

Nursing Programs Student Handbook 2023-2024



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WELCOME

The Administration, Faculty, and fellow students of Victoria College (VC) are happy to extend a warm welcome to each new student in the VC Nursing Programs (Associate Degree Nursing and Vocational Nursing).

This handbook provides essential information, guidelines, rules, and regulations for students in both nursing programs and will assist in successful completion of one of both of the nursing programs.

It is the responsibility of the student to be aware of and follow all guidelines for nursing students and to also follow all regulations set forth in the VC Catalog and the VC Student Handbook. Appropriate behavior and a professional attitude is expected at all times while you are a student in the Nursing Program.

Do not lose sight of the high ideals of the nursing programs or of the goals that you have set for yourself. Please continue to apply them in nursing and in all your endeavors.

SECTION 1- NURSING PROGRAMS OF STUDY

Statement of Nondiscrimination

Victoria College does not discriminate on the basis of race, color, religion, national origin, gender, pregnancy, age, disability, genetic information, marital status, amnesty, veteran's status, or limited English proficiency. It is our policy to comply fully with the nondiscrimination provision of all state and federal rules and regulations.

ALLIED HEALTH ORGANIZATIONAL CHART



MISSION

The Victoria College Nursing Programs are committed to creating life-long learners as health care professionals while improving the holistic health, well-being, and betterment of the community and its citizens.

PURPOSE

The primary purpose of Victoria College (VC) Nursing Programs is to prepare graduates to successfully complete the National Council Licensure Examination of Registered Nurses (NCLEX-RN) or the National Council Licensure Examination for Practical Nurses (NCLEX-PN), respectively; and therefore assume the responsibility of functioning as a member of the health care team and demonstrate a commitment to life-long learning. The administration and faculty acknowledge the concurrent responsibility of preparing graduates to meet the nursing care needs of people of this community and surrounding communities and to meet the educational needs of students who wish to pursue nursing as a means of personally satisfying intellectual, financial, and self-esteem needs.

The primary role of the entry level graduate of a vocational nursing (VN) program is to provide nursing care in structured health care settings for individual clients who are experiencing common, well-defined health problems with predictable outcomes. The new graduate can readily integrate technical skills and the use of computers and equipment into practice.

The associate degree nursing (ADN) program curriculum offers a variety of initial learning experiences in the cognitive, psychomotor, and affective domains which will enable the graduate to enter nursing with graduate level skills and personal behaviors consistent with professional expectations. The educational experience emphasizes development of an inquiring mind which recognizes that the educational process of a contemporary, safe, and effective nurse requires the continual pursuit of knowledge.

The VN Program curriculum offers a variety of both classroom and patient care learning activities in a variety of health care facilities in the region. The educational experiences emphasize development of a contemporary, safe, and effective vocational nurse who recognizes the need for the continual pursuit of knowledge.

All students of VC Nursing Programs must abide by all College policies and have the same privileges and responsibilities as of other VC students.

AMERICAN DISABILITIES ACT (ADA) INFORMATION

Victoria College (VC) does not discriminate against individuals with disabilities. The College is dedicated to assisting all students with their needs. VC ensures access to a wide variety of resources and programs. To review the nursing programs Core Performance Standards in detail see page 10 in the handbook.

To speak to the VC ADA Coordinator contact Ms. Karen Friedel at (361)572-6411.

ADA POLICY

Victoria College (VC) is committed to assisting students as completely as possible. VC provides equal opportunities for students with disabilities and ensures access to a wide variety of resources and programs.

VC complies with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990, pertaining to the provision of reasonable academic adjustments/auxiliary aids for students with a disability. In accordance with Section 504 and ADA guidelines, the Allied Health Division strives to provide reasonable academic adjustments/auxiliary aids to students who request and require them.

This requirement does not mean that the College will fundamentally alter a program, service, or activity, or that would result in an undue financial or administrative burden. The College will make reasonable modifications for qualified individuals/students with a disability as defined by law and in the College Board of Trustees ("Board") Policies. VC strives to ensure that appropriate testing accommodations are provided for students who have registered with:

Victoria College ADA Coordinator Ms. Karen Friedel (361) 572-6411

Student confidentiality is high priority for VC and the College complies with the Family Education Rights and Privacy Act ("FERPA"). Guidelines and safeguards are put in place to protect the privacy of all documentation concerning disabilities.

CORE PERFORMANCE STANDARDS

The Nursing Programs at Victoria College has minimal physical competencies which must be met. These are reasonable and common functions found in nursing. If an applicant or student is unable to meet all of the outlined standards, he or she may withdraw from the Nursing Program. The student must independently demonstrate the following minimal abilities:

1. Perform complex psychomotor and physical tasks with or without accommodations or which include, but are not limited to:

a. Standing for long periods of time (8 to 12 hours/day)

- b. Lifting 30 pounds
- c. Performing one and two person transfers
- d. Turning and ambulating another person
- e. Visually discriminating between different color objects

f. Manipulating equipment and performing patient care procedures (i.e., starting IV's, dressing changes, managing medical equipment.

g. Discriminating between auditory stimuli

2. Communicate English effectively in both oral and written forms.

3. Utilize intellectual abilities, exercise good judgment and complete tasks within the required time limits.

4. Demonstrate the emotional health required for full utilization of intellectual abilities and exercise of good judgment.

5. Show integrity, concern for others, use interpersonal skills, interest, and motivation.

The Professional Nurse Role, requires a licensee to exhibit a multitude of knowledge, skills, and abilities in order to provide safe and effective patient care (National Council of State Boards of Nursing, Inc., 1992). It is the

Nursing Department's responsibility to ensure that this requirement is met before a graduate is certified. Core Performance Standards (CPS) are the required basic cognitive, psychomotor, and affective activities that are essential to successful completion of the nursing program and are categorized as communication, cognitive, and motor and sensory skills. Students enrolled in the nursing program at VC must be able to perform the following CPS with or without reasonable accommodations.

Core Performance Standards for Program Academic Progress

Applicants and students, with or without reasonable accommodations, must be able to:

1. Gain knowledge from learning experiences relevant to program objectives, including but not limited such means as:

a. Attending scheduled class lectures, laboratory, and simulation sections, etc.

b. Satisfying specific course/program objectives specified in course syllabi.

c. Completing certificate/degree plans and other student progress records as required by the program and college.

2. Demonstrate critical thinking skills deemed appropriate for the academic level and discipline content, including such means as:

- a. Successfully completing the nursing degree plan.
- b. Comprehending appropriate professional literature.
- c. Integrating professional literature and evidence based practices.
- d. Articulating information specific to the academic major.

e. Demonstrating critical thinking/clinical reasoning and cognitive abilities sufficient for problem solving and clinical judgment.

3. Demonstrate eligibility to assume a professional role at program completion, including such means as:

a. *Meeting all matriculation requirements specific to the nursing program.

b. *Interacting in a productive manner with individuals, families, and groups from a variety of social, cultural, and intellectual backgrounds.

c. *Demonstrating communication skills sufficient for interaction with others in verbal and written form. (Communication is understandable to other).

d. *Demonstrating mobility sufficient to move independently from room to room and maneuver in small spaces.

e. *Demonstrating motor skills sufficient to provide safe and effective nursing care within reasonable and necessary time limits.

f. *Demonstrating auditory and smelling ability sufficient to provide safe and effective nursing care.

g. *Demonstrating visual ability sufficient for observation and assessment necessary for nursing care.

h. *Demonstrating tactile abilities sufficient for physical assessment and therapeutic interventions within reasonable and necessary time limits.

i. *Completing certification/licensure requirements if needed for employment.

• Elements specific to nursing

Conduct Within the Department of Nursing

All applicants and students, with or without reasonable accommodations, must be able to:

1. Demonstrate competencies through evaluation procedures adopted by the Nursing Program.

- 2. Demonstrate behaviors appropriate to study at the post-secondary level, including such means as:
 - a. Abiding by the current College policies for student conduct
 - b. Interacting appropriately with peers, faculty, and the professional community
 - c. Obtaining and Maintain Core Performance Standards
 - d. Meeting all course objectives within the specified program time frames
- 3. Demonstrate safe and effective nursing interventions in a judicious and timely manner

COMMUNICATION:

Applicants and students must communicate effectively and sensitively with patients/clients and their families as well as other students, staff, faculty, professionals, agency personnel, community residents, and others relevant to their area of study. Expression of ideas and feelings must be clear and appropriate. Applicants and students must demonstrate a willingness and ability to give and receive feedback. Communication examples include complete verbal and written command of the English language in order to explain procedures to patients, give oral reports (e.g., report on patient's condition to others), interact with others (e.g., health care workers, faculty), speak on the telephone, direct activities of others, convey information through writing (e.g., progress/nursing notes), read and comprehend printed materials and documents, document clearly and correctly on patient's medical record, and transmit information through written documents that use proper grammar, syntax, spelling, and punctuation in a timely manner.

ELEMENT	DESCRIPTION	EXAMPLES
Communication	Communication abilities sufficient for interaction with others in verbal and written form. Communication is understandable to others.	Explain treatment procedures, ini- tiate health teaching, document and interpret nursing actions and patient/client responses.
Interpersonal	Interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of so- cial, cultural, and intellectual back- grounds.	Establish rapport and maintain professional demeanor with pa- tient/client, family, and colleagues.

COGNITIVE:

Creative problem-solving and clinical reasoning require certain intellectual abilities. Applicants and students must be able to reason, analyze, integrate, synthesize, prioritize, and evaluate in the context of the nursing activities of the program and area of study. In addition, applicants and students must be able to comprehend three dimensional relationships and understand spatial relationships (i.e., X-Rays, CT Scans, concept maps).

ELEMENT	DESCRIPTION	EXAMPLE
Critical Thinking, Cognitive Ability	Critical thinking sufficient for clini- cal judgment.	Ability to handle multiple tasks and problem solve simultaneously, identify cause-effect relationships in clinical situations, utilize the nursing process in developing nursing care plans, and perform dosage calculations in a time frame to deliver safe care.

MOTOR AND SENSORY SKILLS:

Applicants and students need to have sufficient motor function and sensory skills in order to be able to execute movements and make observations required in the domain of nursing care or nursing activity in their chosen program of study.

EXAMPLE	DESCRIPTION	EXAMPLE
Motor skills	Gross and fine motor abilities suf- ficient to provide safe and effec- tive nursing care.	Motor skills of lifting, carrying, pushing, and pulling of objects up to 30 pounds. Physical ability of bending, stooping 1 inch from the floor and of reaching overhead to retrieve or place on patient/clients shelves; to intermittently push ob- jects over 100 pounds; stand/walk 8-12 hours.

OBSERVATION:

Visual to accurately observe items both close at hand and at a distance in order to learn skills an to gather data (e.g., observe an instructor's movements, a patient's gait or nonverbal response, draw up correct quantity of medication into a syringe, read very fine print on medication labels, monitor ECG/Fetal Monitor strips and equipment calibrations, etc.). Applicants and students must possess functional use of the senses that permit such observation, including being able to accurately visualize a computer screen (e.g., access a patient's electronic medical record ascertain patient's vital sign information form the patient monitor, perform all nursing exams on computer, etc.).

ELEMENT	DESCRIPTION	EXAMPLE
Visual	Visual ability sufficient for obser-	Assess and observe patient/client
	vation and assessment necessary	responses; able to identify and
	in nursing care.	distinguish colors and shades of
		the same color.

TACTILE:

Applicants and students need to have sufficient tactile ability to perform physical assessments, examinations, and procedures, palpate pulses, palpate veins, identify body landmarks, skin turgor, rashes, and vibrations, feel differences in size, shape, detect temperature, feel differences in surface characteristics, and detect environmental temperature.

ELEMENT	DESCRIPTION	EXAMPLE
Tactile	Tactile ability sufficient for physical assessment.	Finger dexterity to perform palpa- tion and percussion functions of physical assessment and/or those related to therapeutic intervention, e.g., insertion of a catheter. Per- ceives attributes of object such as size, shape, temperature, or tex- ture.

HEARING:

Applicants and students need to have sufficient ability to accurately hear normal speaking levels of sounds, hear faint voices and body sounds (e.g., blood pressure sounds, assessment placement of tubes), hear in situations when not able to see and read lips (e.g., wearing a mask), hear auditory alarms (e.g., monitors, fire alarms, call bells), and hear sufficiently enough to assess changes in heart, breath, abdominal, and vascular sounds.

ELEMENT	DESCRIPTION	EXAMPLE
Hearing	Auditory ability sufficient to pro- vide safe and effective nursing care.	Hears, with and without back- ground noises, monitor alarms, emergency signals, auscultatory sounds, and cries for help.

SMELL:

Applicants and student need to have sufficient ability to smell and detect odors from patients/clients (e.g., foul smelling drainage, alcohol breath, etc.), detect smoke, detect gases or noxious smells, and detect odors exhibited by the body or body fluids which may be indicative of disease processes.

PSYCHOMOTOR SKILLS:

Applicants and students need to have sufficient motor capacities and mobility to execute the various tasks and physical maneuvers to fulfill the professional roles toward which each program educates. For example, they must be able to move within confined spaces (e.g., accompany immobile patients or hospital beds in elevators), sit and maintain balance, stand and maintain balance, reach above shoulders (e.g., IV poles), reach below the waist (e.g., plug electrical devices into low wall outlets), perform cardiopulmonary resuscitation (e.g., move above

patient to compress chest and sustain repetitive movements), squat (e.g., empty Foley catheters and other drains), move quickly (e.g., respond to a code or other emergency), climb (e.g., ladders/stools/stairs), push/pull (e.g., transport a stretcher, transfer a patient), lift at least 3 pounds, and complete assigned clinical practice and duties within a safe time period.

ELEMENT	DESCRIPTION	EXAMPLE
Mobility	Physical abilities sufficient to move from room to room and ma- neuver in small spaces.	Moves around in patient's rooms, work spaces, and treatment areas and can administer cardiopulmo- nary procedures. Able to coordi- nate eyes and hands/fingers rap- idly and accurately in making pre- cise movements with speed when providing patient care.

Freedom from Discrimination, Harassment, and Retaliation

The College District prohibits discrimination, including harassment, against any student on the basis of race, color, religion, gender, national origin, disability, age, or any other basis prohibited by law. Retaliation against anyone involved in the complaint process is a violation of College policy and is prohibited.

ASSOCIATE DEGREE OF NURSING PHILOSOPHY

The philosophy of the Victoria College Nursing Program is in accordance with the mission, philosophy and purpose, and values of Victoria College. The Nursing Faculty believe in the following concepts:

Nursing Education

Nursing education provides opportunities for the self-directed student to develop the necessary knowledge, skills, and attitudes to become a caring and competent provider of nursing care. Nursing education is grounded in natural, social, behavioral, and humanistic sciences with a strong emphasis on clinical judgment and reasoning, ethical behavior, and caring for culturally diverse individuals. The faculty is committed to the educational process that acknowledges the right of the individual to pursue the desired level of education. The Nursing Programs provide a mechanism for students to move through the nurse aide, vocational nurse, and associate degree nurse levels; it also prepares students to enter the baccalaureate level of nursing. Nursing education can occur in secondary, post-secondary, graduate, and post-graduate institutions. The faculty designs and implements a current and relevant curriculum guided by community needs, professional organizations, accrediting bodies, and is evaluated by the Program's systematic plan of evaluation.

Teaching-Learning Process

Learning is an active life-long process that results in a change in judgment, values, and/or behavior. Students are responsible for their own learning, must demonstrate preparedness, and begin to develop clinical judgment and reasoning. Faculty is responsible for facilitating and structuring the learning experiences using a variety of teaching strategies and serving as a professional role model. Central to nursing education is the relationship between the student and faculty member and the partnership they develop to work through the educational process. The Nursing Program provides the educational resources and structure to facilitate the desired outcomes.

Patient

The patient is a holistic being with biological, psychological, sociological, spiritual, cultural facets, and individual human needs who exists at some point on the wellness – illness continuum and is constantly utilizing adaptation to maintain equilibrium throughout the life span. The patient is the intended recipient of health care regardless of the state of health.

Roles of the Nurse

Practice capabilities among nurses are differentiated on the basis of the combined effect of education, experience, and achieved level of expertise. The graduate has essential nursing competencies at the technical level in the roles of member of the profession, provider of patient-centered care, patient safety advocate, and member of the health care team. There are identified essential nursing competencies for each level of the Nursing Program.

<u>Health</u>

Health is a subjective dynamic state that includes well-being, optimal functioning in all dimensions of life, effective response to a continually changing environment, and achievement of personal potential. It is reflected as adaptation along the wellness – illness continuum as affected by illness, disability, and dysfunction; and is an individual responsibility. Health care is concerned with promotion of wellness, prevention of illness, and restoration of health.

Community

A community consist of a group of individuals with varying socioeconomic characteristics, cultural beliefs, and values who interact with each other individually and as a whole at varying levels and in ever changing ways. The community exists in a variety of settings providing numerous opportunities for nursing practice. By practicing in the community, the student prepares for the regional, national, and global level.

Nursing

Nursing is a dynamic, interactive, and caring process where the nurse and client participate actively utilizing the nursing process in the diagnosis, treatment, and management of human responses to actual or potential health problems. In collaboration with the patient the nurse utilizes the nursing process to prevent disease and promote health.

Nursing Practice

Nursing practice integrates concepts form the arts and sciences into a theoretical base for the provision of health care to culturally diverse clients, families, and groups. Nursing practice is based on the nursing process, intellectual judgment, the continuing pursuit of knowledge, and a caring relationship. It includes professional and technical components, including informatics, which may be utilized individually or in aggregate in a variety of settings. An integral and complimentary part of nursing practice involves collaboration with other health professionals. The goal of nursing practice is to assist the patient/family to obtain their optimum level of health.

Nurse Aide Practice

The nurse aide practices in structured settings and provide basic nursing care under the direct supervision of a licensed nurse.

Vocational Nursing Practice

The vocational nurse practices in structured settings and practices safe, effective general nursing care utilizing the nursing process under the supervision of a registered nurse.

Associate Degree Nursing (ADN) Practice

The associate degree nurse provides direct nursing care by implementing the nursing process in a safe and effective manner. This practice occurs in a variety of settings and includes coordination of care for a limited number of clients and supervision of other health care providers. Practice in the community is limited to care of individuals/families.

Baccalaureate Nursing (BSN) Practice

The baccalaureate nurse utilizes nursing theory and research findings to implement and provide comprehensive nursing care for a variety of patients in various settings utilizing the nursing process. This practice may include coordination of care for individuals, families aggregates, and communities as well as supervision of other health care providers. Victoria College ADN graduates have an opportunity to articulate directly into the BSN Program at Texas A&M University – Corpus Christi, University of Houston – Victoria, and Texas Tech University; therefore a statement regarding BSN practice is included in this philosophy.

Values

In keeping with the mission, philosophy and purpose, and values of Victoria College, we the faculty of the multiple entry – exit program are guided by the following values:

INTEGRITY	Quality nursing education program.	
RESPECT	The unique characteristics and abilities of indi-	
	vidual nursing students, faculty, and staff.	
COMMITMENT	The commitment of the student and the com-	
	munity to nursing education.	
STUDENT SUCCESS	An environment conducive to the learning pro-	
	cess.	
EXCELLENCE	The quality of life of the patient/community.	
PERSERVERANCE	The right of every nursing student to pursue	
	the desired level of education.	

ASSOCIATE DEGREE NURSING CONCEPTUAL FRAMEWORK



THEORETICAL BASIS FOR THE CONCEPTUAL FRAMEWORK

The VC-ADN Program is based on the foundational concepts of Jean Watson's Theory of Transpersonal Caring, Patricia Benner's Novice to Expert Theory, and the adult educational theory of Experiential Learning. Watson's concept of preventing illness and restoring health describes the framework of wellness to illness across the lifespan. This theory supports our belief that the patient and family are a composite of their psychosocial, spiritual, and cultural environments. Benner's transition of the nurse from novice to expert utilizes a systematic approach (nursing process) in the integration of knowledge, skills, and ethical comportment. Assimilation into the role of professional nursing necessitates the application of acquired knowledge, skills, clinical reasoning/judgment, and ethics to operate safely in the complex field of nursing practice.

Through experiential learning, our integrated program emphasizes the concepts of Quality and Safety Education for Nurses (QSEN) to connect the patient and the nurse to provide optimal quality, safe patient care. The curriculum focuses on developing simple-to-complex concepts progressing from fundamentals in level 1 through leadership and advanced nursing in level 4. Experiential learning provides the framework to transcend the preparation-to-practice gap through selective strategies, i.e. simulation, clinical, debriefing, post conference, self-reflection, and/or open discussion.

ADN CURRICULUM DEFINITIONS

Because the ADN curriculum is organized integrating all five nursing content areas (Medical, Surgical, Pediatrics, Psychiatric Nursing, and Obstetrics) the Associate Degree Nursing Faculty has developed the following curriculum definitions based on QSEN, are found in every course that emphasize processes rather than specific content areas:

QSEN Competencies

I. Patient-centered care-

a. Bio - Psycho - Social - Spiritual Integrity

Nurses must assess clients' needs as holistic beings as well as their biological, psychological, social, and spiritual needs. Using this framework provides an organized method of assisting clients to achieve their highest potential for health. Nurses must use their knowledge of pathophysiology, psychology, sociology, and spirituality to assist clients and their families in achieving their highest potential of wellness. Implied in this framework are families' and individuals' needs as well as a variety of settings where they may be found.

b. Caring

Central to the art of nursing is the ability to demonstrate caring. Nurses must learn to view health care and its complex system from the client's perspective. Only then can the nurse truly assist the client in setting achievable goals and provide individualized interventions to help accomplish these goals.

c. Health Promotion and Health Maintenance

At any given time clients can be located somewhere on the wellness – illness continuum. The goal of nursing is to assist clients in moving toward wellness or to maintain the level of health that they currently have. One of the major tools that nurses use to promote wellness is health teaching.

d. Nursing Process

"The nursing process is an organized systematic method of giving goal-oriented humanistic care that is both effective and efficient. It is organized and systematic in that is consists of five sequential and interrelated steps – Assessment, Diagnosis, Planning, Implementation, and Evaluation – during which you perform deliberate activities designed to maximize long-term results" (Alfaro, 1994, pg. 3, updated – 2014). It is used as the basis to plan and deliver nursing care to clients.

e. Cultural Diversity

In all aspects of providing nursing care the unique cultural background of individual clients, as well as families, is a part of the basis for mutual goal setting. Nurses must also be aware of how their own cultural background affects their perspective of clients' needs.

f. Ethics

The complex health care system and our ever-changing society present many ethical dilemmas for the nurse. The use of ethical principles as a standard to guide nurses as they assist clients in making very personal and often difficult decisions is paramount to providing quality health care.

II. Teamwork and Collaboration

a. Communication

The interaction and interplay between nurses and clients is a key component in the nursing process. It is the nurse – client relationship and an integral part of conveying caring to clients.

b. Roles of the Nurse

Professional and Vocational nurses provide care to clients in a variety of settings. Their legal and ethical responsibilities in all these settings must be clearly understood. Standards of care for each level of nursing as well as competency statements guide the nurse in fulfilling the roles of provider of care, coordinator of care, and member of the discipline.

III. Evidence-Based Practice (EBP)

a. Clinical Judgment and Reasoning

The nurse must be able to use the process of critical thinking to make appropriate nursing decisions. Critical thinking is based on the specific knowledge base, experience, competencies, attitudes, and standards. There are three levels of critical thinking: basic, complex, and commitment.

b. Nursing Skills

Nurses use a wide variety of skills when providing care to clients. Many of these skills use the same basic principles in different ways so that adaptation to individual clients can easily be done. Emphasis on principles gives nurses flexibility in making these adaptations as well as the ability to learn new skills.

c. Nutrition

Principles of therapeutic nutrition play a major role in health promotion and health maintenance for all clients. Nurses assist clients in using these principles in a cost effective manner that fits the individual or family lifestyle.

IV. Quality Improvement (QI)

a. Outcomes of Care

Using the evaluation component of the nursing process to approach the changing processes of care and identify gaps between local and best practices. Recognize that nursing and other health professions are parts of systems of care and care processes that affects outcomes for patients and families.

b. Leadership Development

A leader must have the ability to influence others to achieve a goal. They do this by influencing their followers and focusing on effectiveness, vision, and motivation. Some characteristics of a good leader includes: intelligence, organizational skills, confidence, decisive and independent, and personable.

V. Safety

a. Growth and Development

Clients present a wide range of health care needs related to their physical growth and psychological development. Nurses must utilize their knowledge of these principles of growth and development when implementing the nursing process with individual clients and families.

b. Pharmacology

Comprehensive knowledge of medication administration and drug classifications plays an important role in the nurse's ability to assist clients with health maintenance and health promotion. Specific principles of medication administration and drug classes are paramount to safe effective care of the client in a variety of settings.

c. <u>Safety</u>

In all settings with clients of all ages, nurses must consider physiological and psychological safety factors. Specific knowledge in all other content area is used to evaluate safety when providing nursing care.

VI. Informatics

a. Information Technology

Nurses identify and use essential available information to support patient care, patient safety, and quality improvement. Nurses protect confidentiality of health information in electronic health records. Continuous learning of evolving information technology skills is required.

ADN OBJECTIVES

LEVELI	LEVEL II	LEVEL III	LEVEL IV
I. Member of the profession:	I. Member of the profession:	I. Member of the profession:	I. Member of the profession:
A. Begin, with assistance, to function within the nurse's legal scope of practice and in accordance with regula- tion and the policies and procedures of the employ- ing health care institution or practice setting.	A. Function, with assistance, within the nurse's legal scope of practice and in ac- cordance with regulation and the policies and proce- dures of the employing health care institution or practicesetting.	A. Function, with minimal as- sistance, within the nurse's legal scope of practice and in accord- ance with regulation and the policies and proce- dures of the employing health care institution or practice setting.	A. Function within the nurse's legal scope of practice and in accordance with regula- tion and the policies and procedures of the employ- ing health care institution or practice setting.
 B. Accept responsibility and accountability for the quality of nursing care provided to patients and their families. 	B. Demonstrate responsi- bility and accountability for the quality of nursing care provided to pa- tients and their families.	B. Demonstrate responsibil- ity and accountability for the quality of nursing care provided to patients and their families.	 B. Assume responsibility and accountability for the quality of nursing care provided to pa- tients and their fami- lies.
C. Seek opportunities for personal growth that will improve clinical performance.	C. Demonstrate behaviors thatpromote the devel- opment and practice of nursing.	C. Participate, with assis- tance, in activities that promote the develop- ment and practice of	C. Participate in ac- tivities that pro- mote the develop- ment and practice
D. Begin to demonstrate, with assistance, responsi- bility for continued com- petence in nursing prac- tice, and develop insight through reflection, self- analysis, self-care, and lifelong learning.	D. Demonstrate, with assis- tance, responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.	nursing. D. Demonstrate, with mini- mal assistance, responsi- bility for continued com- petence in nursing prac- tice, and develop insight through reflection, self- analysis, self-care, and lifelong learning.	of professional nursing. D. Demonstrate responsibility for continued competence in nursing practice, and de- velop insight through reflec- tion, self- analysis, self-care, and lifelong learning.
II. Provider of Patient- Cen- tered Care:	II. Provider of Patient- Cen- tered Care:	II. Provider of Patient- Cen- tered Care:	II. Provider of Patient- Centered Care:
A. Begin to identify and clus- ter data to use for clinical reasoning and knowledge based on the diploma or associate degree nursing program of study and evi- dence-based practice out- comes as a basis for deci- sion making in nursing practice.	A. Use, with assistance, clini- cal reasoning and knowledge based on the diploma or associate de- gree nursing program of study and evidence-based practice outcomes as a ba- sis for decision making in nursing practice.	 A. Use, with minimal assistance, clinical reasoning and knowledge based on the diploma or associate degree nursing program of study and evidence-based practice outcomes as a basis for decision making in nursing practice. B. Determine, with minimal 	 A. Use clinical reasoning and knowledge based on the di- ploma or associate degree nursing program of study and evidence-based practice out- comes as a basis for decision making in nursing practice. B. Determine the physical and mental health status, needs,
 B. Begin, with assistance, to determine the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, and social diversity of patients and their families based 	B. Determine, with assis- tance, the physical and mental health status, needs, and preferences in- fluenced by culture, spirit- uality, ethnicity, and social diversity of patients and their families based upon	assistance, the physical and mental health status, needs, and preferences in- fluenced by culture, spirit- uality, ethnicity, and social diversity of patients and their families based upon interpretation of	and preferences influenced by culture, spirituality, eth- nicity, and social diversity of patients and their families and the interpretation of comprehensive health as- sessment findings compared with evidence- based health

upon interpretation of comprehensive health assessment findings compared with evidencebased health data derived from the diploma or associate degree nursing program of study.

- C. Begin, with assistance, to analyze assessment data to identify problems, formulate goals/ outcomes, and develop plans of care for patients and their families using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.
- D. Begin, with assistance, to provide safe, compassionate, comprehensive nursing care to patients and their families through a broad array of health care services.
- E. Begin, with assistance, to implement the plan of care for patients and their families within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.
- F. Begin, with assistance, to evaluate and report patient outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice, and plan follow- up nursing care.
- G. Begin, with assistance, to develop, implement, and evaluate teaching plans for patients and their families to address health

interpretation of comprehensive health assessment findings compared with evidence- based health data derived from the diploma or associate degree nursing program of study

- C. Analyze with assistance, assessment data to identify problems, formulate goals/outcomes, and develop plans of care for patients and their families using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.
- D. Provide, with assistance, safe, compassionate, comprehensive nursing care to patients and their families through a broad array of health care services.
- E. Implement, with assistance, the plan of care for patients and their families within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.
- F. Evaluate, with assistance, and report patient outcomes and responses to therapeutic interventions in comparison to benchmarks from evidencebased practice, and plan follow-up nursing care.
- G. Develop, implement, and evaluate teaching plans, with assistance, for patients and their families to address health promotion,

comprehensive health assessment findings compared with evidencebased health data derived from the diploma or associate degree nursing program of study

- C. Analyze, with minimal assistance, assessment data to identify problems, formulate goals/outcomes, and develop plans of care for patients and their families using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.
- D. Provide, with minimal assistance, safe, compassionate, comprehensive nursing care to patients and their families through a broad array of health care services.
- E. Implement, with minimal assistance, the plan of care for patients and their families within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.
- F. Evaluate, with minimal assistance, and report patient outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice, and plan follow-up nursing care.
- G. Develop, implement, and evaluate teaching plans, with minimal assistance, for patients and their families to address health promotion, maintenance, and restoration.

data derived from the diploma or associate degree nursing program of study.

- C. Analyze comprehensive assessment data to identify problems, formulate goals/outcomes, and develop plans of care for patients and their families using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.
- D. Provide safe, compassionate, comprehensive nursing care to patients and their families through a broad array of health care services.
- E. Implement the plan of care for patients and their families within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.
- F. Evaluate and report patient outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice, and plan follow-up nursing care.
- G. Develop, implement, and evaluate teaching plans for patients and their families to address health promotion, maintenance, and restoration.
- H. Coordinate human, information, and physical resources in providing care for patients and their families.

promotion maintenance	maintonance and restar-	1	1
promotion, maintenance, and restoration. H. Begin, with assistance, to	maintenance, and restora- tion. H. Coordinate, with assistance	H. Coordinate, with minimal assistance, human, infor- mation, and physical re-	
coordinate human, infor- mation, and physical re- sources in providing care for patients and their	human, information, and physical resources in providing care for patients and their families.	sources in providing care for patients and their fami- lies.	
families.			
III. Patient Safety Advocate:	III. Patient Safety Advocate:	III. Patient Safety Advocate:	III. Patient Safety Advocate:
A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules to emphasize safety, as well as all federal, state, and local government and accreditation organiza- tion safety requirements and standards.	A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules to empha- size safety, as well as all federal, state, and local government and accredita- tion organization safety re- quirements and standards.	A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules to empha- size safety, as well as all federal, state, and local government and accredita- tion organization safety re- quirements and standards.	A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules to emphasize safety, as well as all federal, state, and local government and accreditation organiza- tion safety requirements and standards.
B. Begin, with assistance, to implement measures to promote quality and a safe environment for patients, self, and others.	B. Implement, with assis- tance, measures to pro- mote quality and a safe en- vironment for patients, self, and others.	B. Implement, with minimal assistance, measures to promote quality and a safe environment for patients, self, and others.	B. Implement measures to pro- mote quality and a safe envi- ronment for patients, self, and others.
C. Begin, with assistance, to formulate goals and out- comes using evidence based data to reduce patient risks.	C. Formulate, with assis- tance, goals and outcomes using evidence based data to reduce patient risks.	C. Formulate, with minimal assistance, goals and out- comes using evidence based data to reduce pa- tient risks.	 C. Formulate goals and out- comes using evidence based data to reduce patient risks. D. Obtain instruction, supervi-
D. Obtain instruction, supervi- sion, or training as needed when implementing nursing procedures or practices.	 D. Obtain instruction, super- vision, or training as needed when implement- ing nursing procedures or practices. 	D. Obtain instruction, super- vision, or training as needed when implement- ing nursing procedures or	sion, or training as needed when implementing nursing procedures or practices. E. Comply with mandatory re-
E. Comply with mandatory re- porting requirements of the Texas Nursing Practice Act.	E. Comply with mandatory reporting requirements of	practices. E. Comply with mandatory	porting requirements of the Texas Nursing Practice Act.
F. Accept assignments and identify delegable tasks that take into consideration pa-	the Texas Nursing Practice Act. F. Accept assignments and	reporting requirements of the Texas Nursing Practice Act.	F. Accept and make assign- ments and delegate tasks that take into consideration patient safety and organiza-
tient safety and organiza- tional policy.	delegate, with assistance, tasks that take into consid- eration patient safety and organizational policy.	F. Accept assignments and delegate, with minimal as- sistance tasks that take into consideration patient safety and organizational policy.	tional policy.
IV. Member of the Health Care Team:	IV. Member of the Health Care Team:	IV. Member of the Health Care Team:	IV. Member of the Health Care Team:
 A. Begin, with assistance, to coordinate, collaborate, and communicate in a timely manner with patients, their families, and the 	A. Coordinate, collaborate, and communicate, with assistance, in a timely manner with patients, their families, and the	A. Coordinate, collaborate, and communicate, with minimal assistance, in a timely manner with pa- tients, their families, and	A. Coordinate, collaborate, and communicate in a timely manner with patients, their families, and the interdiscipli- nary health care team to

	interdisciplinary health care team to plan, deliver, and evaluate patient centered care.	interdisciplinary health care team to plan, deliver, and evaluate patient cen- tered care.		the interdisciplinary health care team to plan, deliver, and evaluate patient cen- tered care.	В.	plan, deliver, and evaluate patient centered care. Serve as a health care advo- cate in monitoring and pro-
В.	Identify, with assistance, sit- uations that require the nurse to serve as a health care advocate in monitoring and promoting quality and access to health care for pa-	B. Serve, with assistance, as a health care advocate in monitoring and promoting quality and access to healthcare for patients and their families.	В.	Serve, with minimal assis- tance, as a health care ad- vocate in monitoring and promoting quality and ac- cess to health care for pa- tients and their families.	 moting quality and access to health care for patients and their families. C. Refer patients and their families to resources that facilitate continuity of care; health promotion, maintenance, and restoration; and ensure confidentiality. D. Communicate and manage information using technology to support decision making to improve patient care. E. Assign and/or delegate nursing activities to other members of the health care team based upon an analysis of patient or unit need. F. Supervise nursing care provided by others for whom the nurse is responsible by using evidence based nursing practice. G. Participate with health care teams during local or global health emergencies or pandemics to promote health and safety and prevent disease. 	
C.	tients and their families. Begin, with assistance, to refer patients and their families to resources that facilitate continuity of care; health promotion, mainte- nance, and restoration; and ensure confidentiality.	C. Refer, with assistance, pa- tients and their families to resources that facilitate continuity of care; health promotion, maintenance, and restoration; and en- sure confidentiality.	C.	Refer, with minimal assis- tance, patients and their families to resources that facilitate continuity of care; health promotion, maintenance, and restora- tion; and ensure confiden-		
D.	Begin, with assistance, to communicate and manage information using technol- ogy to support decision making to improve patient care.	 D. With assistance, communi- cate and manage infor- mation using technology to support decision making to improve patientcare. 	D.	tiality. With minimal assistance, communicate and manage information using technol- ogy to support decision making to improve patient care.		
E.	Begin, with assistance, to assign and/or delegate nursing activities to other members of the health care team based upon an analy- sis of patient or unit need.	E. Assign and/or delegate, with assistance, nursing ac- tivities to other members of the health care team based upon an analysis of patient or unit need.	E.	Assign and/or delegate, with minimal assistance, nursing activities to other members of the health care team based upon an analysis of patient or unit		
F.	Begin, with assistance, to supervise nursing care pro- vided by others for whom the nurse is responsible by using evidence based nurs- ing practice.	F. Supervise, with assistance, nursing care provided by others for whom the nurse is responsible by using evi- dence based nursing prac- tice.	F.	need. Supervise, with minimal assistance, nursing care provided by others for whom the nurse is respon- sible by using evidence based nursing practice.		
G.	Begin, with assistance, to participate with health care teams during local or global health emergencies or pan- demics to promote health and safety and prevent dis- ease.	G. Participate, with assis- tance, with health care teams during local or global health emergencies or pandemics to promote health and safety and pre- vent disease.	G.	Participate, with minimal assistance, with health care teams during local or global health emergencies or pandemics to promote health and safety and pre- vent disease.		

VOCATIONAL NURSING PHILOSOPHY

We, the faculty of the Vocational Nursing (VN) Program, believe that a human being is a highly complex interrelated system. This system is composed of biological, sociological, psychological, cultural, and spiritual aspects. Together, and in varying degrees separately, these composite aspects impact on health and human behavior. Furthermore, we believe that human beings are rational persons whose value and worth are explicit. We respect the rights and dignity of all individuals to self-determination. In keeping with this philosophy, we accept that all individuals, to the extent of their ability, are responsible for their own life choices.

Related to our beliefs about humanity, we believe that the purpose and goal of the practice of nursing is to enhance the health and well-being of the individual as an integral member of society. Nursing care is a service primarily concerned with the quality of human life and the support of the highest level of quality that each individual is capable of achieving. Nursing roles and functions are directed to the performance of such caring behaviors, which when administered in an organized way, will have a maximum positive effect on the individual's potential for daily living. Consistent with our understanding of the complexity of human life and behavior, we acknowledge that the performance of nursing care is conducted on several levels and in a multiplicity of settings. The practice of vocational nursing is but one level of nursing practice which derives its body of knowledge and scope of practice from selected elements of the total body of professional nursing knowledge. Vocational nursing graduates are prepared to function as members of the health care team under the supervision of registered nurses and physicians. Vocational nurses provide nursing care in all health care settings requiring increasing levels of technical expertise. The preparation of nursing practitioners is based on scientific principles and structured so as to provide the foundation of skills upon which the vocational nurse may build in the future.

We believe that learning is a life-long process that enables the survival and enhancement of human existence. Learning has occurred when there has been a change in behavior as a result of a recognized need. Learning is best brought about when it occurs in an environment which is both positive and nurturing. We believe that the act of teaching is an art and a science whose aim is to being about learning in a logical and efficient manner so as to achieve the greatest utility and meaning for the student We believe that education is a process involving active participation of both learner and teacher which enables the individual to develop his or her potential in becoming a productive responsible member of our existing and changing society. We further believe that education should allow for upward and/or horizontal mobility according to the individual's capacity. The practice of nursing education occurs in community settings where nursing care is needed and can be delivered in a manner consistent with the philosophy of the program. Educational experiences are focused on the direct care of selected patients in all age groups with common deviations from wellness.

*VN - Client = individual

VN OBJECTIVES

Semester I	Semester II	Semester III	
I. Member of the Profession:	I. Member of the Profession:	I. Member of the Profession:	
A. <i>Begin with assistance</i> , to function within the nurse's legal scope of practice and in accordance with the policies and procedures of the employing health care institution or practice setting.	A. Function, <i>with assistance</i> within the nurse's legal scope of practice and in accordance with the policies and procedures of the employing health care institution or practice setting.	A. Function within the nurse's legal scope of practice and in accordance with the policies and procedures of the employing health care institution or practice setting.	
B. <i>Accept</i> responsibility and ac- countability for the quality of nursing care provided to patients and their families.	B. <i>Demonstrate</i> responsibility and ac- countability for the quality of nursing care provided to patients and their fami- lies.	B. Assume responsibility and ac- countability for the quality of nursing care provided to patients and their families.	
C. <i>Seek opportunities to</i> contribute to activities that promote the development and practice of vocational nursing.	C. Contribute, <i>with assistance</i> to activi- ties that promote the development and practice of vocational nursing.	C. Contribute to activities that promote the development and practice of vocational nursing.	
D. <i>Begin to</i> demonstrate responsibility for continued competence in nursing practice, and develop insight through re- flection, self-analysis, self-care, and life- long learning <i>with assistance</i> .	D. Demonstrate responsibility for contin- ued competence in nursing practice, and develop insight through reflection, self- analysis, self-care, and lifelong learning <i>with assistance</i> .	D. Demonstrate responsibility for con- tinued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and life	
		II. Provider of Patient-Centered Care:	
II. Provider of Patient-Centered Care: A. <i>Begin to identify and</i> use clinical reason- ing and established evidence- based policies as the basis for decision making in nursing	II. Provider of Patient-Centered Care: A. Use clinical reasoning and established evidence-based policies as the basis for decision making in nursing practice with assistance.	A. Use clinical reasoning and estab- lished evidence-based policies as the basis for decision making in nursing practice.	
 practice. B. <i>Identify aspects of</i> the physical and mental health status, and health needs, and preferences of culturally, ethnically, and socially diverse patients and their families based upon interpretation of health-related data. 	B. Assist in determining the physical and mental health status, and health needs, and preferences of culturally, ethnically, and socially diverse patients and their families based upon interpretation of health- related data.	B. Assist in determining the physical and mental health status, and health needs, and preferences of culturally, ethnically, and socially diverse pa- tients and their families based upon interpretation of health- related data.	
C. <i>Recognize and begin to</i> report data to assist in the identification of problems and formulation of goals/ outcomes, and pa- tient-centered plans of care in collabora- tion with patients, their families, and the interdisciplinary health care team.	C. Report data to assist in the identifica- tion of problems and formulation of goals/outcomes, and patient-centered plans of care in collaboration with pa- tients, their families, and the interdiscipli- nary health care team.	C. Report data to assist in the identi- fication of problems and formulation of goals/outcomes, and patient-cen- tered plans of care in collaboration with patients, their families, and the interdisciplinary health care team long learning.	

Semester I	Semester II	Semester III
 D. Begin, with assistance, to provide safe, compassionate basic nursing care to assigned patients with predictable health care needs through a supervised directed scope of practice. E. Begin, with assistance, to implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors. F. Begin, with assistance, to identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes. G. Begin, with assistance, to implement teaching plans for patients and their families with common health problems and well-defined health learning needs. H. Begin to assist in the coordination of human, information, and material resources in providing care for assigned patients and their families. 	 D. Provide, with assistance, safe, compassionate basic nursing care to assigned patients with predictable health care needs through a supervised directed scope of practice. E. Implement, with assistance, aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors. F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes with assistance. G. Implement teaching plans for patients and their families with common health problems and well- defined health learning needs with assistance. H. Assist in the coordination of human, information, and material resources in providing care for assigned patients and their families. 	 D. Provide safe, compassionate basic nursing care to assigned patients with predictable health care needs through a supervised directed scope of practice. E. Implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors. F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes. G. Implement teaching plans for patients and their families with common health problems and well- defined health learning needs. H. Assist in the coordination of human, information, and material resources in providing care for assigned patients and their families
 III. Patient Safety Advocate: A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local gov- ernment and accreditation organization safety requirements and standards. B. <i>Begin, with assistance, to</i> im- plement measures to promote quality and a safe environment for patients, self, and others. 	 III. Patient Safety Advocate: A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that em- phasize safety, as well as all federal, state, and local government and accredi- tation organization safety requirements and standards. B. Implement, with assistance, measures to promote quality and a safe environment for patients, self, and others. 	 III. Patient Safety Advocate: A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all fed- eral, state, and local government and accreditation organization safety re- quirements and standards. B. Implement measures to promote quality and a safe environment for pa- tients, self, and others.

~ ~ ~		~		
Semester I	Semester II	Semester III		
C. <i>Begin to</i> assist in the formulation of goals and outcomes to reduce patient risks.	C. Assist in the formulation of goals and out- comes to reduce patient risks.	C. Assist in the formulation of goals and outcomes to reduce patient risks.		
D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.	D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.	D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.		
E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.	E. Comply with mandatory re- porting requirements of the Texas Nursing Practice Act.	E. Comply with mandatory reporting re- quirements of the Texas Nursing Practice Act.		
F. Accept assignments that take into con- sideration patient safety and organiza- tional policy.	F. Accept and <i>begin to</i> make assignments that take into consideration patient safety and organizational policy.	F. Accept and make assignments that take into consideration patient safety and organizational policy.		
IV. <u>Member of the Health Care Team</u> A. <i>Begin to</i> communicate and collaborate with patients, their families, and the inter- disciplinary health care team to assist in the planning, delivery, and coordination of patient centered care to assigned patient.	IV. Member of the Health Care Team A. Communicate and collaborate with patients, their families, and the interdis- ciplinary health care team to assist in the planning, delivery, and coordination of patient centered care to assigned pa- tient.	 IV. Member of the Health Care Team A. Communicate and collaborate with patients, their families, and the interdis- ciplinary health care team to assist in the planning, delivery, and coordination of patient centered care to assigned patient. 		
B. <i>Begin, with assistance, to</i> participate as an advocate in activities that focus on im- proving the health care of patients and their families.	B. Participate, <i>with assistance</i> , as an advocate in activities that focus on improving the health care of patients and their families.	B. Participate as an advocate in ac- tivities that focus on improving the health care of patients and their fami- lies.		
C. <i>Begin, with assistance, to</i> participate in the identification of patient needs for referral to resources that facilitate conti- nuity of care and insure confidentiality.	C. Participate, <i>with assistance</i> , in the identification of patient needs for referral to resources that facili- tate continuity of care and insure confidentiality.	C. Participate in the identification of patient needs for referral to re- sources that facilitate continuity of care and ensure confidentiality.		
D. <i>Begin, with assistance, to</i> communicate and collaborate in a timely manner with members of the interdisciplinary health care team to promote and maintain the pa- tient's optimal health status.	D. Communicate and collaborate, with assistance, in a timely manner with members of the interdiscipli- nary health care team to promote and maintain the patient's optimal health	D. Communicate and collaborate in a timely manner with members of the interdisciplinary health care team to promote and maintain the patient's optimal health status.		
E. <i>Begin, with assistance, to</i> communi- cate patient data using technology to support decision making to improve pa- tientcare.	status. E. Communicate, <i>with assistance</i> , patient data using technology to sup-	E. Communicate patient data using technology to support decision making to improve patientcare.		
F. <i>Begin, with assistance, to</i> assign nurs- ing care to unlicensed personnel based upon an analysis of patient or unit need.	port decision making to improve pa- tient care. F. Assign nursing care to unli-	F. Assign nursing care to SVN/ LVNs or unlicensed personnel based upon an analysis of patient or unit need.		
Begin, with assistance, to supervise nursing care provided by unlicensed personnel	censed personnel based upon an analysis of patient or unit need.	Supervise nursing care provided by others for whom the <i>student</i> nurse is		
	Supervise, <i>with assistance</i> , nursing care provided by others for whom the <i>student</i> nurse is responsible.	responsible.		

SECTION 2 – ACADEMIC STANDARDS

GRADING FORMULA

Grades will adhere to the following percent minimum; for point-based courses, a ceiling function will uniformly round up the cut-off values based on total points possible to ensure academically rigorous letter grades.

	Classroom Theory Grade			
А	92-100% of Total Possible Points			
В	83-91% of Total Possible Points			
С	74-82% of Total Possible Points			
D	65-73% of Total Possible Points			
F	64% and below of Total Possible Points			

Learning and Clinical Laboratory Grade:

A numerical grade is not given for the performance in the learning and clinical laboratory. The student's performance is either judged to be "Satisfactory" or "Unsatisfactory." Further explanation of the grading of clinical and learning laboratory performance is explained later in the handbook and in each course syllabus.

PROGRESSION REQUIREMENTS

1. Students must attain at least a grade of "C" or "Satisfactory" in each nursing course in each level/semester to continue in the Nursing Program. Students must attain a "C" in each nursing theory course in the level/semester in order to progress to the next level/semester. Students who attain less than a "C" in a theory course cannot progress. They must repeat both the theory and clinical course even if the clinical course grade was initially a "S." students who receive a "U" in the clinical course cannot progress. They must repeat the clinical course and the core theory course(s).

a. At least a minimum score of 74% of the total number of possible points must be attained in order to pass the course in the VN Program.

At least a minimum score of 74% of the total number of possible exam points must be attained on nursing theory exams in order to pass the course in the ADN Program.

b. A student must achieve a "Satisfactory" clinical evaluation in order to pass the clinical course.

c. A student must meet the selected criteria for successful course completion as outlined in each course syllabus.

d. Students must satisfactorily complete theory and clinical written work according to stated criteria in the course syllabi. At the discretion of the instruction, students may be asked to resubmit any work that is illegible or contains more than five spelling or grammar errors.

e. Students must complete required standardized tests.

2. A student must have a "C" or better in all courses on the curriculum plan for that semester in order to progress to the next semester of the nursing program. A student will be dropped from the nursing program if the overall Victoria College (VC) GPA drops below 2.0. Additionally, the student is required to notify the Nursing Program Chair if their GPA falls below 2.0.

3. An overall grade point average of 2.0 on all completed courses at VC is required for graduation.

4. Nursing courses may be repeated only once. If a student receives less than a "C" in a theory course, or a "U" in a clinical course, or withdraws from a course after the Official Reporting Date, the student may reenroll in that course only ONCE more. Students will be required to enroll in concurrent nursing courses for the semester. This includes previous courses that the student completed successfully.

5. A student may not repeat more than one entire nursing semester. Exceptions for unusual circumstances will be determined by the ADN Selection and Retention Committee or the VN Program Chair and Coordinators. (See VC Catalog for further information.)

6. If absent for an exam, the student must contact the course coordinator/instructor as soon as possible. The student will need to provide appropriate documentation (student note or note from health care provider) for their absence prior to taking the rescheduled exam.

7. The exam will be administered on the first class day back during non-scheduled class time. The student may be provided with an alternate exam. Failure to schedule the missed test may result in a grade of zero.

8. It is the students' responsibility to maintain current Health Care Provider CPR certification and required immunizations/screening throughout the program. It is also the students' responsibility to upload current records in the CastleBranch/ ViewPoint website. Additional tuberculosis (TB) screening requirements must be submitted annually. Failure to keep immunizations/screenings up-to-date will result in clinical absence time.

9. The student is responsible for monitoring their own GPA and meeting the academic requirements.

10. ADN students who successfully complete RNSG 1219 with a "C" or better and RNSG 1260 with a "S" are eligible to apply for the Nurse Aide certificate of completion and are eligible to take the exam for the Certified Nurse Aide/ Home Health Aide.

11. VN students who successfully complete VNSG 1423 with a "C" or better and VNSG 1260 with a "S" are eligible to apply for the Nurse Aide certificate of completion and are eligible to take the exam to become a Certified Nurse Aide/ Home Health Aide. VN students who are a Certified Nurse Aide and completes Semester II of the program are eligible to take the Texas Medication Aide Certification Exam.

MATHEMATICS COMPETENCY POLICY

Students will be tested each semester to determine mathematical competency. A math test will be administered to all nursing students at the beginning of each level/semester. Students must score a 90% accuracy on the examination to prove competency. The nursing students will be given three opportunities to prove competency.

If a nursing student scores below 90% on either of the first two Mathematical Competency Examinations, remediation and/or tutoring must be completed and recorded on an anecdotal record signed by an instructor/tutor and the student.

See individual clinical course syllabi for specific requirements for meeting math competencies. The dates for the mathematical competency exams will be designated in the course calendar. If a nursing student does not achieve 90% competency by the third attempt on the Math Exam, they will receive a "U" for the clinical course and will be required to withdraw from the Nursing Program.

SKILLS COMPETENCY REQUIREMENT

Students are expected to perform the skills assessments listed in each syllabus following the timelines set forth for the level/semester. Students who are unable to demonstrate those skills will receive a "U" for the skills and/or clinical course and will be required to withdraw from the Nursing Program. Students who pass the skills test for any level/semester will be expected to perform that skill safely throughout the clinical experience for the remainder of the program.

Failure to continue to demonstrate the skill safely with patients may result in clinical failure.

The overall purpose of the skills assessment process is to have students demonstrate the ability to safely perform leveled psychomotor skills in a laboratory setting in order to increase student confidence and to enable students to become safe practitioners. Skills are selected based on the degree of risk and the frequency that students may encounter them in the clinical setting. Assessments are done in a stepwise fashion beginning with basic skills and ending with a multi-skill scenario which focuses on clinical reasoning and judgment in the final semester of the nursing program. Dates and deadlines for the skill assessment can be found in individual course syllabi. In the Nursing Programs, laboratory skills must be performed satisfactorily before students are allowed to perform that skill in the clinical setting. Remediation will be assigned after second unsuccessful attempt. Failure of third attempt may result in failure of the course.

IV PUSH MEDICATION SUPERVISION

1. ADN students will not give intravenous (IV) push medications (other than IV flushes) before Level III and then in selected situations. VN students will not give IV medication before Semester II.

2. Nursing instructors must be present for the preparation and administration of the IV push medications.

3. ADN and VN students are not allowed to administer IV chemotherapeutic agents.

TESTING POLICY/ TEST ADMINISTRATION

The following procedures describes the test administration policy/process:

1. All exams will begin promptly at the scheduled time. Failure to arrive on time will result in taking the exam after the exam completion. Absent from any exam requires the student to provide appropriate documentation prior to the administration of the missed exam. The student may be provided with an alternate exam. The student will take the exam at the first class day back during non-scheduled class time.

2. If tardy for an exam, the student may not enter the exam room while the other students are testing. The exam will be taken after the scheduled exam at the faculty's discretion. In the event that two exams are scheduled on the same day, the first exam missed will follow the second exam.

3. When an exam begins, the classroom door is closed and a sign labeled, "Testing in Progress, contact instructor/ coordinator for rescheduling" will be placed on the door.

Test administration:

- Students are to bring only car keys and laptop (or other approved testing device) into the exam room.
- Electronic devices (such as cell phones, personal digital assistant (PDAs), smart watches, wireless earbuds, etc.) are not permitted in the exam room.
- A simple four function calculator may be given to the student along with pencils and blank sheet of paper for the exam. All items will be turned in after the exam.
- The student's grade will be determined only after the instructors complete test review. The exam grade will be displayed on Canvas. The cumulative score on the exams will show as percentages in Canvas; however, within the Nursing Program a point system is utilized. Please refer to your course syllabi.
- Students may not ask the instructor about test items.
- The students are not permitted to review the exam once it is submitted after the examination process and content review will not be provided unless faculty deem a test review is necessary.
- Exams will be given online, see specific course syllabus for more details.
- Students need to refer to each course syllabi regarding routine testing policies and procedures.
- No items are allowed in the skills testing area unless approved by the Program Chair and faculty.

TRANSFER GUIDELINES

ADN READMISSION OF PREVIOUS VICTORIA COLLEGE STUDENTS

The number of individuals selected for readmission is based on availability of seats per semester in the ADN Program. Students' course work and clinical performance will be evaluated by the ADN Program Chair. The student will need to meet with the ADN Program Chair to discuss all readmission criteria. The student will need to submit a letter to the program chair two months prior to the beginning of the semester that the students is considering to reenter. Students who wish to be considered to readmission to the ADN Program must meet all the current admission requirements as listed in the VC Catalog. Readmission students will be selected based on current GPA. Any special circumstances involved in a students' withdrawal/dismissal from the program will be reviewed by the ADN Program Chair and the Dean of Allied Health. Students who desire to be readmitted into the program must repeat all unsuccessful courses for prior admission in the ADN Program. A student must have a "C" or above on all support courses listed on the degree plan for the semester of reentry.

1. Before registration, the Selection and Retention Committee will review the records and rank candidates seeking reentry into levels (semesters) I, II, III, or IV based on the following criteria:

a. Overall GPA on all Victoria College hours attempted.

b. Special circumstances that were involved in the student's withdrawal/dismissal from the program will be considered in the readmission decision.

2. Readmission must occur within two years of a prior admission.

TRANSFER STUDENTS FROM OTHER SCHOOLS OF NURSING

Associate Degree Nursing Program

Students' course work and clinical performance will be evaluated by the ADN Program Chair. Students who wish to be considered for readmission must meet all current admission requirements as listed in the VC Catalog. The student will need to meet with the ADN Program Chair to discuss all readmission criteria. The student will need to submit a letter to the Program Chair two months prior to the beginning of the semester that the student is considering to reenter. Any special circumstances involved in a students' course work and clinical performance from the prior nursing program will be evaluated by the ADN Program Chair and Dean of Allied Health. Transfer students will be selected based on current GPA. Any special circumstances involved in a students' withdrawal/dismissal from the previous program will be reviewed by the ADN Program Chair and Dean of Allied Health.

1. Transfer students are considered for admission on a space available basis <u>after</u> all previous VC students seeking reentry have been admitted.

2. Students who have successfully completed a nursing course at other accredited schools are evaluated on an individual basis by the ADN Program Chair to determine their entry level in the VC-ADN Program.

3. The transfer student must furnish a copy of each nursing course syllabus with course descriptions to the ADN Program Chair so each course can be evaluated.

4. Transfer students must meet the same admission, progression, and graduation requirements as all other ADN students.

5. It is the responsibility of the applicant to furnish all necessary documentation to the ADN office at least two <u>months</u> prior to the semester the student is seeking entry.

VN READMISSION OF PREVIOUS VICTORIA COLLEGE STUDENTS

The number of individuals selected for readmission is based on availability of seats per semester in the VN Program. Students' course work and clinical performance will be evaluated by the VN Program Chair. The student will need to meet with the VN Program Chair to discuss all readmission criteria. The student will need to submit a letter to the program chair two months prior to the beginning of the semester that the students is considering to reenter. Readmission students will be selected based on current GPA. Any special circumstances involved in a students' withdrawal/dismissal from the program will be reviewed by the VN Program Chair and the Dean of Allied Health. Students who desire to be readmitted into the program must repeat all unsuccessful courses for prior admission in the VN Program. Successful completion of some VNSG courses do not have to be repeated in which a "C" or higher was achieved. However, the following courses must be repeated in the respective semester of readmission: Semester I – VNSG 1260 clinical and VNSG 1423 Basic Nursing Skills; Semester II – VNSG 1329 Medical-Surgical Nursing I, VNSG 2260 Clinical, and VNSG 2331Advanced Nursing Skills; Semester III – VNSG 1105 NCLEX-PN Review, VNSG 1432 Medical-Surgical Nursing II, and VNSG 2461 Clinical.

Readmission must occur within two years of a prior admission.

TRANSFER STUDENTS WITHIN VICTORIA COLLEGE SYSTEM

The student may seek transfer within the VC-VN Program (campus to campus) at the end of each semester by submitting a written request to the VN Program Coordinator and VN Program Chair at least a month prior to the end of the semester. The letter should include a narrative with the rationale and should be dated on the same day of submission. Transfer requests are not guaranteed. Selection will be based on GPA.

TRANSFER STUDENTS FROM VICTORIA COLLEGE ADN TO VN PROGRAM

VC-ADN students may request admission into the VC-VN Program according to the following criteria:

- ADN students will be considered for admission to the VN Program on a space available basis after all previous VN students have been admitted and VC-VN transfer requests have been granted between locations.
- The criteria utilized to rank students for admission will be based on GPA pertaining to ADN program of study, for nursing courses completed thus far.

VN TRANSFER STUDENTS

Prospective students interested in transferring into the Victoria College VN Program must contact the VN Program Chair. Students can join the current VN class on the space available basis.

CLINICAL PERFORMANCE REVIEW COMMITTEE

The Clinical Performance Review (CPR) Committee is comprised of ADN and VN Program faculty. The committee was created to assist faculty to make appropriate decisions regarding students' clinical performance. The student may provide a written letter to be read during the committee session. The student will be given 24 hours to compose and submit the letter to the assigned clinical instructor. The clinical instructor will then submit the letter to the CPR Committee Chair.

The functions of the committee include:

- 1. Assess students' clinical evaluation and anecdotal records for objective teacher evaluation of students' ability to meet clinical objectives.
- 2. Validate accuracy of the clinical performance assessment.
- 3. Act as a support system to the clinical instructor by offering positive reinforcement when accuracy of clinical performance assessment has been validated and student failure has been determined.

4. Assist clinical instructor in devising alternative methods for evaluating performance when the students is in jeopardy of failing. (Example: Student evaluation by an additional instructor.)

WITHDRAWAL

When a student finds it necessary to drop a course or withdraw from the nursing program before the end of a semester, the student must notify the respective Program Chair before initiating the drop/withdrawal through the advising department office. (See VC Catalog for further information.)

APPEAL PROCESS

It is advised for the student to meet with the respective Program Chair regarding guidance for the Appeal Process. The VC Student Handbook includes the rules, procedures, rights, and responsibilities governing academic and nonacademic relationships. The appeal form may be found at:

http://www.formstack.com/forms/VictoriaCollege-studentappeals
SECTION 3 – PROFESSIONAL RESPONSIBILITIES AND REGULATORY ISSUES

ATTENDANCE POLICIES

Attendance will be monitored in a variety of ways. Examples include, but not limited to, sign-in sheets, roll call, classroom response system, online discussions, quizzes, scan sheets/exams, or assignments. If a roll sign-in sheet is being utilized, it will be kept in the classroom and must be signed by the students before the class starts. It will not be circulated. Students arriving after the start of class may sign the roll sheet at the first break. They will indicate next to their signature the time of arrival into the class. Honesty is expected and students forging signatures may be dismissed from the program.

Students who arrive after class or clinical has started will receive one hour of class absence. Students who miss more than 60 minutes of a class or clinical will receive an absence for the actual time missed. Hours will be cumulative toward the total time absent.

Excessive Absences:

1. Because of the complexity and volume of course content, the interactive nature of the health professions, and the personal responsibility that must be developed in today's health care workers, students whose absences in any selective admission health care course exceed the equivalent of two weeks of class meetings may be dismissed from the program.

2. If the student wants to appeal the dismissal before it is processed the student must:

a. Currently be passing courses and be in good standing to be eligible to petition a program dismissal for excessive absences.

b. Notify the course coordinator of their wish to be reinstated.

c. Within 24 hours of exceeding the absences, the student must submit a letter to faculty stating: 1) the circumstances of all previous absences and 2) an action plan for success.

The coordinator and the faculty will meet upon receipt of the petition letter and will provide notification after the decision has been made.

3. If the appeal is granted, the student will sign a contract with the understanding that further absences may result in being withdrawn from the program.

4. Students who have been absent due to a serious illness or childbirth must submit written documentation from their health care provider stating they are eligible to return to class/clinical.

Clinical Absences:

A student who will not be able to attend a clinical learning experience MUST contact by calling or texting their clinical instructor one hour prior to the time of the clinical experience. Failure to contact the clinical instructor one hour prior or failure to arrive at the assigned clinical site will result in a "no call, no show." The first failure to comply with the absence policy will result in a written counseling. The second "no call, no show" may result in dismissal from the program.

Students who miss more than 60 minutes of a class or clinical will receive an absence for the time missed and will be counted absent at 15-minute increments. An example would be if you are an hour and five minutes late, you will be counted an hour (60 minutes) and 15 minutes late.

PERSONAL ELECTRONIC EQUIPMENT

1. No personal electronic equipment (such as cell phones, personal digital assistant (PDAs), smart watches, wireless earbuds, etc.) other than your laptop for testing is allowed in the classroom during testing. Evidence that a student has any electronic equipment on their person during the testing process will result in immediate dismissal from the exam. On the first offense the student will be given an alternate exam; on the second offense and for all other infractions of the policy the student will be given a score of zero on the exam.

2. Use of personal electronic equipment (such as cell phones, personal digital assistant (PDAs), smart watches, wireless earbuds, etc.) is not allowed in clinical areas and institutional and instructor guidelines will be followed. No personal calls may be received during the clinical learning experience via personal electronic equipment. In case of emergency, the appropriate nursing administrative assistant should be contacted and the clinical instructor will be notified and the student will be informed as soon as possible.

SOCIAL MEDIA POLICY

Students need to be aware of the potential consequences for disclosing patient-related information (intentionally or unintentionally) via social media. <u>Any</u> discussion of patient information including, but not limited to, shared experiences is considered a violation of professional conduct of VC Nursing Programs.

Additionally, all students must adhere to the Health Insurance Portability and Accountability Act (HIPAA) guidelines and maintain ethical behavior at all times. Failure to comply may result in disciplinary actions including dismissal from the Nursing Program and/or Victoria College.

STUDENT HEALTH

1. A yearly tuberculin test is required.

2. It is the students' responsibility to keep immunizations current and documentation submitted into their CastleBranch/ViewPoint account in compliance with program deadlines.

3. The influenza vaccination is required by all nursing students prior to the clinical experience. If a student refuses to receive the immunization, a flu declination form need to be signed and uploaded to the compliance website. The student will follow the assigned facility policy regarding the flu vaccine declination.

4. COVID Vaccine or Exemption Status: The health care agencies are requiring that all students provide proof of COVID vaccination or an exemption. All exemptions will be reviewed and handled on an individual basis by VC's Advising and Counseling Services office. The required documents will be uploaded by the applicant into the CastleBranch/ViewPoint website by the date indicated.

PROGRAM DISMISSAL

The following nursing student policies pertain to conduct that warrants immediate dismissal from the Victoria College Nursing Programs. Any demonstration of the following including, but not limited to:

1. Evidence of actual or potential harm to patients, clients, or the public. This includes self-report to Program Chair of a status change with a clear criminal background (CBC) that involves harm to another individual.

2. Criminal behavior whether violent or non-violent, directed against persons, property or public order and decency.

3. Intemperate use, abuse of drugs or alcohol, or diagnosis of or treatment for chemical dependency, mental illness, or diminished mental capacity.

4. The lack of good professional character as evidenced by a single incident or an integrated pattern of personal, academic, and/or occupational behaviors which indicates that an individual is unable to consistently conform their conduct to the requirements of the Nursing Practice Act, the Board's rules and regulations, and generally accepted standards of nursing practice including, but not limited to, behaviors indicating honesty, accountability, trustworthiness, reliability, and integrity. All unprofessional behavior will be investigated.

5. Any infraction of the basic medication rights (Right Assessment, Right Drug, Right Dose, Right Route, Right Time, Right Patient, and Timely and Accurate Documentation) could lead to immediate dismissal from the nursing program.

In addition to criteria defined in the College's General Policies above, students may be subject to immediate dismissal from the program for any of the following:

1. Making verbal (non-written) false statements:

"Failing to accurately or intelligibly report and/or document a client's status including signs, symptoms, or responses and the nurse care delivered."

"Giving false testimony or other evidence at any official hearing of the College <u>or giving false infor-</u> <u>mation</u> [in this case regarding the care of a client] <u>to any faculty</u> or staff member <u>acting in the per-</u> <u>formance of their duties</u>." (See VC Handbook.)

2. Falsification of patient's records: "Failing to make entries, destroying entries, and/or making false entries in records pertaining to care of clients."

3. Abandoning clients: Leaving a nursing assignment without notifying one's instructor or in the case of emergency another instructor or a member of the nursing staff on the assigned unit.

UNIFORM, PERSONAL APPEARANCE, AND CONDUCT

Any student who is at a health care facility, in the role of a student, and does not comply with the dress code regulations will be dismissed from the facility immediately. Time lost will be considered a clinical absence.

A professional appearance must be maintained at all times. Students will maintain good personal hygiene. Cleanliness and grooming are necessary to prevent disease transmission and are an indication of professionalism.

VC photo identification badges and holders are required. They must be worn on the uniform (near the insignia) or uniform scrub jacket and must be clearly visible. Photo badge holders will be provided and will be the only acceptable badge holder. Nursing students must adhere to dress code policies of the facilities where they are assigned. Bandage scissors, stethoscope, and penlight should be brought to the clinical setting each clinical day clean and in working order.

Nursing Programs Uniform Guidelines:

Any required uniform deviation listed in the nursing handbook must be approved by the respective Nursing Program Chair.

A complete, clean, and neat uniform is to be worn by the VC nursing student while in the hospital and for campus simulation experiences. The clinical uniform with the embroidered insignia is available at the VC Bookstore. The student uniform is to be worn <u>only</u> when the student is in the role of student nurse. The student must <u>not</u> wear the VC nursing logo or patch when <u>not</u> engaged in VC learning activities.

Students are not permitted to smoke in their clinical uniform under any circumstances. Furthermore, students are not allowed to smell of smoke during their clinical learning experiences.

- The nursing clinical uniforms should be purchased at the VC Bookstore. Uniforms need to fit loosely for freedom of movement and comfort. Shirts worn under the scrub top should be white, grey, or black only. Scrub pants should touch the top of the shoes. Only uniform scrub jackets purchased at the VC Bookstore with the respective nursing insignia and matching the nursing program's uniform color may be worn. The scrub jacket may be worn over the uniform when caring for the patient. The scrub jacket is optional. Students are required to wear clinical uniforms at clinical sites, simulations, check-offs, and clinical labs.
- Medical scrubs should be made of non-transparent material and fit loosely for freedom of movement and comfort. Shirts worn under the scrub top should be white, grey, or black only. Scrub pants should touch the top of the shoes. Students are required to wear medical scrubs or clinical uniforms for all RNSG and VNSG courses and faculty meetings.
- Shoes should be mostly white or mostly black, preferably supportive loafer or oxford type (no open toes or clogs). Athletic shoes should be mostly white leather or leather-like (no canvas).

Brand	Color	Style Number
WonderWink Pro	Steel Grey	Varies – see below
Women		
Pants	Pewter	5419
Тор	Pewter	6319 w/ embroidered insignia
Men		
Pants	Pewter	5619
Тор	Pewter	6619 w/ embroidered insignia

The ADN uniform will be the following brand, color, and style numbers:

The VN uniform will be the following brand, color, and style numbers:

Brand	Color	Style Number
Wonder Wink Unisex	Wine	Varies- see below
Unisex		
Pant	Wine	5855
Тор	Wine	6855

The nursing discipline necessitates high standards for professional conduct and appearance:

- Hair should be neat, clean, and should be pulled back from the face so that it does not interfere with the student while performing procedures or potentially contaminate sterile fields. Students should avoid extremes in hair styles. Hair styles should be such that they do not invite negative feedback from patients or agency staff. There will be no ribbons, bows, or jewelry worn in the hair. Barrettes or other elastic bands used to keep the hair back must be white or neutral color without excessive ornamentation. False eyelashes are not to be worn during clinical hours/rotations.
- Facial hair should not impede personal protective equipment and should form a contact seal with the student's skin. Facial hair must be able to be completely covered by a surgical mask or personal protection equipment. Any facial hair must be fully grown at the beginning of the semester and be well-groomed and closely trimmed; otherwise, the face will be clean shaven.
- Jewelry is limited to the watch, wedding and engagement rings, and earrings. Small studs for pierced ears are permitted. Only one earring in the lobe may be worn. Ear spacers or gauges must be of neutral color. No other visible body piercing, including the tongue, is acceptable. Rings are discouraged because they tend to tear gloves. No necklaces are permitted.
- Student must wear a professional appearing water resistant watch with a second hand to all clinical and laboratory settings. The watch band must be flexible to allow for adequate hand washing.
- Fingernails should be clean, relatively short and well-manicured. Only clear, non-chipped nail polish can be worn with the uniform. Artificial nails, gel set, or painted nails are not permitted.
- Covering of tattoos will follow the policy of the clinical agency.
- Students in the clinical setting must be free from all odors, specifically body, smoke, perfume, cologne, and after shave while in the patient contact areas.
- Public display of affection (PDA) is prohibited.

STUDENT EMPLOYMENT

The performance of students when working for compensation is the legal responsibility of the employing agency and the individual worker. The student may not wear the VC uniform, identification badge, lab coat, or follow their signature with "SN" or "SVN" when working for compensation or any time other than when assigned to a particular facility by authorized VC Nursing faculty. The student will be counseled if class work and/or clinical performance are affected by employment. Nursing students are strongly encouraged to work less than 20 hours per week.

LIABILITY INSURANCE

Students are required to carry liability (malpractice) insurance throughout the nursing program. The insurance is included with registration fees. The liability insurance coverage <u>does not</u> extend to student employment in the health care setting.

CRIMINAL BACKGROUND CHECKS

All VC nursing students must maintain a clear criminal background check (CBC), according to the Texas Board of Nursing (BON) standards for the entire time they are enrolled in the nursing program. If an incident occurs that could change the student's CBC status and/or if the student is arrested, they must notify either the ADN Program or VN Program Chair within 24 hours of the incident. (Students who do not provide this notification may be ineligible for program readmission.) Additionally, the student must notify the Texas Board of Nursing immediately. Once the program is aware of the incident the student **may** be withdrawn from the program. The student's readmission to the program will be determined through collaboration between the student, the respective nursing program, and the BON.

DRUG TESTING

All nursing students must complete the required drug screen test at their own cost by a college approved agency. Nursing students must allow Victoria College to provide their drug screen test results to any clinical facility where the students may have learning experiences. If a nursing student's behavior during clinical warrants additional testing, the student may be required to submit screening samples such as (including but not limited to) urine, blood, or saliva. If nursing faculty determine the need for a random drug screen, this will be done at the student's expense and a copy of the results will be filed in the Dean's Office and may be reported to the Texas Board of Nursing. Furthermore, students may be referred to the Victoria College campus counselor who may recommend a rehabilitation program. Nursing students must understand that at any time they could be prohibited from entering the nursing program and/or dismissed from the nursing program as it pertains to their drug screen test results. Furthermore, students must understand/agree that all clinical agencies, in which the student is assigned, may require random drug tests at their discretion.

STUDENT CONTACT FOR FAMILY EMERGENCIES

Since students may not have cell phones turned on during class nor are they permitted to bring their cell phones to the clinical site, the student's family should contact the appropriate program administrative assistant in case of emergencies. Student will be contacted by their instructor as soon as possible.

SIGNATURE

Due to the legal aspects of clients' clinical records, entries are signed only by the person writing them. A student will sign his or her first initial and last name followed by SN (for ADN student) or SVN (for VN student) when charting. (Example: M.Smith, SN or M.Smith, SVN, as appropriate.) These initials will identify the nursing student throughout the college period.

STUDENTS GIFTS TO FACULTY

The faculty-student relationship is a professional relationship in which gift giving is neither expected nor encouraged.

GUIDELINES FOR STUDENT ACCIDENTS OR INJURY

1. A student who is injured should immediately notify their instructor.

2. If the incident took place in a clinical setting or classroom setting, a Victoria College Incident Report will be completed by the student and submitted to the instructor for review. In addition to the institution's required documentation, the instructor will then submit the original copy of the report to the Director of Nursing/ Dean of Allied Health who will maintain the original.

3. Students who are injured have access to the hospital emergency room, walk-in clinic, or private health care provider for medical care. The <u>student</u> is responsible for all expenses charged.

4. Nursing students are strongly urged to carry a personal health insurance policy.

EXPOSURE TO BLOOD/ BODY FLUIDS

1. In the event of exposure to blood/ body fluids, the responsible faculty member will ensure that the student involved in the exposure completes an incident report according to the facility's policy where the exposure occurred and the Nursing Program Occurrence Report.

2. Testing of the source patient will be completed according to agency protocol and state law. Copies of the source patient's lab work will be forwarded to the student's health care provider. Students who do not have a personal health care provider will be given a list of facilities that can provide a follow-up testing and counseling.

3. <u>All expenses for any initial and follow-up testing and care of the exposed student will be paid by the student.</u>

4. Neither the facility where the exposure occurred nor Victoria College is responsible for initial and follow-up testing or counseling of the exposed student.

5. A copy of the completed Nursing Program Occurrence Report will be forwarded to the Dean of Allied Health/ Director of Nursing.

6. Should a student experience exposure or potential exposure to blood and body fluids in a campus laboratory setting, supervising faculty will implement the appropriate policies and procedures.

CONFIDENTIALITY

Students will abide by the Health Insurance Portability and Accountability Act (HIPAA) regulations in all agencies in which they participate in all clinical experiences. Each student will be asked to sign a Health Information Confidentiality agreement for each applicable clinical agency.

Students who violate the provisions of HIPAA, such as accessing private patient information not pertinent to their role as a student health care provider or violating patient confidentiality, may be dismissed from the program.

<u>Under no circumstance are students to make photocopies or print computerized copies of any por-</u> tion of the client's chart or medical record.

If the student fails to comply with the above regulations concerning photo copying, the nursing student will be notified to make an appointment with the clinical instructor or course coordinator. At this time, the situation will be evaluated by the Program Chair and/or Dean of Allied Health to determine if the student will be allowed to remain in the nursing program.

A sample HIPAA agreement is attached.

HEALTH INFORMATION CONFIDENTIALITY AGREEMENT

This Health Information Confidentiality Agreement ("Agreement") applies to the student whose signature appears below ("Student") and who has access to protected health information ("PHI") maintained, received, or created by FACILITY. As used in this Agreement, "FACILITY" includes any and all facilities listed in Attachment A, attached hereto and made a part hereof by reference, where Student receives training. Attachment A may be updated by Victoria College upon at least ten (10) days' written notice to students. This Agreement shall be effective from the date listed below (the "Effective Date") until Student completes training at every applicable FACILITY.

Please read all sections of this Agreement, in addition to FACILITY's privacy and security policies and procedures, before signing below.

FACILITY has a legal and ethical responsibility to safeguard the privacy of all FACILITY patients and to protect the confidentiality of their health information. In the course of your training at FACILITY, you may hear information that relates to a patient's health, read or see computer or paper files containing PHI and/or create documents containing PHI. Because you may have contact with PHI, FACILITY requests that you agree to the following as a condition of your training:

1. <u>Confidential PHI</u>

I understand that all health information which may in any way identify a patient or relate to a patient's health must be maintained confidentially. I will regard confidentiality as a central obligation of patient care.

2. <u>Prohibited Use and Disclosure</u>

I agree that, except as required for training purposes or as directed by FACILITY, I will not at any time during or after my training at FACILITY speak about or share any PHI with any person or permit any person to examine or make copies of any PHI maintained by FACILITY. I understand and agree that personnel who have access to health records must preserve the confidentiality and integrity of such records, and no one is permitted access to the health record of any patient without a necessary, legitimate, work or training-related reason. I shall not, nor shall I permit any person to, inappropriately examine or photocopy a patient record or remove a patient record from FACILITY.

3. <u>Safeguards</u>

When PHI must be discussed with other healthcare practitioners in the course of my training at FACILITY, I shall make reasonable efforts to avoid such conversations from being overheard by others who are not involved in the patient's care.

I understand that when PHI is within my control, I must use all reasonable means to prevent it from being disclosed to others, except as otherwise permitted by this Agreement. I will not at any time reveal to anyone my confidential access codes to FACILITY's information systems, and I will take all reasonable measures to prevent the disclosure of my access codes to anyone. I also understand that FACILITY may, at any time, monitor and audit my use of the electronic/automated patient record and information systems.

Protecting the confidentiality of PHI means protecting it from unauthorized use or disclosure in any form: oral, fax, written, or electronic. If I keep patient notes on a handheld or laptop computer or other electronic device, I will ensure that my supervisor knows of and has approved such use. I agree not to send patient identifiable health information in an email, or email attachment, unless I am directed to do so by my supervisor.

4. <u>Training and Policies and Procedures</u>

I certify that I have read FACILITY's policies and procedures, completed the training courses offered by FACILITY, and shall abide by FACILITY's policies and procedures governing the protection of PHI.

5. <u>Return or Destruction of Health Information</u>

If, as part of my training, I must take PHI off the premises of FACILITY, I shall ensure that I have FACIL-ITY's permission to do so, I shall protect the PHI from disclosure to others, and I shall ensure that all of the PHI, in any form, is returned to FACILITY or destroyed in a manner that renders it unreadable and unusable by anyone else.

6. <u>Termination</u>

At the end of my training at FACILITY, I will make sure that I take no PHI with me, and that all PHI in any form is returned to FACILITY or destroyed in a manner that renders it unreadable and unusable by anyone else.

7. <u>Sanctions</u>

I understand that my unauthorized access or disclosure of PHI may violate state or federal law and cause irreparable injury to FACILITY and harm to the patient who is the subject of the PHI and may result in disciplinary and/or legal action being taken against me, including termination of my training at FACILITY.

8. <u>Reporting of Non-Permitted Use</u>

I agree to immediately report to FACILITY any unauthorized use or disclosure of PHI by any person. The persons to whom I report unauthorized uses and disclosures for FACILITY is listed in Attachment A.

9. <u>Disclosure to Third Parties</u>

I understand that I am not authorized to share or disclose <u>any</u> PHI with or to anyone who is not part of FA-CILITY's workforce, unless otherwise permitted by this Agreement.

10. <u>Agents of the Department of Health and HumanServices</u>

I agree to cooperate with any investigation by the Secretary of the U.S. Department of Health and Human Services ("HHS"), or any agent or employee of HHS or other oversight agency, for the purpose of determining whether FACILITY is in compliance federal or state privacy laws.

11. Disclosures Required byLaw

I understand that nothing in this Agreement prevents me from using or disclosing PHI if I am required by law to use or disclose PHI.

By my signature below, I agree to abide by all the terms and conditions of this Agreement.

Signature of Student:	
Printed Name of Student:	
Effective Date:	
Address:	
Phone:	

VICTORIA COLLEGE HANDBOOK ACKNOWLEDGEMENT

I hereby verify that I have received the current *Victoria College Nursing Programs Student Handbook*, and agree to abide by all rules and regulations contained therein for the entire time I am enrolled in the nursing program. I also agree to abide by the rules and regulations to delineated in the *Victoria College Catalog* and the *Victoria College Student Handbook* while I am a student at Victoria College.

I have read, understand, and agree to abide by the orientation information provided by the clinical facilities where I may have learning experiences.

By signing this document I also agree to allow Victoria College to provide to any clinical facility where I may have learning experiences any documentation required by that facility for student nurses such as, but not limited to, immunization records, TB test results, etc.

The college reserves the right to make changes to this handbook as necessary and appropriate.

Student Name (Please print)

Date

Student signature

NOTIFICATION TO STUDENTS

1. The Allied Health Dean has the authority to withdraw any Allied Health student form a course that requires direct patient care for all of the following reasons (but not limited to) safety concerns, violation of agency's policies or procedures, violations of state or federal laws, or any violation of the rules, policies, or standards noted in the Victoria College/Allied Health/Nursing Program Handbook.

2. In accordance with Texas Occupations code, Chapter Fifty-three, all applicants and enrolled students in pursuit of an occupational degree with licensure must be notified of possible ineligibility. Admission to and/or complete of a Victoria College Allied Health program does not ensure licensure eligibility. An 'occupational license' is a license, certificate, registration, permit or other form of authorization required by law or rule that must be obtained by an individual to engage in a particular business or occupation. Moreover, ineligibility is determined by the corresponding occupational organization that provides approval for the licensure or examination for licensure. Some reasons for ineligibility could be, but are not limited to, an overall criminal history, criminal conviction, substance abuse, a mental health issue or certain singular criminal or other acts in violation of the current guidelines or state/local restrictions issued by the applicable licensing authority. Any student or prospective student declared ineligible has the right to request a criminal history evaluation letter from the licensing agency.

3. All Allied Health students are responsible for maintaining a clear criminal background check (CBC) and/or reporting a change with their CBC status to the appropriate licensure entity for their discipline. Failure to contact the licensure institution may result in the student/graduate being ineligible to take the licensure exam or attain licensing. The student's signature below indicates his/her acknowledgement of the responsibility to report his/her status to the appropriate entity, thus Victoria College is not responsible for his/her failure to report.

A student signature is required to demonstrate acknowledgement of these notifications.

Applicant/Student signature

Date