

**UMPQUA COMMUNITY COLLEGE  
NURSING PROGRAM  
STUDENT POLICY and PROCEDURES  
HANDBOOK  
2023-2024**



*Caring for our community starts here!*

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**UMPQUA COMMUNITY COLLEGE REGISTERED NURSING PROGRAM  
STUDENT PROCEDURES HANDBOOK 2023 - 2024**

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## WELCOME

This Umpqua Community College (UCC) Nursing Program Student Procedures Handbook has been prepared by UCC's Nursing Program team to provide you with the information you will need to be successful in your studies. Please read it carefully and refer to it frequently.

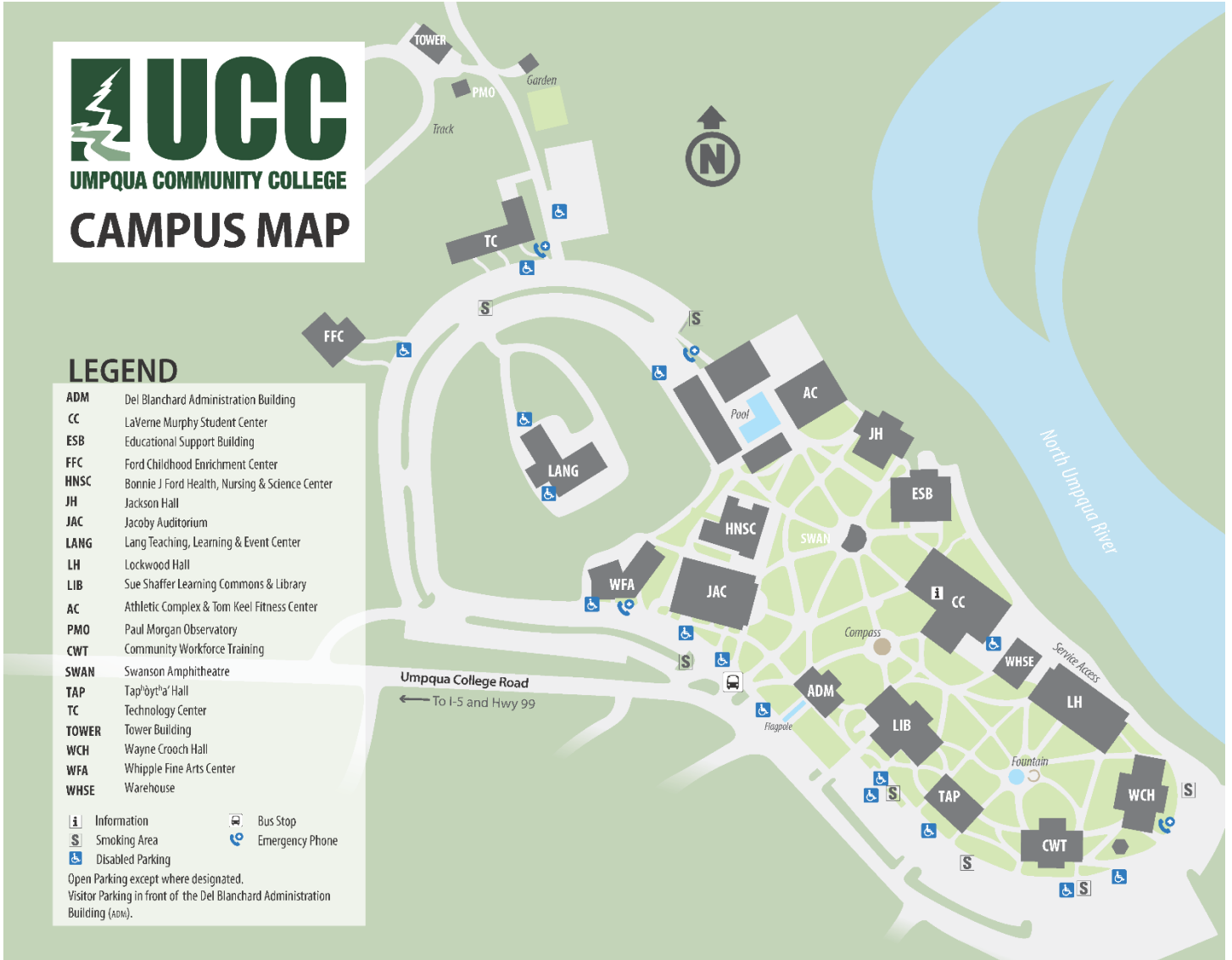
UCC's Nursing Program consists of education that builds on the previous terms learning standards. Each course combines didactic with clinical experiences in a variety of settings. You will be responsible for your own learning, with your instructors serving as resources to facilitate your learning. Your progress will depend on your demonstrating achievement of the competencies required in each term. To succeed, you will need to use the many resources available on and off-campus such as the library, the tutoring center, eBooks, and more.

UCC's Nursing Program was fully re-approved in 2019 for the maximum allotted time of 8 years by the Oregon State Board of Nursing (OSBN), which means that the program meets or exceeds standards for excellence. To maintain this approval, nursing staff are constantly monitoring the quality and outcomes of the curriculum. We invite student participation in evaluating the curriculum and the program. Students are given opportunities to provide feedback both oral and written throughout the course, at the culmination of courses, and through individual conferences with their Clinical Instructors and via their Student Representatives. The Nursing Director ensures that Student Representatives are invited to participate in program meetings to seek information and share feedback.

The materials in this handbook supplement the UCC Catalog and presents more explicitly current requirements and policies for the Nursing Program. In conjunction with this handbook, the UCC Student Code of Conduct is also provided. Please note that the UCC Nursing Program Student Procedures Handbook supersedes the UCC Student Code of Conduct per UCC Board Policy #4106. However, nursing students are required to abide by the following handbook and UCC Student Code of Conduct.

## CAMPUS MAP AND PHYSICAL ADDRESS

Umpqua Community College  
 1140 Umpqua College Rd.  
 Roseburg, OR 97470-0226



## PHILOSOPHY AND PROGRAM OUTCOMES

### **Mission Statement:**

The Registered Nursing Program prepares compassionate, competent nurses who are ready to meet our community's health care needs.

To locate the Oregon Nurse Practice Act, go to this web site. <http://www.oregon.gov/OSBN/adminrules.shtml>

### **Vision Statement:**

The vision of the UCC nursing program is to develop a compassionate and involved cohort of prudent and competent nursing students, nurse educators, and support personnel who promote and prepare future nurses to emulate therapeutic communication, create a culture of safety, provide support to patients and their families, and prepare to become leaders within their communities.

**Motto:** *UCC Nursing – Caring for our community starts here!*

### **Nursing Program Outcomes (Competencies/Student Learning Outcomes):**

This entire theoretical framework for the UCC RN program was the combined efforts of all of the nursing educational programs in Oregon using current evidence to guide the thinking. Based on the Pew Health Profession Commission and Healthy People 2010 initiative in conjunction with the Institute of Medicine (IOM) reports identifying the types of clients that nurses will care for in the future, these competencies (outcomes) were developed. UCC's nursing programs are integrating these competencies into the curriculum. The nursing curriculum is a "living" document that is always evolving and improving based on newly discovered scientific evidence.

## OREGON CONSORTIUM FOR NURSING EDUCATION (OCNE)

### **OCNE Professional and Nursing Competencies:**

The competencies defined by faculty in [OCNE](#) partner programs are based on a view of nursing as a theory-guided, safety-oriented, evidence-based discipline. The competencies recognize that effective nursing requires a person with particular values, attitudes, and practices. Accordingly, there are two categories of competencies: professional competencies and nursing care competencies. **Professional competencies** define the values, attitudes, and practices that competent nurses embody and may share with members of other professions. **Nursing care competencies** define relationship capabilities that nurses need to work with patients/clients and colleagues, the knowledge, and skills of practicing the discipline and competencies that encompass understanding of the broader health care system. In all cases, the patient/client is a member of the health care team, and is defined as the recipient of care, considered an active participant in care, and includes the individual, family, or community. A competent nurse provides safe care across the lifespan directed toward the goals of helping patient/client (individuals, families, or communities) promote health, recover from acute illness and/or manage a chronic illness and support a peaceful and comfortable death.

### **Professional Competencies:**

1. A competent nurse **bases personal and professional actions on a set of shared core nursing values** through the understanding that...
  - 1.1 Nursing is a humanitarian profession based on a set of core nursing values. As affirmed in the ANA Code of Ethics and other nursing literature, these values include social justice, caring, advocacy, protection of patient autonomy, prevention of harm, respect for self and others, collegiality, authority, accountability, responsibility for nursing practice, and ethical behavior.
  - 1.2 Ethical dilemmas are encountered in clinical practice. Nurses are obligated to notice, interpret, respond and reflect on these dilemmas using ethical principles and frameworks as a guideline.



- 1.3 Nursing has a legal scope of practice and professionally defined standards that enable nurses to practice at the top of their license.
2. A competent nurse **uses reflection, self-analysis, and self-care to develop insight** through the understanding that...
  - 2.1 Ongoing reflection, critical examination and evaluation of one’s professional practice and personal life improves nursing practice.
  - 2.2 Reflection and self-analysis encourage self-awareness, self-regulation, and self-care.
3. A competent nurse **engages in intentional learning** with the understanding that...
  - 3.1 Engaging in intentional learning develops self-awareness of the goals, processes, and potential actions of this learning and its effects on patient/client care.
  - 3.2 Purposely seeking new, relevant knowledge and skills guides best practice development, supporting safe and effective patient/client care.
  - 3.3 Integrative thinking establishes connections between seemingly disparate information and sources of information that will be applicable in any situation.
  - 3.4 Using an array of communication and information technologies enhances continuous, intentional learning.
4. A competent nurse **demonstrates leadership in nursing and health care** through the understanding that...
  - 4.1 Nurses take a leadership role to meet patient/client needs, improve the health care system and facilitate community problem solving.
  - 4.2 Nurses effectively use management principles, strategies, and tools to improve systems, processes and outcomes.
  - 4.3 Nurses are skilled in working with assistive nursing personnel including the assignment/delegation of responsibilities and supervision.
5. A competent nurse **collaborates as part of a health care team** through the understanding that...
  - 5.1 The patient/client is an essential member of the health care team.
  - 5.2 Successful health care depends on a team effort, and collaboration with others in a collegial team is essential for success in serving patients/clients.
  - 5.3 Learning and growth depend on providing, receiving, and using feedback in a constructive manner.
  - 5.4 Supporting the development of colleagues creates a just culture in the health care setting.
6. A competent nurse **is able to practice within, utilize, and contribute to all health care systems** through the understanding that...
  - 6.1 Components of the system must be considered when coordinating or planning care and when engaging with the multidisciplinary team.
  - 6.2 Improvements to health care utilize information technology for the collection and analysis of data.
  - 6.3 System-level thinking is required in the development and implementation of health policy to achieve health equity.
  - 6.4 Improving health literacy and expanding access to health care are essential to improve outcomes.
  - 6.5 Responsible management and utilization of health care resources is essential.

### **Nursing Care Competencies:**

7. A competent nurse **practices a relationship-centered approach** through the understanding that...
  - 7.1 Patient/Client-centered care is based on developing mutual trust and respect for the autonomy of the patient/client.
  - 7.2 Culture, history, health disparities, family and community must be considered in a patient/client-centered approach.
8. A competent nurse **communicates effectively** through the understanding that...

- 8.1 Therapeutic communication establishes a caring relationship with patients/clients, families, and/or communities to advocate, develop, and facilitate care.
  - 8.2 Accurate and complete communication with both patients/clients and the health care team is essential to ensure patient safety and provide for comprehensive continuity of care.
  - 8.3 Successful communication requires attention to social and cultural influences and the use of appropriate communication modalities and technologies.
  - 8.4 Health teaching requires attention to the patient's/client's and family's health literacy, cognitive and physical abilities, as well as community values and beliefs.
9. A competent nurse **makes sound clinical judgments** through the understanding that...
    - 9.1 Nurses use a variety of frameworks, classification systems and information management systems to organize data and knowledge for clinical judgment.
    - 9.2 Nursing judgment is an iterative process of noticing, interpreting, responding, and reflecting.
    - 9.3 Noticing, interpreting, and responding require use of best available evidence, a deep understanding of the patient/client experiences and cultural influences, recognition of contextual factors as well as one's own biases that may influence judgments and sound clinical reasoning.
    - 9.4 Clinical judgment involves the accurate performance of cognitive, affective, and psychomotor skills in the delivery of care while maintaining safety of the patient/client, family, community, environment, and self.
  10. A competent nurse, **locates, evaluates, and uses the best available evidence** through the understanding that...
    - 10.1. Legitimate sources of evidence for decision-making include research evidence, standards of care, community perspectives, a deep understanding of patient/client experience and preferences, and practical wisdom gained from experience and participation in professional organizations.
    - 10.2. Knowledge from the biological, social, medical, public health, and nursing sciences is constantly evolving.
    - 10.3. Best practice in nursing is continuously modified.

### **Oregon Consortium for Nursing Education Transfer Students:**

The following guidelines are for student looking to transfer to OHSU at the end of their ADN program for their BSN.

#### **Overarching Principles:**

**Communication:** It is important that the personnel and offices responsible for providing services to students with disabilities at the partner schools be able to communicate with each other in an honest and respectful manner. Concerns or issues that arise need to be communicated as early as possible among affected partner schools. Students need to be made aware of the partnership relationship early on, and communication for the student between the partner schools (community colleges and OHSU) should be as barrier free as possible.

**Seamlessness:** To the greatest extent possible students with disabilities will be provided seamless services and accommodations between the community college partner and OHSU.

**Partnership:** The community colleges and OHSU will work in the spirit of partnership to make sure that the needs of students with disabilities are met in a timely manner.

#### **Guidelines:**

1. A co-admitted student who requests accommodation will be served by the disability service office where the student is enrolled. For routine accommodations, documentation and decision will be made by staff in that office. OHSU and community college disability services offices will communicate/consult with each other as necessary to support students who choose to transition from the college to the university. This consultation can take place without sharing the personal identifying information or the community college may choose to get a signed release form from the student enabling more formal discussions. The goal of the consultation is to discuss appropriateness of accommodations, strategy, and accommodation ideas.

2. The disability service office at OHSU will provide a release form to the community college disability service office if needed. The release form will be given to students with disabilities in the nursing program to sign to enable the sharing of information and communication between the disability service offices at the community college and OHSU. This release form will also address the transfer of hardcopy information including documentation information from the community colleges to OHSU when requested by the student.  
The community college will determine when the best time and manner is to provide this form and information to the student. However, this will happen no later than when a student with a known disability indicates their intention to pursue the BS degree through OHSU and requests the assistance of the community college disability services office.
3. The OHSU disability services office will be responsible for developing and writing the accommodation letter for the student with a disability after matriculation into the OHSU nursing program.

## PROGRAM STANDARDS

### **Conduct for a Professional Nurse:**

**The Nursing Program Director reserves the right to immediately suspend or remove from the nursing program those students who, in the judgment of the nursing team and Nursing Program Director, do not satisfy program requirements regarding scholarship and/or professional behaviors and/or the ability to maintain the listed Technical Standards or requirements of the UCC Nursing Program Student Procedures Handbook and/or facility policies. Additional factors that may influence the decision to remove a student from the nursing program are listed in “Readmissions Policy,” (section b.).**

The Faculty bases the evaluation of student behaviors on the following codes:

American Nurses Association (ANA) ([www.nursingworld.org/ethics/ecode.htm](http://www.nursingworld.org/ethics/ecode.htm)), National Students Nurses Association ([www.nsna.org](http://www.nsna.org)), Oregon Consortium for Nursing Education ([www.ocne.org](http://www.ocne.org)), Oregon State Board of Nursing ([www.oregon.gov/OSBN/index.shtml](http://www.oregon.gov/OSBN/index.shtml)), Umpqua Community College ([www.umpqua.edu](http://www.umpqua.edu)).

Students are required to sign the pledge at the end of this handbook, signifying understanding of the Conduct for the Professional Nurse, NSNA’s Student Code of Academic & Clinical Conduct, UCC’s Student Code of Conduct and the contents of this handbook.

### **ANA Code of Ethics:**

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 healthcare 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, *Code of Ethics for Nurses with Interpretive Statements*, Washington, D.C.: American Nurses Publishing, 2005

### **NSNA:**

National Student Nurses' Association, Inc.  
Code of Academic and Clinical Conduct  
[www.nsna.org/nsna-code-of-ethics.html](http://www.nsna.org/nsna-code-of-ethics.html)

#### **PREAMBLE**

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide safe, quality nursing care. The clinical setting presents unique challenges and responsibilities for the nursing student while caring for human beings in a variety of health care environments.

The *Code of Academic and Clinical Conduct* is based on an understanding that to practice nursing as a student is an agreement to uphold the trust society has placed in us. The statements of the code provide guidance for nursing students in their personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

### **A Code for Nursing Students:**

As students are involved in the clinical and academic environments, we believe that ethical principles are a necessary guide to professional development. Therefore, within these environments we;

1. Advocate for the rights of all clients.
2. Maintain client confidentiality.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate, and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values, and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any technique or procedure for which the student has not been adequately trained.
13. Refrain 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. Assist the staff nurse or preceptor in ensuring that there is full disclosure, and those proper authorizations are obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.

17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

Adopted by the NSNA Board of Directors, October 27, 2009, in Phoenix, AZ

**NSNA Unethical and Unprofessional Behaviors Related To Client/Student/Nurse Relationships:**

The nursing student is advised that some of the unprofessional and unethical behaviors are:

- a. receive money or gifts from individuals (i.e. clients under their care)
- b. communicate with former clients
- c. continue relationships with clients after clinical hours or after clients have been discharged
- d. visit socially with individuals in the clinical area

A student who is faced with any of these situations should discuss it with his/her clinical instructor. Such actions violate the Nursing Procedures Handbook and can result in suspension or expulsion from the Nursing Program.

**ACADEMIC STANDARDS**

In addition to developing safe clinical practice, nursing students are working to develop professionalism and their own professional identity. As a nursing program, we believe that it is our responsibility to assist students in the development of their professionalism and professional identity. To assist in this, it is necessary for the student and the nursing faculty to conscientiously identify any behavior that is unprofessional. The following identifies unprofessional behavior. This list is not all-inclusive but can be used as a tool for feedback and expectations.

***Unprofessional behavior is demonstrated when the student:***

1. Fails to adhere to UCC policies including, but not limited to, attendance, dress code, and confidentiality.
2. Fails to accept responsibility for own actions and fails to communicate in a courteous, assertive, non-aggressive, non-defensive manner with instructor and staff.
3. Fails to demonstrate professionalism through honesty and integrity.
4. Fails to demonstrate a nonjudgmental attitude and respect to instructors, classmates, and staff.
5. Fails to turn in completed written assignments when due as required by course syllabus.

**Didactic (Classroom):**

Grading will be based on a variety of assignments and participation. Late assignments will earn zero points. It is the responsibility of the student to ensure that the correct assignment is uploaded for instructor review before the deadline. Every assignment in this program meets a specific purpose and is therefore an integral part of learning. All classroom/didactic assignments must be submitted by the end of the Term in which it is assigned in order for the student to receive a passing grade for the course.

**Clinical:**

Late clinical assignments, incomplete assignments, and uploading the incorrect file will receive zero points. It is the responsibility of the student to ensure that the correct assignment is uploaded for instructor review before the deadline. Clinical due date extensions may be provided for students facing unforeseen circumstances or with a doctor's note. Please see the "Clinical Absence" for more information.

**Testing:**

The testing category will include either 3 exams, or 2 exams and quizzing to equal one exam. This is at the discretion of each individual instructor. Students arriving more than 10 minutes late to a test (midterm, final, HESI) forfeit their right to test with the exception of extenuating circumstances. See "readmission" section for a list of these circumstances.

In rare cases, discrepancies in tests can take place (missing a page, etc.) In these situations, faculty/staff may pause the test to communicate for the benefit of the class.

For Scantron testing: The Scantron form is the definitive source for the exam score, not the written test. No altering of the Scantron will be accepted after it is submitted. It is the student's responsibility to adequately complete/fill-in the Scantron.

**Deficient Exam Scores/Test Review:**

Students with a score of less than 75% on an exam will be required to submit the Student Plan for Improvement and Exam Review via email to the appropriate Instructor and Program Coordinator prior to requesting a one-on-one meeting with the appropriate instructor. A group exam review will be offered by the instructor after the exam, outside of classroom time. This is an optional review but no one-on-one meeting will be scheduled for students that do not attend the group review first. This review will be instructor led and is an opportunity to look at your exam, your answer sheet, and the rationales for the test questions. This is not an arena for arguing test questions, answers, etc. It is the student's responsibility to contact the Didactic instructor for mentorship and guidance following the exam review, IF DESIRED. If a student chooses not to schedule a one-on-one meeting with the instructor, or attend the group exam review, this is the equivalent of knowingly bypassing assistance. Instructors may, at any time, require a mandatory meeting with students for deficient grades (see below for additional information). Failure to attend this mandatory meeting, may result in a Behavioral Strike.

One-on-one meetings regarding Exams will not be made available to students that score above 75% on exams.

**Grading Guidelines:**

1. **Final Grade** – The benchmark of 75% must be met upon course completion in **each** of the following categories to progress in the program: clinical, didactic, and testing. At the end of each quarter the grades will be determined on the following scale (for specific points & criteria see course syllabus):

92 - 100% = A Outstanding

84 - 91% = B above Average

75 - 83% = C Meets Minimum Standards

Below 75% = F Not Passing

2. Progression in the program requires a minimum of 75% in all components of the course (testing, didactic, and clinical) to receive a passing grade. Receiving a score of less than 75% in any of the three listed categories will result in an "F" for the course and removal from the program.
3. The program evaluation form (PEF) emphasizes the use of the core nursing competencies and evaluates the student behavior against a rubric in the 10 core competencies.
4. Program performance/behaviors will be evaluated and graded weekly.
5. Failure to turn in the PEF as instructed will result in a loss of 10 points for the week.

**NOTE:** In the event of a disaster, catastrophe, pandemic, etc., the UCC Nursing team have the right to end the term early and will use the individual student's current grade in the course to determine final grades. For example: Short notice of a campus closure may result in the inability to take final exams. In this scenario, the individual student's cumulative grade in the course will be used as the final grade. The UCC Nursing Team will put forth maximum effort to provide as many clinical hours as possible during the event of a disaster, catastrophe, or pandemic, but must follow State guidelines. It is expected that students will be flexible and will practice professionalism when learning of new plans and schedules.

### **Incompletes:**

The core nursing courses are not subject to an incomplete grade with the exception of the final term, NRS 224, in which the student experiences extenuating circumstance (see Clinical Rotations, NRS224C). An "incomplete" will not be assigned unless a contract is initiated by the student and approved by the instructor. The UCC Student Handbook states: "An "I" (incomplete) is given under special circumstances. If you cannot complete the class work in the term in which you take a course, you can arrange with the instructor (prior to grading time) to be given an "I". An incomplete must be made up no later than the following term of study, under the conditions specified by the instructor at the time he or she agreed to grant the "I". An "I" is not computed when figuring your GPA, but it does appear on your academic record. *Please see associated UCC policy for Incompletes.*

### **Learning Resources:**

1. In addition to the required textbooks, other resources are provided in the Library. Extensive Library use is an integral part of your education, as not all information that is necessary to learning is in your textbooks. **Computers and access to the Internet is an essential part of any education program.**
2. The college provides computer labs on campus, but it is the students' responsibility to get access to and maintain a school issued e-mail address. This email is used for all correspondence between the school, staff, and students. Students are required to have access to a laptop computer or compatible tablet, and a smart phone with application and texting capabilities.
3. Books and AV materials borrowed from the College, instructors, and/or other agencies are to be returned by the due date. Students with overdue materials at the end of any term will not receive a grade in nursing until the situation is satisfactorily resolved.
4. Photocopying is to be done on the machines located in the Library. Faculty/Staff are unable to allow student access to interdepartmental photocopiers.

### **APA 7th Edition Format:**

APA 7<sup>th</sup> Edition format is expected on all papers. See course syllabus for specific instructions.

## **PROGRAM REQUIREMENTS**

***Students are expected to check their email and the Learning Management System website (CANVAS) regularly. Any changes with contact information needs to be addressed immediately to the Program Coordinator.***  
Current names, telephone numbers, addresses and email addresses must be given to the nursing department Program Coordinator and the College Registrar at the beginning of the school year and whenever there are changes. Students must inform their clinical instructor of telephone number changes and/or name changes. Student information lists are considered confidential and used only by faculty and fellow students with their consent.

**Prior to the Start of Program:**

1. A current American Heart Association (AHA) Health Care Provider BLS Card is required for clinical experience, and it is the student's responsibility to obtain this and bring copy of current card to the Program Coordinator prior to the first day of class. Students are responsible for making sure their BLS is current throughout the program.
2. Begin collecting current & valid evidence of immunizations including: Hep B x3, MMR, Varicella, and Tdap. This evidence either needs to be documented immunization or Titer for the above. The Hep B Titer MUST be for Hep B Surface Antibody. See Vaccinations below.
3. Start background process. Follow instructions sent out by Program Coordinator. See Background History Clearance below.

**Completed in the Fall Term:**

1. Annual required and recommended OHA trainings for healthcare students such as: Blood-borne pathogens, HIPAA, and other safety trainings.
2. Signed consent to photograph and record.
3. FIT testing (respiratory mask size).
4. Digital photo obtained (for student I.D. badge).
5. TB screening/skin test/blood test will be required for the program. Please wait for specific direction from the Program Coordinator.
6. Facility specific documents required for clinical placement.
7. All nursing students will be required to have drug screening upon admission to the nursing program. In addition, students are subject to random drug screening throughout the program. *See Drug Screening Statement below.*

**Note: This list may not be all inclusive. Check your email regularly for program updates. Admission or continuance in the program may be denied/revoked if the required documents are not provided to the Nursing Program Coordinator by the assigned date.**

**Records:**

It is the responsibility of the student to maintain their own files. UCC will not provide copies of your student file, though you are able to review your file upon request. Certain information (such as immunizations, BLS, etc.) within your file will be confidentially shared with clinical facilities for compliance and may also be shared with record-keeping companies for organizational purposes. Note: Much of this documentation will be needed as you create a student portfolio/begin applying for work as a new RN graduate – please stay organized.

**Background History Clearance:**

Students will have completed a background check as part of the admission to the nursing program. It is important to understand that students will need to continue to complete background checks when applying for licensure and as conditions of employment. Additional background checks may be completed for various clinical sites; details will be made available from the Clinical Coordinator or Program Coordinator.

After completion of the background check and acceptance into the Registered Nursing program, any new citations, arrests, or violations need to be communicated to the Program Coordinator and Director of Nursing. Note: If you currently hold an Oregon CNA or LPN certificate or licensure, the Director of Nursing is required to notify the OSBN of the infraction/arrest, etc.

**Prior to registration for the first term, you need to submit evidence of beginning your Background History check.** Evidence of past or present criminal behavior identified through the background check or through other documented evidence of criminal behavior may lead to administrative sanctions up to and including dismissal from the Nursing Program. It is the responsibility of the student to inquire of past crimes. These crimes may prevent the



student from entering or remaining in the program due to the inability to participate in the clinical setting at a healthcare facility despite already attending class. Students who are unable to attend the assigned healthcare facility are unable to pass the course and are encouraged to withdraw.

The Program Director and Director of Nursing will meet to look over history checks and contact any student with a potential problem. Decisions related to admission to a program and/or clinical experience for applicants with convictions or arrests are guided by, but not limited to: the Department of Human Services, Seniors with Disabilities, and the OSBN Division 1: 851-001-0115 (see below).

**OSBN Division 1: [851-001-0115](#)**

**Criminal Background Checks (CBC) for Applicants for Licensure or Certification by the Board including Initial, Renewal, Reactivations, Reinstatements, and Endorsements**

When applying for a license or certification to practice, including renewal, the Board will make a fitness determination consistent with ORS 181A.195 and OAR 125-007, which includes national fingerprint and state records criminal background checks per Board procedure.

- (1) If the CBC reveals a conviction, the Board will make a determination whether the conviction bears a demonstrable relationship to the practice of nursing. If the conviction relates to the practice of the applicant, licensee or certificate holder, the Board may deny or otherwise discipline the license or certificate up to, and including revocation. No denial or discipline will be based solely on the findings of a crime; all findings will be investigated and brought to the Board for consideration.
- (2) When making a fitness determination, the Board must consider:
  - (a) The nature of the crime;
  - (b) The relevancy of the crime to the present practice or proposed position, license, or certification;
  - (c) Findings of fact;
  - (d) The passage of time since the commission of the crime.
  - (e) The age of the applicant at the time of the crime.
  - (f) Likelihood of a repetition of the crime.
  - (g) Subsequent conviction of another relevant crime.
  - (h) Whether the conviction was set aside and the legal effect of setting aside the convictions
  - (i) Letters of support that would supply evidence of current character, including recommendations by employer, if applicable.
- (3) The Board will evaluate a conviction or pending indictment or that indicate the making of a false statement; crime or offense on the basis of law of the jurisdiction in which the crime or offense occurred.
- (4) A conviction in the following crimes may have a nexus to nursing and may be investigated and considered and could result in denial or discipline of the license or certificate:
  - (a) Crimes involving theft.
  - (b) Crimes involving fraud or deceit.
  - (c) Crimes involving any sexually related conduct, including but not limited to rape or sexual penetration.
  - (d) Crimes involving assault, harassment, stalking, domestic violence or similar conduct, including causing the death of another individual or individuals.
  - (e) Crimes involving driving under the influence of intoxicants if convicted for another crime in connection with the same incident.
  - (f) Two or more driving under the influence of intoxicant convictions within a five year period.
  - (g) Violation of controlled substance laws.
- (5) Other criminal offense information that may have a nexus to nursing and may be considered includes:
  - (a) Sex offender registration
  - (b) Conditions of parole, probation, or diversion program.
  - (c) Unresolved arrests for:
    - (A) Felony Burglary
    - (B) Felony Robbery
    - (C) Felony Criminal Mistreatment

(D) Crimes involving visual depiction or visual recordings of sexually explicit conduct involving a child.

(6) The Board of Nursing in and through its designee(s) shall evaluate a crime or offense on the basis of the law of the jurisdiction in which the crime or offense occurred.

(7) Under no circumstances shall an applicant be denied under these rules because of a juvenile record that has been expunged or set aside pursuant to ORS 419A.260 to 419A.262.

(8) Under no circumstances shall an applicant be denied under these rules due to existence of contents of an adult record that has been set aside pursuant to ORS 137.225.

**Statutory/Other Authority:** ORS 678.150

**Statutes/Other Implemented:** ORS 678.150

**History:**

[BN 1-2022, minor correction filed 01/10/2022, effective 01/10/2022](#)

[BN 15-2021, amend filed 07/20/2021, effective 08/01/2021](#)

BN 5-2017, f. 7-3-17, cert. ef. 8-1-17

## **Vaccinations:**

Required immunizations: UCC Nursing follows the Oregon Health Authority's (OHA) requirements for immunization standards (Oregon Administrative Rule: 409-030-0180).

### **409-030-0180**

#### **Immunization Standards**

(1) Table 1 lists the diseases and the corresponding required immunizations that students must have in order to receive a clinical placement or the immunizations that students are recommended to have but that are not required in order to receive a clinical placement.

(2) Evidence of immunization may be demonstrated through the following:

(a) A document appropriately signed or officially stamped and dated by a qualified medical professional or an authorized representative of the local health department, which must include the following:

(A) The month and year of each dose of each vaccine received; or

(B) Documentation of proof of immunity to the disease via titer; or

(C) Written documentation by a qualified medical professional indicating the month and year the diagnosis of the disease was confirmed.

(b) An official record from the Oregon ALERT Immunization Information System.

(3) Individual student medical exemptions from specific immunizations must be maintained by health profession programs as part of the overall record of the student. Documentation for exemption requires a written statement of exemption signed by a qualified medical professional. Non-medical exemptions from immunizations are not allowed.

[\[ED. NOTE: To view attachments referenced in rule text, click here for PDF copy.\]](#)

**Statutory/Other Authority:** ORS 413.435

**Statutes/Other Implemented:** ORS 413.435

**History:**

[OHP 24-2019, amend filed 11/06/2019, effective 11/15/2019](#)

OHP 4-2015, f. & cert. ef. 7-1-15

OHP 8-2013, f. 9-30-13, cert. ef. 7-1-14

Vaccination requirements are subject to change as deemed necessary per State mandates and/or facility guidelines. Students are required to submit proof of vaccine completion to the Program Coordinator within the timeframe provided at UCC Registered Nursing Student Orientation. Students will not be permitted into the clinical setting without proof of the required immunizations, resulting in absence from clinical. Clinical absences can result in removal from the program.

UCC highly recommends that students seeking entrance into Allied Health programs, such as Registered Nursing, Nursing Assistant, Dental Assistant, Phlebotomy, Medical Assistant, Emergency Medical Technician, and Paramedicine, are fully vaccinated for COVID-19.

At this time, Umpqua Community College (UCC) is accepting religious and medical exemptions for students who decide not to get vaccinated for COVID 19. However, these exemptions are for the college's nursing and allied health programs which includes the on-campus portions of the program. UCC has no control over the requirements of clinical sites which are critical to the completion of the program. UCC is required to enforce the policies of our clinical sites.

According to the American Association of Colleges of Nursing (AACN) The Essentials: Core Competencies for Professional Nursing Education (2021), "Simulation experiences represent an important component of clinical education... However, care experiences with actual individuals or groups continue to be the most important component of clinical education...Simulation cannot substitute for all direct care practice experiences in any one sphere or for any one age group." (pg. 21) Nursing education programs are mandated by boards of nursing as well as accreditors to provide students with face-to-face clinical experiences. They are not obligated to provide substitute or alternate clinical experiences based on a student's request or vaccine preference.

If the student is unable to be placed into clinical sites due to unvaccinated status, they may be unable to complete the requirements of the program.

### **Drug Screening Statement:**

All nursing students will be required to have drug screening upon admission to the nursing program. The cost of the drug screen is the responsibility of the student. In addition, students are subject to random drug screening throughout the program.

A student is required to show proof of prescription if the student was prescribed medication that would alter or affect the drug screening. The nursing program holds the right to dismiss the student from further advancement or admission into the program if such information is not disclosed prior to the drug screen.

The nursing program will designate the company that will do the drug testing. The nursing program will not accept drug screening results from any company other than the one designated by the nursing program.

The nursing program maintains a no tolerance policy regarding substance abuse.

Students must clear a urine drug test. Failure to undergo the drug test will result in dismissal from the program. If the test comes back positive for reasons other than medically prescribed, the student will be dismissed from the program or acceptance into the program will be revoked. If the drug screen comes back diluted, not to temperature, or otherwise does not meet the requirements of the testing facility, the student will be required to submit another urine specimen. The student may be required to submit a monitored specimen before leaving the testing facility. If the student declines the second test, the student will be subject to dismissal from the program.

Any results below will result in revocation of acceptance or dismissal from the program. Note: *If the student is a CNA or LPN, the results will be reported to the OSBN.*

- Not eligible for a safety sensitive position
- Confirmed positive
- Positive for THC
- Not consistent with human urine (or shows that a urine substitute has been used)

To be considered for readmission the following year, the student must submit a letter from a treatment agency verifying completion of a substance use assessment and treatment program as indicated. Readmission is not guaranteed. If the student is readmitted and tests positive for a substance a second time, the student is not eligible for readmission to the nursing school.

Students will be subject to random, mandatory drug testing. If results are inconclusive, additional monitored mandatory testing will be required at the student's expense. Students may not return to clinical practice until a valid, passing result is obtained. These absences will be unexcused absences and will be subject to points lost. Students have a legal and ethical responsibility to report peers who they suspect are substance users.

**Impaired Nursing Student/Student Suspected of Substance Abuse:**

The nursing program faculty believes they have a professional and ethical responsibility to provide a safe teaching and learning environment to students and to clients who receive nursing care from students. To fulfill this purpose, nursing students must not be chemically dependent/under the influence, have mental illness, or any other behavior/condition that results in unsafe behaviors during their participation in any learning experience, including classroom, on and off-campus clinical settings, and other department sponsored functions.

Students are not to work "night shifts" prior to their assigned clinical rotation to ensure the safety of the students and the patient(s) in their care. The nursing school staff and faculty have the right/responsibility to ask an unsafe student to leave the clinical area. This will result in a recorded clinical absence.

The problems of chemical abuse and/or mental illness, and impairment due to fatigue resulting in unsafe behaviors must be proactively addressed when identified in nursing students. The nursing faculty will intervene with the impaired student as outlined in the Student Procedures Handbook.

The nursing program follows UCC's policy prohibiting the illegal possession, use, or distribution of drugs and/or alcohol by students on college property or as a part of any college affiliated academic activity, including off-campus clinical learning experiences. Violators will be prosecuted in accordance with applicable laws and ordinances and will be subject to disciplinary action by the college in conformance with college policy (See UCC's Student code of Conduct, and the Nurse Practice Act).

To maintain the integrity of the nursing program and ensure safe client care, and in accordance with UCC policy (see the UCC Statement of Student Rights, Freedoms, and Responsibilities), students must abstain from the use of alcohol or drugs/medications which affect safe and appropriate functioning in the following situations:

1. Before and during nursing classes
2. Before and during assigned on and off-campus clinical time.
3. While in student uniform or while participating in any UCC RN program function(s).
4. Before and during assigned time in the clinical facility, including the time of client selection.
5. Students are subjected to possible drug screen per faculty discretion.

Students have a responsibility to notify their instructor if they are taking any medications that may have an adverse effect upon their clinical performance. The instructor will then determine if the student's clinical performance is safe.

Students have a legal and ethical responsibility to report peers who they suspect are substance users.

As stated in the college catalog, "Anyone under the influence of alcohol or controlled substances may be removed, dismissed, or suspended from college functions, classes, activities, or responsibilities. The college will impose disciplinary sanctions on students up to and including expulsion...for violation of these policies."

While other medical conditions may cause some of the following behaviors, signs suggestive of substance use include:

- slowed thinking processes or very impulsive thinking;
- immobilization or panic with resulting inability to think or act;
- wildly unpredictable behavior deviant from usual, acceptable behavior; inappropriate or bizarre response/laughter;
- irritable, restless manner;
- complaints of blurred vision; dilated or constricted pupils; bloodshot eyes;
- slurred speech;

- emaciated or unusual weight loss;
- tremors, especially in the hands and early in the morning;
- complaints of morning headache; abdominal or muscle cramps; diarrhea;
- diaphoresis;
- odor of alcohol;
- poor coordination or unstable gait;
- threats to kill or harm oneself or another person;
- possession of a weapon or hazardous object;
- severe psychological distress;
- poor judgment regarding safety issues for self, patients, and coworkers;
- severe physical distress e.g. seizures, chest pain, respiratory distress;
- possessing, using, or transferring any narcotics, hallucinogen, stimulant, sedative, or similar drug other than in accordance with licensed health care provider's order.

Any Nursing Instructor, Nursing Supervisor, or Nursing Support Staff who believe that a student is under the influence of drugs or alcohol or is performing in a way that puts a client at risk has the right and responsibility to remove the student from client care responsibilities to avoid threats to client safety. If drug or alcohol abuse takes place in the clinical setting, the instructor has the right to confiscate the substance(s) for identification with a witness present. Signs, symptoms, and behaviors of the student, and actions taken by the instructor will be documented and validated by another nurse (UCC Instructor, Charge Nurse, or Nurse Manager on duty). The student will be escorted to the testing laboratory by a UCC representative or program director. Expenses of the testing will be charged to the student. Refusal to provide a sample warrants disciplinary actions which includes the possibility of immediate dismissal from the nursing program. Following completion of the specimen collection, warranted because of behavior in clinical, the UCC instructor or representative will arrange for the student's safe transportation home.

The involved student will be temporarily excluded from the nursing program while awaiting test results. The Nursing Director or Lead Clinical Instructor will be informed of the drug test.

The Program Director or Lead Clinical Instructor will notify the student of the results as soon as possible.

1. Negative results: Student may return to program activities with opportunities for make-up. The student will be expected to make-up time/assignments missed.
2. Positive results: the Nursing Director will inform the Program's Dean the dismissal of the student on the grounds of substance use. The student who disagrees with the program's decision can utilize the UCC Student Code of Conduct, Student Grievance Procedure outlined at the end of this handbook and online. Note: Positive findings will be reported to the OSBN if the student is a currently licensed medical professional (i.e., EMT, Paramedic, CNA, LPN, CMA).

### **Classroom Attire:**

1. Classroom dress code includes: black scrub pants, UCC Nursing logo sweatshirt or t-shirt.
2. Hair can be worn down.
3. All other personal grooming/hygiene rules from clinical must be followed.
4. According to campus student code of conduct, students are not permitted lewd, indecent, or obscene conduct or expression on campus.

### **Attendance Policy:**

Attendance and punctuality are a crucial part of the professional development and will be documented. 100% attendance and punctuality in on and off-campus clinical areas and the classroom is expected with the exception of extenuating circumstances (listed in the readmission section). ***In addition: See Clinical absence policy.***

1. Students must be registered with the college prior to attending classes or clinical. Only registered students may be in class, conferences, counseling sessions, or clinical.
2. Students are expected to be in their seat in the classroom by the time lecture is scheduled to begin. Once the instructor has begun lecturing, late students should enter the classroom quietly and choose the closest available seat to minimize disruption to the class.
3. A pattern of tardiness may be noted by the instructor and can result in a loss of points, and/or missed opportunities. Patterns of behavior will be noted on the Program Evaluation Form (PEF) and an associated loss of points can occur. Repeated behavior will result in progressive disciplinary action up to and including removal from the program. An example of a missed opportunity includes the inability to make-up missed in-class quizzes.
4. Students arriving more than 10 minutes late to a test (midterm, final, HESI) may forfeit their right to test.
5. Students need to schedule personal appointments at times other than during class or clinical times.
6. Students that are experiencing extenuating circumstances (as identified in the readmission policy), and with the permission of the instructor, may zoom into class. Students must understand that they may not be able to participate in group activity due to the nature of zoom versus face-to-face. Those with an eligible excused absence will have the option to make up assignments.

### **Confidentiality of Information and Social Media:**

Confidentiality is one of the primary responsibilities of every student. Students are given extensive training and education regarding confidentiality, HIPAA, and professionalism by the Nursing Program and will not be allowed into clinical if the training is not completed. Confidential information is defined as any information, written, spoken or electronically transmitted, whose unauthorized or indiscreet disclosure could be harmful to the interest of a client, employee, physician, the institution, a student, or an instructor. Examples of such information include, but are not limited to, personally identifiable medical and social information, professional medical judgments, classroom and post-conference learning activities and discussions.

All information about clients, including the nature of the client's disease, diagnosis and treatment is to be considered protected by applicable state and federal laws and by this policy. Incident reports relating to risk management issues and any other information designated as a private or sensitive nature is also included in the category of confidential information. These matters should only be discussed in the appropriate school or clinical setting, not in public areas such as the cafeteria or outside of the clinical facility. No portion of a client's record is to be photocopied or removed from the facility.

Students should never share passwords or login information to protect confidential information. Students must understand that clinical affiliation agreements state "at no time while a student or in the future shall any student publish or cause to have published any material relative to their learning experience at any clinical facility unless approved by both UCC and the clinical facility."

Absolutely no reference to a patient, even if de-identified, should ever be shared electronically in any manner outside the clinical assignments related to the care of the patient. Students should never take pictures or videos in any clinical facility or on-campus clinical setting. Any pictures needed for educational purposes will be taken only by clinical facility or UCC staff following facility and UCC policies with appropriate signed permissions. Students should understand that negative information about any person posted on any social networking site or other site reflects on the professionalism, integrity and ethical standards of the person posting the information. Future employers and college faculty and staff will periodically and randomly search public blog and profile sites.

A student/group of students may create a Facebook page using UCC's name in the page for school-related activities (such as the UCC nursing class of 2022 or 2023). This page must include the Program Coordinator and a member of communications/IT/web applications as administrators. The Facebook page is subject to the entire confidentiality of information/social media/cell phone policy.

### **Cell Phone/I-Pad/Tablet Use:**

1. Students are required to have a cell phone with application and texting capabilities for clinical rotations.
2. Students are required to have a group message for group communication. Students must be mindful to keep this communication directly related to group activities. Professionalism is expected in group communication.
3. Students will not use cell phones in the classroom setting without the direct authorization of the faculty.
4. Students will have cell phones on silent during class and clinical.
5. Students understand that they may receive disciplinary consequences for violating board policies regarding cyber-bullying. (Refer to UCC Student Code of Conduct.)
6. Students will not contact faculty's personal cell phone outside of class. Please use your instructor's contact information provided in the course syllabus or visit during office hours.
7. With consideration of the severity of a "Cell Phone Use" breach, students in violation of any of the cell phone/I-pads/tablets use policies will be subject to disciplinary consequences including the possibility of dismissal from the program and possible denial of re-entry.
8. Students must request permission before audio taping or videotaping an instructor, and when they are permitted, such tapes or pictures must only be used for educational purposes within the program unless other express, signed permission is given by the instructor. This permission must be granted daily unless the instructor specifically identifies otherwise. Educational material (e.g., lesson power points or outlines) posted online for course student uses are not to be posted by students on any other media or site.

### **Chain Of Command:**

In effort to resolve conflict related to course/seminar/clinical matters, it is expected you will utilize the following steps listed below. Please refer UCC Student Code of Conduct Policies and go through the proper chain of command.

1. Individual directly involved
2. Instructor of Record (for classroom issues) or Clinical Instructor (for clinical issues)
3. Student Representative(s)
4. Clinical Coordinator (for clinical issues not resolved with clinical instructor).
5. Director of Nursing
6. Dean of Instruction
7. College VP of Student Services
8. College President

### **Student Representatives:**

1. Each year's class will nominate individuals to serve as student representatives for each academic year. There will be one representative chosen to represent each clinical day cohort. The top three candidates from each group will then complete a panel interview process. The interview panels may include:
  - a. The current second-year student representatives
  - b. Nursing instructors
  - c. A non-nursing instructor
  - d. Support personnel
  - e. The Nursing Director
2. The interview panel will choose the incoming student representatives.
3. Student representatives are expected to attend the majority of nursing faculty meetings, normally held bi-weekly. If one of the representatives is unable to attend meetings regularly, faculty may elect a new candidate or ask that an alternate move into the role.
4. Each representative will be allotted time during each faculty meeting to provide feedback, describe concerns, or contribute to discussion topics. They may also be asked to convey information to the nursing student body.

5. Individual students may have concerns that may need to be addressed personally. These students will notify the class representative that they will talk directly with the Instructor of Record, and if necessary, follow the chain of command.
6. Student representatives will participate in the annual Pinning Ceremony.
7. Active Student Representatives are not required to complete CLA hours but are encouraged to participate in community events related to the essential representative duties.

### **Approved Community Learning Opportunities or Activities (CLA):**

1. RN Students are required to complete 50 hours for the total program (10 hours each for the first 5 terms). CLA hours do not “earn” points. However, incomplete CLA hours will result in a loss of 5 didactic points per hour (up to 50 points) and will be deducted from the “assignments” category (Health Promotion, Chronic 1, Acute 1, Chronic 2, or Acute 2, respectively).
2. The Nursing Program may post information on potential CLA opportunities. However, it is the student’s responsibility to secure these hours and not the Nursing Program.
3. Being an active participant in the local community is an important part of your nursing education. There are experiences which may result in the allotment of additional hours (exceeding 10) within the term. To promote continued participation in the community, students are able to roll over up to three hours each term with the exception of spring to fall terms. CLA opportunities that occur over summer term will count towards the students upcoming fall term.
4. No CLA hours are required in the 6<sup>th</sup> and final term (Scope of Practice).
5. International Service Learning, mission, and humanitarian work (one week or greater) is the equivalent of 5 CLA hours per term for the remainder of the program.
6. Mentors can earn up to 2 hours of CLA per term using the following guidelines: half-time is earned while waiting for students to arrive. 1:1 mentoring time will accrue via regular hours.
7. Active Student Representatives are not required to complete CLA hours but are encouraged to participate in community events related to the essential representative duties.

### **Supplemental Nursing Attire:**

Nursing Program Sweatshirt and T-shirt: The nursing t-shirt and sweatshirt serve as an advertisement for student nurses and the UCC nursing program. Students may wear their nursing program t-shirt and sweatshirt for CLA activities, classroom attendance, as well as within the community in appropriate settings. Care should be taken to not wear the t-shirt in environments that might reflect questionably on the student or the program. However, the supplemental nursing attire should NOT be worn in: dispensaries, bars, pubs and taverns, etc. Students who fail to comply with the above policy regarding uniform and hygiene may be sent home by clinical faculty and subject to loss of clinical points as well as a behavioral strike.

## **CLINICAL REQUIREMENTS**

### **Unsafe And Unprofessional Clinical Performance:**

**Nursing students are legally responsible for their own committed or omitted acts and nursing instructors are responsible for their students in the clinical area. Due to this, it is necessary for the student and the nursing faculty to conscientiously identify any behavior that is unsafe. The following further defines unsafe and unprofessional clinical performance.**

***Unsafe clinical performance is demonstrated when the student:***



1. Compromises the *physical* safety of the client (e.g., neglects use of side rails, restraints; leaves bed in high position; leaves call bell out of client reach; inadequately supervises clients at risk).
2. Compromises the *psychological* safety of the client (e.g., speaks inappropriately in front of client and significant others; does not communicate therapeutically).
3. Compromises the *microbiological* safety of the client (e.g., does not recognize violation of aseptic technique; comes sick to clinical experience; fails to follow hand washing techniques or standard precautions or isolation procedures).
4. Compromises the *chemical* safety of the client (e.g., violates the “6 Rights in Administering Medications”; fails to monitor IV infusions safely; administers medications without consideration/knowledge of reason for drug, drug side effects and/or client lab or V.S. values; fails to check client’s armband).
5. Inadequately and/or inaccurately utilizes the nursing process (e.g., does not prepare for care per clinical guidelines; does not complete initial assessment before doing client care; fails to observe and/or report critical assessment regarding clients; makes repeated faulty nursing judgments; fails to follow written and/or verbal instructions/orders including directions given by the clinical instructor; fails to complete care and/or documentation within the specified clinical time frame).
6. Fails to apply previously learned principles/objectives in carrying out nursing care skills and/or therapeutic measures (e.g., does not give IM or IV medications correctly; does not correctly calculate IV drip rate and/or medication dosage, fails to observe safety precautions during oxygen therapy after lessons have been covered in class/clinical and practice).
7. Assumes inappropriate independence/dependence in action or decisions (e.g., fails to seek help when situation is out of control or in an emergency; leaves floor without reporting off to appropriate staff nurse; does not make decisions at appropriate level for term in program; makes inappropriate decisions without consulting an RN or an instructor; does not provide safe nursing care without constant direction or prompting).

***Unprofessional clinical performance is demonstrated when the student:***

6. Fails to adhere to UCC policies including, but not limited to, attendance, dress code, and confidentiality.
7. Fails to accept responsibility for own actions and fails to communicate in a courteous, assertive, non-aggressive, non-defensive manner with instructor and staff.
8. Fails to demonstrate professionalism through honesty and integrity.
9. Fails to demonstrate a nonjudgmental attitude and respect to colleagues, clients, and family members.
10. Fails to actively seek challenging clients and new learning experiences.
11. Fails to turn in completed written assignments when due as required by course syllabus.

**Technical Standards:**

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

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

Students admitted to Umpqua Community College Nursing Program are expected to be able to complete curriculum requirements, which include physical, cognitive, and behavioral core competencies that are essential to the functions of the entry level professional nurse. These core competencies are the minimum and essential skills necessary to protect the public. These abilities are encountered in unique combinations in the provision of safe and effective nursing care.

Progression in the program may be denied if a student is unable to demonstrate the technical standards with or without reasonable accommodations.

Umpqua Community College is obliged to provide reasonable accommodations to qualified students with disabilities, which may include academic adjustments, auxiliary aids and or program modifications. Accommodations that fundamentally alter the nature of the academic program, could jeopardize the health and safety of others, or cause an undue burden to the program are not considered reasonable accommodations. Regular consistent attendance and participation is essential to learning, especially for all scheduled clinical experiences.

#### **Cognitive:**

1. Recall, collect, analyze, synthesize, and integrate information from a variety of sources.
2. Measure, calculate, reason, analyze and synthesize data.
3. Problem-solve and think critically to apply knowledge and/or skill.
4. Communicate effectively with individuals from a variety of social, emotional, cultural, and intellectual backgrounds.
5. Relay information effectively, accurately, reliably, and intelligibly. This includes a thorough and accurate use of computers and other tools to individuals and groups, using the English language.
6. Effectively collect, analyze, synthesize, integrate, recall, and apply information and knowledge to provide safe patient care for assigned clinical shifts.

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

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

#### **Motor:**

1. Coordinate fine and gross motor movements.
2. Coordinate hand/eye movements.
3. Negotiate level surfaces, ramps, and stairs.

4. Work effectively and efficiently within a limited space.
5. Effectively manage psychomotor tasks to provide safe patient care for up to twelve (12) hour clinical shifts.

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

- Transfer patient/patients in and out of bed from stretchers and wheelchairs.
- Control a fall by slowly lowering patient to the floor.
- Perform cardiopulmonary resuscitation (CPR)
- Lift, move, turn, position, push, or pull patients and/or objects, weighing up to 35 pounds.
- Reach to place or access equipment such as intravenous fluid bags or bend or squat to reach catheter bags, within compliance of safety standards.
- Transport equipment and supplies to the patient bedside.
- Manipulate small equipment and containers, such as syringes, vials, ampules, and medication packages, to administer medications.
- Dispose of needles in sharps container.
- Dispose of contaminated materials in a safe and compliant manner.
- Complete assigned periods of clinical practice (up to twelve (12) hour shifts, days, evenings, or nights, holidays, weekdays, and weekends).
- Complete skills tests within assigned time limit.

**Sensory:**

1. Acquire information from demonstrations and experiences, including but not limited to information conveyed through online coursework, lecture, small group activities, demonstrations, and application experiences.
2. Collect information through a variety of senses and/or using appropriate and approved equipment.
3. Use and interpret information from diagnostic procedures.

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

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

**Behavioral:**

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

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

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

Initiated:

Revised: 2.18

Reviewed: 7.22

Reviewed: 6.23

**Clinical Assignments:**

1. All clinical rotations must be supervised by UCC nursing faculty, unless otherwise specified by written agreement.
2. Students are financially responsible for transportation to and from clinical sites and may require travel out of the area for clinical experiences.
3. Students may ride with clinical preceptors during their community-based when participating in home visits.
4. Exceptions will not be made for travel or clinical schedule regardless of where the student lives. The student's presence in the clinical area is necessary for the instructor to adequately evaluate performance and competence.
5. Clinical hours will vary based on the type of clinical rotation. Clinical rotations may start as early as 0600 and may finish as late as 2400. Clinical rotations are subject to be any day of the week. Students may rotate between nursing instructors, facilities, and clinical shifts.
6. Students are guests in clinical facilities but are still subject to the same policies and code of conduct as facility employees. Therefore, if a facility employee is aware of a particular infraction of its policy by a student, he/she will inform the college of this incident and the student may be subject to disciplinary measures under the UCC Student Code of Conduct.
7. Students are responsible to inform the Director of Nursing of any action that occurs during the program that could impact their ability to obtain a nursing license – i.e. infraction of patient safety policies (abuse) or any pending civil or criminal activity.
8. Nursing students are required to identify themselves when in the clinical setting by wearing appropriate clinical uniform including name tag (badge). No "badging in" for others is permitted, even if they have no access (respectfully ask that they call or visit the security department).
9. Students will be assigned their nurse to work with by their clinical instructor at the beginning of the clinical day.
10. Students must introduce themselves to their RN they are working with and communicate their year and goals/objectives for the day.
11. Students must identify themselves as a student to the patients and gain permission to participate in their care for the day. Students must document this in the patient's EHR in a note.

*Updated: June 21, 2022\_RV\_CGT*

*Revised: 07/19/2023\_RV\_CGT*

12. Students must clearly communicate with their nurse when they will be away from the floor for breaks, mid-day conference, and post-conference.
13. Students must access only materials/areas/resources available to all students during the clinical experience.
14. First year students will pass medications with clinical instructors only.
15. Second-year students will work with their clinical instructors to establish guidelines for medication administration based on the student competency level.
16. Students are responsible for their scope of practice. Practicing outside of their scope of practice will result in disciplinary action up to, and may include, being exited from the program.
17. Clients with nuclear implants will be cared for by male students or female students of non-childbearing age.
18. Pregnant students will not handle chemotherapeutic agents or their containers.
19. **PLEASE LET INSTRUCTORS KNOW IF YOU HAVE A LATEX OR IODINE SENSITIVITY.**

### **On Campus Clinical:**

1. All clinical rotations must be supervised by UCC nursing faculty, unless otherwise specified by written agreement.
2. HNSC Simulation and Skill rotations are considered a part of the clinical experience. Rules that apply in clinical apply to HNSC including, but not limited to, dress code.
3. All students will be given time to practice skills during clinical hours in HNSC. Any additional practice hours need to be coordinated with the HNSC SIM Technician and the student's clinical instructor.
4. Invasive and other nursing procedures will be practiced on manikins and in simulated environments. These skills may be performed in the clinical facilities under the supervision of the nursing faculty as availability allows.
5. **No invasive procedures may be performed on anyone other than a patient, and only under the direct supervision of a UCC Nursing faculty or staff RN.** Students are not covered by insurance to perform invasive procedure on one another, or a hospital staff member- even with staff member permission. Times are scheduled with instructors to evaluate skill performance.
6. **Skills Check-Off:**
  - a. With each new skill, students are given the opportunity to practice the skill in the HNSC. The more detailed skills have a checklist which the student is required to follow and master in a return demonstration. Each student must successfully perform these skills prior to performing them on clients in the clinical setting.
  - b. The CORE Nursing Skills Checklist lists BOLDDED skills. These clinical skills CANNOT be performed on a client in the clinical setting without FIRST being checked-off in the HNSC.
  - c. The faculty set a specific timeline for practicing each skill and for the check-off performance. When the check-off time is set, the student must practice the skill in the on-campus clinical as often as needed to be prepared for the check-off appointment.
  - d. Since these skills must be mastered in a timely fashion, each student is expected to successfully perform the skill during the check-off time. If the student is not able to perform successfully during the check-off time, they will need to retest on a different day and schedule practice times prior to retesting. If the student is not able to demonstrate the skill successfully, the student will not be allowed to attend clinical until he/she performs the skill successfully. This may impact the student's ability to continue in the program.
  - e. The first 2-3 weeks of Fall Term in 2nd Year are designated "Bootcamp". This is a time for skills review, signoffs, and meeting clinical facility requirements that allow placement into the clinical facility. If a student is absent for any of these signoffs, their placement into clinical facility may be delayed.
  - f. Anytime students miss a day that involves meeting requirements for clinical facility placement, this may cause a delay in the student's placement into a clinical facility until these requirements can be met.
  - g. The CORE Nursing Skills Checklist (evaluation form) is a permanent part of the student's educational record. Students are required to carry their CORE Nursing Skills Checklist sheet with them during clinical hours. The original document with both student and instructor signatures will be placed in the student's permanent file.

### **Clinical-Uniform Specific:**

1. A designated clinical uniform includes: designated scrub top with patches, black scrub pants, and black shoes.
2. The designated uniform must be available by the first clinical day of the program. A long sleeved black or white shirt may be worn under the scrub top.
3. Students may wear their nursing program sweatshirt in the on-campus clinical/simulation environment. The sweatshirt may not be a substitute for appropriate uniform but may be worn over the uniform. The nursing sweatshirt should NOT be worn in the off-campus clinical patient care environment.
4. Uniforms are to be worn in clinical areas. No attire outside of the designated uniform is to be worn in any clinical area unless specific instructions are given.
5. Uniforms must be clean, wrinkle-free and kept in good repair.
6. Pants must not drag on the ground.
7. Students must wear their photo ID/name badge once available at all times when in the clinical/CLA setting.
8. Shoes must have closed heels and toes and must be black.
9. Each student must have a watch that accurately measures seconds, bandage scissors, ink pen, stethoscope, penlight, and a hemostat.
10. Correct placement of patches and method of attaching patches are required. Do not glue or staple.
11. Some clinical areas require special attire which is furnished by the hospital. It is acceptable for students to wear this alternate attire when assigned to that clinical area. Clinical experiences may not be omitted because of inability to fit into the required garments.

### **Clinical-Personal Grooming/Hygiene:**

#### **1. Jewelry**

- a. Should not be excessive and should be appropriate for a clinical environment.
- b. One ring may be worn but should be free of any sharp edges that may tear gloves or scratch clients.
- c. Must not be a distraction to you or others.
- d. Be visible either by shape or size through clothing.
- e. Earrings must not extend past the earlobe.
- f. All visible body piercings must be removed (or covered if unable to remove) with the exception of earrings in the ear (small stud or hoop that does not extend past the earlobe), small solid ear plugs (no tapers, gauges or tunnels), or one small stud or small hoop in the nose that cannot extend past the edge of the nares. No septum piercing.
- g. Jewelry in the tongue is prohibited.

#### **2. Hair**

- a. Must be neat, clean, and appropriately secured to prevent it from falling forward if shoulder length or longer.
- b. Long hair must not obstruct vision and must be controlled to prevent contact with the patient, equipment, or supplies.
- c. Hair fasteners must be conservative and considered professional for the clinical environment.
- d. Sideburns, moustaches, and beards must be neatly trimmed.

#### **3. Tattoos**

- a. Visible tattoos must not be obscene, profane, vulgar, offensive, or distracting to others.
- b. Tattoos visible above the jaw line are to be covered at all times.

#### **4. Fingernails**

- a. Fingernails are not to extend beyond the fingertip.
- b. In accordance with CDC guidelines, artificial nails are prohibited.
- c. Gel nails are acceptable but must be in good repair.
- d. Painted nails must not be chipped.

## 5. Hygiene

- a. Perfumes, powders, and colognes should not be worn.
- b. Students must be physically clean, including oral hygiene, clean hair, fingernails, and free of pervasive body odors such as smoke, pet odors, or sweat.
- c. It is important to ensure that odors are neutral, therefore smoking is not permitted at any clinical facilities.

## 6. Makeup

- a. Makeup must not be excessive or a distraction to others.
- b. Colors must be neutral.
- c. Makeup should not include any substance that could flake or fall off during patient care.
- d. Any cosmetic appliances, such as eyelash extensions, need to be in good repair and condition.
- e. Unless related to an organized campus event, no character, cosplay, theater, dress-up, caricature-type, makeup or attire can be worn in the clinical or classroom setting.

### **Clinical Placement Conflict of Interest:**

Students have a responsibility to immediately disclose a financial, professional, and/or personal conflict of interest or potential conflict of interest with any clinical placement sites, CLA partners or any staff associated with these entities. In determining clinical placements for students, every effort will be made to avoid placing a student in a healthcare setting where there is a potential or actual conflict of interest. Examples for consideration include students currently or formerly employed in the setting or individuals in the setting have a financial or personal stake in the student's success or failure such as a boss, manager, family, friend, student/peer, and UCC faculty and/or staff. If a conflict is identified, either before or during clinical experience, it is the responsibility of the student to inform the Director of Nursing, Program Coordinator, and Clinical Coordinator. Once notified, every reasonable effort will be made to develop a plan for resolution. If a student has been banned from a clinical site, this impacts the ability of the student to meet the requirements for clinical experience. These cases will be reviewed by the Director of Nursing and may result in removal from the program. RN students that currently work in a healthcare facility that leave on unsatisfactory terms may be at risk of losing the ability to participate in clinical rotations within the facility. It is the student's responsibility to seek written permission with contact information for clinical access to continue in the RN program. The written approval is to be submitted to the Program Coordinator and Clinical Coordinator. UCC Nursing will not make clinical accommodations for students who do not receive a written clinical approval.

### **Clinical Group Changes:**

Students may be able to move clinical groups if they trade with a different clinical group member. This trade must be approved by Director of Nursing prior to trading and the trade is not guaranteed. This trade option is ONLY available upon initial group placement and during the summer between 1<sup>st</sup> and 2<sup>nd</sup> year. Any trade must be clearly accepted and documented by both students involved.

At the discretion of the Program Coordinator, Clinical Coordinator, and the Director of Nursing, clinical groups may be shuffled in the event that there are un-equal numbers of students within groups. If shuffling of the groups is initiated by Nursing Leadership, students may request a move into a group that has space available.

The Program Coordinator, Clinical Coordinator, and the Director of Nursing reserve the right to decide the make-up of clinical groups and clinical placements. No accommodations will be made in the nursing program because of outside employment or for taking courses from other disciplines.

### **Monitoring Of On-Campus and Off-Campus Clinical Sites:**

Please note that you are audio and/or video recorded in both on-campus and off-campus clinical sites. By entering the premises, you consent to photography, audio recording, video recording, and its/their review, release, publication, exhibition, or reproduction to be used for evaluation, news, webcasts, promotional purposes, telecasts, advertising, and inclusion of websites. You release UCC and its employees, and each and all persons involved from any liability connected with taking, recording, digitizing, or publication and use of photographs, computer images, video, and/or sound recordings.

By entering the premises, you waive all rights you may have to any claims for payment or royalties in connection with any use of evaluation, news, webcasts, promotional purposes, telecasts, advertising, and inclusion of websites. You have been fully informed of your consent, waiver of liability, and release before entering the premises.

### **Clinical Absence:**

Clinical grading will be based on competence demonstrated by behaviors in clinical settings (on and off-campus clinical sites), simulation assignments, and clinical written assignments. Clinical absences will have an effect on a student's performance over the course of the program. When a student has been absent from clinical for any reason, the following guidelines will be used to determine the student's grade for the clinical day and potential make-up.

1. Attendance is expected, there is no make-up for clinical absences and a loss of points will occur. See below for exceptions:
  - a. Major medical event supported by doctor's note.
  - b. Major loss of property with documentation.
  - c. Death or Major medical event of immediate family member.
  - d. Discretion of the Director of Nursing.
2. Students are expected to be at pre-conference and post-conference in the clinical setting and ready to participate at the scheduled time.
3. If unable to arrive at your clinical site on time due to unexpected circumstances the students is responsible for communicating with your clinical instructor as soon as possible.
4. Students that are late more than 2 hours to a clinical rotation (excluding emergencies) will be unable to participate in the clinical day and will be subject to a loss of points (This includes having to return home for a missing badge/not being prepared for clinical).
5. Students that are absent for emergent reasons will be cleared for make-up on a case-by-case basis.
6. Students that are sent home from the clinical rotation for behavioral issues, safety concerns, or violations of student conduct or facility policy, are not eligible to make up either clinical hours or assignments.
7. Students that are absent due to illness must have a doctor's note. They will then be given the opportunity to make up the absence with another clinical group. It is the student's responsibility to schedule with the instructor of the group they are planning on joining for the day. They will be required to submit clinical paperwork for the make-up day to receive points. The clinical make-up must be equivalent to the day missed (i.e., community for community, acute for acute).
8. All other absences will result in the loss of points for that clinical day.
9. Students are responsible for the content covered during any clinical absence.
10. To ensure that you are able to attend clinicals, it is advised that you do not schedule elective surgeries during the active weeks and terms of the academic year. Because UCC also follows local clinical facility policies, students that are on weight restrictions, are dependent on a cane, etc., are not approved to participate in the clinical setting with or without a doctor's order or with an accommodation letter. Clinical absences can result in removal from the program. Please note that the above list of restrictions is not all inclusive.
11. If a student has been absent from the program for medical reasons, the student must present a statement from a physician stating he/she is physically/mentally able to perform the functions required by the program (as listed in the Technical Standards) without risk to self or individuals.



12. For NRS110, NRS111, NRS 112, NRS 221, NRS222: A minimum of 80% of all clinical rotations inclusive of on-site clinical and orientation must be completed with the student performing at the expected level (including completion/submission of required assignments), for a student to earn a passing grade. Students who complete 80% of clinical rotations but are not performing at expected level will be placed on an Improvement Plan and must meet the goals of the plan as determined by the student and Clinical Coordinator to pass the course. Completion of less than 80% of the assigned clinical rotations will result in a non-passing grade.
13. For NRS224C: All required clinical hours must be completed by the end of the term, with performance at the expected level, to earn a passing grade (“C” or better). An “Incomplete” cannot be given for the final term clinical grade except for extenuating circumstances. The only extenuating circumstance in which absences will be considered relate to unanticipated hospitalization or bereavement or similar events preventing a student from completion of at most a few weeks of required clinical hours so that the student is able to complete the limited clinical hours by a specified time that will extend into summer term. The exception would only be allowed if an instructor, a clinical teaching associate, and a clinical site are available for the required clinical experience hours.
14. Instances where there have been no absences, but the clinical grade is less than passing can occur. These situations are handled on a case-by-case basis.

### **Insurance Coverage:**

Nursing students are required to be covered by liability insurance before entering a clinical area. This is paid for at the time of registration, in the student fees. Students must be registered for the nursing course prior to the first day of each quarter. Students will not be allowed to participate in a clinical rotation if not registered for class. This liability insurance protects against if the student CAUSES harm, not if the student is harmed. Students are responsible for their own health insurance, and it is strongly recommended that you have health insurance throughout the nursing program. Any debt accrued due to injuries/incidents while in the clinical setting(s) are the sole responsibility of the student. This includes copays, emergency room visits, etc. the college and facilities are not liable for these debts.

### **Incident Reports:**

Nursing students are required to report all injuries/accidents involving themselves and/or individuals to the clinical instructor immediately. When necessary, the clinical instructor will assist the student in obtaining medical care and completing required forms. The clinical instructor will reach out to the Program Coordinator to file the pertinent UCC paperwork. UCC does not provide medical insurance coverage for students.

## **IMPROVEMENT PLANS/BEHAVIORAL STRIKE/PROGRAM EXIT/READMISSION**

*Mandatory meetings may be requested by an instructor for either academic or behavioral reasons.*

### **Improvement Plan:**

Improvement plans are initiated for students require additional coaching, mentorship, and guidance to meet expectations. These can either be for behavioral issues (that do not yet warrant a strike), and/or technical deficiencies noted in clinical. An improvement plan is not a strike, however, failure to meet the goals/objectives of an improvement plan within the allotted timeframe, or a repeat of behavioral issues listed in an improvement plan, may warrant a strike. See below for Behavioral Strike.

Improvement plans are initiated by the clinical instructor and in collaboration with the student and clinical coordinator. The plan is placed in writing and the student is given clearly outlined goals/objectives to meet within a specified time frame. Documentation of progress is the responsibility of the clinical instructor. The Improvement Plan must be signed off if the student has met objectives, and placed in the student file. If the student fails to meet the goals/objectives, a follow up meeting with the Director of Nursing will be scheduled.

### **Behavioral Strikes:**

Behavioral issues warrant a “strike,” and in severe cases, removal from the program. Only one behavioral strike may be accrued while in the program. A second behavioral strike will result in an exit interview.

All students whether entering, or re-entering the program will start with “zero” strikes.

### **Academic Integrity/Honesty:**

Students, staff, and faculty work together to develop and maintain a culture of academic honesty. See “Student Code of Conduct, Academic Integrity” for further information and definition. A breach of academic integrity and honesty is not tolerated. Though not all inclusive, examples of academic dishonesty include: purchase of and/or distribution and/or use of instructor test-banks, sharing of or talking about information related to test/quiz content, accepting a passing grade for group projects in which the student did not participate, or a breach of any listed inappropriate actions in the “Student Code of Conduct, Academic Integrity.”

Faculty members monitor student work for evidence of plagiarism. The submission of one’s own previously graded work as a new assignment without the faculty member’s permission constitutes self-plagiarism and may result in a zero grade for the assignment and further disciplinary action as deemed appropriate by the Nursing Program. At the discretion of faculty, student assignments may be submitted to online originality reporting services.

To ensure and promote academic honesty, you may be required to sign a “testing agreement” stating that the student will follow the academic integrity policies/procedure listed throughout this handbook before taking a midterm, final, and/or HESI exam.

In the event that faculty and/or test proctors suspect that there has been a breach in academic integrity, the faculty and Director of Nursing reserve the right to disavow a test/exam and/or a test/exam grade. See “Academic Standards: Testing.”

### **Exit Interview:**

Exit interviews are held to obtain information on reasons, circumstances or any details that lead to a nursing student leaving the program of study. The interview will include a detailed course of action for both the student and the department to follow when a student exits the nursing program. Students must participate in an Exit Interview to be considered for future audit. A meeting will be scheduled with the student, the involved faculty, the Director of Nursing and the Dean (if available/applicable). The meeting will address the following:

1. Discuss what area the student has failed in and provide written proof of the inability to meet the grading standard. (Program evaluation form, technical standards, testing scores, didactic failed assignments and/or any other material that affected the student’s ability to meet the course standard.)
2. Student will leave the exit interview with either a verbal or written statement of some of the behaviors that were identified that could have contributed to their failure in the course. If it is given verbally, they will receive a written follow up.
3. The written evaluation from nursing faculty of the student’s inability to continue will give the student some ideas of areas where the faculty felt the student needs to make some changes in their focus, behavior, or their ability to allocate the necessary time to the program.
4. The student will not only be asked to sign this document, but they must use this document to address how they will be successful when applying to return to the program. The summary of the exit interview will be placed in the student’s file in the nursing department.
5. Please see “Readmission Policy” for the steps to re-enter the program if applicable.

6. The student should come to the committee with a plan for success and some things that have changed that will impact the student's ability to be successful on this next attempt in the program. The student will have a maximum of two attempts. (See policy on Readmission.)
7. Program re-admittance is at the discretion of the Nursing Director based on the student's interview and written plan.

Note: The student is advised to contact the UCC Registration department and the UCC Financial Aid department after the exit interview is complete.

### **Support Person for Mandatory Meetings/Exit Interviews:**

In the event that you are required to participate in a mandatory meeting, or complete an Exit Interview, you will be permitted to bring one support person with you to the meeting. It is not common to have a support person during "academic" meetings, as these are often strategies shared to improve grades at midterms, etc. However, you are still permitted to bring a support person if desired. A *Student Release of Information* form will be completed prior to the start of the meeting. The instructor will have a staff member present as a witness.

**Who can serve as a Support Person?** The support person may be a UCC staff member, a UCC student, a friend/parent/attorney/or another person that is not directly involved in the situation that will be discussed.

1. The student must notify the instructor (or person requesting the meeting) within 24 hours of the meeting if a support person will be in attendance. The instructor will have a staff member present as a witness.
2. The student must notify the instructor (or person requesting the meeting) within 48 hours of the meeting if a support person is an attorney and will be in attendance. In instances where a student's attorney will be in attendance, UCC may also have an attorney present. The instructor will also have a staff member present as a witness.

**Role of the Support Person, and Guidelines:** The student may have one support person present during their meeting and are limited to "advising" the student. The support person may not:

1. Present information
2. Ask questions
3. Make any statements during the meeting
4. Speak for or on behalf of the student

### **The Support Person may:**

1. Assist the student in clarifying their response to questions
2. Briefly converse with or write brief notes to the student

### **Support Person and Student Expectations:**

1. It is expected that the support person and student act in a professional and courteous manner
2. Be mindful of (support person) communication with the student so that the meeting is not disrupted
3. Do not delay, disrupt, or interfere with meeting (or hearing) procedures
4. Do not disrespect others in the meeting (or hearing) by badgering or harassing the other student(s) or staff that may be involved
5. Be mindful that the process is to guide students as defined by the Student Handbook

**Non-Compliance:** If the student and/or support person does not act in accordance with the limitations set forth, the meeting facilitator will provide a verbal warning for non-compliance. If the non-compliance persists, the support person will be asked to leave the meeting (or if the student is in non-compliance, the meeting will be cancelled). Failure to complete the meeting/plan may result in dismissal from the program. Failure to complete an exit interview may result in the inability to re-enter the program at a later date. (Support person language borrowed, in part, from: <https://studentconduct.okstate.edu/advisors/>.)

### **Readmission Policy:**

It is the student's responsibility to submit a written request stating their desire to return to the program as an auditing student. This letter of intent is due within 30 days of the unsuccessful course completion or withdrawal date and is to be submitted to the Program Coordinator and the Director of Nursing. An interview may be scheduled with the student seeking an audit at the discretion of faculty and the Director of Nursing.

All re-admissions must be approved by the Director of Nursing, no later than 45 days, prior to the beginning of the term the student is requesting to audit. The Nursing Director may seek feedback from faculty regarding re-admission for students(s) seeking re-entry. There is no guarantee of receiving an audit or re-entry in the program.

1. A student who fails from the required nursing course must successfully repeat that course before proceeding in the program. Students requesting re-entry will be required to audit the preceding course and clinical (space allowing) prior to entry term (with the exception of section "g.").
2. A single (one) repeat opportunity may be provided to reenter the program within a year of the failure (not obtaining a grade of 75%) or withdrawal. Factors that influence the decision to allow a student to re-enter the program are related to the nature of the failure (i.e. safety of patient care, academic integrity, failed drug screening, or not meeting course requirements). Students who participate in defamation of the campus, program, peers, or staff, will not be considered for re-admission. Students who threaten the campus, program, peers, self, or staff (general or specific) via face-to-face, phone, text, social media, or otherwise will not be considered for re-admission.
3. Students seeking re-entry into the nursing program will be responsible for the financial cost of any additional standardized testing and/re-entrance fees related to the nursing schools' policies.
4. Students auditing the course are expected to take the midterm and final exams, (and HESI testing if applicable), complete all assignments, and attend at least 75% of classes (see clinical absence policy if applicable – re: student is auditing clinical).
5. If there are multiple auditing students that are competing for readmission, the average score of exams will be reviewed and used to determine readmission to UCC's nursing program.
6. If a student leaves the program before successful completion, due to extenuating circumstances, auditing the previous course may not be required based on previous academic performance. Re-entry is not guaranteed except in extenuating circumstances and per space availability. Extenuating circumstances may consist of: significant loss of immediate family member, major loss of property, military service, major medical conditions, and other circumstances as approved by the UCC nursing staff and director. Proof of the legitimacy of the event must be provided to the nursing director before returning to the program.
7. All returning students will be required to practice/demonstrate core skills with an instructor before being allowed to perform these skills in off-campus facilities. It is the responsibility of the student to communicate with Nursing Support staff 5-6 weeks before re-entry to initiate skills practice, determine upcoming CLA opportunities, EMR training, review of immunizations, BLS expirations date, etc.
8. The UCC Nursing Director and staff reserve the right to hold an "admission placement" for the following academic year should the student have extenuating circumstances as listed in section "h" or clear and credible cause to withdraw from the program after acceptance but prior to the start date. Proof of the legitimacy of reason for withdrawal must be submitted in writing to the UCC Nursing Director.

### **GRADUATION REQUIREMENTS**

Refer to the UCC catalog for graduation requirements. **Note to all RN students:** Once you have joined the nursing program, please review your Degree Audit carefully (and/or meet with your Nursing Advisor) to ensure that you have completed all courses necessary to graduate from the RN program. It is not the responsibility of the nursing team to review your transcripts/Degree Audit for graduation eligibility. **Note to Second-Year students:** Please be aware that you will be required to apply for graduation so that your AAS-Nursing degree can be conferred (which is required before the Director of Nursing can attest your graduation with the OSBN for NCLEX-RN® testing approval). You can expect to apply for graduation in late winter or early spring term of your second year. Mark your calendars!

## LICENSURE

Upon completion of the Program, it is the student's responsibility to apply for licensure. When applying for licensure, students will be subject to fingerprinting and a background check again. Details of felony convictions, parole provisions, drug and/or alcohol abuse history must also be reported. Failure to report this information constitutes fraud and will result in that person not being permitted to sit for the Licensing Exam or loss of license if the non-disclosure is discovered after the license has been issued. Completion of the UCC Registered Nursing Program does not guarantee licensure. For additional information, please contact:

OSBN 971-673-0685  
17938 SW Upper Boones Ferry  
Portland, OR

National Council State Board of Nursing 866-293-9600  
111 E. Whacker, Ste. 2900  
Chicago, ILL 60601-4277

## ACCESSIBILITY STATEMENT and MENTAL HEALTH STATEMENT

### **Accessibility Statement:**

UCC is committed to supporting all students. Any student who feels he or she may need an accommodation for any type of disability should make contact with the Accessibility Services Office in the Campus Center, as soon as possible. Accommodations are not retroactive; they begin when the instructor receives the "Approved Academic Accommodations" letter sent by email. This is why it is imperative to start the process early. To request academic accommodations for a disability, please contact Accessibility Service Coordinator: [accessibilityservices@umpqua.edu](mailto:accessibilityservices@umpqua.edu). Additional information can be found on the UCC website: <http://umpqua.edu/accessibility-services>. UCC Nursing **is not able** to approve accommodations that violate the technical standards or required attendance within the program.

### **ADA compliance statement:**

Canvas conforms with the W3C's Web Accessibility Initiative Web Content Accessibility Guidelines (WAI WCAG) 2.0 AA and Section 508 guidelines.

### **Mental Health Statement:**

The Campus Mental Health, Recovery and Wellness Department at UCC offers counseling services and specialty advising for students who are enrolled at UCC. We can assist with common student and personal concerns including: Counseling Services (personal, crisis, 10/1 related), Recovery/Specialty Academic Advising (10/1 related, Veterans, and students receiving accommodations), career exploration, planning and counseling, testing anxiety, referrals to campus and community resources, and weekly Wellness Workshops. Drop-ins are always welcome!! **Campus Wellness Center located in the Campus Center. Phone: 541-440-7859**

## UCC POLICIES

**Students, staff, and administration have together developed rules to guide student behavior. It is the student's responsibility to know and abide by these regulations. Always refer to the updates available for UCC policies online. Please note that the UCC Nursing Program works in conjunction with the UCC Campus Student Code of Conduct. Certain circumstances warrant the need and action to immediately remove/dismiss a student from the UCC Nursing Program in order to safeguard the cohort, college, and/or community.**

**The Standards of Student Conduct or (Student Code of Conduct) describes your rights and responsibilities while a student at Umpqua Community College. It also describes the College's student disciplinary process and also how a student can have a complaint addressed.**

**The most current UCC policies can be found online at [www.umpqua.edu](http://www.umpqua.edu).**

### **Non-Discrimination Statement on The Basis of Disability:**

Umpqua Community College complies with all applicable federal and state regulations that prohibit discrimination on the basis of disability. These regulations require that any qualified person receive reasonable accommodation to ensure equal access to educational opportunities, services, programs and activities at the College.

Any student who believes he or she has been denied any service or benefit or otherwise discriminated against due to a disability may follow the steps outlined in the Disability Grievance. In addition to utilizing the College's Grievance Procedure, a student may contact the Office of Civil Rights or the Equal Employment Opportunity Commission at the following address:

Seattle Office, Office of Civil Rights, United States Department of Education

915 Second Avenue Room 3310, Seattle, WA 98174-1099

Telephone: (206)220-7900, FAX: (206)220-7887, TDD: (877)521-2172

Email: [OCR.Seattle@ed.gov](mailto:OCR.Seattle@ed.gov)

Seattle Field Office, United States Equal Employment Opportunity Commission

Federal Office Building, 909 First Avenue, Suite 400, Seattle, WA 98104-1061

Telephone: (800)669-4000, Fax: (206)220-6911, TTY: (800)669-6820

### **Non-Discrimination Statement On The Basis of Sex:**

Umpqua Community College complies with all applicable federal and state regulations that prohibit discrimination on the basis of sex. No student at UCC shall, on the basis of sex, be excluded from participation in, be denied the benefits of or be subjected to discrimination in any education, program, service or activity.

Any student who believes he or she has been denied any service or benefit because of sex discrimination may follow the steps outlined in the Sex Discrimination Grievance Procedure. In addition to utilizing the College's Grievance Procedure, a student may contact the Office of Civil Rights or the Equal Employment Opportunity Commission at the following address:

Seattle Office, Office of Civil Rights, United States Department of Education

915 Second Avenue Room 3310, Seattle, WA 98174-1099

Telephone: (206)220-7900, FAX: (206)220-7887, TDD: (877)521-2172

Email: [OCR.Seattle@ed.gov](mailto:OCR.Seattle@ed.gov)

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**Copyright Infringement:**

Umpqua Community College's Acceptable Use and Copyright policies prohibit the use of the Umpqua Community College network or computer systems for the unauthorized duplication, use, or distribution of copyrighted digital materials, movies, music, and videos, regardless of the method employed (e.g. web pages, peer-to-peer (P2P) file sharing, email, etc.). Peer-to-peer file sharing is covered under the Student Code of Conduct. Disciplinary actions follow sections 5520.

**Summary Of Civil And Criminal Penalties For Violation Of Federal Copyright Laws:**

Copyright infringement is the act of exercising, without permission or legal authority, one or more of the exclusive rights granted to the copyright owner under section 106 of the Copyright Act (Title 17 of the United States Code). These rights include the right to reproduce or distribute a copyrighted work. In the file-sharing context, downloading or uploading substantial parts of a copyrighted work without authority constitutes an infringement. Penalties for copyright infringement include civil and criminal penalties. In general, anyone found liable for civil copyright infringement may be ordered to pay either actual damages or "statutory" damages affixed at not less than \$750 and not more than \$30,000 per work infringed. For "willful" infringement, a court may award up to \$150,000 per work infringed. A court can, in its discretion, also assess costs and attorneys' fees. For details, see Title 17, United States Code, Sections 504, 505. Willful copyright infringement can also result in criminal penalties, including imprisonment of up to five years and fines of up to \$250,000 per offense. For more information, please see the website of the U.S. Copyright Office at ([www.copyright.gov](http://www.copyright.gov)).

## CONTACTING THE OREGON STATE BOARD OF NURSING (OSBN)

The UCC Nursing Staff and Faculty strive to meet and exceed the needs of all UCC Nursing Students. If, after following the chain of command (listed in section 16: Communication), the need to communicate with and/or file a complaint to the OSBN persists, the following web-link is provided.

[Click Here to File a Complaint Against a Nurse or Nursing Assistant](#) or call: 971-673-0678.

### Other methods to contact the OSBN include:

#### **Address:**

Oregon State Board of Nursing  
17938 SW Upper Boones Ferry Rd.  
Portland, Oregon 97224-7012

[www.oregon.gov/OSBN](http://www.oregon.gov/OSBN)

[Map/Directions](#)

#### **Hours of Operation:**

Main Phones: 9:00 AM - 3:00 PM

Office Hours: 7:30 AM - 4:30 PM

#### **Contact:**

[General E-mail](#)

Phone: 971-673-0685

Fax: 971-673-0684

[Website Privacy Notice](#)

#### **Customer Service Center:**

971-673-0685

#### **License Verification:**

[Click here](#) for the OSBN Online Verification System.



### UCC Nursing Student RN 2023-2024 Contract

I have read the material in the 2023 - 2024 UCC Nursing RN Student Procedures Handbook and understand it. As a UCC RN student, I will comply with these regulations. I understand, further, that certain nursing procedures will be practiced by all students on manikins and in simulated environments plus in the clinical facilities under the supervision of the nursing faculty.

It is understood that all information regarding individuals, both in clinical rotation and in the classroom is strictly confidential, whether written in the hospital record or coming to the student's knowledge from being in the health care facility.

I, (legibly printed name): \_\_\_\_\_ pledge to follow the behaviors as identified by the ANA Conduct of the Professional Nurse, the NSNA Student Code of Academic and Clinical Conduct, nurse competencies, and the UCC Code of Conduct. I will refrain from any form of academic or clinical dishonesty or deception, such as cheating, plagiarism, or falsification of information. I am also aware that as a member of the UCC RN Program, it is my responsibility to report all suspected violators of the above codes following the appropriate chain-of-command.

I understand that failing to comply with the standards in the UCC Nursing RN Student Procedures Handbook may result in academic discipline and/or program dismissal.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\*Please return this completed and signed form to Ruth Verkuyl, Nursing Program Coordinator, on or before Friday of week 1, fall term.