

QUINSIGAMOND COMMUNITY COLLEGE

NURSE EDUCATION DEPARTMENT



ASSOCIATE DEGREE PROGRAM NURSING STUDENT HANDBOOK

FALL 2025/SPRING 2026/SUMMER 2026

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

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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. Shannon Overcash, Associate Director of Compliance/Title IX & Title VI Coordinator, can be reached at 508-854-7408 (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 Shannon Overcash, QCC Associate Director of Compliance/Title IX & Title VI Coordinator, or Sara Simms, Executive Director of Human Resources/Affirmative Action Officer (<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 decisions and achievement of positive outcomes.

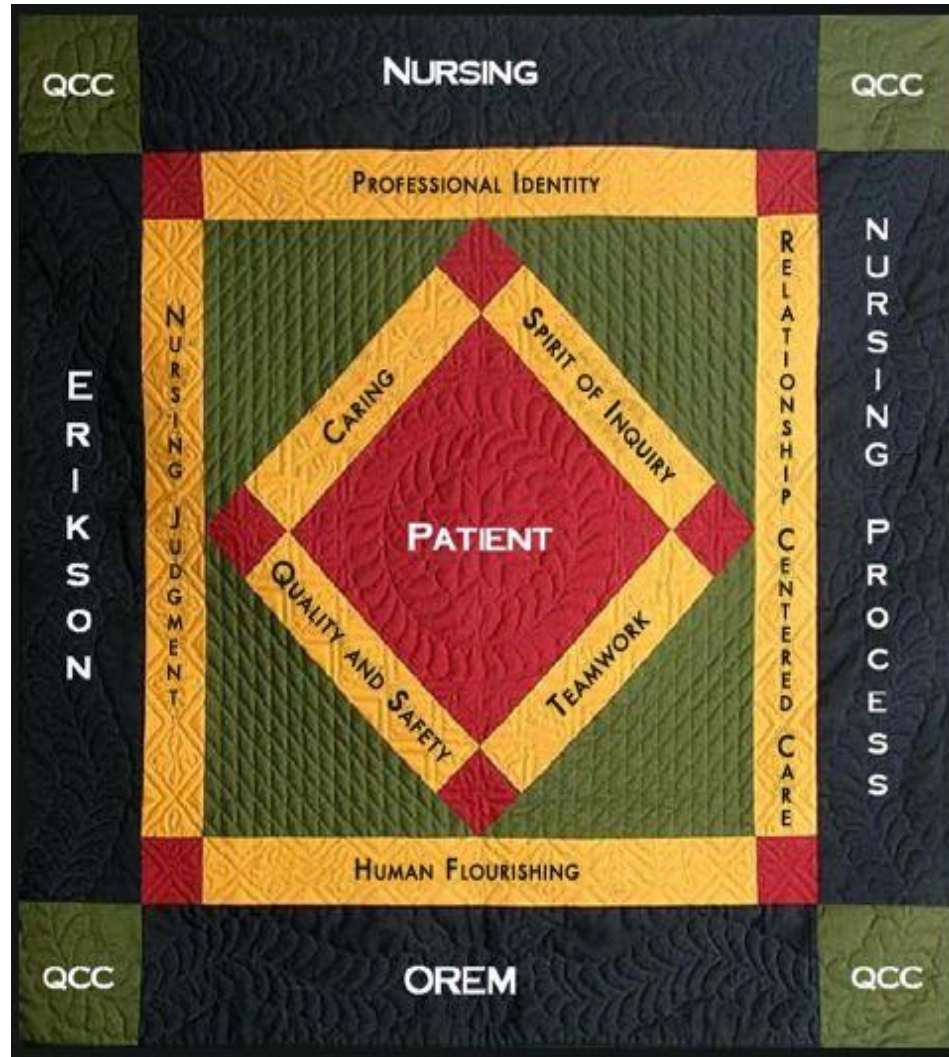
Nursing education/scholarship occurs within a system of higher education and is a planned approach to the acquisition of knowledge. Nursing education progresses from the simple to the complex, facilitates the development of cognitive, psychomotor and affective knowledge and provides for multiple points 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 in Science 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 emancipation
- 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 emancipation
- 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

Stage	Age	Central Task	Indicators of Positive Resolution	Indicators of Negative Resolutions
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

Remembering (Knowledge)	Understanding (Comprehension)	Applying (Application)	Analyzing (Analysis)	Evaluating (Synthesis)	Creating (Evaluation)
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.*

**NURSE EDUCATION ASSOCIATE in SCIENCE DAY (NUR)
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 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 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		7.5	10	12.5	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	32.5	12.5	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 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 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

The policies in this section apply to the Nurse Education Department, which includes the Practical Nursing Certificate and Associate of Science in Nurse Education program options.

ACADEMIC AND PROFESSIONAL INTEGRITY POLICY

Policy Title	Academic and Professional Integrity
Policy Purpose	To promote an environment of intellectual honesty, professionalism, trust, and integrity
Scope and Applicability	Policy applies to all students enrolled in the Nurse Education Department
Definitions	• Integrity refers to the behavior or conduct expected of students in all settings including honesty, professionalism, trustworthiness, respect, and responsibility. • Academic dishonesty includes cheating, plagiarism, or knowingly furnishing false information. • Plagiarism is the representation of another's work as one's own. • Incivility is failing to treat others with dignity and respect. • Program warning is given to a student by nursing faculty for violating the academic and professional integrity policy (in addition to any college-imposed sanctions).
Policy Statement	Nursing students are expected to behave in an ethical, professional, safe, and collegial manner, and adhere to published policies while in the program. 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 Code of Ethics can be viewed here: https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/code-of-ethics-for-nurses/ Plagiarism/False Information/Cheating 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 credit sources in an essay. Students uncertain about what constitutes plagiarism or cheating should seek help from faculty or from appropriate college services. Turnitin is 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 will 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 include: failing to cite the source of information, submitting a paper or test completed 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.

	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 include: posting a faculty developed PowerPoint or handout to a website such as CourseHero, sharing Kaplan or ATI questions/content with a friend or website such as Quizlet, downloading, copying or printing copyrighted materials without permission of the author/owner, etc. Incivility The QCC nursing program aims to create an ethical environment and culture of civility. 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. See also QCC Code of Conduct Policy.
Roles	Student, Faculty, Program Coordinator, Dean of Students
Procedures and Responsibilities	• Student – responsible for behaving in an ethical, professional, safe, and collegial manner while adhering to published policies. • Faculty – oversees students in the class, lab, simulation, and clinical settings. Faculty will notify the program coordinator of any issues related to plagiarism, cheating, or incivility, and document policy violations through a college incident report, clinical evaluation, program warning, or other relevant form specific to the incident. • Program Coordinator – will assist faculty with documenting student issues • Dean of Students - reviews and tracks student incident reports and may impose sanctions.
Enforcement and Consequences	Consequences of policy violation include receiving a zero for the assignment, course failure, clinical failure, program warning, and/or dismissal from the program. Faculty completes a QCC Student Incident Report and the Dean of Students determines sanctions based on the severity of the incident and previous Code of Conduct issues. In addition, posting/sharing of propriety content is subject to the policies of the owner of the content. A Program Warning remains active throughout the student's enrollment in the program. Two or more program warnings will result in immediate dismissal through Administrative Withdrawal by the Dean of the School of Healthcare (see Withdrawal Policy).

ADMISSION POLICY

Policy Title	Admission
Policy Purpose	To identify candidates who possess evidence of potential for successful program completion and licensure exam performance. Each candidate is evaluated on an individual basis according to established and published admission criteria.
Scope and Applicability	Applies to students interested in the Quinsigamond Community College (QCC) Nurse Education Department. Program options include Practical Nursing Certificate and Associate of Science in Nurse Education.
Definitions	• Admission refers to the process by which a student qualifies for placement in one of the Nurse Education Department program options • Waitlist describes the rolling admissions process by which students qualify for placement into one of the program options. Students on the waitlist are assigned a designated start term (expected date of enrollment) but may be asked to start the program option sooner if space becomes available. • Program options include: LP, LPE, LPA, NUR, NUL, and NUP • Expedited placement – once qualified for a program option, a student can request a fast-track to enrollment if certain criteria is met, including, but not limited to completion of a designated QCC health certificate program.
Policy Statement	See the QCC College Catalog https://www.qcc.edu/catalog and the program-specific websites for the admission process and requirements. Expedited placement is available to students who meet the qualification criteria. Please see the Advising Office for additional information.
Roles	Student, Admissions Office, Advising Office, Registrar
Procedures and Responsibilities	• Student – completes a Major Change form, responds to communication from the Registrar's Office to verify ongoing interest in starting the requested program option. Once notified of acceptance into the program option, the student is required to attend program specific orientation and meet the health requirements by the designated deadline. • Admissions Office – reviews the student record to ensure the program admission requirements are met. • Advising Office – guides students in selecting courses required to meet the admission criteria of the desired program and provides information related to the program options. • Registrar – places student on the program waitlist once qualified by the admissions office and sends a qualification letter to the student with the designated start term. Communicates with the student to verify ongoing intent to start the program at the specified time. Enrolls the student in the program option before the designated start term begins.
Enforcement and Consequences	If the student does not meet the admission requirements at the time that a Major Change form is completed, they can reapply in the future once the requirements have been met. A student who does not verify ongoing intent to start the program, defers enrollment more than one time, does not attend program orientation, or fails to meet the health compliance deadline will be removed from the program option waitlist by the Registrar.

ADVANCED PLACEMENT POLICY

Policy Title	Advanced Placement
Policy Purpose	To establish advanced placement within the Nurse Education curriculum while remaining in compliance with admission policies and procedures and curriculum requirements.
Scope and Applicability	Applies to students seeking enrollment in the NUL or NUP program options
Definitions	Advanced Placement allows eligible students, such as Licensed Practical Nurses (LPNs) and paramedics, to enter the program at a level beyond the traditional first semester of nursing courses, shortening the time to complete the associate degree. These options are designed to build upon prior healthcare experience and education.
Policy Statement	Advanced Placement occurs when NUP students (paramedics) complete NUR 100 and NUR 101 and when NUL students (LPNs) complete NUR 101. Students who complete the course(s) successfully with a C+ grade or better are granted advanced placement into the NUR 108 course. This is designated on the college transcript as NUR 888 for the appropriate number of credits.
Roles	Student, Advanced Placement Program Coordinator, Coordinator for Career Services & Credit for Prior Learning, Registrar
Procedures and Responsibilities	• Student – applies to the NUL or NUP program option, provides the required documentation to meet the admission requirements to qualify for advanced placement, and successfully completes NUR 101. • Advanced Placement Program Coordinator – upon student’s successful completion of NUR 101, the program coordinator sends a list of student names to the Credit for Prior Learning Office. • Career Services & Credit for Prior Learning – upon receiving the list of student names from the Advanced Placement Program Coordinator, reviews each student record for credentialling to receive credit for NUR 888. • Registrar – applies credit for NUR 888 to student’s transcript after verification is completed
Enforcement and Consequences	Students will not be granted a degree upon completion of the NUL or NUP program option unless the transcript shows credit was given for NUR 888.

ATTENDANCE POLICY

Policy Title	Attendance Policy
Policy Purpose	To provide direction related to attendance and a mechanism for clinical (and lab and simulation) makeup time to assure all students are held to the same standard.
Scope and Applicability	Applies to all students enrolled in the Nurse Education Department
Definitions	• Attendance - the physical presence and active participation of the student at designated times, places, and activities. • Absence – student is not present for clinical/lab/simulation within 15 minutes of the scheduled start time. • Group absence – the clinical/lab/simulation group is not present due to college closure, faculty absence, clinical site cancellation or other circumstance outside the control of individual students. • Tardiness – student is late but arrives within 15 minutes of the scheduled start time of clinical/lab/simulation • Leaving early – student leaves the clinical/lab/simulation before the scheduled end time and/or before the rest of the group • No call/no show - failure to notify the clinical/lab/simulation faculty of absence at least 30 minutes prior to the scheduled start of the clinical/lab/simulation experience • Make-up – the student will complete the time missed due to absence, tardiness, or leaving early on a day and time to be arranged by the course faculty • Exempt – a student will not be subject to the conference summary/warning/failure consequences for one of the qualifying circumstances if the student submits the proper notification and documentation (See the enforcement and consequences section) • Good academic standing – the student has a passing grade (≥ 73 for PN and ≥ 77 for NUR, NUL, NUP) in the didactic portion of the nursing course
Policy Statement	Classroom Attendance Students are encouraged to attend all classroom activities. Students are responsible for all missed content. 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. • There are NO excused absences, tardiness, or leaving early - all missed time will be made up. • 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 not to attend clinical/lab/simulation if feeling ill (see Illness policy). If a student arrives at the clinical/lab/simulation feeling unwell or becomes ill during the scheduled time, they will be immediately dismissed and will be required to make up the missed time. • 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 absence or tardiness via phone, text, and/or email at least 30 minutes prior to the scheduled start of the clinical/lab/simulation experience, otherwise it is considered a no call/no show.

	Tardiness, leaving early, and dismissal from clinical/lab/sim: • If a student is more than 15 minutes late, leaves early (regardless of notification), or is dismissed, the student is considered absent. 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 Without an official announcement, the faculty will make an internal decision about whether to attend, delay or cancel clinical based on conditions near the clinical site. Students are responsible for making their own decision 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, Program Coordinator, and Clinical Coordinator in the event of clinical cancellation. • See the group absence make-up section in the Procedures and Responsibilities section.
Roles	Student, course faculty, clinical/lab/simulation faculty, Clinical Coordinator, Program Coordinator, Program Assistant
Procedures and Responsibilities	• Student – must notify clinical/lab/simulation faculty of absence, tardiness, or leaving early at least 30 minutes prior to the scheduled start time. Schedules an appointment with the Program Coordinator if given a warning or failure, or if one of the exempt criteria applies. Makes up missed time prior to receiving a final course grade. • Course faculty - track all tardiness, leaving early, and absences based on clinical/lab/sim faculty reports. Course faculty will work with the clinical/lab/sim faculty to deliver conference summary/warning/failure documentation to the student and determine make up days/times. Assigns an incomplete grade if missed time is not made-up within 48 hours of the final exam and converts the incomplete to a letter grade following completion of missed time. • Clinical/lab/simulation faculty (if different from course faculty) - document attendance and report to the course faculty. Work with the course faculty to deliver conference summary/warning/failure documentation to the student and determine make up days/times. ○ All documents (conference summary, warning, failure) are copied or cc'd to the Program Coordinator and given to the Program Assistant for filing in the student record. • Clinical Coordinator – works with the course faculty to schedule clinical make-up days and coordinates scheduling with the clinical facility. • Program Coordinator – meets with student if placed on clinical warning, clinical failure, or if the student meets one of the exempt criteria. Communicates with course faculty if exempt criteria applies to the student situation. • Program Assistant – files the documentation related to student absence/tardiness/leaving early

Enforcement and Consequences	No call/no show: • 1st: clinical/lab/sim warning (failure if previously given attendance conference summary) • 2nd: clinical/lab/sim failure • A student cannot have any additional absences with a no call/no show during the semester. A second absence, regardless of notification, will result in course failure. • A student with a conference summary for attendance who has a no call/no show will result in course failure. Absence/tardiness/leaving early: • 1st: conference summary • 2nd: warning • 3rd: failure An absence/tardiness/leaving early may be considered <i>exempt from the conference summary/warning/failure consequences</i> for the circumstances below if the student submits the proper notification and documentation to the Program Coordinator (and other QCC offices as specified) within one week unless otherwise indicated. <i>The student is required to make up the missed time.</i> If the student is going to miss more than three clinical/simulation/lab days then the student will meet with the Program Coordinator to determine if make-up is feasible (no more than 4 days can be made up), course withdrawal is warranted (see withdrawal policy), or an incomplete (I) grade is appropriate: • Title IX: communicate with Program Coordinator and Title IX Coordinator. Provide documentation from health care provider to Title IX Coordinator 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 to the Program Coordinator including name of the deceased, date of services, and relationship to the student • Mandated court appearance: show copy of summons or court document to the Program Coordinator • Religious observance: submit statement to the Program Coordinator including the date of the religious observance at least two weeks prior to the planned absence. Make-Up: • All missed clinical, lab, and simulation will be made up using virtual or in person lab, simulation, and/or on-site clinical at the clinical site and will be comparable to the time missed. ○ Missed clinical time made up in lab/sim is limited to one day, additional days will be made up at the clinical site if feasible based on faculty and clinical site availability. If make up at the clinical site is not possible, then lab/sim make up will occur. • Make-up will occur during the semester (if feasible based on faculty and clinical site availability) 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. 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.
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	Group absence clinical make-up: • One written or virtual makeup is allowed for each clinical rotation due to group absence. • 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.
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COURSE EXEMPTION POLICY

Policy Title	Course Exemption
Policy Purpose	To provide a mechanism by which students are provided information regarding course exemption.
Scope and Applicability	Applies to students in the Nurse Education Department
Definitions	Course Exemption refers to the official permission granted by an educational institution allowing a student to skip a specific course that is normally required for a program of study.
Policy Statement	Students can request course exemption to receive credit for previous coursework, training, and healthcare experience. This applies to students applying to: • NUL and NUP program options - see Advanced Placement policy • Transfer from one nursing program option to another - see Transfer policy
Roles	Student, Program Coordinator, Registrar
Procedures and Responsibilities	• Student – requests course exemption and provides documentation to support the request • Program coordinator - reviews the documentation from the student and determines if the student qualifies for exemption. • Registrar - applies credit for the previous coursework if the student qualifies for exemption based on advanced placement or transfer.
Enforcement and Consequences	Failure to submit the required documentation or denial of the request based on lack of meeting the advanced placement or transfer criteria will result in credits not being awarded for requested courses.

EDUCATIONAL MOBILITY POLICY

Policy Title	Educational Mobility
Policy Purpose	To create a mechanism, consistent with program philosophy, for individuals to move seamlessly from one educational level to another, while acknowledging acquired competencies and minimal repetition of previous learning.
Scope and Applicability	Policy applies to all students in the Nurse Education Department
Definitions	• Educational mobility refers to the ability of individuals to attain a higher level of education
Policy Statement	Students are urged to pursue advanced education upon completion of the program of study at QCC.
Roles	Student, Program coordinator, program administrator, transfer office
Procedures and Responsibilities	• Student - contact the QCC Transfer Office and program of their choice for specific information and consideration of transfer credit • Program Coordinator – provides information and encourages students in the last semester of the nursing program regarding opportunities for attaining a higher level of education. • Program Administrator – works with the Program Coordinator to share information about educational mobility opportunities • Transfer Office – meets with students interested in seeking a higher level of education, and provides information relative to articulation agreements https://www.qcc.edu/services/transfer/transfer-agreements
Enforcement and Consequences	Failure to adhere to the process will result in loss of educational mobility opportunity.

GRADUATION POLICY AND LICENSURE

Policy Title	Graduation Policy and Licensure
Policy Purpose	To establish process to enable students to qualify for graduation.
Scope and Applicability	Applies to all students in the Nurse Education Department who are seeking eligibility for graduation and licensure
Definitions	• Graduation refers to the process of earning a certificate or associate degree by meeting all the requirements of a program option. Students who meet all requirements are then referred to as a graduate of the program option as of the date of graduation. • Licensure refers to authorization of an individual to practice nursing granted by a state board of nursing following successful completion of a national exam. • NCLEX - National Council Licensure Exam to determine if a graduate from an accredited nursing program is safe for entry-level practice; eligibility requires meeting requirements of the state board of nursing. PN graduates take the NCLEX-PN, and associate degree nursing graduates take the NCLEX-RN. Graduates cannot use the title of LPN or RN until they have successfully completed the NCLEX exam.
Policy Statement	Students must satisfy all course and program requirements including attendance and conduct to be eligible for graduation – see the QCC graduation policy. To be eligible for licensure, a graduate must meet the requirements of the Board of Registration in Nursing in the state where licensure is requested, including the Good Moral Character requirement. Good Moral Character Students and nurses are expected to act in ways which safeguard the patient and the public at all times. The Massachusetts Board of Registration in Nursing has a Good Moral Character (GMC) policy. Massachusetts General Laws (MGL) Chapter 13, sections 13, 14, 14a, 15 and 15D and Chapter 112, sections 74 through 81 C authorize the Board of Registration in Nursing to regulate nursing practice and education. Pursuant to these laws, the MA 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 Board to determine licensure applicant compliance with the “good moral character” licensure requirement established in the MGL, Chapter 112, section 74 and 74A. Nursing graduates are evaluated for GMC in accordance with regulations. https://www.mass.gov/info-details/good-moral-character-requirements-for-nursing-licensure. A student who wishes to discuss Good Moral Character is encouraged to make an appointment with the Program Administrator.
Roles	Student, Program Coordinator, Registrar, Program Administrator
Procedures and Responsibilities	• Student ○ Complete an “Intent to graduate” form with the Registrar’s office during the last semester of the nursing program. ○ Fills out the Certificate of Graduation form ○ Complete the NCLEX review course ○ Apply for licensure upon successful completion of the nursing program requirements. The application includes documentation of good moral character and clearance through child protective services. ○ Pay the fees associated with the licensure application process, including passport photo, notary services, etc.

	○ Requests accommodations (if needed) by contacting the state board of nursing prior to applying for NCLEX • Program Coordinator – works with the Program Administrator to inform students of the process for applying for licensure during the last semester of the nursing program • Program administrator - signs the Certificate of Graduation forms and obtains transcripts from Registrar's office validating student completion of all program requirements. Forwards all required documentation on behalf of the graduates. • Registrar – provides original copies of graduate transcripts to the Program Coordinator following completion of all program requirements and validates the Certificate of Graduation forms.
Enforcement and Consequences	Failure to satisfy all program requirements will result in being ineligible for graduation and licensure. Failure to satisfy requirements as defined by the state Board of Nursing will result in ineligibility to complete the NCLEX licensure exam. The Board of Nursing 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, including information obtained through CORI and Child Protective Services reports completed with the MA Board of Registration in Nursing.

MILITARY POLICY

Policy Title	Military Policy: Transfer or Advanced Placement of Military Education, Training, or Service for a Military Healthcare Occupation
Policy Purpose	To establish a process by which prior military education, service, and training is evaluated for credit.
Scope and Applicability	Applies to students seeking credit for prior military education, training, and/or service.
Definitions	• Military – of or relating to the armed forces, students with active, reserve, or veteran status • Credit for Prior Learning provides opportunities to earn credit for learning acquired through life experiences: including work, the military, and non-collegiate training programs.
Policy Statement	QCC does not provide training specific to the military, however the Nurse Education Department 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.
Roles	Student, Veteran Affairs Office, Credit for Prior Learning Office, Registrar
Procedures and Responsibilities	• Student - must contact and provide documentation to the QCC Veteran's Affairs Office located in 125A (Administration Building), email veteranaffairs@qcc.mass.edu or call 508-854-4290 to qualify for military status at the college. • Veteran's Affairs Office - works with students to confirm military status and informs students of benefits associated with military status • Credit for Prior Learning Office – reviews student record for applicable credits for general education courses and sends recommendation to the Registrar https://theq.qcc.edu/ICS/Student_Services/Credit_for_Prior_Learning_(CPL).jnz • Registrar – applies credit to general education courses as recommended by the Credit for Prior Learning Office for students with prior military education, training, and/or service.
Enforcement and Consequences	Students with military education, training, and/or service who do not request credit for prior learning will not receive credit for general education courses.

PROGRESSION POLICY

Policy Title	Progression
Policy Purpose	To identify academic standards for passing at the conclusion of each course and reflect achievement of course student learning outcomes
Scope and Applicability	Applies to students in one of the Nurse Education Department program options
Definitions	- Progression is the advancement of a student to the next nursing course - Curriculum as applied in 244 CMR 6.00, means a planned sequence of course offerings and learning experiences comprising the nursing education program.
Policy Statement	NUR, NUL, and NUP program options: - To progress to the next NUR nursing course, the student must achieve a grade of “C+” (77%) or better in the NUR designated course(s). - Students who start the program prior to Fall 2027: - Must receive a grade of “C” (73%) or better in the <i>science courses</i> required in the curriculum. - Students who return or readmit to the program must receive a grade of “C” (73%) or better in the <i>science courses</i>, unless the program is restarted from the first nursing semester during or after Fall 2027. - Students enrolling in the first nursing semester during or after Fall 2027: - Must receive a grade of “C” (73%) or better in <i>all general education courses</i> required in the curriculum. PNP program options: To progress to the next PNP nursing course, the student must achieve a grade of “C” (73%) or better in <i>all courses</i> within the curriculum. All program options: The nursing course grade is rounded at the end of the semester 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 to continue in the program. All courses must be successfully completed according to the curriculum grid to progress to the next nursing course.
Roles	Student, Faculty, Registrar
Procedures and Responsibilities	- Student must achieve passing grades in all required courses as specified in the policy to progress. - Faculty evaluate student performance in the class, lab, simulation, and clinical settings and assign grades according to the course syllabus. - Registrar assigns official course grades within 48 hours of the course final exam based on faculty report
Enforcement and Consequences	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. The student’s major will be unassigned until the student requests a new major such as “Healthcare Pre-Nursing Option” 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 or progress to the next course.

READMISSION POLICY

Policy Title	Readmission
Policy Purpose	To establish a mechanism for re-enrollment of qualified students who have a reasonable expectation of successful completion of the program.
Scope and Applicability	Applies to students who have separated from the Nurse Education Department
Definitions	Readmission includes students who left the nursing program due to withdrawal (except <i>qualified</i> withdrawal as noted in the Withdrawal Policy), failure to progress due to not completing pre or co-requisites, or academic failure. Readmission also applies to students who were dismissed from the program for other reasons, including clinical compliance issues.
Policy Statement	PNP 101, PNP 111, and NUR 107 Request for Readmission: - 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 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 provide a copy of the qualification letter to the Program Coordinator if readmission is requested - Readmission requirements and documents must be completed by March 1st if readmission is requested for fall semester, and October 1st if readmission is requested for spring semester. - Students accepted for readmission must attend the program orientation prior to the start of the semester, even if previously attended. - All previously completed nursing courses will need to be repeated, even if a passing grade was achieved. - The only exception is NUR106: if a passing grade was earned within the previous two years the course does not need to be repeated. All other PNP and NUR courses: - Students requesting readmission to any other PNP or NUR course must contact the Program Coordinator to complete the Request for Readmission form. - Readmission request deadlines: - PNP and NUR: March 1st for priority consideration for fall semester; and October 1st for priority consideration for spring semester. Late requests will be considered up to one week after the semester ends for readmission the following semester. - NUL and NUP: October 1st for spring semester, January 10th for summer semester, and June 30th for fall semester. General Information for All Students: - Students must request readmission within one year of the last completed nursing course (received a grade other than W, X, or another grade which indicates the course was not completed). - There is a one-time readmission policy for the Nurse Education Department. - Readmission is based on current published policies.

	• Student must have no holds on their student account, which would prevent the student from registering/attending. • Readmission is based on space availability. Students are prioritized in this order if space is limited: ○ Students returning to the program after a <i>qualified</i> withdrawal (see Withdrawal Policy) ○ Other eligible students with the highest total score using the criteria below: Grade/status in last enrolled nursing course (enrolled past the add/drop period) F, X, or administrative withdrawal = 0 points D- to D+ or W = 1 point C- to C+ = 2 points B- to B+ = 3 points A- to A = 4 points QCC overall GPA <2.0 = 0 points 2.00-2.49 = 1 point 2.50-2.99 = 2 points 3.00-3.49 = 3 points 3.50-4.0 = 4 points Program Coordinator will review all requests for readmission to determine ranking according to the criteria, if necessary due to space limitations. Refer to the QCC College Student Handbook ‘Academic’ section <i>Readmission for Health Programs</i> policy: https://www.qcc.edu/information/current-students/student-handbook
Roles	Student, Admissions Office, Program Coordinator, Director of Nursing, Dean, VP of Academic Affairs, Registrar
Procedures and Responsibilities	• Student – contact the Program Coordinator to request readmission to the program and complete required forms, or contact the admissions office to re-qualify for the waitlist • Admissions Office – processes student application forms and if qualified, will place the student on the waitlist with a designated start term and notify the student with a qualification letter • Program Coordinator – informs the student of the readmission policy and assists the student in completing a Request for Readmission form. Determines eligibility and if space is limited, ranks the students according to the criteria. Approves or denies the request for readmission based on published policies. If approved, the form is forwarded for signature by the Program Administrator, Dean, and VP of Academic Affairs. • Director of Nursing (Program Administrator), Dean, and VP of Academic Affairs – reviews the Request for Readmission form and approves or denies the request based on Program Coordinator determination of eligibility. • Registrar – places the student into the requested nursing program option once the Request for Readmission is approved and registers the student for the appropriate course(s)
Enforcement and Consequences	Students who do not request readmission within one year of the last completed nursing course or denied readmission, will need to reapply to the program with the admissions office.

	Readmission will be denied for the following reasons: • Student was previously readmitted • Space limitations • Student's last completed nursing course was more than one year prior. • Student has a hold on their account which prevents them from registering for courses. Holds must be addressed with the office that placed the hold prior to requesting readmission. • Student was responsible for a patient safety issue in the clinical setting which resulted in serious harm to the patient. • Inability to place student in clinical setting due to lack of clearance from facility. • Failure to resolve issues with CORI/SORI, health requirements, fingerprinting, or other clinical site requirements. • 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.
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SOCIAL MEDIA POLICY

Policy Title	Social Media
Policy Purpose	To provide guidance to enrolled students regarding the use of social media.
Scope and Applicability	Applies to students enrolled in the Nurse Education Department when engaging in social networking, email, texting, or other forms of digital communication.
Definitions	• Social media includes all forms of electronic communication such as Facebook, Instagram, X (Twitter), TikTok, SnapChat, email, and text messaging used to share information, images, or opinions. • Clinical affiliates refer to hospitals, healthcare facilities, and other organizations that provide clinical training for students. • HIPAA – Health Insurance Portability and Accountability Act: prohibits the sharing of confidential patient information. • Harm – any physical or psychological damage done to a person’s health and wellbeing, or damage done to the reputation of an organization
Policy Statement	Students are strictly prohibited from posting, sharing, or distributing any digital content related to patients, peers, faculty, staff, or clinical affiliates.
Roles	Students, Faculty, Program Coordinator
Procedures and Responsibilities	Students must not post, share, or distribute: • Any images or disparaging remarks related to patients, peers, faculty, staff, or clinical affiliates, even if identifying information is removed. • Images of students or faculty without the consent of all parties involved • Content that may compromise the safety, emotional well-being, or professional reputation of the Nurse Education Department or its members • Disrespectful, lewd, offensive, violent, or discriminatory content, particularly when identifying oneself as a nursing student Faculty - will review the social media policy with students during course orientation and reinforce expectations each semester. If a violation occurs, it will be reported through a Student Incident Report. Program Coordinator – will assist faculty in determining if a social media violation has occurred, and will instruct on completion of a Student Incident Report Dean of Students – reviews Student Incident Reports and determines if sanctions are warranted or if the student will be re-educated and the incident recorded for future reference in case of minor (no harm) or first offense.
Enforcement and Consequences	Student Incident Report: completed by faculty for all instances of policy violation. The Dean of Students reviews the incident to determine if sanctions are warranted. In addition, the following applies: Clinical warning: completed by faculty for 1st offense at clinical without known harm to patient, facility staff, or the facility Clinical failure: Completed by faculty for HIPAA violation, known harm to patient, or the clinical site prohibits return of the student to the clinical facility. Program warning: completed by faculty or Program Coordinator for violation of policy related to clinical, or with known harm to peer or faculty in any setting.

STUDENT RIGHTS AND GRIEVANCES

Policy Title	Student Rights and Grievances
Policy Purpose	To provide students an opportunity to resolve academic and nonacademic conflicts when other means have not resulted in satisfaction.
Scope and Applicability	Applies to students enrolled in the Nurse Education Department
Definitions	• Student representative - student elected by peers to serve as a liaison between the student body and nursing faculty. • Grievance - formal concern or issue brought forth by a student regarding program policies, procedures, or academic matters. • Second reader/review - faculty evaluation of an Evidence-Based Practice (EBP) paper when a student challenges the assigned grade.
Policy Statement	Students have the right to participate in program governance, request access to their academic records, and pursue concerns through a formal grievance process. Students are encouraged to communicate directly and professionally with faculty to address course-specific or academic issues. Formal grievances must follow the outlined chain of communication and align with procedures in the QCC Student Handbook. Students also have the right to request a second review of qualifying academic work and access documents maintained by the Nurse Education Department.
Roles	Students, Faculty, Program Coordinator, Director of Nurse Education, Evidence-Based Practice Hearing Committee
Procedures and Responsibilities	Student Participation in Governance • Each nursing class will elect two student representatives to serve on the faculty organization committee. • Students may self-nominate or be nominated by a peer; if more than two nominations are received, a class vote determines the representatives. • Student representatives may serve on select committees in a non-voting capacity and may bring forward agenda items and student concerns related to the program (issues specific to a course should be directed to the course faculty team). • Faculty will guide students through the process of electing representatives, submit the names of reps to the Program Coordinator and invite students to scheduled meetings. Request for a Second Reader/Review • A student who does not receive a passing grade on any section of the EBP paper grading rubric may request a second review. • The request must be submitted in writing to faculty within two weeks of receiving the grade. • The EBP Hearing Committee, composed of three nursing faculty members, will review the paper anonymously and assign a grade based on the rubric. The grade will be forwarded to the course faculty. • The final paper grade will be the average of the original and committee-assigned grades and will be returned to the student within two weeks by course faculty. Student Records • Student record retention follows the Nurse Education Department Records Maintenance and Retirement Policy. • Nurse Education Department files include clinical evaluations, academic contracts, and signed policy documents.

	• Students may submit written requests to the Program Coordinator for copies of documents maintained by the Nurse Education Department. Requests typically take two weeks to process. The Program Coordinator will locate the requested records and provide copies to the student. • Immunization and health records are maintained via the Castle Branch online system. • Requests for records maintained outside the Nurse Education Department must be directed to the appropriate college office responsible for the records being requested. Grievance and Grade Appeal Procedure Students who have concerns must document the concern in writing and follow the communication chain by scheduling an appointment with the involved parties in this order. If the issue remains unresolved the student should contact the next person(s): • Specific faculty involved (classroom, clinical, lab, or simulation) • Course nursing faculty team • Program Coordinator • Director of Nurse Education If unresolved, students may initiate Level I of the College Grievance Procedure as outlined in the QCC Student Handbook: QCC Student Handbook Grievance Procedure
Enforcement and Consequences	Failure to follow established procedures will result in delayed resolution or dismissal of concerns. Students and representatives are expected to communicate respectfully, meet deadlines, and participate actively in governance roles and resolution processes.

TRANSFER POLICY

Policy Title	Transfer Policy
Policy Purpose	To create a mechanism to transfer coursework into program of studies.
Scope and Applicability	Applies to students enrolled in or seeking to enroll in the Nurse Education Department who are interested in transferring credit from another institution to QCC, those seeking to transfer from QCC to another institution, or between QCC nursing program options.
Definitions	Transfer credit - academic credit earned at another institution that may be accepted at QCC and credit earned at QCC that may be accepted by other institutions. In addition, credits may be transferred from one nursing program option to another within QCC.
Policy Statement	Students may apply for transfer, but transfer credit is not guaranteed. Approval is based on current admission requirements, course comparability, and program capacity. Transfer of credit for general education courses completed at another institution of higher learning is completed by submitting official transcripts to the Registrar Office.
Roles	Student, Admissions Office, Registrar, Program Coordinator
Procedures and Responsibilities	Students interested in transferring from QCC to another institution should refer to the Transfer Services page and review the Educational Mobility Policy. Students interested in transferring to QCC nursing programs should: • Apply through the QCC Admissions Office Admissions page • Submit official transcripts to the Registrar for evaluation of general education course credit • Credit is not given for PNP and NUR courses. Students seeking to transfer between QCC nursing program options must: • Meet with the Program Coordinator of the most recently enrolled (within one year) program • Meet the admission requirements of the desired program option • A student who successfully completes NUR108 requesting to enter the Practical Nursing program option will receive credit for PNP101 only.
Enforcement and Consequences	Students who do not have transferable credit for general education courses, do not meet program requirements, or fail to follow the procedures outlined will be denied the opportunity to transfer. All transfer decisions are subject to program capacity and academic review to verify requirements have been met according to the policy.

WITHDRAWAL POLICY

Policy Title	Withdrawal Policy
Policy Purpose	To establish method for enrolled students to separate from the program.
Scope and Applicability	Applies to all students who are seeking to withdraw from a nursing course, the Nurse Education Department, or who are subject to administrative withdrawal.
Definitions	• Withdrawal - student separation from the program, either from individual nursing courses or the program in its entirety, either during a semester (before the college final exam period) or between semesters. • Readmission - the process of reapplying to the program following withdrawal or dismissal. • Return - reentry into the program under qualifying circumstances without counting as a readmission. • Administrative withdrawal - removal of a student from the program by the Dean due to unsafe clinical behavior, code of conduct policy violations, or failure to comply with program policies. This will appear as WA on the academic record.
Policy Statement	Students wishing to withdraw from a nursing course or the nursing program must follow the college's withdrawal procedure. The student meets with the Program Coordinator to discuss the withdrawal and if the student is eligible for return or readmission to the program. Students who separate from the program under qualifying circumstances (see Procedures section) may request a return rather than readmission. Administrative withdrawal will occur due to unsafe clinical behavior, code of conduct policy violations, or failure to comply with program policies.
Roles	Student, Program Coordinator, Faculty, Dean of Healthcare, Registrar
Procedures and Responsibilities	Students – must follow the college's official withdrawal procedure as outlined in the QCC College Catalog by completing a Course Withdrawal form on the Registrar's website. • Following withdrawal (or dismissal) students must complete a transition (exit) interview form, the link is provided by the Program Coordinator. • The student can request readmission to the program, see Readmission policy. • To qualify for a return to the program without counting as a readmission, within 14 days of the withdrawal the student must provide documentation of one of the following (with documentation requirements): ○ Birth, adoption, or foster placement of a child (letter from health care provider or adoption/foster agency) ○ Serious health condition of student or family member (letter from health care provider) ○ Military deployment of student or immediate family member (copies of orders) ○ Death of a significant person/immediate family member (statement from student) ○ Title IX (letter from health care provider and contact with Title IX coordinator) ○ State/community emergency – withdrawal within 4 weeks of declaration (statement from student) Required documentation should include the qualifying event for the student withdrawal, such as a statement from the health care provider regarding the student inability to participate in the program due to a serious health condition and <i>not</i> include confidential or protected information.

	Administrative Withdrawal The Dean of Healthcare will withdraw a student for clinically unsafe behavior, violation of Student Code of Conduct or Affirmative Action policies, or failure to comply with health, drug testing, or CORI/SORI requirements. In addition, two or more program warnings will result in immediate dismissal by the Dean of Healthcare. Administrative withdrawal is recorded as “WA” on the academic transcript.
Enforcement and Consequences	Failure to follow proper withdrawal procedures will result in a failing grade, incomplete (I), or X grade at the end of the semester. Withdrawal from one or more courses will impact program progression, and may impact financial aid, and insurance coverage (if purchased through the college). Unsafe clinical behavior, code of conduct policy violations, or failure to comply with program policies or policy violations will result in administrative withdrawal and formal documentation as “WA” on the academic record.

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
8. Attendance Policy

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.

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, NUR206-F1.

Technology Requirements

- Desktop or laptop computer with mouse, web cam, and microphone
- Internet access
- Microsoft Office (available to students free of charge)

Remote/Online Learning

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 verified using 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 verified using 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 (includes scheduled make-up test day) will result in a loss of 5 points for each test.
 - 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: the make-up exam will be given within 5 business days. The student must contact the faculty team (and SAS if applicable) to arrange a date and time for the make-up exam. If the exam is not completed within 5 business days, a grade of zero will be assigned.
 - a. Students who meet the criteria in 2.a or have not been cleared to attend on campus by the health team within 5 business days, will have 10 business days to complete the make-up exam. If the exam cannot be completed within 10 business days, the student will be counseled to withdraw or will receive an incomplete for the course until the exam can be completed.
 - b. 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 the Academic and Professional Integrity policy. Examples of cheating include, but are not limited to:
 - a. Using answers found on the internet or provided by another person, having another person complete the exam, or looking at another person's answers
 - b. Accessing notes, materials, or electronic resources in the testing room without faculty permission

- c. Providing answers to another person
- d. Accessing the test at a time other than the scheduled test time

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 testing website and 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, Zoom, and Respondus LockDown Browser for remote tests.

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 (See Academic and Professional Integrity policy).

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. Visitors who are ill, showing signs of illness, or have been excluded from daycare/school/work cannot attend. 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. Faculty will complete a conference summary with the student outlining the skills requiring remediation. The student will receive a copy of the conference summary, and the original conference summary will be filed with the student's lab competency sheet. 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/EXPENSES

Students are required to purchase a dual-head stethoscope and adult size manual blood pressure cuff prior to the first scheduled clinical and 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 – see Attendance Policy. 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 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.

Clinical Compliance

Students must remain compliant with health and clinical requirements in the Nurse Education Program, including during semester breaks since information is required by clinical affiliates prior to the start of each semester. This information includes, but is not limited to immunizations, titers, TB testing, BLS training, background checks, drug screenings, fingerprinting, CCP tickets, and clinical affiliate paperwork required for clinical placement.

Prior to enrollment in the first semester, students are given a deadline to meet the health and clinical requirements for the program. Students who do not meet the deadline will have five business days to become compliant. If a student fails to complete the requirements within 10 business days of the due date they will be removed from the nursing program course(s). A student can request program deferment if not previously requested or can reapply with the admissions office to re-qualify for the program.

Once enrolled in the first semester and beyond, students must remain compliant during and between semesters.

- A student who becomes non-compliant during the semester:
 - Cannot attend clinical and is subject to the Attendance policy for missed clinical days
 - If a student attends the clinical site while non-compliant, they will receive a clinical warning, or a clinical failure if already on warning status.
 - Will receive a Program Warning if not compliant within 5 business days of the deadline
- A student who fails to meet the compliance deadline at the end of a semester or between semesters (including the completion of clinical affiliate paperwork and CCP tickets):
 - Will receive a Program Warning if not compliant within 5 business days of the deadline
 - Will be removed from the next nursing course(s) if compliance is not met within 10 business days of the deadline. The student can request readmission once compliance is met – see Readmission Policy.

See Academic and Professional Integrity policy for more information about Program Warning.

CHANGE IN HEALTH STATUS

Students are encouraged to disclose any change in health status and/or the ability to meet the Technical Performance Standards (see policy) to the Program Coordinator. Additionally, a student who presents to the clinical setting and discloses or exhibits a change in health status or cannot complete patient care without previously approved accommodations will be dismissed from the clinical setting and referred to the Program Coordinator per the Clinical Dismissal policy.

For a student to continue in clinical (off-site clinical experiences) 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. The student will be referred to Student Accessibility Services (SAS) or the Title IX coordinator (if indicated) to participate in an interactive process with the student, Program Coordinator, and Clinical Coordinator to determine reasonable accommodations or modifications. The Clinical Coordinator (or designee) will notify the clinical partner of accommodations requested, and a decision will be made regarding whether the accommodation can be accomplished in the clinical setting. The student cannot attend clinical during the review process until approved with or without accommodation. All absences are subject to the Attendance Policy.

Health status changes include, but are not limited to:

- Injury/Surgery
- Pregnancy/Delivery (see Title IX policy)
- Change in physical or mental health
- Splint/brace/cast/sling, etc.

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 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 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 Dismissal

If an instructor deems a student to be 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, faculty will 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. In addition, a student who is unable to perform due to changes in mental or physical health will be dismissed from the clinical site and must contact the Program Coordinator – see Change in Health Status policy. The student is subject to the Attendance policy for missed time due to dismissal.

Conduct that is unethical, unprofessional, and/or unsafe to affect or potentially affect the well-being of the patient, student, or faculty will result in immediate dismissal from clinical. Student conduct (unethical or unprofessional) issues are subject to the Academic and Professional Integrity policy and the student discipline process as outlined in the QCC Student Code of Conduct policy.

The instructor will notify the Program Coordinator and the Clinical Coordinator of the dismissal incident immediately.

Clinical Warning

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 (no Unsatisfactory). 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 to review relevant policies and address any questions.

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 (Unsatisfactory performance). 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 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.

Meals and Breaks

Students will take a break when the clinical instructor takes a break and/or at other times with the instructor’s permission. Meal breaks will be taken when the clinical instructor goes to lunch/dinner, ideally around 11am-12pm and 6pm, meal breaks will not be taken at the end of the shift. Clinical will start and end as published on the clinical rotations.

- Prior to leaving the assigned unit for a break, students must give report to the assigned nurse and the clinical instructor.
- Students must return promptly to their assigned clinical areas at the end of the break and receive report from the covering nurse.
- Break times are dependent on the length of the shift. An eight-hour shift will include 70 minutes of breaks, and an additional 10 minutes at the end of the shift (10 minutes/hour). *For example*, a 6am-2pm clinical may have two morning breaks, lunch around noon, and leave the facility at 1:50pm.
- Any free time during the clinical shift, excluding breaks, should be spent constructively, e.g., performing practical demonstration of skills, reviewing patient records, assisting with patient care, researching diagnoses and medications, working on clinical paperwork, etc.

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

Students are responsible for any expenses incurred for drug screening and fingerprinting.

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/DISA Healthcare, 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 by the specified due date, students must ensure health compliance is maintained while in the program – see Clinical Compliance policy. Students are responsible for any expenses incurred for BLS/CPR certification and health compliance requirements.

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.

If a student is unable to receive a specific vaccine, they can complete a declination request form available from QCC Healthcare Compliance or Castle Branch/DISA Healthcare by the compliance due date. The completed declination form will be forwarded by the Clinical Coordinator (or designee) to the assigned clinical site and request a determination of clinical eligibility, as there is no guarantee that declinations will be approved by clinical sites. The program will make every effort to communicate the clinical site's response to the student before the end of the add/drop period. This allows students sufficient time to plan accordingly if the declination request is not approved by the clinical facility.

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) is required prior to resuming in-person educational activities.

INFECTION CONTROL GUIDELINES

Standard Precautions: FOR ALL PATIENTS	• Clean hands with alcohol-based hand rub or soap and water before and after patient contact, after removing gloves and upon exiting room • Clean hands after contact with patient environment and equipment • Clean equipment with disinfectant between each patient use • 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 • Anticipate need and use for other protective barriers including gowns, mask, and eye protection		
Precautions	Implementation of Precautions	Associated Disease or Condition(s)	
Contact	• Private room • Gloves • Gown for close contact • Hand Hygiene (before and after, foam in foam out) • Disinfect equipment	• Abscess, Major Draining • Adenovirus • Pressure Ulcer (Major) • Multidrug-Resistant Organisms	• <i>Escherichia Coli</i> (E-Coli) • <i>Respiratory Syncytial Virus</i> (RSV) • Rotavirus
Droplet	• Private Room • Mask • Hand Hygiene (before and after, foam in foam out) • Disinfect equipment	• Adenovirus • <i>Influenza</i> (flu) • Meningococcal Pneumonia • Meningococcemia • Mumps	• <i>Respiratory Syncytial Virus</i> (RSV) • Streptococcus Group A • Pneumonia, Pharyngitis • Pertussis • Rubella
Airborne	• Negative Pressure Private Room • N-95 Mask • Hand Hygiene (before and after, foam in foam out) • Disinfect equipment	• <i>Active Pulmonary Tuberculosis</i> (TB) • <i>Varicella</i> (Chicken Pox)	• Rubeola (Measles) • Smallpox
Contact Plus	• Private Room • Gloves • Gown • Hand Hygiene (before and after, foam in foam out) • Hand Hygiene <u>exception</u> - wash hands with soap & water for C-Diff and Norovirus • Disinfect equipment with BLEACH	• Norovirus • Clostridium Difficile (C- Diff) • Diarrhea with environmental soiling	
Neutropenic	• Private Room • Gloves • Gown for close contact • Hand Hygiene (before and after, foam in foam out) • Disinfect equipment • Screen staff and visitors for illness • No plants or flowers in the room	• Patient is Neutropenic	
Herpes Zoster-Shingles (Varicella Zoster)	• Private Room • Gloves • Gown for close contact • Hand Hygiene (before and after, foam in foam out) • Disinfect equipment • Cover Lesions • Do not enter if you have not had Chicken Pox/Varicella	• Only people that have had Chicken Pox should enter the room • Herpes Zoster Virus (Shingles) with open lesions	

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 NUR205.

NUR 107				
COMPETENCY	PREPARATION	PROCESS	REMEDIATION	FAILURES
Math Competency Exam Basic math calculations including metric conversions. Medication Lab Competency *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	Math Competency Exam Students must achieve a passing score of 80% . Medication Lab Competency 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	Math Competency Exam Students unable to achieve an 80% or greater within 3 attempts are unable to meet the clinical objectives, which constitutes a clinical failure. Medication Lab Competency 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
Math Competency Exam *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 IV Medication Lab Competency *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	Math Competency Exam Students must achieve a passing score of 80% . IV Med Lab Competency 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	Math Competency Exam Students unable to achieve an 80% or greater within 3 attempts are unable to meet the clinical objectives, which constitutes a clinical failure. IV Med Lab Competency 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	REMEDATION	FAILURES
Math Competency Exam *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 90% . 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 90% or greater within 3 attempts are unable to meet the clinical objectives, which constitutes a clinical failure.
NUR 205				
COMPETENCY	PREPARATION	PROCESS	REMEDATION	FAILURES
Math Competency Exam *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 90% . 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 90% 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.

SMOKING/VAPING POLICY

All QCC campuses are smoke free including cigarettes, vapes, and chewing tobacco. Students are expected to adhere to the smoking policy at each facility. Students may not smoke, vape, or use chewing/smokeless tobacco while in uniform or anywhere on campus.

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>

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 optional approved jacket with appropriate color undergarments (a plain white or black shirt only). All students are required to wear a name pin purchased from McGill's. The student is responsible for the expense of these items.
- 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.
 - No smoking, vaping, chewing gum, or smokeless tobacco while in uniform.

*McGill's, Inc. 410 Chestnut Street Manchester, NH 03101

Phone: 603-627-3472

Website: <https://mcgillsinc.com/>

Email: contact@mcgillsinc.com

WORKING CONDITIONS AND TECHNICAL STANDARDS

The Nurse Education Department includes the Practical Nursing and Associate Degree programs of study and strives to create an inclusive environment that represents the diverse population of healthcare professionals and communities we serve. We value the uniqueness and potential of every learner and strive to create a culture of respect and equality. After reviewing the technical standards, any learner who believes they may need accommodation to fully participate and engage in the program should contact Student Accessibility Services (SAS). Students must also contact SAS if there is any change in ability to meet the technical standards while enrolled in the program.

SAS works to promote access to ensure an accessible college experience for students with disabilities. Requests for accommodation can be made at any time.

Phone: 508-854-4471

Email: sas@qcc.mass.edu

SAS Office Location: Room 246A @ 670 West Boylston St. Worcester, MA

Working Conditions

Nurse Education students provide care to patients of all ages and in a variety of healthcare settings including acute care hospitals, sub-acute, chronic care, and the community. Responsibilities include, but are not limited to, direct patient care, physical assessment, medication administration, wound care, positioning of the patient, handling of complex equipment, patient education, and attending to the emotional needs of patients. Successful completion of the Nurse Education Department requires the graduate to have demonstrated the knowledge, skills, and behaviors necessary to deliver patient care safely and competently.

Accordingly, Nurse Education applicants and matriculating students must meet the following technical standards.

Technical Standards

A.) Motor

The applicant/student must be able to perform patient care procedures and handle equipment, including the capability to grasp, assemble, and manipulate medication administration equipment, sphygmomanometer, stethoscope, wheelchairs, hospital beds, lifts, and patients. This includes turning and repositioning patients of varying weight according to individual needs, including transferring patients from bed to chair, and moving heavy, bulky equipment. The student nurse must have the capacity to manually move equipment at various angles at heights up to six feet, be able to crouch down to the floor, accurately draw up sterile solutions without contamination, physically be able to administer emergency care based on assessment, remain still for long periods of time, properly wear personal protective equipment for extended periods of time, and to move around large facilities of great distances during a normal workday.

B.) Communication

The applicant/student must be able to detect and respond to patient verbal and non-verbal communication and acoustic signals on medical devices and equipment from a distance of up to 20 feet,

understand, converse in, read, and write the English language in order to accurately, effectively and sensitively communicate with patients, instructors, and all members of the health care team.

C.) Intellectual-Conceptual, Integrative and Qualitative Abilities

The applicant/student must be able to comprehend, integrate, and apply didactic concepts to the clinical setting. This involves physiologic measurements, mathematical computation, information gathering, interpretation and analysis of data, critical thinking, decision-making and problem solving. The applicant/student will be expected to synthesize information, solve problems and think critically to identify cause-effect relationships in clinical situations. The applicant/student will be expected to accurately observe patients from up to 20 feet, and within close proximity, correctly read syringes, medication labels, computer screens, digital, analogue or graphic gauges, scales, monitors, and written instructions, identify equipment and devices, and recognize biohazard fluids. The applicant/student will be expected to adapt procedures and sequences of activities to accommodate the changing status of a patient's condition and mobility, including assessing patient changes in mood, activity, and cognition.

D.) Behavioral and Social Attributes

The applicant/student must possess the reasoning necessary to exercise judgment, complete patient care responsibilities, and maintain effective relationships with others in classroom, laboratory, simulation, and clinical settings. Applicants/students must be able to remain alert, tolerate physically taxing workloads, and to function effectively under stress. They must be able to adapt to changing environments, display flexibility and function in the uncertainties inherent to the health care setting. Compassion, integrity, accountability, empathy, interpersonal skills, dedication, and motivation are all-important personal qualities.

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 2nd 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. The Library staff have created a Nursing Resource Guide for students

<https://qcc.mass.libguides.com/nurse>

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 subject to disciplinary action if they are found using computers in any manner that violates the QCC Code of Conduct policy.

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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.

Name		Pronouns		Student ID	
Current Course		Semester		Date	

Potential Barriers to Success

☐ Math ☐ Reading/Vocabulary ☐ Content ☐ Memorization ☐ Organization/Time Management ☐ None identified

Are you currently receiving SAS services? ☐ Yes ☐ No If yes, do you feel you are benefitting by SAS services? ☐ Yes ☐ No

Do you have issues with transportation? ☐ Yes ☐ 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? ☐ Yes ☐ No Do you struggle with food insecurity? ☐ Yes ☐ 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 Navigate 360 for detailed notes):

Student Learning Contract (indicate exam remediated):

Test remediation date:

Follow up remediation date:

Student Resource	Web page	Phone	Email
Office of Counseling and Wellness	www.qcc.edu/services/office-counseling-and-wellness	508.854.4479	counselingandwellnessoffice@qcc.mass.edu
Student Accessibility Services	www.qcc.edu/services/student-accessibility-services	508.854.4471	sas@qcc.mass.edu
Alden Library or Downtown Library	www.qcc.edu/services/library	508.854.4366	reference@qcc.mass.edu

HLC: General Academic Areas for Tutoring	www.qcc.edu/services/tutoring	508.854.4279	tutoringcenters@qcc.mass.edu
ThinkingStorm Online Tutoring	Access through Blackboard	877.889.5996	care@thinkingstorm.com

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

Student signature: _____ Date: _____

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: 7/30/2025

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

Abbey Kelley Foster Charter Public School 10 New Bond St Worcester, MA, 01606/508-854-8400	Northboro Southboro Public Schools 53 Parkerville Rd Southboro MA 01772 /508-852-3011
AdCare Hospital 107 Lincoln St Worcester, MA 10605 / 866-493-4187	Notre Dame Health Care 559 Plantation St. Worcester, MA 01655 / 508-852-5800
Assabet Valley Collaborative 57 Orchard Street Marlborough, MA 01752/508-481-3611	Oxford Public Schools 4 Maple Rd. Oxford MA 01540 /508-987-6081
Auburn Public School 5 West St. Auburn, MA 01501 /508-832-7788	Saint Francis Rehab & Nursing Center 20 Worcester Center Blvd Worcester, MA 01608 / 508-755-8605
Berlin- Boylston Regional School District 215 Main Street Boylston, MA 01505/	Saint Vincent Hospital 123 Summer St Worcester, MA 01608 / 508-363-5000
Countryside Healthcare of Milford 1 Countryside Dr. Milford, MA 10757 / 508-473-0435	Shrewsbury Public Schools 100 Maple Avenue Shrewsbury, MA 01545 / 508-841-1226
Grafton Public Schools 22 Providence Rd Grafton MA, 01519 /508-839-5420	UMass Memorial Health Alliance: <u>Leominster Hospital</u> 60 Hospital Rd. Leominster, MA 01453 / 978-466-2000
Harrington UMass Memorial Hospital 100 South St. Southbridge, MA 01550 / 508-765-9771	UMass Memorial: <u>Marlborough Hospital</u> 157 Union St. Marlborough, MA 01752 / 508-481-5000
Harrington Health Care Co-Occurring Disorders Unit (CDU) 340 Thompson Rd. Webster, MA / 508-640-2986	UMass Memorial: <u>PTRC Unit</u> 26 Queen St. Worcester, MA 01655 / 508-334-2670
Holy Trinity Nursing & Rehab Center 300 Barber Ave. Worcester, MA 01606 / 508-852-1000	UMass <u>University</u> Campus 55 Lake Ave. N. Worcester, MA 01655 / 508-334-1000
Jewish Health Care 629 Salisbury St. Worcester, MA 01609 / 508-798-8653	UMass <u>Memorial</u> Campus 119 Belmont St Worcester, MA 01605 / 508-334-1000
Life Care Center of Auburn 14 Masonic Circle Auburn, MA 01501 / 508-721-2400	West Boylston Public School 125 Crescent Street West Boylston, MA 01583/ 508-835-2917
Milford Regional Hospital 14 Prospect St. Milford MA 01757 / 508-473-1190	Worcester Public School System Nursing Department: 40 Apricot St. Worcester, MA 01603 / phone # is school specific
	Worcester Recovery Center and Hospital 309 Belmont St Worcester, MA 01604 / 508-368-4000

APPENDIX I

EXPEDITED PLACEMENT POLICY

Nursing programs have a designated start term (previously called a ‘waitlist’), meaning students who have qualified for program admission might have to wait for an available opening before starting the program-specific courses. Expedited placement helps fast-track students who have qualified for a nursing program and previously demonstrated a specific interest and commitment to a career in healthcare.

<i>Students in one of these 4 categories can request expedited placement</i>
--

1. Military/Veteran

- Requirements:
 - Veteran or guard status as confirmed by the QCC Veteran Affairs Office
 - At least 15 college credits completed with overall GPA 3.0 or higher.

2. Scholarly Excellence and Program Readiness

- Requirements:
 - All pre and co-requisite courses complete for the chosen program.
 - At least 15 college credits completed with overall GPA 3.0 or higher for NUR, NUL, NUP
 - At least 10 college credits completed with overall GPA 3.0 or higher for LP, LPE, LPA

3. Graduate from a Pipeline High School

- Requirements:
 - Graduate from a qualifying high school Chapter 74 healthcare program:
 - North High School
 - Worcester Technical High School
 - Innovations Pathways Healthcare Program at Worcester Technical High School
 - Assabet Regional Technical High School
 - Blackstone Valley Regional Technical High School
 - BayPath Regional Technical High School
 - Tantasqua Regional High School
 - Student has an overall high school GPA of 3.0 or higher (based on scale 0-4 or equivalent of B or higher overall)
- Process:
 - Senior students are identified for pipeline admission by the high school based on academic performance, interest in health career, and teacher recommendation.
 - Parent and student completes the *Pipeline Application and Release of Information & Authorization Form*, which is then reviewed and signed by the high school Chapter 74 healthcare program faculty and program administrator, before being forwarded to the QCC Dean of Healthcare.

- Once signed by the Dean, the approved *Pipeline Application and Release of Information & Authorization Form* is forwarded to QCC's Healthcare Advising Coordinator.
- A letter acknowledging the receipt and conferring the award will be sent to the student and the referring high school.
- Student must apply and qualify for program admission and be placed into a designated start term for said program within three years of graduating from high school.
- Once given a designated start term, the student can apply for Expedited Placement with the Healthcare Advising Coordinator.
- Student has QCC overall GPA 3.0 or higher.

4. QCC Health Certificate Program Graduate

- Requirements:
 - Completion of a QCC health certificate program:
 - Practical Nursing
 - EMT/Paramedic
 - Medical Assisting
 - At least 15 credits taken at QCC with GPA 3.0 or higher.
 - Student must apply and qualify for program admission and be placed into a designated start term for said program within three years of completion of the healthcare certificate program.
 - For the NUL program option:
 - Practical Nursing certificate graduates can apply for NUL program admission while awaiting NCLEX-PN testing but must obtain licensure prior to starting the first NUR/NUL course.
 - Student must have earned a C+ or higher in all PN courses.

<i>Procedure to request expedited placement</i>
--

1. Student must apply and qualify for desired nursing program with the Admissions Office.
2. Once given a designated start term, the student must schedule a meeting with the Healthcare Advising Coordinator. Bring a copy of the program qualification letter.
 - The goal of the intake meeting is to determine eligibility and build an academic course plan.
 - Complete the *Request for Expedited Placement to Nursing Programs* form before the deadline.
 - March 1 for the summer/fall semester
 - October 1 for the intersession/spring semester
 - NUL program only: March 1st for previous PN grads, September 1st for current PN students
 - The completed *Request for Expedited Placement to Nursing Programs* form is forwarded to the Program Coordinator for the chosen program.
 - There is no guarantee of expedited placement for the requested semester.

- If there are more applications than available space, students will be prioritized based on *Request for Expedited Placement* submission date.
- Number of spaces reserved for each program per enrollment period (additional spaces may be available based on enrollment numbers):
 - LP: 5
 - LPE: 5
 - LPA: 1
 - NUR: 5
 - NUL: 10
 - NUP: 1

APPENDIX J

**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 2025-2026 (*reviewed & revised December 2025 - effective January 2026*), 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

*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.