I, __________________________, have received a Maria College Practical Nurse Certificate (PNC) Program Handbook and understand it is my responsibility to read and know the policies in this handbook during my course of study in the PNC Program.

Student Signature:____________________________

Date:__________________________________
Dear PNC Student:

Welcome to the Maria College Practical Nurse Certificate Program. This Manual has been prepared for your use and reference. The Manual contains those policies and procedures that are applicable to the Program of Nursing. General College Policies are found in your Student Handbook and the Maria College catalog.

Please keep the Manual as a reference source for any questions you may have as to specifics which apply to Nursing.

This handbook contains valuable information to facilitate your achievement of academic and professional excellence as a student nurse. Please keep it as a reference throughout your nursing education. It is a supplement to the College Catalog and College Student Handbook. All information contained in this handbook is subject to change. Changes will be communicated as they occur.

Elizabeth J. Heywood, RN, PhD.
Interim Nursing Program Chair

Patricia A. Washco-Monasterial, RN, MSN
Director, PNC Program


Student Handbook Disclaimer

Not withstanding anything contained in this Student Handbook, the Nursing Program expressly reserves the right, wherever it deems advisable, (1) to change or modify its schedule of tuition and fees, (2) to withdraw, cancel, reschedule or modify any course, program of study, degree or any requirement in connection with the foregoing, and (3) to change or modify any policy. Please be advised that, due to printing deadlines, information in this Student Handbook may be outdated. It is the responsibility of each student to ascertain current information that pertains to the individual’s program, particularly with regard to satisfaction of degree requirements, by consultation with the student’s advisor, the Program Chairperson, the office of the Academic Dean and other appropriate offices such as the Registrar or Financial Aid.

In preparing this Handbook, efforts are made to provide pertinent and accurate information; however, MARIA COLLEGE assumes no responsibility for Handbook errors or omissions.
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Maria College Program of Nursing

Mission of Maria College

Maria College of Albany is a private college that offers a Baccalaureate Degree in Nursing and Associate Degrees in Accounting, Early Childhood Education, Education Transfer Program, General Studies, Liberal Arts, Management, Nursing, Occupational Therapy Assistant, and Paralegal.

Its curriculum is grounded in the humanities, seeking to instill in its graduates respect for the dignity of each person and the ability to transform learned skills into caring service. The ideal of “service to others” is rooted in the Judeo-Christian tradition and the ideals of the Sisters of Mercy who founded and sponsor the College.

The intent of the College is to deliver these programs with high academic standards, convenient scheduling formats for students of any age who will benefit from small classes, and a warm, encouraging environment.

The Mission of the Maria College Nursing Program

The Mission of the Nursing Department is to promote lifelong learning through education reflective of the Judeo-Christian tradition and the ideals of the Sisters of Mercy. Individuals from diverse backgrounds are educated through rigorous academic programs offered in a supportive environment that fosters the transformation of learned skills into caring nursing practice.

Philosophy of the Maria College Nursing Program

The philosophy of the Nursing Program supports and compliments the mission of Maria College. The works of Florence Nightingale and Jean Watson shape the philosophy of the Nursing Program. Based on their work, the faculty have identified that human needs, the environment, the nursing process, caring, critical thinking, and the roles of the nurse are the foundation for the conceptual framework for the nursing program curriculum. The metaparadigm of nursing provides a foundation for the nursing faculty’s beliefs concerning nursing, the environment, human beings and health, as well as their beliefs about education.
The faculty believe that nursing is the professionalization of the human capacity for caring. Caring behaviors respect client choices related to cultural values, beliefs, and lifestyle. Nursing is an art and science, constantly dynamic and evolving, which utilizes the nursing process as a systematic approach to nursing care. Nurses are responsible for ethical practice in relation to their clients, the public, their colleagues, and themselves. In addition, the practice of nursing ensures advocacy for those clients who are unable to advocate for themselves. Furthermore, nurses have a professional responsibility to continually seek to improve their clinical judgment and practice through reflection, evidence-based practice, and life-long learning.

The faculty believe that the environment includes all conditions, internal and external, surrounding and affecting the individual. The environment can be manipulated to place a client in the best possible condition for health promotion, healing and/or a dignified death.

The faculty believe that human beings are individuals, families, groups, and communities who coexist in diverse, multicultural societies. These human beings are individuals who are holistic; possess integrity, dignity, free will, and the ability to learn. Nursing is a caring profession with the goal of meeting human needs that have an impact on health and illness.

The faculty believe that health is the extent to which people are able to realize their aspirations, satisfy needs, and to change or cope with the environment. Health is a positive concept that emphasizes both personal resources and physical capacities. Health is not limited to the absence of disease; a person can experience good health in the presence of illness. Promoting health involves enabling people to increase control over and to improve their health.

The faculty believe that it is their mission to educate people from diverse backgrounds. They strive to create an environment that is supportive and fosters mutual respect, genuine
relationships, encourages personal and professional growth and instills in students the desire for life-long learning. Nursing, as an art and science, uses the humanities and sciences provide a foundation for nursing education.

The practical nurse functions in the roles of provider of care, manager of care and member within the discipline of nursing. The PNC faculty believes that within these roles the practical nurse is prepared to provide direct care in a variety of settings. These roles are actualized through the following core competencies: professional behavior, clinical competency, nursing care concepts, advocate of care, communication, clinical decision making, teaching/learning, collaboration, and caring interventions.

**Goals of the PNC Program**

The goals of the PNC program are to:

1. Support the mission and goals of Maria College.

2. Educate students for entry level positions in current technologically complex health care settings. (As measured by a graduation rate of 60%).

3. Provide a practical nursing curriculum that meets the needs of the local community agencies and provides caring service to the community (As measured by employment rate of 90%).

4. Prepare the practical nurse to be eligible to take the NCLEX – PN Examination. (As measured by a NCLEX pass rate of 97.1%).

5. Foster the concept of lifelong learning for both personal and professional growth. (As measured by continuing education/professional activity rate of 80%).

6. Provide an educational program that prepares the graduate to accomplish their career goals. (As measured by student program satisfaction rate of 85%).
Conceptual Framework

The conceptual framework of the PNC Program is derived from the philosophy of the Maria College Nursing Program. The major foci are human needs, environment, the nursing process, critical thinking, caring, and the roles of the nurse.

The PNC Program faculty envision the practical nurse as a caring professional who effects the meeting of human needs as they are impacted by the external and internal environment. The practical nurse utilizes the nursing care concepts, in collaboration with the RN, to critically think while functioning as a care provider, manager of care and member of the discipline of nursing.

Student Learning Outcomes

After completion of the Practical Nurse Certificate Program, the graduate will be able to:

1. Demonstrate clinical competency while caring for clients and families with health problems in various environments.

2. Utilize data gathering and the nursing process to identify basic needs for clients in various environments and reports deviations from the norm.

3. Reinforce essential elements of teaching-learning to enable clients to make educated decisions about basic health promotion/maintenance and self care by providing...
health information from a designated teaching plan.

4. Communicate in a collaborative manner with the clients and members of the health care team to improve client outcomes.

5. Incorporate critical thinking into clinical decision making when implementing plans of care, assisting in the planning and evaluation of care for clients and families in a variety of environments.

6. Utilize management skills under the directions of the RN/appropriate health care provider.

7. Demonstrate professional behavior in an accountable, responsible manner as a member of the profession of nursing.

**Concepts of PNC Education**

The PNC faculty believes that the study of the humanities, social sciences and biological sciences provide the student with an appreciation of and respect for the human experience and dignity of the individual, which is central to nursing. Knowledge, skills, and beliefs acquired assist the student to develop critical thinking and decision making skills essential to nursing practice.

The faculty believes nursing education involves mentoring and role modeling for nursing students. The faculty believes that nursing education facilitates the learning of scientific principles and ability to transfer learned skills into caring service. Recognizing that students have unique and varied learning styles, the PNC nursing faculty strives to establish a caring environment that maintains the cultural integrity of students and nurtures commitment to the learning process. We believe this learning is a life long process that takes place in the learner, occurs at different rates in learning, and results in behavior change. The PNC faculty fosters the
student’s growth through enhancement of life experiences and social/cultural/ethnic diversity. Nursing education is based on scientific principles and clinical experiences for the mastery of skills. Nursing education is a synthesis of clinical experience and classroom learning.

The PNC faculty recognizes the necessity for an organizing framework for teaching and testing. Bloom’s Taxonomy of Educational Objectives for the cognitive, affective, and psychomotor domains is used for stating level and course objectives. Bloom’s Taxonomy is a classification of learner behaviors representing intended outcomes of educational experiences. The behaviors are progressive in nature and are categorized from simple to complex, and from concrete to abstract. For instance, if more complex behaviors such as synthesis are seen, simple behaviors such as recognition must to some extent also be present. The logical, sequential and consistent nature of the classification system suggests methods for curriculum development and gives faculty guidance for providing appropriate learning activities and evaluation methods.

**Role of the PNC Program Director**

The role of the PNC Program Director is to develop and facilitate the activities of the didactic and clinical nursing courses. This role involves: course revisions, trending and evaluation of data, assisting in the faculty evaluation process, problem solving student/course issues; facilitate the testing process, coordination of student absence and make-up schedules. Please feel free to call the PNC Program Director at any time.

**Faculty/Student Responsibilities**

Teaching and learning are crucial activities for an educational program. The teaching-learning process is interactive and occurs between a teacher and learner when specific objectives or desired behavioral changes are achieved.
The PNC faculty member as facilitator will:

1. consider the needs of the learner when formulating course objectives;
2. provide an educational environment that is conducive to effecting behavioral changes;
3. acknowledge the individuality of the student;
4. present appropriate content in an educationally sound manner;
5. utilize varied teaching techniques that are appropriate to the identified objectives;
6. evaluate the learner based on identified learning objectives;
7. serve as a role model as a member within the profession of nursing;
8. encourage continuing growth and development;
9. assist the learner with setting objectives for professional growth and development;
10. participate in evaluating teaching effectiveness.

The student as participant will:

1. identify learning needs;
2. work actively toward identified learning objectives;
3. assume responsibility to synthesize knowledge presented;
4. evaluate learning based on identified learning objectives;
5. develop behaviors/skills appropriate to nursing practice;
6. take responsibility for professional growth and development;
7. participate in evaluation of teaching-learning process.
Clinical Expectations

Core performance standards

Core performance standards define the cognitive, sensory, affective, and psychomotor performance standards that must be meet to successful perform the nursing program’s competencies and meet course outcomes. Students must be capable of meeting the eight core performance standards with reasonable or no accommodations for progression in the nursing program. See these performance standards in Appendix E.

Clinical Roles and Responsibilities

The clinical roles and responsibilities have been established as minimum expectations for the faculty and student. These minimal expectations have been developed to help the faculty and students involved with the client's care to have an understanding of what is expected of them. Expectations are further defined, based on course objectives in each course evaluation tool. In addition various facilities have developed roles and responsibilities for the student, faculty, manager and co-assigned RN that the faculty and student nurse are expected to meet. From understanding comes good communication and interaction that benefits the client. Role responsibilities are categorized as:

1. PROVIDER OF CARE
2. MANAGER OF CARE
3. MEMBER WITHIN THE DISCIPLINE OF NURSING

| PROVIDER OF CARE |
|------------------|-----------------|
| **Faculty**      | **Student**     |
| Identify student learning needs, clinical focus and communicates to co-assigned nursing staff. | In collaboration with faculty, communicate procedures which are to be accomplished and arrange supervision. |
Discuss quality of care, standards and policies and procedures with nurse manager.

Identify and communicate weekly clinical focus and clinical objectives to students and co-assigned nursing staff.

Identify student assignments and related responsibilities and ensure that student and co-assigned staff member are aware of student's role in nursing care assignment.

Communicate to co-assigned staff regarding student's responsibilities for completing client assignment.

Supervise and evaluate student documentation.

Maintain and demonstrate competency in skills according to recognized standards of nursing care and agency policy.

Demonstrates knowledge and competency in assessing and planning for total client needs.

Communicates to co-assigned nursing staff what procedures will be done by student.

Supervise students in the performance of treatments, procedures and nursing interventions.

Communicate clinical objectives to nursing staff.

Collaborate with the health care team to receive, and give appropriate information pertinent to assigned clients.

Accurately communicates care using agency documentation system.

Communicate pertinent data to faculty and co-assigned nursing staff.

Address environmental issues when providing care to clients.

Accept responsibility for own actions.

Utilize college laboratory to achieve clinical competencies.

Prepare for all aspect of client care.

Complete procedures and care according to accepted nursing standards and agency policy in a caring manner.

Communicate client response upon completion of procedures to faculty and co-assigned nursing staff.

Utilizes the nursing process to provide client care safely and accurately.

Maintains a safe environment.

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<thead>
<tr>
<th>Faculty</th>
<th>Student</th>
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<tr>
<td>Supervise the student in the nursing process to provide client care in a caring manner.</td>
<td>Achieves clinical objectives.</td>
</tr>
<tr>
<td>Supervise the student in the preparation and administration of medication.</td>
<td>Prepares appropriately for administration of medications.</td>
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<tr>
<td>Evaluate care completed by students.</td>
<td>Reinforces appropriate teaching-learning as determined by plan of care for assigned clients.</td>
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<tr>
<td>Assign clients according to student learning needs and clinical objectives.</td>
<td>Participate actively in conferences in a professional manner.</td>
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<tr>
<td>Conduct pre- and post conferences related to identified clinical focus. Supervise student learning activities.</td>
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<tr>
<td>Act as a role model and facilitate student learning utilizing the nursing process.</td>
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**MEMBER WITHIN THE DISCIPLINE OF NURSING**

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<thead>
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<th>Faculty</th>
<th>Student</th>
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<tr>
<td>Act as role model for students in professional activities.</td>
<td>Arrive on time and prepared for effective care.</td>
</tr>
<tr>
<td>Act as a student advocate to facilitate the accomplishment of goals for student learning.</td>
<td>Collaborate with the faculty and co-assigned nursing staff member to achieve client outcomes.</td>
</tr>
<tr>
<td>In conjunction with the co-assigned nursing staff member and student, ensure that nursing care accurately and efficiently completed.</td>
<td>Complete assignments accurately and efficiently.</td>
</tr>
<tr>
<td>Act as a client advocate. Act in a professional manner.</td>
<td>Act as a client advocate. Act in a professional manner.</td>
</tr>
<tr>
<td>Demonstrate knowledge of legal and ethical role responsibilities.</td>
<td>Practice legal and ethical role responsibilities.</td>
</tr>
<tr>
<td>Maintain confidentiality of client information based on standards of care</td>
<td>Maintain confidentiality of client information based on standards of care</td>
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**Clinical Agencies**

A variety of clinical agencies are used for clinical experience to meet the learning needs of the students. Clinical assignments are randomly made and **special assignments will not be granted**. During clinical experience faculty will assign students to a client or clients to whom the student will be providing nursing care. The faculty will provide guidance and supervision for
the students. A specific student to faculty ratio is maintained to ensure availability of individual assistance. For this reason the student will be assigned to a clinical section each semester. To broaden clinical experiences, we ask that students not participate in a clinical experience on a unit in which they are employed. It is the student’s responsibility to notify the Clinical Placement Director of this conflict so adjustments in clinical assignments may be accommodated.

While in the clinical area, students are expected to be alert, oriented and have the physical capacity to provide safe client care. If in the clinical faculty’s judgment the student is unable to provide safe client care:

1. The student will be asked to leave the clinical area.
2. The clinical time will be made up per policy.
3. An incident report will be completed and filed.

Criminal background check

The nursing program does not require a criminal background check for admittance, but the program’s educational requirements include placement at one or more hospitals or other off-campus clinical sites. These sites may require a student to undergo a criminal background check before the student can be placed for clinical experience. If, based upon the results of a criminal background check, the site determines that a student’s participation at the clinical site would not be in the best interest of the site, the site may deny that student admission to the clinical site at any time.

Please note that if a clinical site determines that you may not take part in the clinical experience based on the results of a criminal background check, the student must be flexible in working with the faculty for an appropriate clinical placement. If you are unable to complete your clinical course requirements you will not be able to continue in the Nursing program. It is important for you to consider this before you enroll in the Nursing program. Maria College has
no obligation to refund your tuition or fees or to otherwise accommodate you in the event you are ineligible to complete your course requirements based on the results of a criminal background check, or if you are denied a license to practice nursing.

**Clinical Agency Requirements**

The PNC Program is committed to providing meaningful experiential learning opportunities for all students enrolled in the program. The PNC Program has entered into agreements with agencies to assist in providing student learning opportunities. As a part of these agreements, it is a requirement for the PNC Program to maintain records that assure that each student meets the agency’s health and other requirements. In addition there may be agency specific requirements with which the student must comply to participate in the clinical experience.

1. **Students and faculty** must submit the appropriate Physical Exam Form to the PNC Nursing Program **prior** to the clinical experience.
   a. The Physical Form requires:
      - Physical assessment
      - Description of any physical limitations
      - Results of Mantoux-PPD test OR recent chest x-ray.

      **Dates of vaccination OR antibody titer levels with accompanying laboratory report for:**

      - Measles
      - Rubella
      - Rubeola
      - Varicella
      - Tetanus (within last 10 years).

      Initiation of the Hepatitis B series of injections with dates of inoculation(s) **OR** a signed Declination Statement waiver.

   b. **ANNUALLY** - the student must submit:
      - a completed physical form with
      - results from Mantoux-PPD test – OR chest x-ray

   c. Submission of a completed Physical Form, with accompanying laboratory reports by
the required due date results in clearance for experiential learning opportunities in the specific clinical sites. If completed information is not provided prior to the required date results in clearance for experiential learning opportunities in the specific clinical sites. If completed information is not provided prior to the required dates, the student will be prohibited from attending clinical experiences and will be required to attend a clinical make-up. (A fee will be charged for each clinical make-up.) Faculty will be notified if a student is not in compliance with this requirement and cannot attend clinical.

2. Certification in Cardio-pulmonary Resuscitation (CPR) – Adult & Child OR Professional

The student and faculty must provide a copy of a current CPR card from either AHA or the American Red Cross before attending clinical experience. Web-based certifications are not accepted for CPR certification.

a. A copy of both sides of the CPR card is required.
b. The student may select one of the following courses in which to become certified:
   1) Professional Rescuer course offered through the American Red Cross which provides one year of certification.
   2) Health Care Provider course offered through the American Heart Association which provides two years of certification.

c. If completed information is not provided prior to the required dates, the student will be prohibited from attending clinical experiences and will be required to attend a clinical make-up. (A fee will be charged for each clinical make-up). Faculty will be notified if a student is not in compliance with this requirement and cannot attend clinical.

Clinical Dress Codes

To promote the professional image of nursing, a dress code is in place for the safety, comfort and asepsis needs of the client and student. Therefore, each student is required to wear the regulation Maria College uniform in the designated clinical area and adhere to the dress code.

The following guidelines must be followed. If the guidelines are not followed, the student will be asked to leave the clinical experience at the expense of a clinical make-up.

**Uniform:** Clean and neat Maria College regulation uniform with a Maria College patch affixed to the upper external sleeve. White socks and white shoes. White scrub pants are worn as a part of the uniform. Female students choosing to wear white uniform skirt wear plain white stockings with no ankle socks over stockings. No form fitting uniforms.
White Shoes: No canvas sneakers. Shoes are to be polished, have clean white shoe laces and have appropriate walking heel. No platform soles, sandals, clogs, open toes, heels or casual shoes may be worn.

Scrub Jacket: No sweaters are allowed in clinical. White scrub jackets can be worn. The scrub jackets must have a Maria College patch affixed to the upper external sleeve.

Undergarment: Appropriate undergarments are expected (white or flesh-colored). Completely white turtlenecks or white long sleeve shirts may be worn under uniforms. No writing or symbols on shirts are to be visible under the uniform.

Photo ID: Maria College student IDs and facility-required identification badges must be worn and visible at all times.

Jewelry: Limited to one (1) plain band ring/wedding ring, one (1) pair plain small earrings in the ears lobes, and watch with minute hand. No other jewelry is allowed. No visible body piercing except what is described above.

Hygiene: Nails must be natural, unpolished, and no longer than fingertip length to avoid scratching or injury to the client. Acrylic nails and tips are not permitted. Makeup should be used with discretion and minimally applied.

Hair must be clean and neatly arranged with no extremes of style or color. Hair must be clear of the uniform collar and be controlled in such a way that it will not cause contamination. No hair accessories such as decorative handkerchiefs, etc. are allowed.

Body odor can be offensive because of the close physical relationship with clients. Therefore no perfume, cologne or aftershave is permitted. Noxious odors such as poor dental hygiene, body odor, and cigarette smoke will not be tolerated.

Men shall be clean shaven and/or beards and mustaches neatly kept and trimmed.

Tattoos: If visible, tattoos or body art is required to be concealed in the clinical area.

Eyeglasses: Glasses should have clear lenses - no tinted lens. Any student needing corrective
lenses will be given one week to meet their reading needs.

**SALT Class:** Students must wear their uniform top to SALT classes with their name badges and bring their lab supplies as assigned.

If the dress code is not adhered to as described in the above standards or does not promote the professional image of nursing:

1. The faculty will ask the student to correct the problem.
2. If the problem cannot be corrected at the time of the incident, the student will be sent off the clinical area and time off the unit will be made up per policy.
3. A critical incident form will be completed and filed.

**Maria College Class Attendance Policy**

PNC Program students are expected to follow the Attendance/Absences Policy requirements as stated in the Maria College Catalog.

**Clinical Absences**

Clinical absences must be made up at a time designated by the faculty, usually at the end of each semester. A fee will be charged for each clinical make-up. Clinical absences will jeopardize continuation in the PNC Program:

1. A **second** clinical absence will initiate a **written warning of probation**.
2. A **third** clinical absence in a course will result in **dismissal from the program**.
3. A **pattern of clinical absences in successive nursing courses** will result in probation.
4. If a student must leave the clinical area for any reason, the student will be **required to makeup a full clinical day**.
5) Any student arriving **15 minutes or more late** to the clinical area will be asked to leave the clinical area and will be **required to make-up a full clinical day**.

6) Students who have experienced diarrhea, vomiting or fever in the past 24 hours or exposure to infectious disease should not attend clinical.

**If a student is unable to attend on the assigned clinical day, the student will call 861-2551 and leave a message on Voice Mail. Messages may be left on this voice mail after office hours.**

**Include the following information in the message:** name, clinical faculty, clinical facility, day/date of clinical and reason why you are unable to attend. The clinical faculty may request additional notification of the faculty member by the student.

**SALTs Absences**

Laboratory attendance is a required component of the PNC program. Absences from lab will jeopardize continuation in the PNC program. Attendance for the full 2 hours of all lab classes is expected. Lab attendance is counted as clinical time and the following rules apply:

1) **One lab absence per course is allowed without penalty.**

2) A **2nd lab absence is a course will result in a written warning.**

3) A **3rd absence in a course will result in dismissal from the PNC program.**

4) A **pattern of lab absences in successive PNC nursing courses will result in probation.**

5) **Leaving a lab class for any reason will be considered an absence.**

6) **Arriving 10 minutes after the start of the lab class is considered an absence.**

**Transportation**

Transportation to and from scheduled clinical agency is the responsibility of the student.

**Remedial Work**

When a student demonstrates inability to meet expected behaviors, the faculty will issue a
remedial assignment sheet indicating areas of deficiency. The student is required to correct these deficiencies by date indicated on the sheet. The remedial assignment sheet is to be signed by the laboratory faculty and returned to the clinical faculty who issued the original sheet. The laboratory faculty will have a copy of the sheet placed in the student file. The clinical instructor will attach the remedial sheet to the student’s clinical evaluation. Failure to complete remedial work in designated time will prevent attendance at next clinical experience and count as a clinical absence.

Cell Phone Policy

Cell phones must be turned off while students are in clinical setting, classroom and lab. The student must adhere to the clinical facilities’ cell phone policy. Students may use cell phones during break in the appropriate areas.

Clinical Grading

Satisfactory Progress

In order to complete the clinical component of a nursing course successfully, the student must achieve a rating of “Safe” in the course’s clinical component. The student’s clinical progress is measured by the course outcomes and clinical competencies as outlined on the clinical evaluation tool. This tool is specific for each clinical nursing course. A rating of “Safe” is achieved when the student consistently meets all clinical expectations.

Periodically, a verbal clinical progress review is held with each student to identify strengths and areas for growth. The student’s clinical performance is documented on the course-specific clinical evaluation tool at the end of the clinical rotation. The student is provided with the opportunity to write any desired comments on the clinical evaluation tool and asked to sign the document. The student’s signature indicates that the student has participated in the meeting
and has seen the clinical evaluation tool. The signature does not imply agreement. The completed clinical evaluation is usually based on the last few weeks of the clinical experience.

**Unsatisfactory Progress**

Unsatisfactory progress consists of a rating of “Unsafe” for any of the following behaviors:

- Identified as “Unsafe” in any area of the delineated clinical components
- Fails to meet clinical objectives
- Behavior that is evaluated by the faculty as detrimental to the client.

A student whose clinical performance is unsafe will first be given either a clinical warning or placed on Clinical Probation. Clinical failure results when a student does not satisfactorily meet the terms of the clinical probation or does not successfully achieve a grading of “Safe” in all areas. The faculty should notify the Director if a student is at risk of receiving an “Unsafe” rating.

**Clinical Warning**

A student is given a clinical warning by the PNC Director with input from the Clinical Faculty, and/or the Chairperson, for less than safe performance in the clinical setting. The student is provided with

1. written documentation which includes the course and clinical objectives on the clinical evaluation tool which were unsafe;
2. the time limit of the clinical warning;
3. terms of the student remedial plan; and
4. by whom the student will be evaluated during the term of the clinical warning.
Once the terms of the clinical warning have been met, the PNC Director and/or the Nursing Department Chairperson will determine when the student is performing at a safe level. Should the student’s performance remain at an “Unsafe” level following the completion of terms of the Clinical Warning, the student will be placed on Clinical Probation. Once the student has been placed on Clinical Warning for any reason, the next occasion of less then safe performance in the clinical setting will advance the student to Clinical Probation or Clinical Failure depending on the occurrence.

**Clinical Probation**

A student is placed on Clinical Probation by the PNC Director and/or the Nursing Program Chair for:

- Failure to remediate performance according to the terms of the Clinical Warning
- Ongoing inconsistencies in meeting clinical and course objectives
- Behavior which is evaluated by the faculty as detrimental to the client.

A student placed on Clinical Probation is provided with

1. written documentation identifying the objectives on the clinical evaluation tool which are unsafe,
2. terms of the remedial plan,
3. the time limit of the Clinical Probation, and
4. by whom the student will be evaluated during the term of the clinical probation.

Once the terms of the clinical probation have been met, the PNC Director will determine if the student is performing at a safe level. Two (2) consecutive semesters of probation will not be
allowed. Should the student’s performance remains at an unsafe level following the completion of the clinical probation, the student will receive a clinical failure.

**Clinical Failure**

A student receives a clinical failure when evaluated as demonstrating either of the following:

- A pattern of unsatisfactory performance of the clinical objectives
- Grievous incident: A grievous incident is defined as any action, or inaction, on the part of the student which threatens another person’s physical and/or emotional well being. This includes incidences where faculty has intervened to prevent the error from occurring.

Performance records such as the clinical warning and the clinical probation will be maintained in the student’s file. When a student receives a clinical failure, the student will fail the course, regardless of the current classroom grade and be dismissed from the nursing program.

**Nursing Student Evaluations**

**Academic/Competency Grading**

<table>
<thead>
<tr>
<th>LETTER GRADE</th>
<th>NUMERICAL GRADE</th>
<th>CLINICAL PERFORMANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>92.6-100</td>
<td>Demonstrates expected level of competence on clinical performance summary with a “safe” rating and is successful in skills competency by 2nd attempt.</td>
</tr>
<tr>
<td>A-</td>
<td>89.6-92.5</td>
<td></td>
</tr>
<tr>
<td>B+</td>
<td>86.6-89.5</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>82.6-86.5</td>
<td></td>
</tr>
<tr>
<td>B-</td>
<td>79.6-82.5</td>
<td></td>
</tr>
<tr>
<td>C+</td>
<td>76.6-79.5</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>72.6-76.5</td>
<td></td>
</tr>
<tr>
<td>I</td>
<td></td>
<td>Has not completed course requirements.</td>
</tr>
</tbody>
</table>

Students must maintain a C+ average to continue in the Nursing Program
<table>
<thead>
<tr>
<th>Grade</th>
<th>Range</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>D+</td>
<td>66.6-69.5</td>
<td>Clinical failure and/or failure of skills competency assessment 2nd time.</td>
</tr>
<tr>
<td>D</td>
<td>62.6-66.5</td>
<td></td>
</tr>
<tr>
<td>D-</td>
<td>59.6-62.5</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>Below 59.5</td>
<td></td>
</tr>
</tbody>
</table>

### Grading Process

A grade of “C+” is required in all nursing courses with a clinical component to continue in the program. The final grade for PNC 101 is a composite of the numeric theory testing grade and passage of the basic skills measurement. The final grade for PNC 102, 103 and 104 is a composite of the numeric theory testing grade and a safe clinical evaluation is also required. Nonclinical nursing courses and courses required by the nursing program require successful completion with a grade of “C+.”

### Rounding of Grades

Only the final grade for the course will be rounded. Final grades will be calculated to the tenth if there is a partial grade. Grades 0.6 and greater will be rounded up to the next highest whole number. Grades 0.5 and lower will be rounded down to the next lowest whole number.

### Examinations

Nursing courses PNC 101, 102, 103 and 104 have five unit examinations each worth 12% of the final course grade and a cumulative final examination worth 35% of the final course grade, and a group or individual presentation worth 5%. If a unit examination is missed by a student, the percentage worth of that exam grade will be added to the final exam grade. Examination grades cannot be dropped from the final grade after the examination has been taken. The final exam must be taken to pass the course.

Students are expected to take the exams at regularly scheduled exam times. Students may
take the exam at a non-regularly scheduled class time **only** with faculty approval. Students may utilize Maria College approved calculators in testing situations. Students are not permitted to share calculators during testing. Students may not use cell phone, PDA technology and programmable calculators (also called graphing calculators, which allow storage and retrieval of data) in testing situations.

Disputed grades must be addressed by the student to the full time faculty within five business days of the receipt of the exam grade. The disputed grade must be addressed by the faculty within five business days of the complaint.

**Dosage Calculation**

A dosage calculation exam must be passed in PNC 101, 102, and 103 prior to the final in each semester. Passing for dosage calculation is a grade of 100. Dosage exams will be given once a week at specific times, which will be announced at the beginning of each semester.

**ATI Policy**

Assessment Technology Institute (ATI) offers a comprehensive assessment designed to increase the students’ pass rates on the nursing licensing exam. ATI tools can help students prepare more efficiently as well as increase confidence and familiarity with content and testing. These tools include DVDs, web-based practice tests and books on specific content. These materials are distributed to the students by the faculty each semester as described by the attached grid. (See Appendix D).

Nurse-educator content experts from around the US participate in setting a national standard for the ATI score on each of the content mastery examination that relate to different levels of proficiency. These proficiencies are:

- **Proficiency Level 3**: indicates the student is likely to exceed NCLEX performance standards in this content area
- **Proficiency Level 2**: indicates the student is fairly certain to meet NCLEX performance standards in this content area
• Proficiency Level 1: indicates the student is likely to just meet NCLEX performance standards in this content area. Students are encouraged to develop and complete a rigorous plan of focused review in to achieve a firmer grasp of this content
• Below Proficiency Level 1: indicates a need for thorough review of the content area. Students are strongly encouraged to develop and complete an intensive plan for focused review.

The student is responsible to develop a plan to complete a focused review and should meet with their advisor to discuss the plan. In developing this plan the student should reflect and consider possible reasons for the low score and methods to improve study habits, test taking strategies, time management and retention of knowledge.

Each semester students are provided with codes for practice exams before the proctored exam is given. The practice exams may be taken multiple times and the student is encouraged to repeat the practice exams until a grade of 90% is obtained.

The proctored ATI exams grade will count for 10% for a grade for each course based on the attached grid (Appendix D). The grades for the ATI will be based on proficiency levels

• Proficiency Level 3 – ATI grade 100%
• Proficiency Level 2 – ATI grade 90%
• Proficiency Level 1 - ATI grade 75%
• Below Proficiency Level 1: ATI grade 60%

Students will sign up to take the proctored exam at scheduled times. The dates of the exams will be listed in the course syllabus. All proctored exams are taken on line in the Administrative Building. The taking of the ATI exam is a part of the course requirements. Proctored exams may only be taken once and must be taken at the scheduled time. ATI tests grades are not curved. If you have been approved for additional test taking time please let the Nursing Chairperson know if you want it for the ATI test. The Chair needs to be notified 24 hours before the test for extended time to be given for the ATI test.

ATI results for the proctored exam will be available when all of the students have completed the exam. Students will not discuss the exam with other students until the exam results have been posted.

**Basic Skills Measurement**

In PNC 101, a basic skill measurement is required prior to beginning the clinical experience. The student must pass this measurement before starting at the clinical facility. If this measurement is not passed, the student will receive an “incomplete” for PNC 101, will not attend
clinical at the clinical facility and this will be a clinical absence that will need to be made up.

**ATI Skills Modules**

ATI Skills Modules will be assigned to all students as part of the lab requirements for students in the PNC program. Skills Modules are on-line, interactive learning modules and access must be purchased in the bookstore. Students will receive a schedule for assigned Skills Modules in their course syllabus. Skills Modules must be completed before the assigned PNC skills lab. Students will complete a pre-test, all of the assigned on-line learning materials, and a post-test. The **minimum required grade for the post-test is 90%**. The test may be repeated until the 90% is achieved. Upon successful completion of the post-test, students must print a completion certificate to be handed to faculty at the start of the lab. Faculty will track the time that the student engaged in each module to ensure that the module was completed in its entirety.

All completion certificates for ATI Skills Modules will be collected at the start of the clinical lab or SALT period. An inability to turn in the certificate at the start of the session will result in a clinical absence (see Absence policies for clinical lab and SALT). No exceptions will be made. As mentioned before in order to partake in the skills lab you MUST submit your certificates of completion (which you can print at the end of the skills module) to the lead faculty member each day. That certificate becomes your “ticket” into skills lab.
Student Resources

College Nursing Laboratories

The nursing laboratories are available in Marian Hall. At certain times the college laboratory will not be available for use. Students will be notified of these exceptions.

Every effort is made to maintain the lab in optimum working order. Within the lab the student will find resources to help enrich and expand knowledge and clinical expertise.

Equipment is for use in the college lab only. Students are expected to report to faculty any broken laboratory equipment and be familiar with rules of the college lab.

In addition to the nursing laboratories, there is an Audio-Visual classroom with videotapes, CDs and computers that are available to nursing students to address learning needs and class assignments.

E-mail

All students are encouraged to utilize their Maria College email to facilitate communication with the faculty and students. Maria College email is the only email used by the PNC faculty to communicate with the PNC students.

Individual Assistance

The PNC Faculty offices are located on the second floor of Marian Hall. Students can make appointments for clarification of course work, advisement, clinical performance appraisals or individual concerns. For specific issues the student may contact the PNC Coordinator by email or phone. PNC faculty will be available for individual and group instruction, which will be scheduled by the PNC faculty as needed.

Learning Resources Center

The Learning Resources Center is open to students during the regular academic year. Contact the Resource Center for appointments and/or open times for assistance.
**Blackboard**

Faculty will post announcements and updates for students on Blackboard. All students are encouraged to regularly check Blackboard for these announcements and updates.

In addition course exam grades are posted on Blackboard. Students receive exam grades as follows:

1. Grades will be posted 24 hours prior to examination return.
2. Do not call or e-mail your advisor, Nursing program chair, other members of the nursing faculty or the nursing administrative assistant, in order to find out your grade prior to it being posted on Blackboard. It is prohibited to give out grades to students until they are posted on Blackboard.
3. Only unit examination grades will be posted on Blackboard.
4. Final course grades will be posted on Web Services. Final examinations will be returned to students in the fall semester.
5. Scantrons will be returned to students at the examination return. Students who are unable to pick up their Scantron at this time, may get their Scantron only from a nursing faculty member after the examination return has taken place, which is the next class weekend.

**Tutoring**

Faculty supported tutoring is provided to student study groups per request to the PNC Director and based on faculty availability. The PNC faculty at Maria College can provide faculty tutoring for student groups. Students should organize themselves and contact the PNC Director for further information, who will then find a faculty member with availability.

The PNC faculty agrees that these should be student driven sessions. The faculty member will not present content or ask questions or act as the primary leader of the group and shouldn’t be expected to do so. Students should first agree as a group on how they would like the sessions to be conducted then come with an agenda each week. This may include questions or concerns from lecture or readings that students felt were confusing. The group might ask the faculty member to provide case studies to work on each week to help augment their readings.
There are many options for this type of small group study and as education experts we can help to explore them with your tutoring group.

**Critical Incident Form**

This is completed by the student and appropriate faculty when an incident occurs in which a mistake has occurred, or a client/student has been placed at risk. If an incident report is completed in a clinical facility a Maria College incident will also be completed. The Maria College incident is placed in the student’s file.
**Academic Policies**

**Course sequence and grade progression requirements**

The Nursing courses and their requisites must follow the sequence identified in the Maria College Catalog. Please note that you may not withdraw from a co-requisite course and remain in the Nursing course. If you withdraw from a co-requisite course, you must also withdraw from the Nursing course.

**Program completion time for nursing students**

The program must be completed in no more than 3 consecutive years from enrollment in the first Nursing course.

**Assessment methods**

To successfully complete a Nursing course, the student must demonstrate competency in all four components of the course—**Classroom, Clinical** and **Nursing Skills/Dosage Competency**.

- **Classroom:** Students must achieve a final grade of C+ (77%). The academic grade will be based on course objectives and determined by criteria listed previously.

- **Clinical:** Satisfactory clinical performance is required to pass the course and to sit for the final examination. Clinical performance will be evaluated utilizing a Clinical Evaluation Tool. Students are expected to demonstrate a safe level of practice to be competent. An unsafe clinical rating results in a course grade of F. Any student demonstrating consistently unsafe behaviors in the clinical area may be removed from the course and assigned a failing grade. See additional details in the Clinical Expectations section of this handbook.

- **Nursing Skills Laboratory:** Students must demonstrate satisfactory performance on all skill evaluations and skill laboratory requirements. Unsatisfactory Nursing Skills Laboratory rating results in a course grade of F. See additional details in the Nursing Student Evaluations section of this handbook.

- **Dosage:** Each semester a student must receive a 100% on a dosage competency within the established time frame. Failure to do so will result in an F in the course.

**Social networking policy**

Social Media is a way for people to use technology for social interaction through the use of words, images, audio and video. Examples of Social Media sites include, but are not limited to, websites such as Facebook, MySpace, LinkedIn, Twitter, YouTube and more. Any statement made electronically which can cause actual or potential harm or injury to another or to the school will be grounds for dismissal. Maria College Nursing students are free to express
themselves as private citizens on social media sites to the degree that their speech or posting;

- Do not violate the American Nurses’ Association (ANA) Code of Ethics
- Do not violate confidentiality implicit in their roles as Nursing students
- Do not impair working relationships among students and staff of the Nursing Department
- Do not ridicule, malign, disparage or otherwise express bias against any race, religion or protected class of individuals
- Do not engage in behavior that would reasonably be considered reckless or irresponsible as members of the Maria College Nursing Department
- Do not spread false information that harms the reputation of another person, group or organization (defamation).
- Do not cause harm or injury to another or to the Maria College Nursing program.
- Do not negatively affect the public perception of the Maria College Nursing Department

2. Maria College Nursing students shall not post, transmit or otherwise disseminate any information to which they have access as a result of their attendance without written permission from the Nursing Department Chairperson and the instructor of the course. This includes but is not limited to audio or videotaping of lectures and lab.

3. Maria College Nursing students may be required to access their social media sites at the request of the Nursing department or Maria College administration to verify compliance with the above stated policies. Failure to comply may result in immediate dismissal from the Nursing program.

   Failure to comply with this social media networking policy may be grounds for disciplinary action, including but not limited to dismissal from the Maria College Nursing program.

Academic integrity – Student responsibilities

Maria College expects that its students will act as responsible, courteous, and law-abiding citizens. All students are expected to contribute to a positive learning environment. Nursing student, are expected to be reflective, courteous, respectful, and empathetic to classmates, instructors, and others assisting students in their learning. Further, as members of an intellectual community, students are expected to maintain standards of personal and academic honesty in all course work and examinations.

Academic misconduct includes plagiarism, cheating, forgery or alteration of institutional records. Within the nursing program as a part of academic integrity, students are also expected to follow the ANA Code of Ethics in both the classroom and clinical setting.

Ignorance of the standards of academic integrity is not an acceptable excuse for breaking
ethical standards. Examples of failure to comply with the academic integrity are as follow:

- **Cheating**: Cheating is defined as using another’s test answers or assignments, as well as personal unauthorized information during a test, with the intent of escaping observation by the instructor for the purpose of improving a grade. Examples include but are not limited to:
  - (a) referring to materials that the instructor has not allowed to be used during the test, such as textbooks, notes or websites;
  - (b) using devices the instructor has not allowed to be used during the test, such as cell phones, text messages, or calculators; and
  - (c) copying from another student’s paper or asking another student for an answer.

During exams all personal items (including hats) must be left at the front of the class—only writing implements and provided calculators will be allowed. **If a student leaves the testing site, their examination is considered completed.**

- **Plagiarism**: Plagiarism is defined as using another’s words or ideas as one’s own without acknowledging that the words or ideas originated from another source. Not only do quotations have to be referenced, but also any use of the ideas of others, even if expressed in the student’s own words, must be referenced.

- **Submission of work that is not entirely the student’s own work**: Having another person write a paper or parts of a paper is one example of this offense; allowing another student to copy test answers is another example.

- **Theft or sale** of examinations, falsification of academic records, and similar offenses.

A nursing student that violates the academic integrity policy and ANA Code of Ethics will be disciplined and can be dismissed from the Maria College nursing program.

**Recording a Class**

Tape recording of a class is at the discretion of the faculty teaching the class. The student must request the permission of the faculty teaching the class to tape record the class. There is no tape recording of the laboratory or test review classes.
Student Policies

Illness, surgery, injury, etc.

When a student has a condition in which there is actual or possible limitation in the student’s ability to function, the student will be denied the learning experience. Prior to returning to the learning experience, the student will be required to submit to the PNC Program Coordinator medical clearance from a health care provider, indicating that the student can function in the learning environment. This clearance must be submitted prior to attending the learning experience.

Pregnancy

Students who become pregnant during the program must obtain written clearance to continue in the clinical agency. As soon as the pregnancy has been confirmed, a written clearance that the student can continue in the program without restrictions must be submitted to the PNC Program Coordinator. Failure to notify the PNC Program Coordinator may be grounds for dismissal from the program.

Dismissal from the PNC Program

A student may be dismissed from the program if any of the following conditions occur:

1. failure to maintain a C+ (77%) nursing courses with a clinical component;
2. failure to maintain a C+ (77%) in all courses required in the nursing program;
3. unsuccessful in skills competency;
4. three (3) absences in clinical or SALT in one clinical nursing course;
5. unsatisfactory completion of assignments;
6. clinical failure;
7. failure to adhere to PNC Program and Maria College policies;
8. grievous incident by the student;
### Readmission to the PNC Program

A letter requesting readmission must be sent to the Nursing Chair and PNC Program Director. This letter should include information as to what the candidate has accomplished during the time he/she left the program and the possible return (i.e., courses taken, work experience.) The request will then be acted upon by the PNC Program Director. If the student has been out of the program for more than six months and was successful in PNC 101, readmission is contingent upon successful completion of the skills competency and written examination for the last nursing course that the student passed. Because the skills competency and written examination are only offered during the regular college year it is imperative that requests for readmission be submitted as early as possible, e.g., requests for a Fall readmission should be submitted by March 15. Requests for a Spring readmission should be submitted by October 15. Any student who has failed two clinical nursing courses will not be readmitted to the PNC Program unless the Nursing Chair and the PNC Program Director determine otherwise.

### Repeating a Nursing Course

Nursing courses may only be repeated once. However, repeating a course is not automatic and requires that Nursing Chair and PNC Program Director’s approval.

### Grievance procedure

Extenuating circumstances to the above stated policies should be addressed with the Program Director. A grievance may involve any area of student life. See grievance procedure in Maria College Student Information Handbook.

### PNC Student records

The Nursing Program maintains student records. If you need a copy, the student first needs to sign a release form which is available in the secretary’s office. Once the release is signed, copies will be sent to the designated agency or the student may pick them up in the
secretary’s office during business hours (8:30AM-4:25PM). Requests for records will take up to 72 business hours to fulfill, requests will not be immediately fulfilled.

Scope of Practice of LPN’s

The NY State Education Department State Board of Nursing - September 2005

(Section 6902 of Article 139 of the Education Law)

“The practice of nursing as a Licensed Practical Nurse is defined as performing tasks and responsibilities within the framework of case finding, health teaching, health counseling, and provision of supportive and restorative care under the direction of a Registered Professional Nurse or licensed Physician, Dentist, or other licensed health care provider legally authorized under this title and in accordance with the Commissioner’s regulations.”

Clinical Roles and Responsibilities

(NYS Department of Education, Office of the Professions, Nursing Guide to Practice, July 2003, p.45)

(NYS Education Law, Article 139, Section 6902)

The Practice of Nursing as a Licensed Practical Nurse (LPN) is defined as performing tasks and responsibilities under the direction of a Registered Professional Nurse or licensed Physician, or other legally authorized health care provider, in accordance with the regulations of New York State, such as:

- case finding;
- health teaching;
- health counseling;
- provision of supportive and restorative care.

Licensed Practical Nurses in New York State may not:

- have assessment privileges;
- interpret patient clinical data;
- act independently on patient clinical data;
- triage;
- create, initiate, or alter care goals;
- establish nursing care plans.
Under the direction of a Registered Nurse, or other legally authorized health care provider, the LPN MAY:

- administer medications;
- provide nursing treatments;
- gather patient data – measurements, signs and symptoms – that can be used by the RN in making decisions about the nursing care of specific patients.

Licensing Requirements

Any use of the Licensed Practical Nurse (LPN) title within New York State requires licensure. To qualify to be licensed as a Licensed Practical Nurse in New York State an applicant shall fulfill the following requirements:

1. **Application**: file an application with the department;
2. **Education**: have received the education, and completion certificate from a practical nursing program, in accordance with the commissioner’s regulations;
3. **Experience**: meet no requirement as to experience;
4. **Examination**: pass a licensing examination satisfactory to the board, and in accordance with the commissioner’s regulations;
5. **Age**: be at least eighteen years of age;
6. **Citizenship**: meet no requirement as to United States citizenship;
7. **Character**: be of good moral character as determined by the NYS Education Department
8. **Fees**: pay the required fee to the NYS Education Department for admission to a department conducted examination and for an initial license.
**(There are also fees required for each re-examination, for the initial license for persons not requiring admission to a department conducted examination, and for each triennial registration period.) (See Appendix)

(9) The form for licensure application can be obtained from NYS Education Department’s website: [http://www.op.nysed.gov/nursel.pdf](http://www.op.nysed.gov/nursel.pdf) After you have completed the form, have the Chairperson complete the back. The Registrar will mail the form to the NYS Education Department with an official transcript.
Appendix A

GLOSSARY

Accountability: Individual responsibility encompasses actions and judgments regarding patient care, professional and individual conduct.

Advocacy: A relationship with the individual that facilitates, supports, and represents the needs of the individual.

Assessment: The gathering of relevant data for the purpose of appraising the client’s health status. It involves the orderly collection of information from multiple sources, establishes a foundation for provision of nursing care, identifies available resources to meet client needs and provides a baseline for future comparisons of individualize client care. (NYS Nursing Education Articulation Model, 2/04).

Caring: A pattern of behaviors, beliefs, and consciousness that demonstrates presence, empathy, spirituality, recognition, the dignity of each person and promotion of worth for others and self from life/death.

Caring Behaviors: Conduct that is nurturing, protective, compassionate and client centered that creates an environment of hope and trust. Client choices related to cultural values, beliefs and lifestyle are respected. (Maria College Department of Nursing Philosophy)

Caring Interventions: Those nursing behaviors and actions that assist clients in meeting their needs based on knowledge and understanding of the natural/behavior sciences, nursing theory/research and past nursing experiences. (Maria College Department of Nursing Philosophy)

Client: An individual who has health care needs created by the impact of the external and internal environment.

Clinically Competent: Performance in a manner within the legal scope of defined LPN practice, utilizing nursing principles that satisfy the demands of the situations.

Clinical Decision Making: A process that requires the application of theoretical knowledge, thinking skills and intuition, under the supervision of an RN, MD, DDS or other licensed provider of care, in determining appropriate care for effective client outcomes. (New York State Board of Nursing. LPN Scope of Practice – September 2005).

Collaboration: Shared planning, decision-making, problem solving, goal setting and assumption of responsibility/accountability by those who work together cooperatively with open professional communication across healthcare settings. (New York State Board of Nursing. LPN Scope of Practice – September 2005).
Communication: An interactive process with an exchange of information that occurs verbally, nonverbally, and/or in writing or through information technology. (New York State Board of Nursing. LPN Scope of Practice – September 2005).

Critical Thinking: The deliberative process of collecting presenting information that is both factually and belief based. Components of critical thinking are based on ethical, diagnostic and therapeutic dimensions.

Cultural Awareness: The conscious, informed recognition of and respect for individual differences and similarities between cultural groups.

Delegation: Transferring to a competent individual the authority to perform a selected task in a selected situation. The nurse retains the accountability for the delegation. (NCSBN position paper, 1995). It involves the five rights: right task, right circumstance, right person, right direction/communication and right supervision/evaluation

Environment: All the conditions, internal and external, surrounding and affecting the human condition.

Illness: Is a state of disequilibrium resulting in an imbalance between internal and external environments.

Individual: A holistic, thinking, feeling, organized being, possessing integrity, free will and potential for learning. Individuals are at the same time similar and unique. The individual is in constant interaction with their environment, adapting to a variety of stimuli.

Health: A homeostatic process which integrates bio-psycho-social-spiritual needs and is influenced by the internal and external environment.

Human needs: A person’s internal and external environmental factors which impact on health and illness. These needs are categorized as biological, psychological, social, and spiritual.

Management: The process, in collaboration with the RN, of planning, organizing and directing activity in collaboration with the team to reach positive outcomes. (New York State Board of Nursing. LPN Scope of Practice – September 2005).

Manager of Care: A Licensed Practical Nurse who optimizes resources under the supervision of an RN, to achieve desired outcomes for the promotion of health in client populations. (New York State Board of Nursing. LPN Scope of Practice – September 2005).

Managing Care: The efficient, effective use of human, financial and technological resources to meet client needs, in a cost effective manner and which supports organizational outcomes. (New York State Board of Nursing. LPN Scope of Practice – September 2005).
**Member Within the Discipline of Nursing:** A Licensed Practical Nurse who is accountable for the ethical, legal and professional dimensions of the practice of nursing. (New York State Board of Nursing. LPN Scope of Practice – September 2005).

**Nursing:** Is a systematic, caring profession grounded in concepts from the liberal arts and biologic, psychologic and social sciences. Nursing is an art and science, constantly dynamic and evolving.

**Nursing Process:** Process used for decision-making within the professional framework of nursing. It is defined as those actions which nurses implement as they deliver nursing care to their client(s). These actions include data gathering, contributing to the plan of care, implementation of care, and measurement of the results of care.

**Profession:** An occupation or vocation requiring education in the liberal arts, sciences, and advanced study in a specialized field.

**Professional Behavior:** Demonstrates adherence to standards of professional practice, accountability for actions and behaviors, and the practice of nursing within legal, ethical and regulatory framework while caring and valuing the profession. (New York State Board of Nursing. LPN Scope of Practice – September 2005).

**Provider of Care:** A Licensed Practical Nurse who, under the supervision of an RN, utilizes a systemic process, assists clients in meeting health care needs in a wide variety of settings and with the RN, coordinates the care of clients across the life span using a multidisciplinary approach. (New York State Board of Nursing. LPN Scope of Practice – September 2005). This is demonstrated through clinical competency.

**Reflection:** an analytical process in which individuals explore their experience in order to clarify meaning that leads to new understandings.

**Safety:** minimize risk of harm to patients and providers through both system effectiveness and individual performance.

**Teaching-Learning:** Processes used to promote and maintain client health, and reduce risk, and which are implemented in collaboration with the registered nurse, client, significant support person and other members of the healthcare team. (New York State Board of Nursing. LPN Scope of Practice – September 2005).

**Therapeutic Communication:** An interactive verbal and nonverbal process that assists the client to cope with change, develop more satisfying interpersonal relationships and integrate new knowledge and skills. (New York State Board of Nursing. LPN Scope of Practice – September 2005).

**Wellness:** A dynamic state in which an individual achieves or maintains an optimal balance between internal and external environment.
Appendix B
Nursing Program Curriculum Strands

**Vertical strands**
Human needs form the vertical strands of the nursing curriculum. Organized as the biological needs and the psycho-social-spiritual needs, these concepts provide the organization and framework for content taught in progression throughout the curriculum.

**Human Needs**
- Biological
  - Oxygenation
  - Circulation
  - Fluid/Electrolyte Balance/Hydration
  - Nutrition
  - Elimination
  - Rest and Sleep
  - Regulation and Sensation
  - Skin Integrity/Hygiene
  - Activity
  - Safety/Protection from Infection
  - Comfort
- Psycho-Social-Spiritual
  - Developmental Stages
  - Mental Health
  - Sexuality
  - Social, Cultural, Ethnic Identity
  - Spirituality

**Horizontal Strands**
The horizontal strands are process oriented, focus on the use of the content, and are in place throughout the curriculum. The application of content is achieved through the horizontal strands of the curriculum.

**Nursing Process**
- Data Gathering
- Problem identification
- Planning
- Implementation/ Intervention
- Measurement of results of care/outcomes

**Roles of the Licensed Practical Nurse**
- Provider of Care
  - Clinical competency
- Manager of Care (under the supervision of an RN, MD, DDS, or other licensed care provider)
  - Coordinating care
  - Communication
  - Collaboration
  - Reinforce Teaching-learning
- Member of the Profession of Nursing
  - Professional Behavior

**Caring**
**Critical Thinking**
**Environment**
Biological
1. Oxygenation - The exchange of gases between an organism and its environment.
2. Circulation - Production, distribution, and destruction of blood and blood components through the body system.
4. Nutrition - The sum of the processes involved in taking in nutrients, assimilating and utilizing them.
5. Elimination - Excretion of body wastes.
6. Rest and Sleep - Periods of diminished activity, both mental and physical.
7. Regulation and Sensation - Neuro-endocrine influences which govern body processes.
8. Skin Integrity/Hygiene - Continuity of the integument.
9. Activity - Any movement of the body or its parts.
10. Safety/Protection from Infection / Protection from all environmental hazards.
11. Comfort – A condition of well-being, removal of sources of pain or distress.

Psycho-Social-Spiritual
1. Developmental Stages - Chronological stages with well-defined tasks.
2. Mental Health - A relative state of mind in which a person is able to cope with and adjust to the recurrent stressors of everyday living.
3. Sexuality - The sum of the physical, functional, and psychological attributes that are expressed by one's gender identity and sexual behavior.
4. Social, Cultural, Ethnic Identity - Those characteristics which identify a person to self and others.
5. Spirituality - An intrinsic frame of reference providing strength, hope and meaning to life.
Appendix C

American Nurses' Association (ANA) Code of Ethics*

The Code of Ethics of the American Nurses Association is used as the standard for ethical practice and is used to assure that patients will be protected in accordance with the New York State's Nurse Practice Act.

The Code of Ethics is based on a body of moral and ethical principles. These principles have been translated into statements of standards which will guide the nursing students' integrity and their conduct while engaged in learning within the nursing program and later as a nurse in practice.

Conduct violating these statements may constitute reason for departmental warning or for departmental withdrawal from the nursing program.

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

American Nurses Association, Code of Ethics for Nurses with Interpretive Statements, © 2001 By American Nurses Association. Reprinted with Permission. All rights reserved.
## Appendix D

**ATI grid for PNC Program**

<table>
<thead>
<tr>
<th>PNC 101</th>
<th>PNC 102</th>
<th>PNC 103</th>
<th>PNC 104</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each of the 5 exams is worth 12%.</td>
<td>Each of the 5 exams is worth 12%, or Exam 1 is 2% and ATI is 10%, whichever grade results in the higher grade.</td>
<td>Each of the 5 exams is worth 12%.</td>
<td>Each of the 5 exams is worth 12%, or exams 1, 2, and 3 worth 8.7% each and ATI 10%, whichever results in the higher grade.</td>
</tr>
<tr>
<td>The final is worth 35%, or 25% and ATI 10%, whichever results in the higher grade.</td>
<td>The final is worth 35%.</td>
<td>The final is worth 35%, or 25% and ATI 10%, whichever results in the higher grade.</td>
<td>The final is worth 35%.</td>
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<tr>
<td>A group presentation is worth 5%.</td>
<td>A group presentation is worth 5%.</td>
<td>An individual presentation is worth 5%.</td>
<td>An individual presentation is worth 5%.</td>
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</table>
## Appendix E

**MARIA COLLEGE**

Nursing program core performance standards

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Standards</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Critical thinking</td>
<td>Critical thinking ability for effective clinical reasoning and clinical judgment</td>
<td>Apply scientific principles while planning and performing client care. Evaluate the effectiveness of nursing interventions. Modify the environment to enhance health/wellness promotion.</td>
</tr>
<tr>
<td>Professional Relationships</td>
<td>Interpersonal skills sufficient for professional interactions with a diverse population of individuals, families, and groups</td>
<td>Demonstrate legal/ethical professional behaviors. Participates and collaborates with all members of the health care team, clients, &amp; support systems to further health promotion/ address illness.</td>
</tr>
<tr>
<td>Communication</td>
<td>Communication adeptness sufficient for verbal and written professional interactions</td>
<td>Documents plan of care and evaluation of interventions Provides verbal reports of client data to members of the health care team Comprehends verbal, nonverbal and written communication Initiates, evaluates and documents client teaching plan</td>
</tr>
<tr>
<td>Mobility</td>
<td>Physical abilities sufficient for movement to provide safe and effective nursing care</td>
<td>Move around patient rooms, work areas and treatment areas. Provide life saving measures (i.e. CPR)</td>
</tr>
<tr>
<td>Motor skills</td>
<td>Gross and fine motor abilities sufficient for providing safe, effective nursing care</td>
<td>Manipulate and safely use equipment (i.e keyboards, dials, switches, syringes, needles)</td>
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<tr>
<td></td>
<td>Therapeutic positioning of clients (moving, lifting, transfers) Properly demonstrate clinical procedures (i.e. sterile technique, use of protective devices)</td>
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<td>--------------------------</td>
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<tr>
<td><strong>Hearing</strong></td>
<td>Auditory ability sufficient for monitoring and assessing health needs and maintain a safe environment</td>
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<td></td>
<td>Hears monitors, emergency warning sounds, auscultatory sounds and cries for help.</td>
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<tr>
<td><strong>Visual</strong></td>
<td>Visual ability sufficient for observation and assessment necessary in patient care and maintain a safe environment</td>
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<tr>
<td></td>
<td>Observe client’s condition and response to treatment Read fine print (i.e. syringe calibration)</td>
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<tr>
<td><strong>Tactile Sense</strong></td>
<td>Tactile ability sufficient for physical assessment and therapeutic interventions</td>
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<tr>
<td></td>
<td>Performs palpations, functions of physical examination and those activities related to therapeutic interventions (i.e. inserting and maintaining client catheters and tubes)</td>
<td></td>
</tr>
</tbody>
</table>


7/2011
# Appendix F
## The PNC Program Contact Information

<table>
<thead>
<tr>
<th>Name</th>
<th>PHONE Ext.</th>
<th>OFFICE # Marian Hall</th>
<th>E-MAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elizabeth J. Heywood</td>
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<td>213</td>
<td>eheywood</td>
</tr>
<tr>
<td>Interim Program Chairperson</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kathleen Curtin</td>
<td>2551</td>
<td>221</td>
<td>kcurtin</td>
</tr>
<tr>
<td>Administrative Assistant</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Jessica Napoli-McNally</td>
<td>2544</td>
<td>239</td>
<td>napolij</td>
</tr>
<tr>
<td>Clinical Placement Director</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patte Washco-Monasterial</td>
<td>2553</td>
<td>235</td>
<td>washcop</td>
</tr>
<tr>
<td>Program Director</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>FACULTY</strong></td>
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<td></td>
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<tr>
<td>Rob Faraone</td>
<td>2569</td>
<td>237</td>
<td>faraoner</td>
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<tr>
<td>Shellie Petrie</td>
<td>2539</td>
<td>227</td>
<td>shelliep</td>
</tr>
<tr>
<td>Retention Coordinator</td>
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<td></td>
<td></td>
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<tr>
<td>Jody Singley</td>
<td>2567</td>
<td>226</td>
<td>singleyj</td>
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<tr>
<td>Marcy Shultes</td>
<td>2565</td>
<td>222</td>
<td>shultesm</td>
</tr>
<tr>
<td>Nursing Lab Coordinator</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>