



*Nursing &
Health Sciences
Division*

CC-BSN & RN-BSN
STUDENT HANDBOOK
2022-2023

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STUDENT HANDBOOK DECLARATION FORM

To be completed by all NHS Students

Accountability Statement

I, _____, hereby declare that I am responsible and
Print Full Name
accountable for the information set forth in the 2022-2023 CC-BSN/RN-BSN NHS Student Handbook.
I understand this handbook is subject to change. I also understand that I will be informed via my LC
Mail account or a posting to the division web page (www.lcsc.edu/nursing) of any policy changes
made during this academic year. My signature below indicates my agreement to familiarize myself
with the contents of this Handbook and abide by these Nursing & Health Sciences policies to the best
of my ability. I understand I am to refer to the LCSC College Catalog for college-related policies and
procedures. I understand I am to use LCMail for all electronic communication with faculty and that I
am responsible for accessing LCMail and the division website on a regular basis.

Signature

Program

Date

Confidentiality Statement

I, _____, hereby declare that I have read the confidentiality
statement in this handbook. I have been provided the opportunity to ask questions and understand what
constitutes confidential information. I agree, as a student of Lewis-Clark State College, to keep
confidential, information to which I am exposed during all clinical and classroom experiences. This
includes information presented in clinical mid or post conference, case studies and classroom
discussions, as well as information associated with patients to whom I provide care. I understand that if
I am found to have shared confidential information with unauthorized individuals in any form (verbal,
written, electronic, or through any social medium), it may be grounds for immediate termination from
the NHS program.

Signature

Program

Date

Student Code Violations Consent Disclosure

I hereby authorize the Vice President for Student Affairs to release any records of LCSC Student Code violations that have occurred while I have been enrolled at the college. I understand that these records will be reviewed as a part of a formal background check related to admission to my program of study.

Signature _____ Program _____ Date _____

Authorization for Release of Record

I hereby authorize the Nursing and Health Sciences Division to release information as requested by clinical agencies. Such information may include, but is not limited to maintenance of health requirements and background check results.

Signature _____ Program _____ Date _____

Drug Testing Consent

I, _____, have read the LCSC Nursing and Health Sciences Drug and Alcohol Testing Policy. I understand and agree to comply with the policies and procedures and specifically consent to Drug and Alcohol Testing as provided for in the Drug and Alcohol Testing Policy. I understand some clinical agencies may require students to have a drug screen or other testing performed prior to allowing students to complete their clinical in their agencies. I further understand I am responsible for the cost of such testing.

Signature _____ Program _____ Date _____

NURSING & HEALTH SCIENCES DIVISION STUDENT HANDBOOK

The rights and responsibilities of all NHS students are detailed in the Lewis-Clark State College Catalog, while policies and procedures specific to NHS students enrolled in one of the Nursing & Health Sciences programs are detailed in the current year NHS Student Handbook. The NHS Student Handbook is updated annually and as needed. Changes are communicated to all NHS Students via LCMail, posting on department bulletin boards in Sacajawea Hall, and on the division website.

NURSING & HEALTH SCIENCES DIVISION MISSION STATEMENT

In concert with LCSC, the Nursing and Health Sciences Division exists to facilitate the development of outstanding healthcare providers committed to excellence in the delivery and management of patient centered care.

HEALTH AND BACKGROUND CHECK REQUIREMENTS

Health Requirements of Students:

Please be aware that some agencies may require a background check and/or other requirements for volunteer service. It is the student's responsibility to ensure these requirements are met.

Specific healthcare institutions may require vaccination without exception (e.g., no declination). Some clinical agencies require any person that declines influenza vaccine to wear a mask at all times when providing patient care during the entire influenza season.

Liability Insurance

All NHS students automatically pay for liability insurance through student course fees. No student is permitted in clinical settings without appropriate liability coverage.

CORONAVIRUS (COVID-19) POLICIES

COVID-19 (revised 1-20-21)

The health and well-being of students is the priority. All NHS students are expected to follow college, division, and clinical agency guidance and requirements in response to the coronavirus pandemic. Updated information can be found on the college [Coronavirus \(COVID-19\)](#) webpage. Students are encouraged to review the site on a regular basis.

If approved by the clinical agency and the clinical instructor, students may care for patients diagnosed with COVID-19. Students may also be allowed to participate in COVID-19 vaccine clinics. Students agree to adhere to all clinical agency requirements, policies and protocols.

ACADEMIC POLICIES

Academic Advising

All NHS students enrolled in an NHS program are assigned an academic faculty advisor to assist with registration procedures, class scheduling, graduation, and academic affairs. NHS students are responsible for the college catalog and Nursing & Health Sciences degree and graduation requirements. Each semester the student consults with his/her advisor to be released for registration.

Student Responsibilities

- Be proactive in the advising experience.
- Schedule appointments and make regular contact with advisor.
- Accept responsibility for your educational experience.
- Develop and record an educational plan, and monitor progression toward meeting program requirements. Use the tools in Warrior Web/ Student Planning to assist in this process.
- Demonstrate professional behavior.
- Clarify personal and academic goals.
- Become knowledgeable about the NHS program, policies, and procedures.
- Access and utilize campus resources as needed or advised.
- Participate in evaluating the advising process.
- Notify advisor of any issues that may affect academic performance.

Academic Advisor Responsibilities

- Advise NHS students regarding educational goals and assist with the development of clear, realistic educational plans.
- Maintain confidentiality.

- Inform NHS students of available resources.
- Identify NHS students requiring additional support, and refer accordingly.
- Use Warrior Web/ Student Planning to access official student documents such as transcripts, TRER, and class schedule.
- Assist NHS students in maintaining educational records and auditing progression. Use appropriate program Study Plan to track progress toward meeting program requirements. Document all electronic mail, voice mail, and in person meetings.
- Assist NHS students in meeting LCSC core and graduation requirements.
- Assist NHS students in accessing and completing college forms.
- Assist NHS students in problem solving and in developing decision-making skills.
- Support NHS students in taking responsibility for their learning and educational experiences.

Credit Transfer

Credits awarded by other colleges may be applied to meet degree requirements.

- NHS students must arrange for a copy of all college transcripts to be sent to LCSC's Admissions office.
- NHS students are notified when the transcripts have been received. NHS students may access transcript information via Warrior Web Transfer Equivalency Guide (TRER).
- The TRER shows the evaluation completed by the Admissions office. NHS students/faculty who wish to conduct an informal evaluation of courses may use the [College Source: TES](#) to determine course equivalencies.
- NHS students/faculty should evaluate the TRER for courses listed as Elective that maybe applicable to the program.
- General education core and program requirements must be satisfied regardless of the number of credits transferred.
- Refer to LCSC College Catalog for [admission policies](#) and core requirements.

Petitions/Course Substitutions

An [Internal Petition](#) is used to address an NHS program requirement (program course, prerequisite, or support course), providing flexibility for student progression in an NHS program or to address unique circumstances that require faculty or administrative consideration. An [External Petition](#) addresses general education *core* issues and is processed by the College Petition committee. Appropriate forms and meeting dates are available on the [Registrar's](#) web site. A **Course Substitution Form** is used to address an NHS prerequisite when a comparable course has been completed at another institution. Consult with your academic advisor for assistance.

Academic Dishonesty

Nursing & Health Sciences adheres to the policies described in the LCSC Catalog under Student Code of Conduct. Consequences for academic dishonesty are determined by the course faculty in accordance with NHS and College policies.

Academic dishonesty in any form is not tolerated. All work completed by NHS students in the classroom, lab, or clinical facility must represent academic integrity and be the sole product of the student's original work. Academic dishonesty includes, but is not limited to:

Cheating: Using or attempting to use unauthorized materials, information, or study aids in any academic exercise. The term “academic exercise” includes all forms of work submitted for a grade earned in a course that generates credit hours.

Examples:

- Downloading or printing electronic copies of tests to a personal computer or as a paper copy.
- Use of online papers, presentations, or other material represented as the student’s own work.
- Copying answers off another student’s test or accessing unauthorized resources when taking an online exam.
- Using notes in a closed book exam.
- Working with others when assignments are required to be completed independently.

Fabrication: Falsification or invention of any information or the source of any information in an academic exercise.

Examples:

- Making up research data or references for a scholarly paper.

Collusion: Intentionally or knowingly helping or attempting to help another to commit an act of academic dishonesty.

Examples:

- Assisting another student in procuring or copying secure documents such as test questions.
- Knowingly helping another student cheat, fabricate information, or plagiarize.

Plagiarism: The deliberate adoption or reproduction of ideas or words or statement of another person as one’s own without acknowledgement. One sentence taken from any source that is not indicated by footnotes or quotation marks constitutes plagiarism unless indicated by footnote or textbook reference that the material is not original. Paraphrased material must have the proper reference cited at the end of the thought or the paragraph. The Nursing & Health Sciences Division requires that all formal papers be written using APA style. Please see Appendix for more detail.

Examples:

- Use of online quotes, wording, or data without proper citation of the source.
- Adopting or reproducing ideas or words of another person without acknowledgement in formal papers, reports, or patient care documentation.

The examples noted do not constitute the entirety of offenses that would be examples of dishonesty. The consequences of a violation of the academic dishonesty policy are independent of, and in addition to, any adverse College disciplinary action, which results from the student’s conduct.

Accountability by NHS Students

All CC-BSN and RN-BSN course content is delivered asynchronously, through the campus online learning management system. Voice over lectures and other learning modalities are utilized. The student is responsible for all course content and learning activities.

Practicum Attendance

The CC-BSN and RN-BSN tracks require practicum hours. The student will exercise autonomy in arranging and completing required hours and experiences. Faculty serve as facilitator for practicum learning experiences.

Conduct in the Teaching-Learning Environment:

Civil behavior is expected in all Teaching-Learning situations, whether face-to-face, virtual, or online classroom settings. Professional behavior is expected (e.g., timely submission of assignments, respectful discussion posts). Each faculty member has the right and the responsibility to set specific ground- rules pertaining to each course at the beginning of the semester. Respectful freedom of expression, conduct, and discourse is encouraged in class situations. Rude or discourteous behavior or communication that disrupts the Teaching-Learning environment is regarded as uncivil and will not be tolerated. Under no circumstances is a student permitted to post publicly (Facebook, social media venues, and other forms of electronic file sharing) any video or audio recording of an NHS lecture or activity without the written permission of the course faculty.

Online exams and quizzes

Electronic equipment is not permitted in the testing environment while test taking. Cell phones and other texting/ electronic devices are to be placed well away from students and in the “off” mode. Students are NOT permitted to screenshot or share test information with any student. To do so is an act of Academic Dishonesty and may result in failure of the course or dismissal from the program.

Late Assignments

The grade for an unexcused late assignment will be reduced by 10% per day that the assignment is late. Assignments will not be accepted four or more days after the due date. The student must contact the instructor at least 24 hours in advance if they need an extension for assignments. This policy is also identified in course syllabi.

If the student anticipates that s/he will not be able to submit an assignment on time, the student must communicate by email message to the course faculty at least 24 hours prior to the date and time the assignment is due. The message must include the reason(s) that the student is unable to meet the deadline and request an extension to complete the assignment. The email request for extension will be placed in the student’s file. The faculty member may approve or deny this request. If the request is approved, the faculty member and student determine the new due date for submission of the assignment. If the request for extension is denied, the original due date will be enforced and the assignment grade will be reduced by 10% per day that the assignment is late. Individual faculty may include alternate information regarding late or omitted assignments in course syllabi.

Grievance, Complaint, Grade Appeal

NHS adheres to the [Student Complaints/ Grievances](#) policies of the College.

An appeal or formal complaint in NHS is defined as one submitted in writing through the appropriate department channels. The complaint must include a detailed description of the circumstances, the parties involved, and the action the complainant wishes to take.

The procedure for an appeal or formal complaint begins at the instructor/program/division level. There

must be written evidence of progression through the appropriate channels at each step of the grievance.

Consistent with LCSC College policy, the appropriate channels are:

1. Course faculty member (attempt to resolve issue)
2. NHS Chair
3. College level (Student Affairs)

Related policies:

- Academic Dishonesty: Academic Policies
- Disciplinary Process: Appendix
- Performance Improvement Plan: Clinical Policies & Appendix
- Unsafe Clinical Practice: Clinical Policies
- Progression Policy: Academic Policies

NHS Student Code of Conduct & Responsibility

The Nursing & Health Sciences Division at Lewis-Clark State College upholds the following as guiding principles for student responsibilities and accountabilities while at Lewis-Clark State College:

- College [Student Code of Conduct Policy](#)

Nursing students at Lewis-Clark State College have added accountability to the following (Appendix A):

- American Nurses Association Code of Ethics
- American Association of College of Nursing Professional Values
- Nursing Code of Ethics/ Social Networking Policy

The Nursing & Health Sciences Division has the mission in all programs to graduate students who will demonstrate the inherent values of *professionalism*. The NHS Student Code of Conduct is based on the understanding that to practice in the health professions is to uphold the trust that society has placed in members of the health professions. The statements of the Student Code of Conduct provide guidance for the student in the personal development of an ethical foundation for academic, clinical, and personal environments.

Failure to comply with student conduct codes will result in disciplinary action, which may include dismissal from the program.

The following are **Standards for Conduct** to be upheld by NHS students in nursing and radiographic science programs in all settings:

1. Models the LCSC Student Code of Conduct.
2. Models the professional standards of conduct for individual NHS programs .
3. Upholds personal accountability to act in a manner that reflects the highest moral and

- ethical integrity in the classroom, clinical lab and clinical settings.
4. Models concern for the well-being of others through supportive interactions with peers, faculty, and the community.
 5. Models positive regard for the beliefs of others by acknowledging differences and supporting ideals that respect humanity.
 6. Demonstrates respect for the inherent worth of all individuals and teachings associated with the programs within NHS.
 7. Demonstrates honesty and safety in all activities associated with the program.
 8. Communicates internally and externally in a truthful and accurate manner to ensure the integrity of information and data associated with the college and programs.
 9. Models respectful behavior and use of constructive communication techniques when addressing problems.
 10. Uses every opportunity to improve faculty and clinical staff understanding of the learning needs of NHS students.
 11. Abstains from the influence of alcoholic drinks or any substance that impairs judgment in the academic and clinical setting. A positive drug screen may lead to dismissal from the program.
 12. Models positive behaviors of citizenship to the individuals and communities we work beside and serve, demonstrating compassion, fairness, and conscience without regard to age, gender, citizenship, national origin, religion, race, socio-economic level, disability or sexual orientation.
 13. Refrains from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
 14. Refrains from use of social media communication that is in conflict with professional standards of confidentiality, privacy, and respect. Use of social media respects the rights and welfare of all individuals and holds in high regard individual integrity in all cases.
 15. Assists the staff nurse or preceptor in ensuring there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.
 16. Provides care for the client in a timely, compassionate and professional manner.
 17. Communicates client care in a truthful, timely and accurate manner.

References

National Student Nurses Association (2001). *Code of academic and clinical conduct*.

Retrieved from

<https://www.dropbox.com/s/a229ong58d5jx4p/Code%20of%20Ethics.pdf?dl=0>

Misconduct Policy

Student misconduct is in direct conflict with the principles and philosophy of professional nursing. Student misconduct of any type will not be tolerated as it lowers the standards of nursing practice, and consequently jeopardizes the safe provision of client care, affecting the lives and well-being of the public.

Academic Misconduct is based on academic performance as measured by grades or through evaluation of clinical performance (see Progression Policy).

Discipline for Misconduct stems from the student's failure to comply with Lewis-Clark State College and Nursing & Health Sciences Division Codes of Conduct, Nursing Code of Conduct/ Social Networking Policy, or with any college or NHS clinical rules and regulations (syllabi or NHS Student Handbook). Examples of misconduct include, but are not limited to, cheating, allowing access to information to support cheating, plagiarism, alcohol or substance use, or behavior not in alignment with the standards and ethics of the nursing profession.

Violations of the NHS Student Code of Conduct will be documented by the faculty member who has witnessed the offense. Documentation will be shared with the student and the student will sign the document, indicating the complaint has been shared with them. The complaint will be forwarded to the Division Chair. Further actions both for improvement and discipline will be determined by the Division Chair in conjunction with the course/ lead faculty. Violations of any NHS conduct policy may also be referred to the Vice President for Student Affairs and may result in course or program dismissal.

Disciplinary Process

NHS adheres to the [LCSC Student Code of Conduct](#) and follows the process outlined in the policy.

Purpose: Applied when a student violates the [LCSC Student Code of Conduct](#), including prohibitions against Academic Dishonesty, or violates any more stringent standard of conduct set out in this Nursing & Health Sciences Student Handbook.

Progression Policy

Progression is the term used for advancing from one semester to the next while in an NHS program. Many criteria must be met to facilitate program progression, including:

1. **Grades:** NHS students must achieve minimum program grades in all required courses (general education, support, and program courses). CC-BSN and RN-BSN students must earn a "Pass" in Pass/Fail courses and the minimum required program or course grade in graded courses (73% for BSN, unless otherwise stated in the course syllabus)

NHS students who are at risk for, or who have, failed a course should initiate a meeting with their faculty advisor prior to the end of the semester in which the course was taken, to develop an academic plan. See Course Failure or Grade Less than "C" / Program/ Course Requirement section below.

CC-BSN Students

- CC-BSN students earning a "Fail" grade or "grade less than C" (as noted in course syllabus), are no longer eligible to continue in the CC-BSN Pathway; the student may apply to the RN-BSN track upon graduation from an A.S program.
- See the RN-BSN Application Process

RN-BSN Students

- RN-BSN students earning a first failure grade in a course with the NU prefix repeats course. A second failure: Student completes Re-Entry Process. For the student re-admitted to the program and a course is failed after a second attempt, the student may not continue in the program.
- See the RN-BSN Re-Entry Policy.

Students who earn a failing grade in a nursing course must successfully repeat that course (if re-entry is approved) prior to advancing to other nursing classes.

Course Failure or Grade Less than “C” / Program/ Course Requirement

Faculty Roles:

Course Faculty:

- Makes course grades available at midterm for student awareness of risk of failure in course
- Assists NHS students seeking help for remediation and plan for success
- At end of semester, completes Course Status Form: Grade Less than “C” for NHS students failing to meet minimum course grade. Forwards to: Chair, Admissions and Progression Committee; Student’s academic advisor

Academic Advisor:

- Advises student related to nursing major and course standing
- Meets with student to assess options and develop plan:
 - Potential change of major
 - Re-entry application to program
 - Completes necessary paperwork and forwards to appropriate faculty depending on decisions (see Re-entry Policy)

Incomplete “I” Grade

A grade of “incomplete (I)” is assigned in cases when substantial progress toward completion of coursework (including attendance requirements) has been accomplished at a satisfactory level, but, because of extenuating circumstances, is not fully completed by the end of the semester. If “I” timelines are not met, a ‘failing’ grade is earned and the student is dismissed from the program.

Faculty Roles:

Course Faculty:

- Notifies student of “I” grade.
- Completes Course Status Form: Incomplete Grade (Appendix or NHS faculty website), including a written description of work to be finished together with relevant timelines.
- Distributes form as indicated, including a copy to the Student File and to the Academic Advisor.
- Notifies student of all program decisions resulting from the academic plan.

NHS Grading Scale

(Course Specific Policies Apply*)

| GRADE | QUALITY POINTS | PERCENTAGE BSN | PERCENTAGE RS Radiographic Science |
|-------|-----------------|----------------|---------------------------------------|
| A | 4.00 | 93 | 93 |
| A- | 3.67 | 90 | 90 |
| B+ | 3.33 | 87 | 87 |
| B | 3.00 | 83 | 83 |
| B- | 2.67 | 80 | 80 |
| C+ | 2.33 | 77 | 77 |
| C | 2.00 | 73-75* | 75 |
| ** | Non-Progression | <73-80* | <80 |

**NHS uses the college grading scale as an overall minimum requirement. Within some courses there is a higher minimum requirement to pass the course. Grading criteria for each course is clearly defined and communicated to students through individual course syllabi.

RN-BSN and CC-BSN Progression Policy

Progression Policy – RN-BSN and CC-BSN students

Progression is the term used for advancing from one semester to the next while pursuing a Bachelor of Science in Nursing degree in the RN-BSN track or CC-BSN Pathway. Many criteria must be met to facilitate program progression, including:

| Degree track/program | Result of “failure” or “grade less than ‘C’” | Re-Entry Process | Action to be taken by student and advisor |
|----------------------|--|---|--|
| RN-BSN | 1 st failure: Student repeats course 2 nd failure: Student completes Re-Entry Process | Upon 2 nd course failure: Degree program track changed from “admitted RN-BSN” to “pre-RN-BSN” Student submits Application for Re-entry (student does not need to sit out for one (1) semester unless placed on Academic Suspension); petition is reviewed by RN-BSN/CC-BSN Committee | Student and advisor complete success plan; update RN-BSN study plan to incorporate course to be repeated |
| CC-BSN Pathway | Student is dismissed from CC-BSN Pathway and may be allowed to progress in RN-BSN track | Determined by Division Chair, CC-BSN Coordinator, and academic advisor | Degree program track is changed from “admitted CC-BSN” to “pre-RN-BSN” Student and advisor complete success plan; |

| | | | |
|--|--|--|--|
| | | | update study plan to reflect progression in RN-BSN track Student must submit RN-BSN application once entry requirements are met |
|--|--|--|--|

Grades: Students must achieve minimum program grades in all required courses (general education, support, and program courses). Students must earn a “Pass” in Pass/Fail courses and the minimum required program or course grade in graded courses (a letter grade of “C” or better, for RN-BSN and CC-BSN).

Students earning a “Fail” grade, or grade less than required by the program or the specific course (noted in course syllabus), must successfully repeat the course prior to advancing to other nursing courses for which the repeated course is a prerequisite.

Progression process

Course Failure or Grade Less than “C” Advising Strategy

RN-BSN and CC-BSN students who are at risk for achieving a grade less than “C” will be advised as follows:

| | Faculty | Advisor |
|--|---|--|
| Prior to midterm grading deadline OR after student has missed two (2) assignments (whichever occurs first) | Contacts student and academic advisor via email, with information on current grade and strategies for improvement; assists students seeking help for remediation and plan for success. Ensures course grades are up-to-date and available via Canvas Gradebook for student awareness of risk of failure. | After receiving notification from Faculty, will send a follow-up email to the student within one (1) week; if no reply, will follow up via phone call within one (1) week of email receipt. Once contact is made, advises student related to major and course standing. Communicates with student to assess options and develop plan: Helps student identify resources for success (tutoring, study groups, counseling, etc.); Potential change of degree track, updates to study plan, etc. |
| Prior to semester course withdrawal deadline | Makes student and academic advisor aware of grade and encourages student to withdraw | Contacts student to follow up on use of resources for success; modifies if necessary. |

| | | |
|--|--|--|
| | <p>from course if it is not possible to achieve a passing grade.</p> <p>If a passing grade is achievable, instructor will communicate actions necessary to be successful in course.</p> | <p>If student is unable to pass class, advisor will assist student in completing the Total Withdrawal Process, updating study plan, and developing a strategy for future success.</p> |
| Prior to registration for upcoming semester | | <p>Communicates with student to update study plan to include repetition of course, if necessary.</p> |
| After current semester grades have been posted | <p>Notifies advisor of students who did not earn a “C” or higher in course(s), as well as a list of course(s), and suggests areas for future improvement.</p> <p>Completes “Course Status Form: Grade Less than ‘C’” for student failing to meet minimum course grade. Forwards to student’s academic advisor.</p> | <p>Receives “Course Status Form: Grade Less than ‘C’” from faculty member. Provides advisor comments and progression recommendations; saves form to student’s advising file.</p> <p>Communicates with student to notify of grade and develop a student success plan*; updates study plan as needed.</p> <p>For CC-BSN Pathway students: submits request to change degree track, if applicable.</p> |

***Student Success Plan – Process**

- Student completes online self-assessment and schedules meeting with advisor
 - The online self-assessment (Study Skills Inventory) is found on the LCSC Advising Center website
- Student and advisor discuss self-assessment and complete success plan; plan approved by advisor and saved in student’s advising file
 - Student success plan must be completed prior to student repeating failed course(s)
- Student and advisor have two (2) follow-up meetings during semester in which course(s) is repeated (meetings must be conducted over the phone, in person, or via Zoom; email check-ins are not accepted)

Incomplete “I” Grade

A grade of “incomplete (I)” is assigned in cases when substantial progress toward completion of coursework (including attendance requirements) has been accomplished at a satisfactory level, but, because of extenuating circumstances, is not fully completed by the end of the semester. If “I” timelines are not met, a ‘failing’ grade is earned and the student will progress according to the RN-BSN progression process.

Due to the requirements of the CC-BSN Pathway study plan, CC-BSN students are not eligible to receive “incomplete (I)” grades in any LCSC coursework. If a CC-BSN student does not complete the requirements needed to complete a course at a satisfactory level, the student will not receive a passing grade, and will be advised in accordance with the CC-BSN progression process.

Faculty Roles:

Course Faculty

- Notifies student of “I” grade
- Completes Course Status Form: Incomplete Grade (found in the Appendix or within the NHS Community – Learning Management System) including a written description of work to be finished together with relevant timelines
- Distributes form as indicated, including a copy to the Student File (Redwood) and to the Academic Advisor
- Notifies student of all program decisions resulting from the academic plan

Withdrawal from an NHS Program

Regardless of the reason, NHS students are encouraged to meet with their academic advisor prior to deciding to withdraw from an NHS program. NHS students who elect to withdraw from an NHS program must do so in writing to the Division Chair and should include the reason for withdrawal, including date of withdrawal and terms of course withdrawals. Withdrawals (“W”) count as one attempt in the course for application eligibility or Re-Entry purposes.

PRACTICUM POLICIES

Practicum Conduct/ Performance Expectations

- Students must fulfill the required number of course practicum hours to obtain a satisfactory grade of “P” [73% in all categories of the practicum assessment tool (PAT)].
- The student is responsible for notifying their practicum site(s) prior to any absences.
- All required practicum hours and activities in each course **MUST** be met.
- Some agencies require drug testing prior to students performing their practicum hours. The student must adhere to volunteer policies at the agency, in addition to LCSC policies. See Drug Testing Policy for additional information.

Unsafe Practice

Definition of Safe Practice

The student will demonstrate patterns of professional behavior, which follow the legal and ethical codes of the profession; promote the actual or potential well-being of clients, health care workers, and self in the biological, psychological, sociological, and cultural realms; demonstrate accountability in preparation, documentation, and continuity of care; and show respect for the human rights of individuals.

Definition of Unsafe Practice

Unsafe practice is any act, practice or omission during clinical practice that fails to conform to the accepted standards of the nursing professions, which may directly or indirectly cause physiological and/or emotional harm to others.

The following are examples (not a comprehensive list), of behaviors that may denote unsafe practice:

- Negligence in the care of a client which could reasonably cause injury or harm to a client or to co-workers (*Negligence is defined as the failure to do something that a reasonable person of ordinary prudence who has been given a similar level of training would do in a certain situation, or doing something that such a person would not do*)
- Attempting activities without appropriate assistance or supervision
- Failure to maintain confidentiality in interactions or records
- Dishonesty
- Use of any substance that may impair clinical judgment or be harmful to self or others
- Failure to display stable mental, physical, or emotional behavior(s) which may affect self or other's well-being
- Unethical behavior.

Evaluation of NHS Students: Practicum

Practicum Assessment Tools (PAT) are used to evaluate student performance in practicum courses.

1. Each practicum course has an evaluation tool.
2. Performance is based on the student's ability to perform consistently the behaviors listed on each of the assessments.
3. (P) pass and (F) fail grading:
 - a. (P) = satisfactory performance indicates that the student has adequately met all criteria for each objective with 73% or greater on the practicum assessment tool (PAT)
 - b. (F) = unsatisfactory performance indicates the student has not adequately met all criteria for each objective, earning less than 75% on the practicum assessment tool (PAT)
4. The student is expected to maintain satisfactory performance gained in previous nursing courses as s/he progresses through the program.
5. The student must adhere to the policies contained within the NHS CC-BSN and RN-BSN Student Handbook and specific course policies found in each syllabus.

When professional performance is not at a satisfactory level in any area on the assessment tool or violates NHS, agency, or LCSC policy, the instructor will initiate the Performance Improvement Plan (see Performance Improvement Plan) or the student may be dismissed from the program.

Performance Improvement Plan (PIP)

All NHS CC-BSN and RN-BSN students are expected to perform within professional, program, and course guidelines for student conduct. These guidelines are outlined within the NHS CC-BSN and RN-BSN Student Handbook, course syllabi, and Practicum Evaluation Tool, and include professional standards and clinical policies.

When conduct violates the above standards or policies, a Performance Improvement Plan (Appendix) documents the issue, states the plan for performance improvement and identifies the expected student outcome. This documentation becomes part of the permanent NHS student file. Student conduct and performance that reflects the high standards set within NHS is expected throughout the course of study. Therefore, faculty members examine student files for trends or continuation of problem behavior.

Accumulation of multiple Performance Improvement Plans in the student file may result in further action, including probation or dismissal from the program.

The use of performance improvement applies to practicum performance. The nature of the problem will determine the level of performance improvement required. Examples include but are not limited to:

- clinical performance that has not progressed to meet level standards
- failure to meet policies outlined in the Student Handbook
- conduct that is unprofessional or disrespectful to patients, NHS students, or faculty
- unethical behavior

Minor problems/issues, appearing once but do not present a concern for patient or student safety (such as student appearance or absences) will be documented on the student evaluation form (PET) or in the student file, and discussed with the student. If the problem is not corrected immediately, it may be pursued as a violation of the Student Code or Nursing Code of Ethics and a Performance Improvement Plan will be initiated.

Written Warning:

Indicates performance may not meet expected level in accordance with the course progress indicators or fails to show progression in learning.

Probation:

Indicates the student's performance 1) is deficient for critical behaviors listed on the course PET, 2) is potentially endangering to patients, faculty, or NHS students 3) violates ethical/legal standards, or 4) is consistently below expected standards for the course level. These behaviors indicate that the student is in jeopardy of course failure. Examples include, but are not limited to: continued offenses requiring written warnings; failure to remediate successfully; impaired practice; safety problems in skills involving patients or hospital staff; medication administration errors, or blatant disregard for professional standards of behavior.

During a probationary period, if the student remains below 75% in any component of the evaluation form, the student will fail the practicum course.

Probation initiated near the end of a practicum course, when time for performance improvement is limited may result in a practicum course failure. Probationary status for a student may be initiated only two (2) times during the program. A third incident may result in a clinical course failure and dismissal from the program.

- NHS students must respond to the initiation of a Performance Improvement Plan within **48 hours** by contacting the designated person who will assist them with the plan.

Immediate Program Dismissal:

Immediate dismissal from the program may occur when a student demonstrates negligent or "unsafe" behavior. In this instance, a grade of 'Fail' for the course is posted immediately; the student may not drop or withdraw from the clinical course if the clinical performance has been deemed unsafe. In cases of questionable performance in the service setting the student may be asked by the service agency or faculty to leave the practicum area until a determination of course status is made.

Grade Appeal Process:

The Grade Appeal process is available to the student who receives a failing grade under this Performance Improvement Plan policy.

Dress Code:

Students are to dress in a professional manner in adherence to the practicum setting.

NHS faculty believes the image portrayed to the patients and public about our programs is of great importance. The clinical uniform and personal hygiene practices exhibited by students can reinforce our dedication to high quality, safe, and evidence-based care.

The dress code is in place to ensure:

1. NHS students are easily identifiable to the patient and staff to assure patient safety through the consistency of the uniform and personal identification as a student.
2. NHS students present a positive personal and professional image to patients, visitors, providers, staff and fellow NHS students.
3. NHS students present an image that promotes confidence and trust among others and represents pride in LCSC while balancing comfort and practicality.
4. NHS students maintain standards of hygiene and universal safety precautions which decrease the risks inherent in the role of apparel in the cross-transmission of pathogens which may result in healthcare-associated infections.

Consequences of dress code violations:

NHS students arriving at the clinical agency improperly groomed or dressed or who violate any of the NHS guidelines will be dismissed from the clinical setting. The absence will count as a clinical absence. Inability to meet these policies must immediately be reported to the clinical instructor. Ongoing violations will be managed through the Performance Improvement Plan process. Consistent disregard for dress code policies may result in dismissal from the program.

Dress Code Expectations/Guidelines

NHS students wear the approved student attire while in the clinical setting, during scenario testing and simulation, as well as in lab courses, if so directed by course instructors.

- *Professional-casual attire:* situations may arise in which NHS students are present in a clinical agency or healthcare setting on school-related visits in which a uniform is not required. In these situations, NHS students are expected to dress in “professional casual attire”: slacks/chinos/skirts (no jeans/sweats), blouse or buttoned shirt/sweater (no T-shirts/sweats), casual socks/hose/shoes (no sneakers/Crocs/flip-flops). Program approved attire (polo shirt/vest/jacket) with the LCSC/NHS logo may also be worn in these situations.
- When visiting relatives or friends who are hospitalized, NHS students should wear street clothes and abide by established rules and regulations of the agencies. The student must make it clear that they are not present in the role of a student nurse, but are present only as a friend or relative of the patient. While assigned to the clinical setting, NHS students must obtain permission from the respective

clinical instructor to visit friends or relatives.

- Shoes are to be reserved for clinical use only and a clean appearance must be maintained.
- NHS students are to wear LCSC photo nametag and “Student” identifying information at all times when in the practicum setting (includes in-services, conferences, etc.). Nametags must always be visible to patients and staff.
- Hospital-specific dress code policies may supersede NHS policy. Students assigned to such locations are expected to follow agency-specific policy and be prepared to accommodate all requests.
- NHS students must maintain personal appearance and hygiene that meets the guidelines stated in this Handbook (jewelry, tattoos, hygiene, etc.).
- Chewing gum, tobacco products of any kind, and vaping are prohibited during the clinical rotation.
- Personal medical equipment for nursing students includes stethoscope, bandage scissors, goggles, timepiece with a second hand, pen, hemostat, and penlight.
- Other Personal Protective Equipment (PPE) may be required (i.e. face masks, surgical cap, etc.). Obtaining and maintaining this equipment will be the student’s responsibility.

Error/Incident

- Any student who makes an error or is involved in an incident in the practicum setting must notify the instructor and agency preceptor immediately.
- The student will complete the NHS incident report form (see Appendix).within 24 hours and submitted to the Practicum instructor, who will forward it to the Program Coordinator/ Assessment Director with a copy to be placed in the student’s file.

Performance Standards

- The student must be capable of meeting the performance standards of NHS programs. Reasonable accommodation may be made for some disabilities. However, NHS students are expected to perform in a reasonably independent manner.

| Category Description and Standard | Examples |
|--|---|
| <p>Critical thinking ability sufficient to exercise sound judgment.</p> <p>Reasoning skills sufficient to perform deductive/ inductive thinking for healthcare decision-making</p> | <ul style="list-style-type: none"> • Identify cause/effect relationships and make appropriate judgments in service situations and all other practicum course activities, applying the learned objectives of each practicum course. |
| <p>Communication abilities sufficient for effective interaction in verbal and written form</p> | <ul style="list-style-type: none"> • Able to obtain information, explain treatment procedures, initiate health teaching, describe patient situations, perceive nonverbal communications |

| | |
|--|---|
| <p>Gross and fine motor function sufficient to provide safe and effective care</p> | <p>Gross Motor:</p> <ul style="list-style-type: none"> Gross motor skills sufficient to provide the full range of safe and effective care activities (move within confined spaces, reach above shoulders, and reach below waist.). Depending on the service agency chosen, there may be an expected lifting weight requirement of the agency. It is up to the student to notify the instructor and agency of any physical limitations. <p>Fine Motor:</p> <ul style="list-style-type: none"> Fine motor skills sufficient to perform manual psychomotor skills (pick up small objects with hands, pinch/pick or otherwise work with fingers, and sustain repetitive movements). |
| <p>Auditory ability sufficient for safe care.</p> | <ul style="list-style-type: none"> Able to hear monitor alarm and emergency signals, able to hear normal speaking level sounds |
| <p>Visual ability sufficient for observation and assessment necessary for care</p> | <ul style="list-style-type: none"> Able to observe patients/clients, and visualize physical alterations and abnormalities |
| <p>Tactile ability sufficient for physical assessment</p> | <ul style="list-style-type: none"> Able to perform palpation of a pulse, perceive temperature and functions of a physical exam |
| <p>Mental Alertness sufficient to interact appropriately with the environment.</p> | <ul style="list-style-type: none"> Able to stay attentive and respond appropriately, wakeful, not fatigued |
| <p style="text-align: center;">Category Description and Standard</p> | <p style="text-align: center;">Examples</p> |
| <p>Emotional health sufficient to utilize totally her or his intellectual abilities. Able to function effectively during stressful situations. Able to perform effective communication and therapeutic interventions with patients.</p> | <p>Interpersonal:</p> <ul style="list-style-type: none"> Interpersonal abilities sufficient to interact with individuals, families, and groups, respecting social, cultural, and spiritual diversity Negotiate interpersonal conflict Establish rapport with clients and with co-workers Able to adapt to ever-changing environments: displaying flexibility, learning to function in the case of uncertainty that is inherent in clinical situations involving patients/clients Able to listen objectively to patient concerns, able to complete communications without outbursts, tears, fears or other encumbrances to patient interactions; personal judgments and persuasions are not promoted; communication is based on professional values and ethics |

| | |
|---|---|
| <p>Professionalism that befits a student healthcare provider and enables proper conduct when representing LCSC at clinical sites</p> | <ul style="list-style-type: none"> • No vulgar/inappropriate language or actions • Communication that is controlled, focused and respects the serious nature of the healthcare environment • Respectful interactions with staff, clients, and peers (polite, calm, listening, accepting of feedback) • Ability to attend clinical physically and psychologically rested and ready to perform in the student role. |
|---|---|

Special Considerations:

- Prescription drug use or medical conditions that could alter judgment or performance must be reported to the Practicum agency and instructor. If a safe assignment/activity for the student cannot be found, the student will be asked to leave the agency and discuss alternative service learning opportunities with the instructor.
- Pregnancy: NHS students who are pregnant or may become pregnant should be aware that certain situations may not be appropriate for them. It is the student’s responsibility to speak with their healthcare provider about limitations, to obtain written documentation of the limitation, and to notify the instructor. A letter of release may be required from the student’s healthcare provider.
- Illness/Injury/Surgery: Students who become ill, are injured, or have surgery during enrollment in an NHS program should be aware that certain practicum situations may not be appropriate. It is the student’s responsibility to speak with their health care provider about limitations, to obtain written documentation of the limitation, and to notify the instructor.
- If a student has exited a workplace under disagreeable conditions, and if that site is a potential practicum site for the student, the student should notify the instructor of this circumstance. This avoids a potentially difficult situation for both the student and site personnel.

Illness/Health/Safety of Student

Chronic or Unstable Medical/Emotional Illness

All NHS students who participate in practicum experiences must be of stable physical and emotional health sufficient to provide patient care that upholds acceptable standards of safety and professionalism.

It is the responsibility of the student to disclose to the Program Coordinator/Director any new or chronic personal medical or emotional condition that could potentially jeopardize the maintenance of a safe environment and safe care for the patient or student. See Performance Standards.

The Program Coordinator/Director, in conjunction with the student and academic advisor, will determine a course of action which may include:

- Notification of faculty and clinical staff who need to know about the situation for patient and student safety.
- Removal of the student from the clinical setting until the problem is resolved. Clinical attendance policies apply if the student is unable to attend clinical.
- Requirement of a primary healthcare provider’s release to document the student’s ability to

return to the clinical setting.

- Referral to the College Accessibility Services and/or Student Counseling Center, as appropriate, for additional resources and assistance.
- Clinical agency policies apply and may exceed those of the nursing/radiography program.
- Examples include (but are not limited to) diabetes in which the student could suffer hypoglycemia, frequent panic attacks, minor surgeries which could influence movement and pain, seizure disorders, unstable asthma, chest pains, back injuries/disabilities.

Excused Medical Absence

- To earn a passing grade in a clinical course, all required clinical hours must be completed. Due to the nature of the clinical experiences, it is very difficult to make up missed time. Absences anticipated to extend longer than 2 clinical days place the student in jeopardy of failing a clinical course.
- When extenuating circumstances present and the student has arranged in advance, faculty will make every effort to provide opportunities for the student to acquire hours needed to fulfill course requirements. It remains the student's responsibility to meet the terminal objectives of the course. If an equivalent and timely make-up experience cannot be provided, the student may receive a grade of "I" (incomplete) for the clinical course. The student may not progress in the program until the "I" is satisfactorily resolved. Clinical make-up experiences are typically not available during official college breaks (Fall, Winter, Spring, and Summer breaks) or holidays.

Medications: Personal Prescriptions

All NHS students are responsible to know the effects and side effects of their personal medications. Any influence from these medications that could potentially jeopardize the provision of safe patient care or safety to the student must be reported to the clinical course faculty.

- In these circumstances, clinical faculty reserves the right to remove a student from the clinical setting. Clinical attendance policies apply if NHS students are unable to attend clinical due to their medication therapy.
- A primary healthcare provider's release may be required to assure the student's safety in some situations.

Nursing & Health Sciences has a responsibility to maintain the standards of the program when planning alternate experiences for the student. Therefore, the following will be considered when absences are accrued:

1. Academic and clinical proficiency of the student
2. Type of experience that will be missed (observation vs. practice)
3. Equivalency/appropriateness of make-up experience
4. Availability of clinical space or appropriately qualified faculty to support the make-up experience
5. Ability of the faculty of record to adequately observe and evaluate the student during the "make up" hours.

See the Appendix for an Excused Medical Absence Agreement form. Following an excused clinical absence, the student must provide a statement from a primary healthcare provider prior to returning to clinical and/or beginning an alternate experience.

Communicable Diseases

If a student has a potentially communicable disease (e.g., COVID-19, hepatitis A, mumps, giardia, shigella, salmonella, or similar), s/he must notify clinical instructor immediately and action will be determined in consultation with Student Health Services and/or the Public Health Department.

Prevention of Transmission of Communicable Disease: Standard/Universal Precautions

Definition of Potentially Dangerous Fluids:

Avoiding occupational blood and other body fluid exposure is the primary way to prevent transmission of hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV) in health care settings. However, Hepatitis B immunization and post-exposure management are integral components of a complete program to prevent infection following blood borne pathogen exposure and are important elements of workplace safety.

An exposure that might place health-care personnel (HCP) at risk for HBV, HCV or HIV infection is defined as a percutaneous injury (e.g. needle stick or cut with a sharp object) or contact of mucous membrane or non-intact skin (e.g. exposed skin that is chapped, abraded or afflicted with dermatitis) with blood, tissue or other body fluids that are potentially infectious.

In addition to blood and body fluids containing visible blood, the following fluids also are considered potentially infectious: cerebrospinal fluid, synovial fluid, peritoneal fluid, pericardial fluid and amniotic fluid.

Clinical Exposure Policy

NHS students who experience an exposure to bodily fluids (needle stick/sharps injury, splash, spills, etc.) or who are exposed to other medical hazards while in the clinical setting must report the incident to the 1) clinical agency and 2) clinical faculty/ NHS program Director/ Coordinator.

Any costs incurred due to a clinical exposure are the responsibility of the student.

NOTE: NHS students are required to follow all LCSC and practicum agency policies for isolation procedures and universal safety precautions. The Clinical Exposure Policy should be followed for treatment and reporting even if proper precautions were not followed.

Procedures: Exposures

Definition: Exposure to substances that are harmful or may be harmful to humans. This includes:

- Blood or bodily fluids received to mucus membranes or open skin through splash, needle puncture, or spillage.
- Chemical agents received to skin, ingested or inhaled.
- Radioactive agents through improper protective or monitoring protocols.
- Viral agents highly contagious or harmful to pregnant individuals.
- Other unusual incidents or exposures out of the ordinary.

See area below for Initial Treatment Protocols.

1. Immediately notify LCSC clinical instructor (NHS students in an observation experience or

preceptorship, notify the agency RN/CI to whom you are assigned. That nurse/CI will assist you to contact the LCSC clinical faculty).

2. Seek treatment if indicated.
3. Complete Incident Reports.
 - a. Agency Incident Report – work with assigned RN/CI to complete
 - b. LCSC Incident Report – see appendix for form; work with clinical instructor to complete.

COVID-19 Protocols: if exposure to COVID-19 is suspected or confirmed, student will follow guidance, policies, and procedures of the clinical agency, the college, and the local Public Health Department (<https://www.lcsc.edu/communications/coronavirus>).

Initial Treatment Protocols:

Clean Needle Stick

Definition: Needle or sharp instrument injury poking or penetrating the skin. Instrument has not been used on a patient or other person; has been used only in preparation for injection or procedure.

1. Clean area, washing with soap and water.
2. Bandage as needed.
3. No prophylactic medications are needed.
4. No laboratory testing for HIV, hepatitis, etc. is necessary.

Contaminated or “Dirty” Needle Stick

Definition: Needle or instrument injury poking or penetrating the skin, regardless of depth. Instrument has been used on a patient or other person.

1. Remove the instrument or needle; do not discard.
2. Wash the area immediately with soap and water. Encourage bleeding from the site with use of gentle pressure.
3. Apply betadine or antibiotic ointment to the site.
4. Apply pressure to control any bleeding before bandaging.
5. Together with primary RN/CI and NHS clinical instructor, follow protocol of facility for contaminated needle/sharps injury. *Costs incurred for evaluation are the responsibility of the student.*
 - If immediate care is required, go to the ER
 - Notify/consult with Employee Health/Infection Control officer
 - Ensure testing of source patient as determined by facility
 - If non-emergent, seek care from primary care provider or Student Health for testing (HBV, HCV, HIV, and/ or other as necessary)

Splashes or Exposure to Mucous Membranes

1. Flush splashes with water and wash skin with soap and water.
2. Irrigate eyes and flush mucous membranes with clean water, saline, or sterile irrigants.

Chemical Agents

Definitions: Exposure to hazardous chemicals used in the hospital setting through splash, spillage, accidental ingestion, or inhalation.

1. Immediately wash or flush the agent from the skin/mucus membrane. Use MSDS information sheets available on each unit. Chemical exposures require specialized treatment.
2. Follow information provided on the MSDS sheet.
3. Visit the agency Emergency Department for emergency treatments needed (flushing of eyes, reversal medications, etc.).

Radioactive Exposure (See Appendix B)

Definition: Exposure to radioactive particles through testing and patient care settings.

1. Follow MSDS sheets for skin or body contact with agents.
2. Other exposures will require follow up with a personal healthcare provider for evaluation and treatment.

Viral Exposures

Definition: Exposure to viral agents known to be potentially harmful to humans (including fetus).

1. Exposure is typically reported to the student or NHS program once a patient is found to be infected with a virus.
2. Treatment is directed by the hospital or healthcare agency.
3. NHS students who discover contact has occurred or who have questions should talk immediately with the clinical instructor.

Faculty Responsibilities:

1. Refer student to the Emergency Department if emergency treatment is needed.
2. If emergency care is not needed, contact the agency's nursing supervisor, or Safety/Infection Control/Employee Health officer.
3. Follow the agency's policies for immediate exposure care and assist student to complete the needed action.
4. All contaminated needle sticks or exposures to blood or bodily fluid must be treated as if there is potential risk of pathogen exposure.
5. Assist student to complete incident forms:
 - a. Agency's Incident Report form
 - b. NHS Incident Report form
6. NHS students are responsible to follow the requirements of their individual insurance plans.
7. NHS students are encouraged to seek care from their personal care provider for necessary post-exposure blood draw (HBV, HCV, HIV, etc.). All costs incurred in relation to the exposure or events are the responsibility of the student.
8. Report incident and actions to NHS Chair and appropriate Program Director/Coordinator through e-mail. Assure that the student provides the Incident Report to the appropriate personnel.

Special Notes for Faculty:

Viral Exposures:

- If student exposure to a viral agent (e.g. Neisseria meningitis, Avian flu, H1N1, etc.) Is

reported to the clinical faculty by the agency, immediately report this to the NHS Chair.

- Report the actions being taken to protect the student(s).
- Complete an LCSC Incident Report for the NHS students involved in the exposure.

Clinical Injury Policy

NHS students who experience a physical injury while in the clinical setting must immediately report the incident to the 1) clinical agency and 2) clinical faculty/ NHS program Director/ Coordinator. *Any costs incurred due to a clinical injury are the responsibility of the student.*

Procedures:

1. Immediately notify the agency RN/CI to whom you are assigned and notify your LCSC faculty
2. Complete Incident Reports.
 - a. Agency Incident Report – work with assigned RN/CI to complete
 - b. LCSC Incident Report – see appendix for a copy; work with LCSC clinical instructor to complete.

Initial Treatment Protocols:

1. Refer student to the Emergency Department if emergency treatment is needed.
2. If emergency care is not needed, contact the agency's department supervisor, or Employee Health/Infection Control officer.
3. Follow the agency's policies for accidental injury and assist student to complete the needed action.

Faculty Responsibilities:

1. Assist student to complete incident forms:
 - a. Agency's Incident Report form
 - b. NHS Incident Report form
2. NHS students are responsible to follow the requirements of their individual insurance plans.
3. NHS students are encouraged to seek care by their personal care provider. All costs incurred in relation to the injury or events are the responsibility of the student.
4. Report incident and actions to NHS Chair and appropriate Program Director/Coordinator through e-mail. Assure that the student provides the Incident Report to the appropriate personnel.

Protection Orders (Order of Protection/Restraining Order)

Any student who has obtained a protection order against another individual must notify and provide a copy of the document to LCSC Campus Security. Campus Security will notify the Division Chair, all involved faculty and staff, and the appropriate campus offices.

The clinical instructor will assist the student to notify the clinical site supervisor and document the action and date in the student's NHS file.

Site/ Agency Policies

- NHS students are expected to perform in accordance with basic rules of safety.
- NHS students are required to follow the policies and procedures of the practicum agency in which they are functioning for patient care.
- Agencies may impose additional requirements on NHS students beyond those identified by LCSC for clinical practicum. Examples include COVID-19 vaccination, drug testing, and fingerprinting. NHS students are expected to submit to all requirements at their expense.
- Confidentiality must be maintained at all times in accordance with LCSC and clinical agency policies and HIPAA.
- The student is responsible to know these guidelines and review them as needed prior to each clinical experience.
- Supplies and/or equipment inadvertently taken from the clinical setting must be immediately returned upon discovery. Pilfering or misuse of hospital supplies and/or equipment is unacceptable and may be grounds for dismissal from the program and/or College-level sanctions.
- NHS students must remain in compliance with all CPR, health/immunizations, and background check policies in order to attend clinical practicum experiences. NHS students who are out of compliance may not be allowed in the practicum setting.
- Parking: please park where your service agency identifies as appropriate. LCSC requests that students avoid parking in areas designated for patients and visitors.

OTHER POLICIES & INFORMATION

Assessment/ Program Evaluation Process

1. All LCSC students have the opportunity to evaluate faculty and each course using the college Student Course Evaluation (SCE) process; NHS has included additional questions to more fully assess the NHS students' perspective of clinical, simulation and other program experiences. NHS students also have the chance to provide informal feedback to faculty throughout the semester via class discussion or informal feedback forms. Participation in the evaluation process is strongly encouraged. It is recommended the student provide his/her comment(s) in an objective, professional, and ethical manner.
2. End of Program Evaluations: All NHS students are required to participate in college and program outcomes assessments, including completion of an exit survey.

Confidentiality Statement

The College and Division abide by the Health Insurance Portability and Accountability Act (HIPAA), specifically the areas of the law related to privacy and confidentiality of patient and student healthcare information. As part of this law, the College and the student agree to not use or disclose Protected Health Information (PHI) other than as permitted or required by this Agreement or as required by law. The College and the student agree to use appropriate safeguards to prevent

use or disclosure of the protected health information other than as provided by this Agreement.

Protected Health Information (PHI) refers to individually identifiable health information held or transmitted by a covered entity. All information related to healthcare clients in any agency setting is strictly confidential. Any notes containing PHI used during clinical must be destroyed prior to leaving the agency. Any student who knowingly or unknowingly reveals information related to a healthcare client in other than appropriately designated settings will be referred to the Division Chairperson. Such behavior could result in dismissal from the program. NHS students who need to access patient records at clinical agencies must submit the appropriate facility request form.

Confidentiality is defined as action taken by the student or healthcare provider to preserve the anonymity of the client. Information used for class presentations or post conferences will contain no PHI. When copying any client records from any setting, all copies must have PHI removed. Confidentiality also includes the security of any electronic data, e.g., hospital computers, telephone, e-mail, fax, and cell phone conversations. Preparation forms, concept maps/care plans, and any other data must contain no PHI.

Consensual Relationships

The educational mission of the College and the Nursing & Health Sciences Division is promoted by professionalism in student/faculty and student/clinical preceptor/facilitator relationships. Policies on student/faculty relationships are addressed in the LCSC Faculty-Staff Handbook and the Student Handbook.

Professionalism is fostered by an atmosphere of mutual trust and respect. Actions on the part of an NHS student or NHS clinical instructor, preceptor/facilitator, which potentially endanger this atmosphere of mutual trust and respect, must be avoided during the period in which the student and preceptor are participating in an NHS course or clinical requirement. Students and clinical instructors/preceptors/facilitators should be aware of the possibility that an apparent consensual relationship with a student may be interpreted (either now or at a later date) as non-consensual and, therefore, sexual harassment. The power differential inherent in student/preceptor relationships may compromise the student's ability to decide and thus call into question the bonafide consensual nature of the relationship.

The potential exists for the student to perceive a coercive element in suggestions regarding activities outside those appropriate to professional relationships. Moreover, instructors, preceptors and facilitators, particularly in relationships with NHS students under their supervision, must be aware of potential conflicts of interest and the possible compromise of their evaluative capacity.

They also must also be aware that a relationship may give rise to a perception on the part of others that the evaluative capacity of the clinical instructor/ preceptor/ facilitator has been compromised.

- It is a violation of this policy for a student to undertake an amorous relationship or permit one to develop with an instructor, preceptor/facilitator or clinical agency staff member when under that person's supervision or evaluation, even when both parties appear to have consented to the relationship.
- NHS does recognize that consensual amorous relationships may exist prior to the time a student is assigned to a clinical instructor/ preceptor/ facilitator or is placed in a situation

where the preceptor/facilitator must supervise or evaluate the student. Should this occur, it is the student's responsibility to notify his/her clinical coordinator or lead faculty for reassignment.

- A student should not be assigned to an instructor, preceptor or facilitator with whom that student has or has had a recent consensual amorous relationship.
- A student who fails to follow this policy will be subject to the NHS Performance Improvement Plan policy, with probation or program dismissal as a possible outcome.
- An instructor, preceptor/facilitator who fails to follow this policy shall be removed from his/her clinical preceptor/facilitator status with NHS and Lewis-Clark State College.
- Persons who are married, or were married, are included within the definition of those persons having, or who have had, a consensual amorous relationship.
- A complaint alleging violations of the policy regarding consensual relationships maybe filed by any person.

Papers/Written Assignments

1. The current edition of the APA style guide is to be used in writing and formatting formal papers.
2. The student is responsible to reference the most recent APA style guide in formatting papers. In disputes about APA grading criteria, the current APA style guide will be used. Faculty preferences for formatting that do not adhere to the APA style guide will be explicitly stated in the syllabus to be used for grading.

Pregnancy and Breastfeeding Statement

Lewis-Clark State College and Nursing and Health Sciences Division supports the achievement of the school/life balance of its students, and values the diversity of its student population. Reasonable attempts to provide accommodations will be made for pregnancy and breastfeeding on a case-by-case basis. Please notify faculty as early as possible of need for pregnancy leave and intentions to breastfeed to ensure adequate opportunity for planning.

References for NHS Students

A student may request a professional reference for a job, scholarship, etc. Students that wish to use a faculty member as a reference must first receive permission from the faculty member. Students must then complete the "Recommendation Letter Request" form available on the Registrar's website. Please provide the faculty member with a current resume, which includes student name and address, career objective, education, certification or licensure, work experiences, professional activities, special skills, projects or course, honors, publications, contributions to the community and references. Provide faculty with at least two weeks advance notice when requesting a reference.

School Pin

Official school pins have been designed for each program. NHS students will be given the opportunity to purchase a pin near the end of the program. Purchase of a pin is not mandatory. Order information will be provided. ****The cost of the pin is not included in program or course fees.****

Student Representation at NHS Meetings

NHS students are given the opportunity to select student representatives to participate on selected NHS committees. It is each representative's responsibility to obtain input from peers prior to these scheduled meetings and determine his/her classmates' requests and concerns and report any decision back to the group. Student representatives are expected to be professional in their conduct. If confidential/personal student material is being discussed during the faculty meeting, the student(s) may be excused.

Transportation

NHS students are required to provide their own transportation and bear expenses for all travel and most housing related to service learning experiences. LCSC is not responsible for any personal injuries or damages incurred during travel.

APPENDIX

NHS: General Appearance Guidelines

| | ACCEPTABLE | UNACCEPTABLE |
|---|--|---|
| Clothing | <ul style="list-style-type: none"> • Role-appropriate attire that is well-fitting and appears professional in accordance with uniform guidelines for each program. • Long pants that appropriately cover the torso. • Undershirt without logo/lettering may be worn. • Clean socks or hosiery. | <ul style="list-style-type: none"> • Tight, ill-fitting, or inappropriate length pants. • Jogger style, workout, or yoga pants • Sweatshirts and hoodies • Stained, dirty, wrinkled attire • Undershirt with logo/lettering. • Bare skin/feet |
| Shoes | <ul style="list-style-type: none"> • Mostly white or black • Close-toed | <ul style="list-style-type: none"> • Multi-colored • Open-toed or sandals |
| Personal Appearance & Grooming | <ul style="list-style-type: none"> • Appearance and grooming standards that reflect highly upon LCSC and yourself. • Use “no fragrance” products • Neat, clean, & groomed hair. • Hair longer than shoulder length must be pulled back and secured when providing patient care. • Modest/natural colored hair • Adornments which serve to hold hair in place. • Headgear r/t cultural or religious beliefs may be worn • Facial (and neck) hair must be neatly trimmed and not interfere with Personal Protective Equipment (PPE) • Fingernails must be clean, short, trimmed, & unadorned. • Modest/natural-appearing makeup. | <ul style="list-style-type: none"> • Offensive odors of any kind, including but not limited to the odor of smoke on uniforms, breath or hair. • Perfumes, after-shaves, and other scented body care products. • Non-naturally occurring hair color. • Decorative hair adornments. • Facial hair that interferes with PPE • Artificial nails • Nail polish, stickers, gel and/or acrylic colored applications • Excessive or unnatural appearing makeup. |
| Jewelry | <ul style="list-style-type: none"> • Small earrings minimal in number • Other facial piercings or gauge holes will be closed with plugs/studs that match the skin tone. • A single modest ring may be worn. • Watch that complies with infection control practices | <ul style="list-style-type: none"> • Dangling earrings or excessive in number • Unnecessary adornments (necklaces, bracelets, etc.) |
| Tattoos | <ul style="list-style-type: none"> • Follow specific clinical site policy | <ul style="list-style-type: none"> • Tattoos of any size which contain swear words, racially or sexually inappropriate, offensive, or gang related content. |
| LCSC Nametag | <ul style="list-style-type: none"> • Worn at chest level. Facing upright and visible | <ul style="list-style-type: none"> • Defaced, dirty, or difficult to read |

Situations not addressed here will be covered individually based on criteria stated above.

NURSING & HEALTH SCIENCES DIVISION DRUG AND ALCOHOL TESTING POLICY

I.

Philosophy/Statement of Purpose

The Nursing and Health Sciences (NHS) Division at Lewis-Clark State College (LCSC) is committed to the physical and mental health and safety of the clients in the facilities where NHS students' practice. During the course of their training, NHS students in these programs are involved in the provision of health care and work with equipment which can cause serious injury or death to clients, the student, his/her fellow NHS students and instructors if not properly performed and/or operated.

The safety of the client is our priority. The risk of injury to the client is substantially increased if a student is Under the Influence of drugs or alcohol. For these reasons, the NHS is committed to being a Drug and Alcohol-Free Program and has instituted this Drug and Alcohol Testing Policy ("Policy"). Any student who is tested and is found to be Under the Influence, or who refuses to undergo Drug or Alcohol Testing when directed to so pursuant to this Policy, or who attempts to manipulate the results of any Drug or Alcohol Testing, is in violation of this Policy and may be suspended or expelled from the NHS program.

II.

Definitions

1. "Drug or Alcohol Testing" means, for the purpose of this Policy, a drug or alcohol test a
 - a. student is required to submit to because a "Testing Event" has occurred.
 - b. "Illegal Drug" means any drug which is not legally obtainable in Idaho or which has not been legally obtained or is not being used in a legally permissible manner. This includes prescription drugs not legally obtained and prescription drugs not being used for a prescribed purpose or in the prescribed dosage or being used by someone other than the person for whom it was prescribed. As used in this policy, the term "drug" includes a drug, chemical substance or immediate precursor listed in Schedules I through VI of Idaho Code § 37-2704 through § 37-2713 as from time to time amended. The term also includes "designer drugs," which are those chemical substances made where the molecular structure of those listed drugs is altered to create a drug that is not explicitly banned by state law.
2. "Prescribed Drug" means a drug that has been prescribed by a licensed health care provider and which is used for the prescribed purpose at the prescribed dosage.
3. "Participating in the Laboratory or Clinical Process" means, for the purpose of this Policy, that a student is participating in an NHS laboratory or clinical course in any setting, including, but not limited to, acute, long-term care, outpatient or community-based, and regardless of direct or indirect instructor supervision, or in other educational activities which involves direct client care, or in any additional off-campus educational activities (e.g., service-learning, volunteer activities, directed learning, conference, ISNA) related to an NHS program.
4. "Reasonable Suspicion" means, for the purposes of this Policy, a belief based upon reliable, objective and articulated facts derived from direct observation of specific physical behaviors, odorous presence, or performance indicators and being of sufficient import and quantity to lead a prudent person to suspect that a student is in violation of this policy.
5. "Under the Influence" means, for the purposes of this policy, having an Illegal Drug in one's

system and/or having a blood alcohol concentration greater than 0.02. Being “Under the Influence” is not limited to situations where a student misbehaves or where there is obvious impairment of physical or mental abilities, such as slurred speech or difficulty in maintaining balance. A finding that a student is “Under the Influence” can be established by

- i. Drug or Alcohol Testing as described in this Policy. A student is conclusively presumed to be “Under the Influence” if Drug or Alcohol Testing establishes that the student has in his/her body at the time of testing Illegal Drugs at a level exceeding the scientifically accepted confirmatory testing levels established from time to time, or if a confirmed breath or other scientifically valid test establishes that the blood-alcohol concentration of the student exceeded
- ii. 0.02 at the time he or she was tested.

III. Policy

1. It is the policy of Lewis-Clark State College Nursing and Health Sciences Division that NHS students shall be Drug and Alcohol Free while Participating in the Laboratory or Clinical Process. NHS students are prohibited from Participating in the Laboratory or Clinical Process while Under the Influence. To maintain this Drug and Alcohol-Free environment and uphold the safety of clients, NHS Students, faculty, and staff, LCSC implements the Drug and Alcohol Testing program set forth below.
2. The Division Chair or his/her designee may require Drug and/or Alcohol Testing of a student for any of the following reasons, each of which is referred to herein as a “Testing Event”:
 - (a) When a Division faculty member develops a Reasonable Suspicion, based upon his or her observations, that a student is Under the Influence while Participating in the Laboratory or Clinical Process, which suspicion will be corroborated by consultation with another Health Care Professional and promptly documented.
 - (b) When a Division faculty member has received a report that a student is suspected to be Under the Influence while Participating in the Laboratory or Clinical Process.

The Division Chair or his/her designee will then confer with the reporting party and then personally corroborate that suspicion through observation of the student and promptly document it.
 - (c) When the student caused or contributed to an accident or injury occurring while the student was Participating in the Laboratory or Clinical Process.
3. This policy shall apply to all NHS Students who register in any NHS Program for the Fall 2015 semester and thereafter. All such NHS students shall be required to read this policy and to sign and return to the Division office a Drug Testing Policy and Program participation form acknowledging receipt of a copy of this Policy and the student’s agreement to participate in the Drug-Testing program outlined herein. A copy of that participation form is attached hereto as Exhibit B. NHS students registering in the Fall of 2015 and thereafter will not be allowed to register in NHS programs without signing and returning the aforementioned participation form to the Division office.
4. A student who is found to be Under the Influence while Participating in the Laboratory or Clinical Process or who refuses to undergo Drug or Alcohol Testing when directed to so pursuant to this Policy, or who attempts manipulate the results of any Drug or Alcohol Testing, will be in violation of this policy and will also be deemed to have violated the NHS and/or LCSC’s Student Code of Conduct. Any such violation will result in disciplinary action which

may include the student's suspension or expulsion from any of the NHS programs. The student shall have the same rights and be entitled to the same procedures available to NHS students charged with violating the Student Code of Conduct. The student shall be referred to the student judicial process as is outlined in the LCSC Student Handbook.

5. If student undergoes a Drug or Alcohol test pursuant to this Policy and it is determined that the conduct which created the Reasonable Suspicion was the result of using a drug prescribed for the student at the prescribed dosage, the student shall not be disciplined pursuant to this Policy. However, the student may still face discipline pursuant to the NHS Unsafe Clinical Practices Policy.
6. All information, interviews, reports, statements, memoranda and/or test results received by Lewis-Clark State College through its Drug and Alcohol Testing program are confidential communications and may not be disclosed in any public or private proceedings, except in an administrative or disciplinary proceeding or hearing initiated pursuant to this Policy, or in civil litigation arising out of Drug or Alcohol Testing conducted pursuant to this Policy, or in response to a subpoena.
7. The Division Chair is responsible for the overall compliance with this Policy. The Division Chair or his/her designee shall be responsible for administering the Drug and Alcohol Testing program; determining when Drug Testing is appropriate; receiving, acting on and holding confidential all information received from the testing services provider; and collecting appropriate information necessary for the defense of LCSC in the event of legal challenge.

IV. Procedure

1. The Division Chair or his/her designee may require a Drug and/or Alcohol Testing of a student when a Testing Event has occurred. See to Policy 2(a), (b) and (c) for the definition of "Testing Event."
2. When the Division Chair or his/her designee requests that a student submit to Drug and/or Alcohol Testing after the occurrence of a Testing Event, the student shall immediately make himself or herself available for testing.
 - (a) Testing must occur within no more than three (3) hours after the initial observation of the Testing Event.
 - (b) The Division Chair or his/her designee shall contact the testing facility and facilitate expeditious testing.
 - (c) The student, upon request of the testing provider, shall inform the testing provider of any prescription or non-prescription medication which he or she has taken within the timeframe specified by the testing provider and shall promptly present that medication to the testing provider for examination for confirmation that it was prescribed to the student and of the prescribed dosage.
3. Collection and testing services shall be performed by a Drug and/or Alcohol Testing Provider chosen by LCSC or its designee. If the Testing Event occurs at a facility where testing can be fairly and confidentially conducted, the testing should occur at the facility. If not, then the student shall be transported to a location designated by the Drug and/or Alcohol Testing Provider by a designee of the Division Chair, who shall wait with the student at that location until the Drug and/or Alcohol Testing is completed and then transfer the student back to the location from which the student was transported. The student may not transport themselves to the Drug and/or Alcohol Testing facility.
4. The Drug and/or Alcohol Testing Provider shall comply with the following:

- (a) All specimen collections will be performed in accordance with applicable federal and state regulations and drug and alcohol testing industry guidelines to ensure the integrity of specimens and the privacy of the individuals tested.
 - (b) Chain of custody forms shall be provided to ensure the integrity of each urine specimen by tracking its handling and storage from the point of collection to final disposition.
 - (c) Positive test results, other than positive alcohol breath tests, shall be confirmed by a certified laboratory.
 - (d) Blood alcohol testing shall be performed by the Drug and/or Alcohol Testing Provider through use of a properly maintained and calibrated breath testing device, and positive breath tests shall be confirmed with a second breath test conducted no earlier than fifteen (15) minutes after the initial test, or through the use of any other confirmatory test meant to demonstrate a higher degree of reliability.
 - (e) The student shall be informed by the Drug and/or Alcohol Testing provider in writing of any confirmed positive drug and/or alcohol test results, including the substance involved. The Drug and/or Alcohol Testing provider shall then give the student the opportunity to discuss and explain the positive test result with a medical review officer.
 - (f) If the student declines to speak with a medical review officer, or if the medical review officer concludes after speaking with the student that the student's explanation is not valid, the positive test results shall be reported by the Drug and/or Alcohol Testing provider to the Division Chair.
 - (g) If the Drug Testing results are negative, or if the medical review officer concludes that the NHS students' explanation is valid, those results shall be reported by the Drug Testing provider to the Division Chair as negative and no disciplinary action shall be taken against the student related to the Drug Testing pursuant to this Policy. Provided, however, that if it is determined that the student was using a drug prescribed for the student at the prescribed dosage, that fact shall be reported to the Division Chair for evaluation of potential discipline pursuant to the NHS Unsafe Clinical Practices Policy.
5. The Division Chair will meet with the student to discuss any positive Drug Testing results. The student will be given the opportunity to explain the positive Drug Testing results. The student may attend classes at the discretion of the Division Chair, but shall have no client contact until the re-testing results have been returned.
 6. Variations in the above procedures shall not invalidate any test result unless such variation substantially compromises the integrity of the specimen/sample tested and/or the scientific validity of the test result.

Exhibit A

The lab will test a panel that at a minimum, screens for:

1. phencyclidine (PCP)
2. cocaine
3. opiates
4. amphetamines
5. cannabinoids
6. benzodiazepines
7. barbiturates
8. ETOH
9. Methadone

10. oxycodone
11. buprenorphine
12. MDMA

Panel may change from time to time depending on the company doing the testing. The screening threshold and confirmatory threshold for above shall be the generally acceptable screening and confirmatory thresholds employed in the drug testing industry.

Drug Testing

Students must consent to disclosure of drug screening results to all clinical agencies to which the student is assigned or to which the student is requesting placement for a clinical experience. Any positive drug screen test may lead to academic dismissal from the program.

If the student is unable to complete the required clinical experience due to a positive drug screen test the student may be dismissed from the program.

NHS Course Status Form: Course Grade Less than "C"/Course Requirement

This is to be completed by course lead faculty when course failure is known.

| | | | |
|---|--|---------|--|
| Student Name ID#: | | Sem/Yr | |
| Student Contact Information during semester break | | | |
| Course # Name | | Grade: | |
| Course faculty | | Advisor | |

Course Faculty Comments (used during re-entry process): Please identify your assessment of student issues that led to course failure and any help or actions taken during the semester to avoid course failure:

- First failure of this course Second failure of this course

Signature of lead faculty: _____ Date: _____

Advisor Comments (used during re-entry process): Please comment on your meeting with the student and recommendations that will assist the admissions committee in decisions about re-entry.

- Recommend re-entry Recommend with reservation Unable to support re-entry
- No plan to re-enter

Signature of advisor: _____ Date: _____

NHS Course Status Form: Incomplete Course Status

Completed prior to end of semester in which failing grade will be received. Forward to Program Coordinator/Director/ Leadership Team prior to the end of the semester in which the failing grade is received.

| | | | |
|--|--|--------------------------|--------------------------|
| Student Name/ID# | | Semester And Year | |
| Student contact information during break | | | |
| Course # Name | | Grade: | <u>Incomplete</u> |
| Course Faculty | | Advisor: | |

To Course Faculty: The grade of “I” indicates that work is satisfactory but, because of extenuating circumstances during the semester, has not been completed by the end of the term. The grade is given at the discretion of the instructor when the student has made substantial progress toward completion of coursework.

Course Faculty with student: List outstanding coursework and due dates (if attachment, add signature)

Student’s Initials _____ Faculty Signature _____ Date _____

Student is to meet with course faculty and the Program Coordinator/Director prior to the end of the semester in which an Incomplete grade is assigned in an NHS course. A plan will be developed to address progression issues. Normal progression to the next semester in NHS program is jeopardized when successful course completion has not occurred.

Program Coordinator/Director Plan:

Classes to register for: _____
 Petitions needed: _____
 Faculty contacts needed/reason _____

Student Signature: _____ Date: _____

Coordinator Signature: _____ Date: _____

Date “I” Resolved: _____ Initials: _____ Change of Grade Form submitted to registrar: _____

Program Coordinator/Director sends copies to:

Assessment Director, Advisor, Adm Asst for NHS students (Lew or CDA), Coordinator/Director, Course Faculty, Student

Course Request Form: Re-entry Student

Today's Date: _____ Request re-entry for: **Fall** **SP** **SU** **Year** _____
(circle one)

Student Name _____ Student ID _____

Contact Information: Phone: _____ LCmail: _____

Course Failed: (students failing >1 course do not qualify for re-entry)

| Course Name | Semester/Yr | Grade | Instructor(s) |
|-------------|-------------|-------|---------------|
| | | | |

Academic Plan for returning semester (see policy for requirements):

- Clinical Course: **List** _____
- Failed course): **List:** _____
- Clinical theory course: **List:** _____

Advisor Information:

Financial Aid review of resources Signature (Fin Aid) _____ **Date** _____

Advisor Comments: _____

- Narrative from student attached
- Re-entry application attached
- Fee paid
- Certified profile attached.
- Basic Skills registration attached
- Immunization, CPR, background check are in compliance

Student Signature _____ Date _____

Advisor Signature _____ Printed Name _____

Program Chair Signature _____ Date _____



Application Fee (\$35)
Pay at the Cashier's Office

Account 11-01-187602-41003

Receipt # _____

Date _____ Cashier's Initials _____

Program Re-Entry Application: RN to BSN Track

Applying for: *(See current program application on the NHS web site for application window dates.)*

- a. **Fall Semester Admission** _____ (Year)
- b. **Spring Semester Admission** _____ (Year)

Personal Information

| | | | |
|--|--------------------------|--|------------------------|
| First Name | Middle Name | Last Name | Maiden Name |
| Permanent Address (Street, Apt #) | | City, State, Zip | |
| Local Address (if different from above) | | City, State, Zip | |
| Primary Phone | Secondary Phone | LCSC Student I.D. Number | Social Security Number |
| E-mail Address | State of Legal Residence | Current Certificate or License (circle all that apply) CNA LPN EMT Paramedic RN Provide license # _____ or certificate. | |
| Person to contact in case of emergency | Telephone | Relationship | |

Submit application with other materials as a packet; requirements detailed in the NHS Student Handbook.

BSN Student Performance Improvement Plan Form

Student Name: _____ Program/ Year: _____/_____ Course: _____

The purpose of this form is to notify you that your performance is not at the expected level for your level in the program. To continue toward successful completion of the course, the steps outlined here must be achieved. Failure to do so may result in course failure. Refer to the current year NHS Student Handbook.

Performance Improvement Level: **Written Warning** **Probation**

Description of event/Date of event/Signature (add additional pages if necessary):

Student Learning Objective (add additional pages if necessary): Date of next review: _____

Student may provide response in written form to faculty member initiating document. Your signature indicates you have read this document.

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Student has attained expected level of performance following remediation. Date: _____ Initials: _____

Recommendations:

| Date | Skills Remediated | Faculty Signature |
|------|-------------------|-------------------|
| | | |
| | | |

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Form initiated by course faculty with copies to: Academic Advisor, Program Coordinator/ Director or AA&P Chair, CRC Coordinator (if necessary), and student. **Final Copies:** Original completed, signed and placed in NHS student file with a second copy to Assessment Director.

LCSC: NURSING & HEALTH SCIENCES

Incident Report

Note: An agency incident report must also be completed.

NAME OF STUDENT: _____ DATE: _____

COURSE: _____

LOCATION OF INCIDENT: _____

To be completed by student:

1. Describe in detail what occurred. Give specific times wherever possible.
2. What action was taken by you or others after this event occurred and who was notified. Give specific times wherever possible.
3. What negative effect (if any) did this occurrence have on the patient? What assessment findings validate your conclusion?
4. What suggestions do you have to either prevent this from occurring again or for alternative ways to handle a similar situation?

To be completed by instructor and/or program coordinator/ director:

5. What needs to be done to correct this error?

6. Remedial action carried through. Cite dates when Performance Improvement Plan will be complete and any further action taken.

Instructor

Date

Nursing & Health Sciences Chair

cc: Program Director/ Coordinator
Assessment Director
Student file

Revised 7/18

LCSC: Nursing & Health Sciences

Excused Medical Absence Agreement

I, _____, (Student Name) am asking for a medical release from clinical, _____ (Course Name and Number), for _____ (up to 4) clinical days. If granted this request, I will make up all hours and experiences associated with these clinical absences. My proposed plan is attached on a separate page. I understand there is limited opportunity to make up clinical hours and this may impact my ability to complete clinical course requirements.

I understand I must provide a medical release from my health care provider prior to returning to my regular clinical setting and schedule.

The release must state in writing that I am physically healthy and able to perform my duties as a student nurse in the selected care setting for up to 12 continuous hours.

I am aware that I must always meet Nursing & Health Sciences Performance Standards.

Student Signature

Date

Clinical Instructor Approval

Date

Course Lead Faculty Approval

Date

Program Director/Coordinator Approval

Date

cc: Clinical Instructor
Academic Advisor
Student's file

APPENDIX A

BSN PROGRAM

Accreditation

The BSN Program is fully accredited by the Commission on Collegiate Nursing Education (CCNE). CCNE is officially recognized by the U. S. Secretary of Education as a national accreditation agency; it is an autonomous accrediting agency that contributes to the improvement of the public's health. CCNE ensures the quality and integrity of baccalaureate, graduate and residency programs in nursing. CCNE serves the public interest by assessing and identifying programs that engage in effective educational practice.

As a voluntary, self-regulatory process, CCNE accreditation supports and encourages continuing self-assessment by nursing programs and supports continuing growth and improvement of collegiate professional education and post-baccalaureate nurse residency programs (<http://www.aacn.nche.edu/ccne-accreditation>). For accreditation questions or concerns please contact CCNE, 655 K Street NW, Suite 750, Washington, DC, 20036, (202)-887-6791.

The Program is also approved by the Idaho Board of Nursing, PO Box 83720, 280 N. 8th Street, Suite 210, Boise, ID 83720-0061, 208-577-2476.

BSN Program Mission Statement

To provide a supportive student-centered learning environment that prepares nursing graduates with the

- ❖ knowledge and skills to meet the nursing needs of the clients they serve
- ❖ ability to become engaged citizens, advocates, and lifelong learners
- ❖ competencies to be effective nurse leaders

Vision

To be recognized as a pioneering nursing program responsive to the needs and expectations of our students and other stakeholders.

Guiding Principles

- We focus on **Patient Safety** and **Quality of Care**
- We embrace the art of nursing as reflected through **Professional Values** and **Ethical Principles**
- We value **Partnerships, Teamwork, and Inter-professional collaboration**
- We emphasize the science of nursing through **Quality Improvement** and **Evidence-Based Practice**
- We create an **Inclusive** environment that promotes **Diversity**

BSN Foundation

We believe the Science of Nursing and the Art of Nursing are synergistic and within the Teaching-Learning environment, provide the foundational basis for the BSN program.

Science of Nursing

We believe that evidence-based practice guides the nursing process, providing a scientific methodology whereby nurses plan and implement holistic care. It is the critical process of the

science of nursing, a deliberate problem-solving approach to meeting people's health care and nursing needs.

Art of Nursing

We believe that caring practices create a compassionate, supportive, and therapeutic environment. Our aim is to promote comfort and healing, and to prevent unnecessary suffering for ourselves and others.

Teaching/ Learning Environment

We believe that adult learning principals guide the curriculum, and that faculty develop curriculum that facilitates learning responsive to the changing health care environment.

We believe in and strive to create an interactive environment that embraces various teaching methods and modalities and takes into account student learning styles.

We believe in providing a safe environment that facilitates open communication where experiential learning is encouraged.

We believe that professional, collegial relationships between faculty and students are essential.

We believe in fostering students' intellectual curiosity and a commitment to lifelong learning.

We believe that the faculty's teaching expertise, personal scholarship, professionalism, and clinical excellence provide students with the tools to develop an expert level of practice as professional healthcare providers.

AACN Roles for the Baccalaureate Generalist Nurse

American Association of Colleges of Nursing (2008). *The essentials of baccalaureate education for professional nursing practice*. Washington, DC.

Baccalaureate Generalist nurses are providers of direct and indirect care. In this role, nurses are patient advocates and educators. Historically, the nursing role has emphasized partnerships with patients – whether individuals, families, groups, communities, or populations – in order to foster and support the patient's active participation in determining healthcare decisions. Patient advocacy is a hallmark of the professional nursing role and requires that nurses deliver high quality care, evaluate care outcomes, and provide leadership in improving care.

Changing demographics and ongoing advances in science and technology are a reality of healthcare practice. The generalist nurse provides evidence-based care to patients within this changing environment. This clinician uses research findings and other evidence in designing and implementing care that is multidimensional, high quality, and cost effective. The generalist nurse also is prepared for the ethical dilemmas that arise in practice and will be able to make and assist others in making decisions within a professional ethical framework. Understanding advances in science and technology and the influence these advances have on health care and individual wellbeing is essential. Understanding patients and the values they bring to the healthcare relationship is equally important.

The generalist nurse practices from a holistic, caring framework. Holistic nursing care is comprehensive and focuses on the mind, body, and spirit, as well as emotions. The generalist nurse recognizes the important distinction between disease and the individual's illness experience. Assisting patients to understand this distinction is an important aspect of nursing. In addition, nurses recognize that determining the health status of the patient within the context of the patient's values is essential in providing a framework for planning, implementing, and evaluating outcomes of care.

The generalist nurse provides care in and across all environments. Nurses focus on individual, family, community, and population health care, as they monitor and manage aspects of the environment to foster health.

Baccalaureate generalist nurses are designers, coordinators, and managers of care. The generalist nurse, prepared at the baccalaureate degree level, will have the knowledge and authority to delegate tasks to other healthcare personnel, as well as to supervise and evaluate these personnel. As healthcare providers who function autonomously and interdependently within the healthcare team, nurses are accountable for their professional practice and image, as well as for outcomes of their own and delegated nursing care. Nurses are members of healthcare teams, composed of professionals and other personnel that deliver treatment and services in complex, evolving healthcare systems. Nurses bring a unique blend of knowledge, judgment, skills, and caring to the healthcare team.

Baccalaureate generalist nurses are members of the profession and in this role are advocates for the patient and the profession. The use of the term "professional" implies the formation of a professional identity and accountability for one's professional image. As professionals, nurses are knowledge workers who use a well-delineated and broad knowledge base for practice. Professional nursing requires strong critical reasoning, clinical judgment, communication, and assessment skills. The professional nurse also requires the development and demonstration of an appropriate set of values and ethical framework for practice. As advocates for high quality care for all patients, nurses are knowledgeable and active in the policy processes defining healthcare delivery and systems of care. The generalist nurse also is committed to lifelong learning, including career planning, which increasingly will include graduate level study.

AACN Professional Values (2008)

American Association of Colleges of Nursing (2008). *The essentials of baccalaureate education for professional nursing practice*. Washington, DC.

Professional values and their associated behaviors are foundational to the practice of nursing. The following professional values epitomize the caring, professional nurse. Nurses, guided by these values, demonstrate ethical behavior in patient care.

Altruism is a concern for the welfare and well-being of others. In professional practice, altruism is reflected by the nurse's concern and advocacy for the welfare of patients, other nurses, and other healthcare providers.

Autonomy is the right to self-determination. Professional practice reflects autonomy when the nurse respects patients' rights to make decisions about their health care.

Human Dignity is respect for the inherent worth and uniqueness of individuals and populations. In professional practice, concern for human dignity is reflected when the nurse values and respects all

patients and colleagues.

Integrity is acting in accordance with an appropriate code of ethics and accepted standards of practice. Integrity is reflected in professional practice when the nurse is honest and provides care based on an ethical framework that is accepted within the profession.

Social Justice is acting in accordance with fair treatment regardless of economic status, race, ethnicity, age, citizenship, disability, or sexual orientation.

American Nurses Association (ANA) Code of Ethics for Nurses*

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, or community.
3. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.
4. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.
5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
6. The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
8. The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.
9. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

*American Nurses' Association. (2015). *Code for nurses with interpretive statements*. Washington, DC: American Nurses' Association.

Nursing Code of Ethics and Social Networking Policy

NHS students in nursing programs are accountable to uphold the standards that apply specifically to the practice of nursing. These standards are reflected in the ANA Code of Ethics for Professional Practice, ANA Social Networking Policy, and AACN Professional Values statements.

**Failure to uphold these standards will result in disciplinary action
which may include dismissal from the nursing program.**

ANA Code of Ethics

“Ethics is an integral part of the foundation of nursing. Nursing has a distinguished history of concern for the welfare of the sick, injured, and vulnerable and for social justice. The Code of Ethics for nurses, found in the BSN Appendix, serves the following purposes:

- It is the profession’s nonnegotiable ethical standard
- It is an expression of nursing’s own understanding of its commitment to society
- It is a succinct statement of the ethical obligations and duties of every individual who enters the nursing profession” (NursingWorld Code of Ethics, 2015)

ANA Social Networking Policy

“Social networks are defined as “web-based services that allow individuals to 1) construct a public or semi-public profile within a bounded system, 2) articulate a list of other users with whom they share a connection, and 3) view and traverse their lists of connections and those made by others within the system” (Boyd and Ellison, 2007). These online networks offer opportunities for rapid knowledge exchange and dissemination among many people, although this exchange does not come without risk. Nurses and nursing students have an obligation to understand the nature, benefits, and consequences of participating in social networking of all types. Online content and behavior have the potential to either enhance or undermine not only the individual nurse’s career, but also the nursing profession.

ANA’s Principles for Social Networking

(ANA Fact Sheet, Navigating the World of Social Media, 2011)

- Nurses must not transmit or place online individually identifiable patient information.
- Nurses must observe ethically prescribed professional patient — nurse boundaries.
- Nurses should understand that patients, colleagues, institutions, and employers may view postings.
- Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
- Nurses should bring content that could harm a patient’s privacy, rights, or welfare to the attention of appropriate authorities.
- Nurses should participate in developing institutional policies governing online conduct.”

ANA Code of Ethics for Nurses, Provision 1.5

The relationships with peers, colleagues and others are of particular importance for the Student Code for nursing students. “The principle of respect for others extends to all individuals with whom the nurse interacts. The nurse maintains compassionate and caring relationships with colleagues and others with a commitment to the fair treatment of individuals, to fair integrity-preserving compromise, and to resolving conflicts.” (NursingWorld, ANA Code of Ethics, 2001)

References

American Nurses Association (2011). *ANA Fact Sheet: Navigating the world of social media*. Retrieved from: <http://www.nursingworld.org/Mobile/Nursing-Factsheets/navigating-the-world-of-social-media.html>

BSN Student and Program Outcomes

The BSN faculty has established the following Student and Program Outcomes. Additional detail is available in the Program’s Systematic Plan for Evaluation.

| Expected Outcomes | Tools/Indicators |
|---|---|
| Student Outcomes | |
| <p>I. Upon graduation, students are well prepared to function as a baccalaureate nurse in various healthcare settings. Nursing core competencies include:</p> <ul style="list-style-type: none"> • Solid base in liberal education • Well-grounded in prevention and population focused care. • Demonstration of professionalism through the application of nursing’s professional values and standards. • Ability to practice with patients, families, groups, communities, and populations across the lifespan and across the continuum of healthcare. • Creation of a compassionate and inclusive environment. | <ul style="list-style-type: none"> • HESI® & other Outcomes Testing • NCLEX-RN® Pass Rates • Exit Survey • Alumni Survey • Employer Survey |
| <p>II. Upon graduation, students are well-prepared to participate as a member of interdisciplinary healthcare teams. Nursing core competencies include:</p> <ul style="list-style-type: none"> • Demonstration of knowledge and skills in information management and patient care technology. • The ability to participate in inter-professional teams. • Engagement in collaboration with inter-professional partners. | <ul style="list-style-type: none"> • Exit Survey • Alumni Survey • Employer Survey |
| <p>III. Upon graduation, students are well prepared to understand and assume leadership roles in the healthcare system. Nursing core competencies include:</p> <ul style="list-style-type: none"> • Demonstration of leadership skills that emphasize ethical and critical decision-making abilities. • Participation in the completion of a quality improvement initiative and/ or evidence-based practice project. • Application of an understanding of healthcare policy to issues of access, equity, and social justice. • Demonstration of a desire for lifelong learning. | <ul style="list-style-type: none"> • Exit Survey • Alumni Survey • Employer Survey |

| Expected Outcomes | Tools/Indicators |
|---|--|
| Program Outcomes | |
| IV. Stakeholders who are satisfied with the BSN curriculum and educational experience. | <ul style="list-style-type: none"> • Exit Survey • Alumni Survey • Employer Survey • Course Feedback forms • Employment rates |
| V. Students who successfully complete and graduate from the program. | <ul style="list-style-type: none"> • Graduation rates |

BSN Standard Paper Rubric for Major Papers

BSN papers are to be professional in nature reflecting concise and cogent expression of ideas in a consistent format. It is recommended that 90% of the total points be assigned to content & quality of the paper; 10% of the total points be assigned to APA formatting, grammar, spelling, and syntax.

| Dimensions | Exceeds Expectations | Meets Expectations | Does Not Meet Expectations |
|--------------------------------------|---|--|--|
| Content (40%) | 37-40 Points | 31-36 Points | 0-30 Points |
| | <ul style="list-style-type: none"> The written work contains all of the criteria listed in the assignment. All objectives of the assignment are met Work is complete and all aspects of the topic are addressed. | <ul style="list-style-type: none"> The written work is missing one to two critical components of the assignment One to two of the objectives of the assignment are not met | <ul style="list-style-type: none"> The written work does not contain 3 or more of the components of the assignment 3 or More objectives of the assignment are not met |
| Critical Thinking (40%) | 37-40 Points | 31-36 Points | 0-30 Points |
| | <ul style="list-style-type: none"> The written work demonstrates an understanding of the content presented. Contains original presentation of ideas along with factual or evidence-based content. | <ul style="list-style-type: none"> There lacks a complete understanding of the content presented The written work lacks original presentation of ideas and facts and evidence is weak or lacking credibility | <ul style="list-style-type: none"> There is a lack of understanding of the content presented The written work does not contain any original presentation of ideas. Facts are weakly supported and there is a lack of evidence-based ideas. |
| Writing Style (10%) | 9-10 Points | 6-8 Points | 0-5 Points |
| | <ul style="list-style-type: none"> Paper consists of an introduction that provides reader with foreshadowing of paper's content and conclusion that provides closure. There is a clear thesis or theme of the paper Ideas transition smoothly and fluidly Logical sequencing Style is appropriate for the style of the paper | <ul style="list-style-type: none"> The introduction is recognizable and the conclusion provides a summary of the content but it lacks clarity of a beginning and an ending. The theme or thesis is ambiguous or lacks clarity and focus. Ideas are introduced abruptly, lacking smooth transition Sequencing lacks logic Style does not quite match the subject matter. | <ul style="list-style-type: none"> There is no real introduction that sets up the content of the paper and weak or no conclusion No clear thesis Ideas are loosely connected or not connected Illogical sequencing Lack of focus or coherent ideas Style is inappropriate for the subject matter |
| Grammar and Spelling (5%) | 5 Points | 3-4 Points | 0-2 Points |
| | <ul style="list-style-type: none"> Less than 2 errors in spelling and/or grammar | <ul style="list-style-type: none"> Less than 5 mistakes in grammar and/or spelling | <ul style="list-style-type: none"> 5 or more mistakes in grammar and/or spelling |
| References and Citations (5%) | 5 Points | 3-4 Points | 0-2 Points |
| | <ul style="list-style-type: none"> Original thought with appropriate APA citations. Uses 3(+) current journal or peer-reviewed references with high level of scientific validity. Less than 2 errors in APA in-text citations and reference page. | <ul style="list-style-type: none"> There are less than 5 citation mistakes within the body of the paper and/or there are fewer than 5 mistakes on the reference page. Uses fewer than 3 current journal or peer-reviewed references | <ul style="list-style-type: none"> There are 5 or more mistakes in citations within the body of the text and/or 5 or more mistakes on the reference page Uses unscholarly references |

BSN Student Transfer Policy

Students are considered for transfer into the BSN program after evaluation on a case-by-case basis. Students requesting transfer to the LCSC BSN program must have successfully completed at least one semester/quarter of a nationally accredited nursing program. Students who have not completed at least one semester/quarter successfully, should apply as a new applicant during an open application period.

NOTE: Graduates from the LCSC BSN program must meet all lower and upper division core requirements, complete 32 residency credits, 36 upper division credits, and a total of 120 credits.

Transfer Request Process

Students requesting transfer to the LCSC BSN Basic Track program should make an appointment with the Chair of the BSN Admissions & Progression subcommittee. The student will provide the following at the meeting:

- Copies of unofficial transcripts from all colleges attended (pre-nursing and nursing coursework included).
- Copies of syllabi from all nursing courses taken at the previous school.
- Clinical evaluations from all clinical courses in the previous school.
- Portfolio of samples of written work completed by the student in the previous program.
- A written statement from the student explaining the reason for transfer and plans for success in the LCSC nursing program.
- A letter from the previous program's nursing administrator highlighting the student's academic successes.
- A letter from the instructor of any failed courses outlining the documented problems resulting in course failure.

Transfer Credits

- Students requesting transfer to the LCSC BSN Basic Track must have completed the final semester at the transfer school within two academic semesters of the application date at LCSC.
- Students must have earned a minimum grade of "C" in all BSN coursework in order for the course to be considered for transfer.
- Students will successfully complete pre-nursing coursework required by the BSN Basic Track, prior to application to the BSN program as a transfer student.
- BSN coursework will be evaluated by course faculty on a case-by-case basis for equivalency. Non-equivalent courses may count toward total college credits for graduation, but not towards the LCSC BSN program courses.

Course Challenge Procedure

Students may earn college credit for specific college-level learning achieved through life and work experience. BSN students that meet requirements may apply to receive credit through a Challenge Exam. Visit the [Challenge Exam](#) website to see what courses may be challenged by exam and meet with your academic advisor to discuss the process.

Licensure Requirement: RN-BSN and CC-BSN

All RN-BSN and LPN-BSN students must have an active, unencumbered U.S. Registered Nurse (RN) or Practical Nurse (LPN) license in the state where they will complete their practicum coursework. To participate in broader clinical experiences, nurses living near state border are encouraged to retain an active license in both states.

Proof of current licensure must be provided upon application and must be updated as the license is renewed. If the license is revoked or disciplined, the student must immediately notify his/her advisor and the Division Chair, and must withdraw from all clinical courses.

The CC-BSN student must have earned an Associate Degree in nursing, successfully completed all LCSC CC-BSN courses, and have a nursing license in order to meet BSN graduation requirements.

Program Progression & Online Coursework

This table delineates which BSN courses (NU prefix) pre-RN to BSN students may take prior to program admission. It also indicates which courses are available for online enrollment of basic NHS students.

| Course | Pre-requisite for this course | Co-requisite for this course | Program admission required | Online Sections: RN/LPN, CC-BSN only | Open to Non-degree seeking licensed RN |
|--|-------------------------------|------------------------------|--|--------------------------------------|---|
| NU 318 Nursing Genetics | Biol 227 Med/Surg (1-Sem) | None | Course is approved for students enrolled as pre-RN to BSN and pre-LPN to BSN | Yes | No |
| NU 360 Transcultural Health Care | None | None | Course is approved for students enrolled as pre-RN to BSN and pre-LPN to BSN | Yes | With written permission of the course faculty |
| NU 413 Professional Role Development III | None | None | No | Yes | No |
| NU 414 Professional Role Development IV | None | NU 413 | Yes | Yes | No |
| NU 440 Population Health Nursing | None | None | Yes | Yes | No |
| NU 442 Practicum: Population Health | NU 440 | NU 440 | Yes | Yes | No |
| NU 447 Evidence-Based Practice | Approved Statistics | None | Yes, or with instructor permission | Yes | No |
| NU 469 Healthcare Policy & Economics | None | None | Yes | Yes | No |
| NU 478 Practicum: Leadership for the RN | NU 413 | NU 414 | Yes | Yes | No |

RN-BSN Progression

To ensure progression through the program, NHS students must complete all nursing coursework (NU prefix) within four (4) years of taking the first NU course. Those who do not must submit an Internal NHS petition requesting an exception.

Escrow Credits: RN-BSN and CC-BSN Students

All Idaho nursing schools operate under the Idaho Statewide Nursing Articulation Agreement, which is designed to facilitate the progression of nurses from one educational level to the next. This agreement provides for escrow credits, which are a means for nurses to be granted academic credits for previous nursing knowledge. At LCSC, these credits are held in “escrow” until the RN successfully completes the BSN program. At that time, the student’s Academic Advisor calculates how many escrow credits are needed to fulfill institutional policies for graduation.

These institutional policies include total number of credits needed for the BSN, which is usually 120, as well as number of credits earned at LCSC, or “Institutional Credits,” which is 32. For example, if a student transfers in 90 credits from a prior degree and completes 30 credits in pursuit of his or her BSN, that student will have earned 120 total credits. Since the student has earned just 30 institutional credits, rather than the required minimum of 32, he or she will be granted two escrow credits to accommodate the difference.

There is an administrative fee of \$20.00 per escrow credit to have these credits appear on the student's transcript. In the example used above, this student would pay \$20.00 each for two escrow credits, or \$40.00.

Student Membership in Professional Organizations

(Idaho Student Nurse Association and National Student Nurse Association)

A student who is pre-nursing or nursing in any state approved program preparing for registered nurse licensure is eligible and encouraged to join the National Student Nurses' Association (NSNA). Membership dues paid to NSNA will also enroll a student into the State Student Nurses' Association (ISNA). Student who have paid these dues are considered members of the LCSC Student Nurses' Association (LCSC-SNA) when an active chapter exists.

Professionalism for the bachelor's prepared nurse embraces not only the work done as part of employment but extends to include advancement of the goals of nursing, education, involvement in the support of local communities, and fellowship with other nurses. Membership in NSNA, ISNA, and the LCSC-SNA promotes the development of these values held by the nursing profession. Active involvement shows a commitment by BSN students to learn these values.

The NSNA is the only national organization for nursing students and the largest independent student organization in the United States. The mission of the NSNA is to bring together and mentor students, convey the standards and ethics of the profession, promote development in students, and advocate for advances in nursing education and healthcare.

Membership benefits include:

1. Scholarships
2. Leadership opportunities
3. Awards and recognition
4. Discounts: On study tools/apparel/conferences/etc.
5. Subscription to *Imprint*: the only magazine published by nursing students for nursing students.
6. Building a professional network: Students will work with faculty and professionals within these organizations. Both ISNA and NSNA collaborate with or hold conventions independently where students can capitalize on education, recruitment, and networking opportunities.

LCSC-SNA meetings are held on the main campus and scheduled so that there is no class conflict for attendance. A faculty advisor(s) assists the student organization. Membership, attendance, and participation is encouraged for all BSN students. Student members serve as LCSC-SNA officers by a formal election process outlined in the bylaws. Additional details regarding this organization can be found in the bylaws.