted only with heel strap in place. Shoes may be purchased from McGill's or elsewhere.
- Students will sign clinical documentation as QCC, A.D.N., SN.
- All students must have with them: bandage scissors, a watch with a second hand, a black ink pen, small note pad or paper, pen light, a dual head stethoscope, manual blood pressure cuff, and plastic-coated tape measure, and gait belt, as required by facility.
- Students are expected to be neat, clean, and well groomed.
  - Pants that touch the ground poses an infection control risk and is not acceptable.
  - No nail polish or artificial nails, and fingernails must be trimmed.
  - Hair should be off the collar neatly secured/ pulled back and away from the face.
  - Hair which has been dyed a color other than the normal/typical range of hair coloring (i.e. black, brown, blonde, red, gray or white) is not allowed.
  - Facial hair should be neat and trimmed.
  - Make-up, if worn, must be "natural/neutral/bare" looking.
  - No scents or strong odors (aftershave, colognes, cigarette smoke, body odor, etc.)
  - No jewelry except for wedding and/or engagement ring. No visible piercing jewelry is allowed. Students who have ear lobe expander must wear a skin tone ear plug.
  - Tattoos must be covered while in the clinical/simulation/lab area.

\*McGill's, Inc. 410 Chestnut Street Manchester, NH 03101 Phone: 603-627-3472  
<https://mcgillsinc.com/>

# ***STUDENT RESOURCES***

## **ACADEMIC ADVISING**

Refer to the QCC Academic Advising page: <https://www.qcc.edu/services/academic-advising>

## **ACADEMIC COUNSELING**

### **Academic advising**

All nursing students will be assigned a nursing faculty member as an academic advisor. Faculty will post their office hours at the beginning of each semester. Students are welcome to schedule appointments with their assigned academic advisor during posted office hours.

### **Academic and Clinical Success**

Students are invited to participate in an academic and clinical success (ACS) process with faculty. Students are encouraged to meet with their ACS advisor at the onset of the semester to complete an ACS form, and every other week for follow-up. Students who are not achieving a grade of 77% or better in theory should meet with the nursing faculty advisor regularly (see Appendix A).

## **HONORS AND AWARDS**

Refer to the Quinsigamond Community College Student Handbook and current college catalog.

## **LIBRARY RESOURCES**

The General Academic Areas for tutoring, located on the 2<sup>nd</sup> floor of the George I. Alden Library Teaching and Learning Center, is an area students use to view videos, computer simulations of nursing procedures, and patient care simulations. A variety of learning resources are available to assist students in their learning. Students are encouraged to use these materials to enhance their class, lab, and clinical work.

Library services and resources are also available in the Downtown Campus. Computers and study rooms are available for student use. Information about the library hours and services, resources, databases, and the online librarian chat link is available here:

<http://www.qcc.mass.edu/library/>

## **NATIONAL STUDENT NURSES' ASSOCIATION**

Students in the Nurse Education program are encouraged to join the National Student Nurses' Association (NSNA), which includes membership in the local/state chapter. The mission of the NSNA is "to mentor students preparing for initial licensure as registered nurses, and to convey the standards, ethics, and skills that students will need as responsible and accountable leaders and members of the profession" (National Student Nurses' Association, 2024). NSNA membership offers scholarship and award opportunities, conferences, networking with other nursing students, a professional magazine for student nurses, career planning, discounts, and many other resources/topics of interest. Visit <https://www.nsna.org/>.



## **NURSE AID TRAINING WAIVER**

Students who successfully complete NUR107 Fundamentals of Nursing are eligible to request a waiver of the nurse aid training requirement to take the Massachusetts Nurse Aide Competency Evaluation. The application is completed and submitted by the student to the testing company along with required supporting documentation. For further information and to download a copy of the *Candidate Handbook* and *Massachusetts Nurse Aide Training Waiver Application* please visit: <https://www.mass.gov/info-details/learn-how-to-become-a-certified-nurse-aide-in-massachusetts>

## **NURSE PINNING**

Each nursing class will have a nurse pinning ceremony upon completion of the program. Faculty will guide students in planning the pinning ceremony, obtaining pins, uniforms, and other items from approved vendors. Students may fundraise or collect funds to purchase other items for pinning such as flowers, decorations, keepsakes, etc. by following college policies. Students who have met the program graduation requirements will be pinned by a full-time nurse faculty from the respective program. A pinning committee comprised of faculty and students may be formed for planning purposes. Please see the Program Coordinator for additional information.

## **QCC FOUNDATION SCHOLARSHIPS**

To apply for scholarships and other financial aid programs, please use this link: <https://www.qcc.edu/admissions/financial-aid-scholarships/aid-programs>

## **STUDENT SUPPORT SERVICES POLICY**

Students in the Nurse Education Program may avail themselves of a network of integrated services and a broad range of programs designed to support the teaching and learning process. These services include Academic Advising, Student Success Center, Math Center, Health & Wellness, Library, and the Writing Center and are outlined in the QCC College Catalog and online <https://www.qcc.edu/services>

In addition, nursing tutors are available to provide subject/course specific support. Detailed information regarding location and hours is communicated at the beginning of each semester.

### **Study Areas at 25 Federal Street**

1. Fairlawn Nursing Technology Lab (Room 229)
2. Library
3. Additional space may be available as needed

### **Policies for Study Areas**

1. No food or drink are permitted in the computer lab due to the potential for equipment damage.
2. Students are expected to clean the computer workspace prior to leaving the room.
3. No equipment is to leave the computer lab and no data files or software may be brought into the lab.

4. Students will be instructed to leave the computer lab immediately and may be subject to disciplinary action if they are found using computers in any manner that violates the QCC Code of Conduct policy.

### References

- Accreditation Commission for Education in Nursing. (2022). *ACEN 2023 accreditation manual for nursing education programs*. <https://www.acenursing.org/accreditation/accreditation-manuals>
- Anderson, L.W. et al. (Ed). (2001). *A taxonomy for learning, teaching, and assessing: A revision of Bloom's taxonomy of educational objectives* (Abridged edition).
- Bloom, B.S. (1956). *Taxonomy of educational objectives, the classification of educational goals. Handbook I: Cognitive domain*.
- Board of Higher Education & Massachusetts Organization of Nurse Executives. (2006). *Creativity and connections: Building the framework for the future of nursing education and practice*.  
<http://www.mass.edu/currentinit/documents/NursingCreativityAndConnections.pdf>
- Centers for Disease Control and Prevention. (2017). *Isolation precautions*.  
<https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html>
- Cronenwett, L., Sherwood, G., Barnsteiner, J., Disch, J., Johnson, J., Mitchell, P., Sullivan, D.T., & Warren, J. (2007). Quality and safety education for nursing. *Nursing Outlook*, 55(3), 122-131. doi:10.1016/j.outlook.2007.02.006
- Guskey, T.R. (2010). Lessons of mastery learning. *Educational Leadership*, 68(2), 52-57.
- Erikson, E.H. (1993). *Childhood and society: The landmark work on the social significance of childhood* (Reissued edition). W.W. Norton & Company, Inc. (Original work published 1950, 1963).
- Herdman, T. H., Kamitsuri, S., & Takáo Lopes, C. (Ed.). (2018). *NANDA Nursing diagnoses:*

- Definitions and classification, 2021-2023.* (12<sup>th</sup> ed.). Wiley-Blackwell.
- Institute of Medicine. (2001). *Crossing the quality chasm: A new health system for the 21st century.* The National Academies Press.
- Kolb, D.A. & Boyatzis, R.E. (1999). *Experiential learning theory: Previous research and new directions.* <https://www.d.umn.edu/~kgilbert/educ5165731/Readings/experiential-learning-theory.pdf>
- National Council of State Boards of Nursing. (2011). *White paper: A nurse's guide to the use of social media.* [https://www.ncsbn.org/Social\\_Media.pdf](https://www.ncsbn.org/Social_Media.pdf)
- National League for Nursing. (2010). *Outcomes and competencies for graduates of practical/vocational, diploma, associate degree, baccalaureate, master's, practice doctorate, and research doctorate programs in nursing.* Author.
- National Student Nurses' Association. (2023). *About us.* <https://www.nsna.org/about-nsna.html>.
- Nurse of the Future Competency Committee. (2016). *Massachusetts nurse of the future nursing core competencies: Registered nurse.*  
[https://www.mass.edu/nahti/documents/NOFRNCompetencies\\_updated\\_March2016.pdf](https://www.mass.edu/nahti/documents/NOFRNCompetencies_updated_March2016.pdf)
- Orem, D.E. (2001). *Nursing concepts of practice* (6th ed.). Mosby.
- Raschick, M., Maypole, D.E., & Day, P.A. (1998). Improving field education through Kolb learning theory. *Journal of Social Work Education, 34*(1). 31-42.  
doi:10.1080/10437797.1998.10778903
- Wesley, R. (1995). *Nursing theories and models* (2nd ed.). Springhouse Publishing.

# APPENDICES/FORMS

## APPENDIX A

### ACADEMIC CLINICAL SUCCESS FORM

**Purpose:** The academic clinical success process is to be used by faculty when meeting with students to discuss tools for student clinical and didactic success.

<b>Name</b>		<b>Pronouns</b>		<b>Student ID</b>	
<b>Current Course</b>		<b>Semester</b>		<b>Date</b>	

#### Potential Barriers to Success

<input type="checkbox"/> Math	<input type="checkbox"/> Reading/Vocabulary	<input type="checkbox"/> Content	<input type="checkbox"/> Memorization	<input type="checkbox"/> Organization/Time Management	<input type="checkbox"/> None identified
Are you currently receiving SAS services?			<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, do you feel you are benefitting by SAS services? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have issues with transportation?			<input type="checkbox"/> Yes <input type="checkbox"/> No	Resource:	
How many hours per week do you work?					
Do you have competing priorities on your time at home?					
Do you struggle with homelessness?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you struggle with food insecurity?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
What do you do to relieve stress?					

#### Explain your Study Plan

How long do you study daily?  
What are you using as study resources?

What are your study strategies?

Are you utilizing any college support services? ☐ Yes ☐ No

Do you attend test reviews? ☐ Yes ☐ No ☐ Reading Questions ☐ General Knowledge ☐ Test Taking Skills

#### Your Learning Style:

Learning Style: ☐ Visual ☐ Kinetic ☐ Auditory ☐ Read/Write

What can an instructor do to facilitate your learning?

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

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

**Follow Up Meeting Dates (see starfish for detailed notes):**

**Student Learning Contract (indicate exam remediated):**

Test remediation date:

Follow up remediation date:

Student Resource	Web page	Phone and Email
Office of Counseling and Wellness	<a href="http://www.qcc.edu/services/office-counseling-and-wellness">www.qcc.edu/services/office-counseling-and-wellness</a>	508.854.4479 <a href="mailto:counselingandwellnessoffice@qcc.mass.edu">counselingandwellnessoffice@qcc.mass.edu</a>
Student Accessibility Services	<a href="http://www.qcc.edu/services/student-accessibility-services">www.qcc.edu/services/student-accessibility-services</a>	508.854.4471 <a href="mailto:sas@qcc.mass.edu">sas@qcc.mass.edu</a>
Alden Library or Downtown Library	<a href="http://www.qcc.edu/services/library">www.qcc.edu/services/library</a>	508.854.4366 or 508.751.7950 <a href="mailto:reference@qcc.mass.edu">reference@qcc.mass.edu</a>
HLC: General Academic Areas for Tutoring	<a href="http://www.qcc.edu/services/tutoring">www.qcc.edu/services/tutoring</a>	508.854.4279 <a href="mailto:tutoringcenters@qcc.mass.edu">tutoringcenters@qcc.mass.edu</a>
ThinkingStorm Online Tutoring	Access through Blackboard	877-889-5996 <a href="mailto:care@thinkingstorm.com">care@thinkingstorm.com</a>

### End of Semester Status

Student: ☐ met expected outcome      ☐ has not met expected outcome

Faculty: ☐ reported to next NUR/PNP course if applicable

☐ will continue as ACS mentor in next NUR/PNP course

Faculty signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Instructions for Faculty:

	<i>White Copy</i>	<i>Pink Copy</i>	<i>Yellow Copy</i>
Deliver to:	Nursing Program Clerks	Student	Student
Following:	End of semester	Remediation Session	Follow-Up Evaluation

Revision Date: 5/16/2023

## APPENDIX B

### NURSING STUDENT REQUEST FOR AUDIO RECORDING LECTURES

Student Printed Name: \_\_\_\_\_ Course: \_\_\_\_\_

*If granted permission by faculty, I agree to the following:*

- I will not record anything other than lectures by the professor(s) in the course listed above for the current semester only.
- I will only use the lecture recordings for my own personal educational use.
- I understand that recordings are protected under copyright laws and I will not share with others, publish, or post on any website.
- The recording will not be used against faculty or students in any way.
- I will destroy/delete the recording at the completion of this course.
- I will follow all college, nursing program, and course policies regarding recording.

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_/\_\_/\_\_

*Submit this form to course faculty.* Faculty will review each request for recording lectures on a case-by-case basis. Students may not record lectures unless granted permission from each faculty.

Faculty use only:

Does student have a Student Accessibility Accommodation form including lecture audio recording? ☐ No ☐ Yes (If yes, request is automatically approved)

Course Faculty Printed Name	Approved?	Faculty Signature

Provide a copy of signed form to student with faculty decision(s).

## APPENDIX C

### NURSING SKILLS LAB REFERRAL FOR REMEDIATION

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_ Nursing Course: \_\_\_\_\_  
Program: \_\_\_\_\_ Associate Degree Nursing \_\_\_\_\_ Practical Nursing

The purpose of this document is to inform you that your clinical performance is not at the expected competency level. You have been unable to satisfactorily perform nursing skill(s) previously demonstrated.

NURSING SKILL(S)	Requires Instruction	Requires Re-Testing

**Directions Provided to Student:**

You must contact the Nursing Skills Lab Coordinator to arrange an appointment. Remediation must be completed within 7 days of this notice.

Bring this form with you and present it to the Nursing Skills Lab Coordinator on the date of your scheduled appointment.

If you do not successfully complete remediation within seven days, you will not be permitted to return to clinical, which will result in clinical absence. Upon completion of successful remediation, present the signed copy of the Remediation Summary to your clinical instructor upon return to the clinical area. The original of this document is filed in your record.

Your signature below indicates that you have been notified of the above unsatisfactory performance, have read, and understand your responsibilities as outlined in this document.

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

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

\*\*\*\*\*

### REMEDIATION SUMMARY

Appointment Date / Time: \_\_\_\_\_

Nursing Skill(s)	Remediation Summary

- ☐ Student has attained expected level of performance
- ☐ Student has not attained expected level of performance or did not attend remediation - Course/Clinical Faculty & Program Coordinator Notified

Plan of Action: \_\_\_\_\_

**Student Directions:**

- ☐ Present signed copy of this form to your Clinical Instructor upon return to the clinical area
- ☐ Other: \_\_\_\_\_

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

\_\_\_\_\_  
Nursing Skills Lab Coordinator Date

## **APPENDIX D**

### **STATEMENT OF CONFIDENTIALITY**

I agree that, except as required by subpoena or other legal process, I will not divulge any patient information which comes to me through carrying out my responsibilities as a student in the nursing program at Quinsigamond Community College.

This includes:

1. Discussing any patient or any information pertaining to any patient or his/her family with anyone (including my own family or friends), who is not directly involved in providing care to the patient other than in a nursing class or clinical setting.
2. Discussing any patient, or any information pertaining to any patient or his/her family, in any location where it can be overheard by anyone not directly involved in providing care to the patient.

I will not contact any individual or agency outside of this institution to get or give information about a patient.



## **APPENDIX E**

### **PHOTOGRAPH/ VIDEO (FILM) / AUDIO RELEASE**

Please read carefully:

I agree to be photographed and/or videotaped as a learner and hereby grant permission to **Quinsigamond Community College** and its agents or employees to use, without restriction or remuneration, for education or research, any photographs, video and/or audio (“media”) taken of me during this session. I understand and acknowledge the use of this media, at the discretion of the college, may be of benefit to the college, the healthcare professions, and the public at large.

I hereby guarantee that any information about the teaching scenarios, simulation exercises, and the performance of other learners will be held in confidence and will not be communicated in any form.

**I accept and acknowledge that personal recording of any component of this session is strictly forbidden.**

I am 18 years of age or older and have read this release before signing below, fully understanding the contents, meaning, and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

## **APPENDIX F**

### **QUINSIGAMOND COMMUNITY COLLEGE NURSE EDUCATION DEPARTMENT**

#### **STATEMENT OF UNDERSTANDING REGARDING CLINICAL AND THEORY PROCESS**

I have read the current academic year\* Nursing Student Handbook and course materials, and I understand all of the implications. In order to pass any Nursing course, I must achieve a grade of “C+” (77%) or better in theory and must receive a satisfactory in Clinical Practice/Clinical Lab. A failure in Clinical Practice/Clinical Lab in any clinical rotation will constitute a failure (“F”) for the course and I will not be allowed to continue in course and clinical activities.

\*Academic year runs from Fall to following Spring into Summer.

## **APPENDIX G**

I **voluntarily** partake in QCC Associate Degree or Practical Nursing Program blood glucose measuring lab. During this lab I agree to perform a finger stick on myself to obtain a drop of blood or will use the control substance provided with the glucose meter for this lab, using correct universal precautions as practiced in the laboratory and clinical setting.

### **INDEMNIFICATION / HOLD HARMLESS AGREEMENT**

The student shall be responsible for, and agrees to indemnify and hold harmless the Massachusetts Board of Higher Education and its executive officers and Quinsigamond Community College, and its trustees, executive officers, agents, employees, students, and providers, from all loss, damage suits, claims, costs, expenses, demands, judgments or liabilities of whatsoever kind or nature arising out of or in any way connected with the student's enrollment in the Associate Degree or Practical Nursing Program's undertakings, activities, or performances under this permit whether they are due or claim to be due to any negligence of the College or any internship provider, its officers, agents, employees, or students.

In the event of any such claim and/or litigation arising out of, or in any way connected with the student's activities under this agreement, the student shall take charge of any such claim and/or litigation and shall be responsible for defending same at his/her own expenses through legal counsel designated by the student or his/her insurer. The College and any internship provider shall have the right in their discretion and without obligation to provide counsel to participate with the student in the conduct of the defense. The student shall pay his or her own expenses and any and all judgments arising out of or resulting from any and all such claims and/or litigation.

## APPENDIX H

### CLINICAL SITE INFORMATION

<b>Abbey Kelley Foster Charter Public School</b> 10 New Bond St Worcester, MA, 01606/508-854-8400	<b>Northboro Southboro Public Schools</b> 53 Parkerville Rd Southboro MA 01772 /508-852-3011
<b>AdCare Hospital</b> 107 Lincoln St Worcester, MA 10605 / 866-493-4187	<b>Notre Dame Health Care</b> 559 Plantation St. Worcester, MA 01655 / 508-852-5800
<b>Assabet Valley Collaborative</b> 57 Orchard Street Marlborough, MA 01752/508-481-3611	<b>Oxford Public Schools</b> 4 Maple Rd. Oxford MA 01540 /508-987-6081
<b>Auburn Public School</b> 5 West St. Auburn, MA 01501 /508-832-7788	<b>Saint Vincent Hospital</b> 123 Summer St Worcester, MA 01608 / 508-363-5000
<b>Berlin- Boylston Regional School District</b> 215 Main Street Boylston, MA 01505/	<b>Shrewsbury Public Schools</b> 100 Maple Avenue Shrewsbury, MA 01545 / 508-841-1226
<b>Countryside Healthcare of Milford</b> 1 Countryside Dr. Milford, MA 10757 / 508-473-0435	<b>UMass Memorial Health Alliance: <u>Leominster Hospital</u></b> 60 Hospital Rd. Leominster, MA 01453 / 978-466-2000
<b>Grafton Public Schools</b> 22 Providence Rd Grafton MA, 01519 /508-839-5420	<b>UMass Memorial: <u>Marlborough Hospital</u></b> 157 Union St. Marlborough, MA 01752 / 508-481-5000
<b>Harrington UMass Memorial Hospital</b> 100 South St. Southbridge, MA 01550 / 508-765-9771	<b>UMass Memorial: <u>PTRC Unit</u></b> 26 Queen St. Worcester, MA 01655 / 508-334-2670
<b>Harrington Health Care</b> <b>Co-Occurring Disorders Unit (CDU)</b> 340 Thompson Rd. Webster, MA / 508-640-2986	<b>UMass <u>University Campus</u></b> 55 Lake Ave. N. Worcester, MA 01655 / 508-334-1000
<b>Holden Rehabilitation and Skilled Nursing Center</b> 52 Boyden Road Suite 206 Holden, MA 01520 /508-829-4327	<b>UMass <u>Memorial Campus</u></b> 119 Belmont St Worcester, MA 01605 / 508-334-1000
<b>Holy Trinity Nursing &amp; Rehab Center</b> 300 Barber Ave. Worcester, MA 01606 / 508-852-1000	<b>Vibra Hospital of Western Mass</b> 111 Huntoon Memorial Highway Rochdale, MA 01542 / 717-954-0278
<b>Jewish Health Care</b> 629 Salisbury St. Worcester, MA 01609 / 508-798-8653	<b>West Boylston Public School</b> 125 Crescent Street West Boylston, MA 01583/ 508-835-2917
<b>Life Care Center of Auburn</b> 14 Masonic Circle Auburn, MA 01501 / 508-721-2400	<b>Worcester Public School System</b> Nursing Department: 40 Apricot St. Worcester, MA 01603 / phone # is school specific
<b>Milford Regional Hospital</b> 14 Prospect St. Milford MA 01757 / 508-473-1190	<b>Worcester Recovery Center and Hospital</b> 309 Belmont St Worcester, MA 01604 / 508-368-4000

## **APPENDIX I**

### **QUINSIGAMOND COMMUNITY COLLEGE NURSE EDUCATION DEPARTMENT**

#### **STATEMENT OF AGREEMENT STUDENT SIGNATURE/ACKNOWLEDGMENT**

Upon my signature, I agree that I have read, understand and will abide by all of the processes/ policies/ statements located in the Associate Degree Program Nursing Student Handbook for the current academic year, including the following documents:

- Statement of Understanding Regarding Clinical and Theory Process
- Statement of Confidentiality
- Photograph / Video (Film) / Audio Release Form
- Indemnification / Hold Harmless Agreement
- Clinical Simulation / Laboratory Policy
- Good Moral Character Policy

\*I further understand that the Nurse Education Program reserves the right to modify the curriculum and policies as needed. These changes may occur at any point during enrollment. Students currently enrolled in the program will be notified of changes in writing and will be asked to sign a document acknowledging receipt. The student signature may be an original signature, electronic signature, typed name via email, or learning management system submission (Blackboard).

**Full Name Printed:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Student ID#** \_\_\_\_\_ **Date:** \_\_\_\_\_

*If you have any questions about this form or the Associate Degree Program Nursing Student Handbook, please see course faculty or the Program Coordinator.*