(The faculty of the Danville Area Community College Nursing Program reserves the right to make changes to this handbook when necessary. Students will be notified of changes.)
The College is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools. The nursing program is approved by the Illinois State Board of Nursing and is accredited by the Accreditation Commission for Education in Nursing, Inc. (ACEN).

Higher Learning Commission of the North Central Association of Colleges and Schools
(312-263-0456)

Department of Financial and Professional Regulation
State of Illinois
320 West Washington, 3rd Floor
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Mission Statement: Danville Area Community College is committed to providing quality, innovative and accessible learning experiences, which meet the lifelong academic, cultural and economic needs of our diverse communities, and the world we share.

Revised June, 2016
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DACC Nursing Student Handbook
GENERAL INFORMATION
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Mission Statement and Program Philosophy

Introduction

The Associate Degree Nursing (ADN) program at Danville Area Community College (DACC) is under the auspices of the Math, Sciences, & Health Professions Division at DACC. The program is a ladder approach in which a student has the opportunity after the second semester to take the National Council Licensure Examination-Practical Nursing (NCLEX-PN), which is required to obtain state licensure as a licensed practical nurse (LPN). After completion of the fourth semester, students are eligible to take the National Council Licensure Examination-Registered Nursing (NCLEX-RN), which is required for state licensure as a professional registered nurse. In addition, LPNs may enter after the 2nd semester and be eligible to take the NCLEX-RN after two semesters of nursing courses.

The Associate Degree Nursing program is approved by the Illinois Board of Nursing and accredited by the Accreditation Commission for Education in Nursing (ACEN). The ADN nursing curriculum reflects current concepts, professional standards, and competencies/student learning outcomes that are consistent with the National League for Nursing (NLN) Outcomes and Competencies for Graduates of Associate Degree Programs in Nursing (2010) and the Quality and Safety Education for Nurses (QSEN) initiative. The curriculum also incorporates guidelines and standards established by the American Nurses Association, the Illinois State Board of Nursing, and the NCLEX test plan.

Mission Statement

Danville Area Community College associate degree nursing program is dedicated to providing nursing education using a variety of affordable and accessible delivery methods to a diverse population. The program’s goal is to prepare graduates who practice safe, entry level professional nursing and have a desire for lifelong learning. To achieve this mission, we strive to create a culture of excellence and support, where students are challenged to meet high educational standards.

Program Philosophy

The nursing faculty believes nursing education should be proactive and responsive to the community’s needs, emphasizing quality, affordability, and effective partnerships in order to enhance quality of life through learning. Our philosophy of nursing education consists of five elements: persons, health, environment, nursing, and education which are also embedded into the Student Learning Outcomes.

Persons: Individuals have a right to knowledge about themselves as well as a right to participate in decisions that influence their life, needs, health, and community services in the environment. Individuals also possess the capability of communicating to meet their needs. The growth and development of individuals are a function of communication with other individuals, genetic endowment, meaningful and satisfying experiences, and an environment conducive to helping individuals mature.

Health or wellness is an outcome variable that depends on dynamic life experiences and resultant needs of an individual. This implies a continuous adjustment to components in the environment through optimum use of the individual’s resources to achieve maximum potential for meeting needs in daily living. Illness is a change from normal, resulting in unmet needs due to an imbalance in the dynamic state of one or more of the components relating to an individual’s health.
Environment may be defined as either the individual’s personal or community environment. The healthy individual continuously adjusts to significant events in these environments. Thus, the environment may be perceived as a stressor for the individual as well as potential precipitators of illness when maladaptation occurs.

Nursing involves therapeutic actions and communication whereby the nurse and individual share information about their perceptions of the environment. Through purposeful communication, the nurse and individual identify needs and assess means to meet these needs. Registered nurses, then, are important in a collaborative role with other health care professionals in assessing and meeting needs, promoting health, preventing disease, facilitating health teaching and client advocacy, and in coordinating and managing health care for the individual and family. As a result, the nursing process is an essential and functional component of professional nursing. Through observation, assessment, and scientific rationale, the nurse utilizes the nursing process as a dynamic factor to facilitate and evaluate an individualized plan of care for identified needs.

Nursing Education is based on sciences, liberal arts, and involves the development of personal, interpersonal, and professional interactions. In this manner, theoretical and clinical components are integrated with the nursing process to provide an optimal educational environment.

End of Program Student Learning Outcomes (SLOs)

The ADN graduate is prepared and expected to practice within the framework of the Educational Competencies for Graduates of Associate Degree Nursing Programs as identified by the 2010 NLN Educational Competencies. ADN graduates practice within the framework of eight core competencies/student learning outcomes which are: caring interventions, clinical decision making collaboration, communication, managing care, professional behaviors, safety, and teaching and learning. It is from this framework that the graduate outcomes, course outcomes, and both clinical and theory weekly learning outcomes have been derived. In addition, these concepts are explored and operationalized in curriculum development and evaluation.

The DACC Nursing Program follows a progressive testing blueprint using Bloom’s taxonomy as it guide. The Level I courses gradually shift from the lower levels of learning to the mid-levels of learning. The Level II courses gradually shift from the mid-levels of learning to the higher levels of learning.

The associate degree nurse is an entry level practitioner and is competent to practice as a direct caregiver in a variety of health care settings which include diverse patient population. ADN graduates are employed in a health care delivery system that continues to grow and change. As noted in our mission statement, the nursing program has an overall goal of preparing graduates who practice safe, entry level professional nursing with a desire for lifelong learning.

Nursing is a life-long learning profession; therefore ADN graduates are strongly encouraged to pursue bachelors, masters, and doctoral degrees in preparation for advanced levels of practice. Schools with articulations agreements with DACC are invited to meet with students several times throughout the school year in order to help them choose their RN-to-BSN completion program.
Role-Specific Graduate Student Learning Outcomes

Upon completion of the Associate Degree Nursing Program, the graduate will be proficient in the following:

Caring Interventions
By the end of the DACC Nursing Program, the graduate nurse will adopt behaviors that support a caring patient-centered environment where choices related to cultural values, beliefs, and lifestyles are respected.

Clinical Decision Making
By the end of the DACC Nursing Program, the graduate nurse will integrate clinical decision making in planning care that incorporates the holistic needs of the patient population by providing culturally and developmentally competent assessment and care while respecting differences, values, preferences, and expressed needs.

Collaboration
By the end of the DACC Nursing Program, the graduate nurse will organize collaboration with clients, significant support person(s), and members of the interdisciplinary healthcare team in the responsibilities of shared planning, decision making, problem solving, and goal setting while delivering high quality, evidence-based, patient-centered care to diverse populations within a family and community context.

Communication
By the end of the DACC Nursing Program, the graduate nurse will model therapeutic communication skills verbally and non-verbally when interacting with patients, significant support person(s), and members of the interdisciplinary team in complex environments and practice effective written and electronic documentation.

Managing Care
By the end of the DACC Nursing Program, the graduate nurse will determine effective utilization of information and technology, and other resources regarding management of comprehensive care to diverse patient populations within a family and community context.

Professional Behaviors
By the end of the DACC Nursing Program, the graduate nurse will integrate professional nursing practice behaviors that demonstrate lifelong personal responsibility and accountability for own care and care delegated while practicing within a legal, ethical, and professional scope that is guided by accepted standards of nursing practice.

Safety
By the end of the DACC Nursing Program, the graduate nurse will incorporate the nursing process to make clinical judgments using evidence-based practice providing safe, quality care to promote the health of diverse populations within a family and community context.

Teaching and Learning
By the end of the DACC Nursing Program, the graduate nurse will design and implement health education to clients and/or significant support person(s) while promoting and facilitating informed decision-making to achieve safe and high quality health outcomes within a family and community context.
Curriculum Guide For Levels I & II
Associate In Applied Science Degree in Nursing
(AAS Degree)

Level 1

SEMESTER I:
- NURS 192 – Concepts of Nursing: 12 hours
- BIOL 136 – Anatomy & Physiology I: 4 hours
- ENGL 101 – Rhetoric I: 3 hours
  Total: 19 hours

SEMESTER II:
- NURS 194 – Adult Nursing: 8 hours
- NURS 195 – Maternal-Child Nursing: 4 hours
- BIOL 137 – Anatomy & Physiology II: 4 hours
- PSYC 100 Intro to Psychology: 3 hours
  Total: 19 hours

**Total for Level I = 38 hours**

**Level II**

SEMESTER I:
- NURS 296 – Advanced Nursing I: 6 hours
- NURS 297 – Advanced Nursing II: 6 hours
- BIOL 140 – Microbiology: 4 hours
  Total: 16 hours

SEMESTER II:
- NURS 298 – Advanced Nursing III: 8 hours
- NURS 299 – Advanced Nursing IV: 4 hours
- MATH 115 Survey of Statistics: 3 hours
  Total: 15 hours

**Total for Level II = 31 hours**
**Total for AAS Degree = 69 credit hours**

It is highly recommended that general education courses be completed prior to applying to the Nursing Program.

**All classes from the first year curriculum MUST be completed prior to advancing to second year. Students will not be allowed to begin the second year unless all first level curriculum has been successfully completed with a C or higher. Additionally, students may not enter Semester II of Level II without having successfully completed with a C or higher the courses from Semester I in Level II.**
Nursing Course Descriptions
ADN -- Levels I & II

LEVEL I - First Year

NURS 192 – Concepts of Nursing – (ADN Level I, First Semester - 12 hrs)
Foundational preparation for nursing care based on the philosophy and science of nursing with content drawn from the physical, social, biological, and nutritional sciences. Incorporates identification of individual needs for life and health as a vital dimension of nursing care. Emphasis on the application of knowledge and the development of assessment skills for the individual's needs in health or illness. Focuses on the development skills related to the nursing process, communication, and interactions with the environment. Clinical experience provided in the hospital environment. (Course includes theoretical skill labs and clinical components.) Prerequisites: Acceptance into Nursing Program and admission to the College. [C]

NURS 194 – Adult Nursing – (ADN Level I, Second Semester - 8 hrs)
Application of the nursing process to concepts of health and illness related to adult needs in a nursing environment. Expands the focus to enhance the student’s understanding of pharmacological needs as well as personal, interpersonal, and social needs and interactions of the individual. Clinical experiences are provided in the hospital and community environments. (Course includes theoretical and clinical components.) Prerequisites: Consent from Nursing Director and NURS 192. [C]

NURS 195 – Maternal Child Health Nursing – (ADN Level I, Second Semester - 4 hrs)
Foundational preparation for the provision of nursing care to the individual with maternal-child health needs. Instruction and supervised clinical experience provides understanding of the ways in which to assess, plan, intervene and evaluate the family, women/maternal health, per-natal periods, as well as child from birth through adolescence. Emphasis is on: maternal health and illness, gynecological health and illness, labor and delivery, postpartum care, newborn care, and growth and development of children and adolescence in the hospital and community environments. (Course includes theoretical and clinical components.) Prerequisites: Consent from Nursing Director, NURS 192 and NURS 194.
LEVEL II - Second Year

NURS 296 – Advanced Nursing I – (ADN Level II, First Semester - 6 hrs)
Advanced preparation for the facilitation of nursing care to individuals with complex health needs. Focuses on the nurse’s unique role to design and manage care for individuals from birth to older adulthood in the acute care environments. Emphasizes the nurse’s collaborative communications with other health care professionals for health teaching and advocacy. Synthesizes theory and clinical experiences in the transition from the LPN to the RN role. (Course includes theoretical and clinical components.) Prerequisites: Consent from Nursing Director and NURS 192, NURS 194, and NURS 195. [C]

NURS 297 – Advanced Nursing II – (ADN Level II, First Semester - 6 hrs)
Emphasizes the significance of nursing care in relation to complex health needs of the individual from birth to older adulthood. Focuses on the collaborative communication with other members of the health care team and with the individual and family in the hospital environment for health teaching and client advocacy. Theory and clinical experience enhance the integration of principles of advanced nursing. (Course includes theoretical and clinical components.) Prerequisites: Consent from Nursing Director and NURS 192, NURS 194, NURS 195, and NURS 296. [C]

NURS 298 – Advanced Nursing III – (ADN Level II, Second Semester - 8 hrs)
Formulates nursing care and communication for the individual and family with complex physical/psychological health needs. Emphasizes the role of the community relative to nursing care of the individual from birth to older adulthood. Theory and clinical experience create the opportunity for integration of principles of advanced nursing, health teaching, and client advocacy in a variety of hospital and community environments. (Course includes theoretical and clinical components.) Prerequisites: Consent from Nursing Director and NURS 192, NURS 194, NURS 195, NURS 294. [C]

NURS 299 – Advanced Nursing IV – (ADN Level II, Second Semester - 4 hrs)
Analyzes the roles of the registered nurse. Examines internal and external influences on nursing practice. Explores concepts related to professionalism, delegation, leadership and management, nursing power and politics, and career planning. Prerequisites: Consent from Nursing Director and NURS 192, NURS 194, NURS 195, NURS 296, NURS 297294, and NURS 298. [C]

LEVEL II--PART TIME LPN-RN SEQUENCE
NURS 296 ADN Level II, First Semester -- 6 hrs)
NURS 297 ADN Level II, Second Semester -- 6 hrs)
NURS 298 ADN Level II, Third Semester -- 8 hrs)
NURS 299 ADN Level II, Fourth Semester -- 4 hrs)
Nursing Program Advisory Council

The Nursing Program Advisory Council is composed of representatives of the community who serve in a voluntary advisory capacity to the Nursing and College administrators and faculty. The council convenes in the Fall of each academic year and studies the educational needs of the nursing program, facilitates the operation of the school, advises on the development of policies, interprets the school to the community and the needs of the community to the school, and studies and recommends optimum policies for students and faculty.

### Community Members

<table>
<thead>
<tr>
<th>Name</th>
<th>Title/Position</th>
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<tbody>
<tr>
<td>Patricia Brown MSN, RN</td>
<td>Retired Nursing Professor</td>
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<tr>
<td>Danville Area Community College</td>
<td></td>
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<tr>
<td>Denise Zandars, RN</td>
<td>Director of Nursing</td>
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<tr>
<td>Timyra Carter MSN, RN</td>
<td>Patient Care Coordinator</td>
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<tr>
<td>DACC ADN Graduate</td>
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<tr>
<td>Christine Schaeffer, BSN RN</td>
<td>Geriatric Clinical Coordinator</td>
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<tr>
<td>Presence United Samaritans Medical Center</td>
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<tr>
<td>Kim Longfellow, RN</td>
<td></td>
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<tr>
<td>Selena McCalla, RN</td>
<td></td>
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<tr>
<td>Carle Hoopeston Regional Health Center</td>
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<tr>
<td>Christine Holycross, MSN, RN</td>
<td>Organizational Development</td>
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<tr>
<td>Presence USMC</td>
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<tr>
<td>Jenny Trimmell BSN RN</td>
<td>Director of Community Health Services</td>
</tr>
<tr>
<td>Melissa Rome, BS, MBA, CHES</td>
<td>Public Health Emergency Planning &amp; Response Coordinator</td>
</tr>
<tr>
<td>Public Health Emergency Planning &amp; Response Coordinator</td>
<td>Nurse Manager, Acute Care</td>
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<tr>
<td>Gina George BSN, RN</td>
<td>Nursing Instructor</td>
</tr>
<tr>
<td>VA Illiana Health Care System</td>
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<tr>
<td>Molly Nicholson, BSN, RN</td>
<td>Chief Nurse Executive</td>
</tr>
<tr>
<td>Elizabeth Angelo MSN, RN</td>
<td>Coordinator of Nursing Education</td>
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<tr>
<td>Carle Hospital</td>
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<tr>
<td>Danna Williamson, RN</td>
<td>Nursing Education Specialist</td>
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<tr>
<td>Connie Schroeder, MSN, RN</td>
<td>Retired DACC Director of Nursing</td>
</tr>
<tr>
<td>Danville Area Community College</td>
<td></td>
</tr>
<tr>
<td>Area High School Health Care Guidance Counselors -- TBD</td>
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</tr>
<tr>
<td>Dr. Stephen Nacco</td>
<td>President</td>
</tr>
<tr>
<td>Kathy R. Sturgeon</td>
<td>Dean, Math, Sciences, &amp; Health Professions Division</td>
</tr>
<tr>
<td>Timmyra Morgan</td>
<td>Health Careers Advisor</td>
</tr>
<tr>
<td>Laura Williams</td>
<td>Director of Adult Education</td>
</tr>
<tr>
<td>Angel Fellers</td>
<td>Office Assistant Health Care Professions</td>
</tr>
<tr>
<td>Student representatives from three cohorts</td>
<td></td>
</tr>
<tr>
<td>Joanna Commons DNP, RN, NP-C</td>
<td>Nicole Carter, DNP, RN, FNP-BC</td>
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<tr>
<td>Dianne Manganaro, MSN, RN, FNP</td>
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</tr>
<tr>
<td>Shannon Childers, MSN, RN</td>
<td>Phyllis Wille, DNP, RN, FNP-CNE, CNN, CNE</td>
</tr>
</tbody>
</table>
Affiliating Agencies

- Carle Foundation Hospital and Clinic (Urbana, Hoopeston and Danville campuses and satellite facilities)
- Department of Corrections
- Hawthorn Inn
- Pavilion Behavioral Health System
- Presence United Samaritans Medical Center and satellite facilities
- Vermilion County Health Department
- Veterans Affairs Illiana Health Care System
Technical Standards

Students entering and graduating from DACC’s Nursing Program must be able to meet the technical standards of the academic program. These technical standards enable all nursing students to carry out the technical standards of the nursing process throughout the nursing program and include, but are not limited to, the following abilities:

### Functional Ability/Category

#### Standard

#### Representative Activity/Attribute

<table>
<thead>
<tr>
<th>Motor Abilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical abilities and mobility sufficient to execute gross motor skills, physical endurance, and strength, to provide patient care.</td>
</tr>
<tr>
<td>- Mobility sufficient to carry out patient care procedures such as assisting with ambulation of patients, administering CPR, assisting with turning and lifting patients, providing care in confined spaces, such as treatment room or operating suite.</td>
</tr>
<tr>
<td>- Move within confined spaces, sit and maintain balance, reach above shoulders (e.g., IV poles), and reach below waist.</td>
</tr>
<tr>
<td>- Twist, bend, stoop/squat, move quickly (e.g. response to an emergency), climb (e.g., ladders/stools/stairs), and walk.</td>
</tr>
<tr>
<td>- Push and pull 25 pounds (e.g., position patients), support 25 pounds (e.g., ambulate patient), lift 25 pounds (e.g., pick up a child, transfer a patient), move light object weighing up to 10 pounds, move heavy objects, defend self against combative patient, carry equipment/supplies, use upper body strength (e.g., perform CPR, restrain a patient), and squeeze with hands (e.g., operate fire extinguisher).</td>
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<thead>
<tr>
<th>Manual Dexterity</th>
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<tbody>
<tr>
<td>Demonstrate fine motor skills sufficient for providing safe nursing care.</td>
</tr>
<tr>
<td>- Motor skills sufficient to handle small equipment, such as insulin syringe and administer medications by all routes, perform tracheotomy suctioning, and insert urinary catheter.</td>
</tr>
<tr>
<td>- Pick up objects with hands, grasp small objects with hands, write with pen or pencil, key/type using computer, pinch/pick or otherwise work with fingers (e.g., manipulate syringe), twist or turn knobs or objects using hands, squeeze with finger(s).</td>
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<table>
<thead>
<tr>
<th>Perceptual/ Sensory Ability</th>
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</thead>
<tbody>
<tr>
<td>Sensory/perceptual ability to monitor and assess patients</td>
</tr>
<tr>
<td>- Sensory abilities sufficient to hear alarms, auscultate sounds, and hear cries for help, etc.</td>
</tr>
<tr>
<td>- Visual acuity to read calibrations on 1 cc syringe, assess color (e.g., cyanosis, pallor, identify color of body fluids, etc.).</td>
</tr>
<tr>
<td>- Tactile ability to palpate pulses, feel skin temperature, palpation veins, etc.</td>
</tr>
<tr>
<td>- Olfactory ability to detect smoke or noxious odors</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Behavioral/ Interpersonal/ Emotional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ability to relate to colleagues, staff and patients with honesty, civility, integrity and nondiscrimination.</td>
</tr>
<tr>
<td>Capacity for development of mature, sensitive and effective therapeutic relationships.</td>
</tr>
<tr>
<td>Interpersonal abilities sufficient for interaction with individuals, families and groups from various social, emotional, cultural and intellectual backgrounds.</td>
</tr>
</tbody>
</table>
- Ability to work constructively in stressful and changing environments.
- Modify behavior in response to constructive criticism.
- Capacity to demonstrate ethical behavior, including adherence to the professional nursing *Code of Ethics for Nurses* as identified by the American Nurses Association (ANA).
  - Establishes rapport with patients and colleagues.
  - Works with teams and workgroups.
  - Demonstrates emotional skills sufficient to remain calm in an emergency situation.
  - Demonstrates behavioral skills sufficient to the exercise of good judgment and prompt completion of all responsibilities attendant to the diagnosis and care of patients.
  - Adapts rapidly to environmental changes and multiple task demands.
  - Maintains behavioral decorum in stressful situations.
  - Establishes therapeutic boundaries, provides patient with emotional support, adapts to changing environment/stress, deals with the unexpected, focuses attention on task, controls own emotions, performs multiple responsibilities concurrently, responds appropriately.
  - Represents the nursing profession in manner, dress, and behavior.

Safe environment for patients, families and co-workers
- Ability to accurately identify patients.
- Ability to effectively communicate with other caregivers.
- Ability to administer medications safely and accurately.
- Ability to operate equipment safely in the clinical area.
- Ability to recognize and minimize hazards that could increase healthcare associated infections.
- Ability to recognize and minimize accident hazards in the clinical setting including hazards that contribute to patient, family and co-worker falls.
  - Prioritizes tasks to ensure patient safety and standard of care.
  - Maintains adequate concentration and attention in patient care settings.
  - Seeks assistance when clinical situation requires a higher level or expertise/experience.
  - Responds to monitor alarms, emergency signals, call lights from patients, and orders in a rapid and effective manner.
  - Negotiates interpersonal conflict, respects differences in patients, and establishes rapport with co-workers.

Communication
- Ability to communicate in English with accuracy, clarity and efficiency with patients, their families and other members of the health care team (including spoken and non-verbal communication, such as interpretation of facial expressions, affect and body language).
- Required communication abilities, including speech, hearing, reading, writing, language skills and computer literacy.
- Communicate professionally and civilly to the healthcare team including peers, instructors, and preceptors.
  - Gives verbal directions to or follows verbal directions from other members of the healthcare team and participates in health care team discussions of patient care.
  - Elicits and records information about health history, current health state and responses to treatment from patients or family members.
  - Conveys information to patients and others as necessary to teach, direct and counsel individuals in an accurate, effective and timely manner.
  - Establishes and maintain effective working relations with patients and co-workers.
  - Recognizes and reports critical patient information to other caregivers.
Teaches (e.g., patient/family about health care), explains procedures, gives oral reports (e.g., reports on patient’s condition to others), interacts with others (e.g., health care workers), speaks on the telephone, influences people, and directs activities of others.
Conveys information through writing (e.g., nursing documentation).

Cognitive/Conceptual/Quantitative Abilities
- Ability to read and understand written documents in English and solve problems involving measurement, calculation, reasoning, analysis and synthesis.
- Ability to gather data, to develop a plan of action, establish priorities, monitor, and evaluate treatment plans and modalities.
- Ability to comprehend three-dimensional and spatial relationships.
- Ability to react effectively in an emergency situation.
- Demonstrate critical thinking.
- Analytical thinking
  - Calculates appropriate medication dosage given specific patient parameters.
  - Analyzes and synthesizes data and develops an appropriate plan of care.
  - Collects data, prioritizes needs and anticipates reactions.
  - Comprehends spatial relationships adequate to properly administer injections, starts intravenous lines or assesses wounds of varying depths.
  - Recognizes an emergency situation and responds effectively to safeguard the patient and other caregivers.
  - Transfers knowledge from one situation to another.
  - Accurately processes information on medication labels, and physicians’ orders, safely monitors equipment calibrations, printed documents, flow sheets, graphic sheets, medication administration records, other medical records for patient safety and understands current policies and procedures.
  - Identifies cause-effect relationships, plans/controls activities for others, synthesizes knowledge and skills, sequences information.
  - Transfers knowledge from one situation to another, processes information, evaluates outcomes, problem solves, prioritizes tasks, uses long term memory, uses short term memory.
  - Reads and understands columns of writing, reads digital displays, reads graphic printouts, calibrates equipment, converts numbers to and/or from metric system, reads graphs, tells time, measures time, counts rates, uses measuring tools, reads measurement marks, adds, subtracts, multiplies, divides whole numbers, computes fractions, uses a calculator, writes number in records.

Punctuality/work habits
- Ability to adhere to DACC policies, procedures and requirements as described in the nursing student handbook and course syllabus.
- Ability to complete classroom, lab, and clinical assignments and submit assignments at the required time.
- Ability to adhere to classroom and clinical schedules.
  - Attends class and clinical assignments punctually.
  - Reads, understands and adheres to all policies related to classroom, lab, and clinical experiences.
  - Contacts the instructor in advance of any absence or late arrival.
  - Understands and completes classroom, lab, and clinical assignments by due date and time.
*The DACC College Catalog states:

“Disability Services provides assistance to all qualified students with disabilities, whether they are physical, psychiatric, or educational. Please note, under the ADA and Section 504, a person is an individual with a disability if he or she has a physical or mental impairment that substantially limits one of more major life activities. In order for academic accommodations to be received, students are required to register through the Assessment Center/Disability Services office and attend an interview to document the disability and identify their needs. All services are based on individual needs. Examples of available services include adaptive equipment, audio textbooks, interpreters, notetakers, readers, special testing accommodations, and TTY locations.”

**Required Health Information**

Current immunization status must be completed by set due dates. Upon acceptance into the program, a physical exam completed by required due dates by a healthcare provider must also be completed indicating the applicant meets the technical standards of the nursing profession regarding physical, emotional, and mental skills abilities, or that needed accommodations can be reasonably provided. Accepted students must submit documentation of current American Heart Association Basic Life Support (BLS) for Healthcare Provider CPR certification by the set due date and maintain such certification throughout the program. Proof of annual flu immunization by the required due date is also required. Failure to provide the required documentation will result in the student being unable to attend clinical until the documentation is provided to the nursing office. Students who miss more than one full clinical day per course cannot be evaluated for meeting course objectives which will negatively affect their grade.
STUDENT SUPPORT AND SERVICES
Academic Advisement & Counseling (AAC) Department

Danville Area Community College provides advisement and counseling services to students, and potential students, in three different formats: 1) through the Academic Advisement & Counseling Department located in Lincoln Hall; 2) through career, program-specific faculty advisors; and 3) through our TRiO program located in Cannon Hall. The college also provides transfer-oriented, faculty mentoring for students who are interested in learning more about their intended major.

One of the primary functions of Academic Advisement and Counseling is to help all students obtain the type of education best adapted to their needs, abilities, and interests. Counselors and academic advisors meet with students to assist them in planning their academic programs and career goals, solving personal concerns, and adjusting to college. While all students are encouraged to work with an academic advisor or counselor, those who are registering for 12 or more credit hours (fall or spring semester) or more than 6 hours (summer semester) are required to work with a counselor or advisor. Advisors and counselors are specialized by major/program of study.

To meet the demanding needs of our students, DACC advisors and counselors provide a flexible meeting/appointment schedule with walk-in times, scheduled appointments, e-mail communications, and phone communications. Students may also visit the Academic Advisement and Counseling Department web-site for degree/certificate requirements, general education electives, transfer course information, schedule of classes, course descriptions, counselor schedules, and more at http://www.dacc.edu/aac/.

In general, DACC academic advisors and counselors provide in-depth guidance on course selection for degree completion and, overall, student success. Advisors and Counselors interpret results of COMPASS, ASSET and ACT/SAT to facilitate appropriate course placement in mathematics and English. Individualized assessment is also provided to help students gain a better understanding of their needs, values, interests and abilities. Advisors and counselors work closely with the Career Services, Financial Aid, and Student Success Center to provide comprehensive services. The AAC office also provides assistance with transfer processes, access to college fairs, assistance with college policies and procedures, and referrals to services on-and off-campus.

Personal counseling is available through DACC’s AAC Office. Counselors will assess student situations and determine if further counseling is needed through the AAC office or an off-campus, community provider. AAC counselors help students to identify barriers and develop solutions that enable them to persist and achieve their academic goals. The College also provides special assistance for disadvantaged students and students with disabilities. Special services are available through the Student Support Services office located in Cannon Hall.

Community Resource Contact Information: The AAC office can provide students with a list of community resources prepared by the United Way office. The updated list may be obtained in the AAC Office (Lincoln Hall, Room 104). On-going, personal counseling needs are generally referred to Crosspoint Human Services at 217-442-3200.
Advisement & Counseling Staff (Lincoln Hall, Room 104)

Jeanne Dunn, AAC Administrative Assistant, 217-443-8750, jdunn@dacc.edu

Stephane Potts, Counselor/Transfer Articulation Coordinator, 217-443-8749, spotts@dacc.edu

Jeff Primmer, Academic Advisor/Counselor, 217-443-8594, jprimer@dacc.edu

Timothy Morgan, Academic Advisor, 217-443-8804, tmorgan@dacc.edu

Amie Musk, Academic Advisor, 217-443-8745, amaul@dacc.edu
Student Success Center

Student Success Center (SSC) provides resources and services to empower students to be successful in college and life. SSC is funded through two federal grants, Perkins III and TRiO. The Student Success Center houses the Tutoring Lab and the TRiO Student Support Services. The SSC provides free tutoring for DACC students in almost every subject, as well as one-on-one and group tutoring. The department also arranges accommodations for students with documented disabilities. Accommodations include but are not limited to alternative testing arrangements, assistive technology, course materials in alternate format, sign language interpreters, and note takers. Students interested in learning more about these services should visit Student Support Services in Room 113 of Cannon Hall or call Vicki Squires, Office Specialist, at 217-443-8862.

TRiO Program

The federally funded TRiO Program serves students who are academically or economically disadvantaged, disabled, or first generation. The program helps qualified students to receive on-campus support and guidance during their first years of college. Applications are accepted throughout the year and students are encouraged to apply. Their goal is to help these students achieve academic success. TRiO participants receive the following services: academic advisement; counseling for academic success; development of education plan; university transfer visits; strategies for financing college; course selection and registration; tutoring; assistance with scholarship search and applications; and assistance with four-year college/university applications and transfer process.

The TRiO Advisors (Cannon Hall, Room 113)
Laura Reed-Sallee, TRiO Academic Advisor, jasaad@dacc.edu, 217-443-8780
Brennon Hightower, TRiO Academic Advisor, bhightower@dacc.edu, 217-443-8898
Shanay Wright, Director, shuerta@dacc.edu, 217-443-8860

Disability Services

Disability Services provide assistance to all qualified students with disabilities: physical, psychiatric, or educational. Students are required to register with the Disability Services and identify the needs in order to be eligible for academic accommodations. All services are based on individual needs. Students are responsible for identifying themselves to the Disability Services, located in Cannon Hall, Room 103, for providing documentation and for requesting accommodations. Students are required to submit disability/accommodation documentation to the Disability Service office, the Nursing Program office, and to their professors. If there are any changes to the disability/accommodation additional documentation must be provided to all parties concerned.

STEPS TO GET STARTED:
1. Contact Lisa Rudolph at 217-443-8708 or lrudolph@dacc.edu to set up a meeting with a Disability Services Specialist.
2. Meet with the Specialist to complete an interview process and to complete the program forms.
3. Provide the Disability Services Office with all requested and appropriate documentation.
4. Complete the Semester Request for Academic Accommodations form every semester.

In order for accommodations to be in place when classes begin, students are encouraged to meet with Disability Services at least four weeks prior to the beginning of each semester.
For additional information on services available, please visit on the website at http://www.dacc.edu/ssc/oa or call 217-443-8708; TTY (217) 443-8701. Please note, the accommodations and services are offered in accordance with Section 504 of the Rehabilitation Act of 1973 and the American with Disabilities Act of 1990.

**Career and Employment Services**

The Careers and Employment Services Center located on the first floor of Lincoln Hall, Room 104, assists students in making career and life planning choices. Students wishing assistance in their career choice or in gaining skills which will aid them in their job hunting process are encouraged to visit the Career Center. A wealth of career and job search information is available, including internet-based and computerized career guidance programs. Career and Employment Services also helps students with their full-time, part-time, and seasonal employment needs. Services are designed to help DACC students acquire the skills necessary for a successful job search as well as connect students with potential employer contacts. For more information, please visit http://www.dacc.edu/career or contact: Carla Boyd, Director of Career and Employment Services cboyd@dacc.edu, 217-443-8593

**Math & Science Solutions (MASS) Tutoring Center**

The MASS Center is dedicated to students’ educational success by providing quality learning support relevant to their individual needs. They seek to provide services that will help students become independent learners and function successfully in an academic environment and foster an interest in becoming lifelong learners.

This endeavor is accomplished through peer tutoring and expert tutoring. Tutors share their knowledge of the subjects with students, explaining difficult concepts, steps and methods, giving examples and being a sounding board to illuminate time management, test taking and study skill problems. The MASS Center tutors impart encouragement, inspiration, motivation, and confidence to students enabling them to keep a positive attitude and succeed in their courses.

Services are FREE to all students currently attending DACC.

Based on tutor availability, students may receive tutoring in the following math and science courses:

- Math 101, 105, 115, 120 (is offered when tutors are available, see schedule)
- Biology 102
- Anatomy and Physiology 136
- Chemistry and Physics
- Nursing – theory and skills lab

For more information, visit the website at http://www.dacc.edu/depts/MASS or stop in Mary Miller Room 112/113.
Computer Labs and Technical Support

Computers are available at various open labs throughout campus (Mary Miller Room 206, Clock Tower Center Room 127, and Lincoln Hall 204). Students using these labs should follow campus guidelines as established in the DACC Student Handbook.

Students may contact the Computer and Network Services department for assistance with accounts, passwords, or other technical issues. The email address for this department is cns@dacc.edu; phone numbers are 217-443-8861, 217-443-8710, and 217-443-8871.

Library Services

DACC maintains a library in the Clock Tower building. The DACC Library provides nursing students with access to a range of electronic resources, video, and print materials. Hours for the library are located on their website. Students can also access the library’s extensive electronic resources at any time over the internet using their user ID and password.

Students can search for books, articles, and video using Summon, the library’s single-search-box discovery tool (known locally as 1Search). The library provides access to CINAHL Plus with Full Text, PubMed Central and Health Source: Nursing/Academic Edition, PsycArticles, Elsevier’s ScienceDirect, EBSCO’s Nursing Reference Source Plus, EBSCO Medline with Full Text, and Sage Journals Online. E-books are available through EBSCO eBook Academic Collection and eBook Community College Collection.

The library also supplies print titles specifically targeting nursing students’ needs, flagging them with a prominent label to make them easy to identify on the shelves. These titles are augmented by more than 1,800 books in closely related areas from anatomy to immunology. In addition, DACC Library is member of the Consortium of Academic and Research Libraries of Illinois (CARLI), giving our students quick interlibrary loan access to materials in all 84 member libraries through I-Share, the joint catalog system.

The library has access to the Alexander Street Video Collection’s Nursing Education in Video and Health and Society streaming video collections, two of the most highly regarded video collections for the health professions.

Additional information on the library at DACC can be found at: http://www.dacc.edu/library/

Additional library facilities located at Presence United Samaritans Medical Center, the Veterans Affairs Illiana Health Care System, Carle Hospital, and Lakeview College of Nursing are also available for student use.
STUDENT RESPONSIBILITIES
Attendance Policy

**Classroom/Lab**
See individual class syllabi for tardiness consequences. In general, if a student is late for class, they will sit out until the first break. Students sleeping in class will be asked to leave based on instructor discretion. Sleeping is defined as consistently closed eyes as observed by Professor.

**Clinical/Simulated clinical experience**
It is **mandatory** that students report to his/her assigned clinical instructor, when unable to attend clinical a **minimum of one (1) hour before the clinical start time but not between the hours of 9 PM and 5 AM.**

- Failure to report the clinical absence a minimum of one (1) hour before the clinical start time will receive a Needs Improvement (NI) in the appropriate clinical criteria outcome.
- Students must report their absence prior to the start of clinical to the instructor via a phone call or text message (if texting is approved by the individual instructor).
- Emailing the instructor and/or having other students inform the instructor will be considered an unacceptable form of communication and will result in an Unsatisfactory (U) for professionalism in the weekly clinical evaluation.
- A “no call, no show” is defined as not notifying the instructor prior to the clinical start time of the intended absence. A “no call, no show” will result in an Unsatisfactory (U) for professionalism in the weekly clinical evaluation.
- Students who will be arriving late to clinical should notify the instructor before the clinical start time.
- Students arriving late without proper notification to the clinical instructor may be asked to leave and will have the day counted as (1) clinical absence day.
- Students who miss more than one full clinical day per course cannot be evaluated for meeting course objectives which will result in dismissal.

**Orientation Attendance**
Failure to be present for ANY mandatory orientation will result in students’ dismissal from the program unless previous arrangements are made with the Nursing Program Director. There are no exceptions to this rule.

**Classroom, Clinical, and Lab Conduct**
Danville Area Community College students must adhere to the Student Code of Conduct located in the College Catalog and online at [http://www.dacc.edu/assets/pdfs/student-handbook/StuHandbook.pdf](http://www.dacc.edu/assets/pdfs/student-handbook/StuHandbook.pdf)

Students are expected to behave in an adult, professional manner on campus, in the classroom, lab, and clinical settings, complying at all times with the policies and procedures (including clinical site policies) outlined in the DACC Student Handbook and the Nursing Program Student Handbook. Incivility will not be tolerated. Incivility is defined as intentional behavior that is aimed to disrupt the teaching and learning process (Morrisette, 2001). The faculty will bring the situation to the Director of Nursing Education. The Director has the authority to decide whether faculty should give a first warning or to eject the student from the classroom, lab, or clinical setting. Other unacceptable behaviors that may not disrupt the learning process but are unbecoming a nursing student are listed below.

Students displaying behaviors identified as incivility and other unacceptable behaviors will be asked to
leave and marked absent for the time that was missed. If incivility occurs in clinical, the time missed will equate to one clinical day. Students will also be counseled on the behavior and receive a Performance Improvement Plan. If the behavior occurs in clinical, the student will receive a Needs Improvement (NI). Behaviors not conducive to a learning environment, and thus defined as incivility include:

<table>
<thead>
<tr>
<th>Examples of Incivility and unacceptable behavior</th>
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<tbody>
<tr>
<td>Cell phone, texting, and computer misuse</td>
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<tr>
<td>Rude comments, put-downs, slurs, and rumors (in person and in cyberspace)</td>
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<tr>
<td>Interruptions and side conversations</td>
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<tr>
<td>Late arrivals and leaving early</td>
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<tr>
<td>Sleeping in class/clinical/lab</td>
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<tr>
<td>Aggressive, intimidating, and bullying behaviors</td>
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<tr>
<td>Anger or excuses for poor behavior</td>
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<tr>
<td>Cheating and other forms of academic dishonesty</td>
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<tr>
<td>Displaying a sense of entitlement</td>
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<tr>
<td>Blaming others for shortcomings</td>
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<tr>
<td>Shunning or marginalizing others</td>
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<tr>
<td>Direct threat (verbal, nonverbal, electronic) to others</td>
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<tr>
<td>Drug or alcohol use prior to attending a campus function</td>
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<tr>
<td>Irresponsible and unprofessional use of social media</td>
</tr>
</tbody>
</table>

Inappropriate use of electronic devices in class will be addressed at the professor’s discretion.

Any evidence of bullying warrants an incident report to be filed with the Dean of Student Services, Stacy Ehmen, who will be responsible for follow-up.

Students are expected to not work the previous eight (8) hours immediately prior to clinical in order to ensure client safety and decrease the potential for errors from practicing in a sleep-deprived condition; therefore, working the eight (8) hours immediately preceding the clinical day will result in an Unsatisfactory (U) and a Performance Improvement Plan will be completed by the faculty. The student will be asked to leave clinical and this will count as one missed clinical absence.

Clinical sites may be held outside Danville and require students to travel. Clinical sites will be within a one (1) hour radius of DACC. Travel to these clinical sites is at the student’s expense.

Students may be responsible for obtaining their clinical assignments prior to their clinical experience when applicable. At no time should any direct patient contact occur when students are obtaining their clinical assignment. Students are expected to be adequately prepared for clinical. Adequately prepared is defined as having equipment needed for patient care such as stethoscope, proper student uniform code, and having the clinical knowledge for patient care. Failure to be adequately prepared for the clinical day will result in a Needs Improvement (NI) on that specific clinical outcome.

Students who are determined to be unsafe in clinical will be dismissed from clinical immediately. Unsafe behaviors require immediate intervention to protect patients and the public from unnecessary exposure to dangerous or potentially dangerous situations. The following are examples of unsafe behaviors.
Examples of unsafe behaviors

<table>
<thead>
<tr>
<th>Examples of unsafe behaviors</th>
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</thead>
<tbody>
<tr>
<td>Inability to follow instructions and safety measures</td>
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<tr>
<td>Inability to perform skills without constant guidance</td>
</tr>
<tr>
<td>Unprepared for clinical, i.e., lack of medication administration knowledge, etc.</td>
</tr>
<tr>
<td>Performing procedure or administering medication without direct supervision of nursing faculty or registered nursing staff</td>
</tr>
<tr>
<td>Impaired behaviors such as loss of motor skills, abuse of drugs or alcohol, or a psychiatric disorder, of sufficient degree to diminish his or her ability to deliver competent patient care</td>
</tr>
</tbody>
</table>

The clinical faculty member who has dismissed the student from clinical will immediately notify the Director of Nursing Education. The clinical faculty member will have two business days to submit written anecdotal notes for the reason for the clinical dismissal. The student will be required to meet with the Director of Nursing Education and clinical faculty member to discuss the unsafe behaviors. The student will receive a U on the clinical evaluation form and will also receive a U on the Performance Improvement Plan. Collaboratively, a plan of action to correct the unsafe behavior will be determined.

No food or drinks (except for water) are allowed in any classroom, clinical, or lab.

No gum chewing, tobacco, or smokeless tobacco is allowed in the clinical setting.

Pagers, cellular phones, text messaging, and similar devices are not to be used in the classroom, lab, or clinical settings. Family members, babysitters, etc. should be informed of telephone numbers that are appropriate institutional contacts for emergency use. (Office Assistant for Health Professions and/or the Office Assistant for Math/Science Division—see page 3 for contact information).

Concerns regarding the clinical site or experience should be discussed with the clinical instructor. Students should not, at any time, contact the clinical facility for matters regarding your clinical experience.
Student Dress Code

The student dress code will be followed when obtaining clinical assignments. The DACC nursing student name badge must be worn AT ALL TIMES when in a clinical setting. The dress code at an affiliating agency may be more restrictive than the following policies. Faculty will advise students in this situation to follow the agency’s policy. The DACC embroidered top and lab coat cannot be worn by student while they are outside the assigned clinical setting or other medical facility.

A. Clean, wrinkle-free, pressed hunter green uniform with embroidered nursing program emblem (purchased from Polyclinic), and name badge worn at chest height. Pants should not touch the ground.
B. Full coverage undergarments are to be worn under the uniform. Undergarments are not to be visible.
C. When uniforms are not required during clinical experiences, students must wear name badge and appropriate conservative business attire. Students should not wear:
   • Sleeveless, tight or low cut tops
   • Low rise and/or sagging pants (abdomen/buttocks should not show with arms raised)
   • Skirts should not be tight and the hem of or top of slits should be below the tip of middle fingers when placed on leg
   • Shirts with slogans
   • Attire which causes distraction or impedes the ability to give healthcare assistance
D. Students may wear a plain, white short/long sleeved shirt underneath the uniform top. If one is worn, it must be tucked in. No thermal undershirts or shirts with logos should be visible.
E. Clean, plain white leather shoes – no clogs, open heel or toe, or high-tops.
F. Plain white hose or ankle high socks. If wearing skirts, white hose should be worn to cover the legs.
G. Good personal hygiene, being well-groomed, without body odor, and clothing in clean condition is expected at all times in the classroom, lab, and clinical settings.
H. Students are to be clean shaven or have a neatly trimmed moustache and/or facial hair.
I. No excessive makeup. Makeup should be conservative.
J. Hair should be clean and neat. Hair must be out of eyes and secured only with subtle hair accessories. Hair must be of natural color. No streak(s) of color/ombre. NO two tone color weaves are allowed. Extreme colors (for example, pink, purple) are not allowed. Hair style must not interfere with the student responsibilities. Hair needs to be pulled back and up off the nape of the neck. Hair should not fall forward when leaning over patient.
K. No artificial fragrances, including, but not limited to perfumes, body lotion, or cigarette smoke.
L. Nails at fingertip length and clean without polish.
M. Jewelry:
   • Engagement/wedding rings only (in some clinical areas all jewelry must be removed)
   • Simple neutral color, professional style watch with second hand (no costume jewelry)
   • Students with body piercing may wear one small pair of stud post earrings only in the earlobes. Except for the ear lobe, no other body piercings are allowed to be visible.
   • Ear gauges must be removed and/or covered.
   • Necklaces, bracelets, decorative pins, etc. are not acceptable.
   • Students in Level II may wear their LPN graduation pin on the student uniform.
N. Stethoscope must be carried in uniform pocket and should be dark or neutral in color (i.e., black, navy, brown, gray, tan, white, hunter green, or burgundy).
O. All Tattoos must be FULLY covered.

P. Lab Coats: Hunter green lab coat is optional, but if worn, must have the embroidered nursing program emblem on left sleeve.

Students are expected to follow the student dress at all times while in the lab and clinical setting. Students not following the student dress code may be asked to leave and marked absent for the time that was missed. Violations of the dress code will result in an Unsatisfactory (U) within the professional behavior outcome. Further violations may result in an Unsatisfactory (U) and ultimately clinical failure. Students who do not comply with the Nursing Program Dress Code will be dismissed from clinical immediately and receive a zero for the day.

**Grading System**

A minimum of a “C” grade must be maintained in each course of the theoretical component. In the clinical component, students must receive a Satisfactory (S) to pass the clinical component. An Unsatisfactory (U) clinical grade will result in the student receiving an “F” in the course despite having a passing theory grade. Further details on the rubric for the clinical component can be found on the clinical evaluation (weekly/summative) tools.

The following grading system is utilized for the theory component:

- 100 – 93.00 A
- 92.99 – 83.00 B
- 82.99 - 76.00 C

No rounding of grades will occur. Student must achieve a 76.00% to pass the theoretical portion of the course. Students who do not achieve a 76% in the theoretical portion of the course will receive a grade of D. The theoretical portion of the course includes any assignments, tests, quizzes, and projects for example. Lab and clinical are not considered theory and grades from those will be calculated into the final course grade after the 76% for theory has been reached.

**Testing Procedure**

1. Students will be allowed one to one and one-half minute per question at the faculty discretion for each test unless additional time is pre-approved by student services. Per the college policy, 2.5 hours will be allotted for the final exam.

2. Students must place their name and Student Test ID on the answer form. Students who do not place their name and Student Test ID on the answer form will receive a zero for the test. Students who just their name or ID will receive a 5% reduction in their grade.

3. When the test is completed, the student returns the answer form and the copy of the test to the instructor, and may than leave the classroom until the last student has completed his/her test.

4. No cell phones, smart watches, or other electronics will be allowed during the testing process. This includes testing completed at the assessment center as well.

5. Desks should be clear with the exception of a pencil. Water bottles should not be on the desk and are subject to inspection. Hats need to be removed.

6. It is the student’s responsibility to assure that any erasures and other stray marks on the answer sheet are removed.
7. At faculty discretion, testing early outside of designated class time is done in the Assessment Center. Arrangements will need to be made in advance.

Any discrepancy in the grade should be discussed with the instructor. Grades are calculated as follows: Subtract the number wrong from the total possible points. Example: 55 total questions minus 5 incorrect answers = 50 correct answers. Then divide 50 by 55= 0.909 or 90.9%.

Group test reviews will be done at the instructors’ discretion. Students may make an appointment with the instructor(s) to review their individual tests in the presence of the instructor. Students may take notes on the areas which were unclear. The answer forms will be graded and the grades will be posted.

**Faculty have up to one week** to enter grades as test review and test analysis of the exam needs to be completed. Grades for final exams will not be posted for 24 hours after the exam.

**Late Testing Procedure**

Five percent (5%) will be deducted for the first and second occurrence testing not completed at the initial time offering. For the 3rd occurrence and thereafter, there will be a 10% deduction. The late test must be taken in the Assessment Center, Cannon Hall, Danville Area Community College, 24 hours within the date of return to class, excluding weekends. The **STUDENT** will call the Assessment Center (443-8708) and make an appointment to take the test. The hours for the Assessment Center may vary. When the student calls the center, they must identify themselves as a Danville Area Community College Nursing Program student calling to schedule a time to make up a test. The student must be specific as to which test he/she is scheduling. Tests will be available by 12:00 pm on the day of the test at the Testing Center; however, it is the student’s responsibility to notify the instructor that the test needs to be taken. The testing format of the late test may vary from the original written test based on instructor discretion. Makeup tests not taken on the scheduled make-up will result in the student receiving a zero percent (0%) on the test. The student must show a photo ID when they arrive at the Assessment Center.

**ATI Testing Policy**

The Assessment Technologies Institute (ATI)’s Comprehensive Assessment and Review Program is designed to provide students with various learning tools that assist them in reviewing course content, identifying strengths and weaknesses, improving test taking abilities, and ultimately successfully passing the NCLEX-PN and NCLEX-RN for professional licensure. The Nursing Program considers ATI materials to be a beneficial adjunct to the curriculum and therefore takes successful completion of all ATI assessments very seriously.

The program involves a proctored assessment of nursing knowledge after core nursing courses, a comprehensive NCLEX-PN readiness examination that is administered at the end of the first year, and NCLEX-RN readiness examination given during the second year, prior to graduation.

ATI offers many unique online tutorials. The tutorial Nurse Logic, for instance, teaches nursing students how to think like a nurse, how to take a nursing assessment, and how to make sound clinical decisions. The Learning System offers practice tests in specific nursing content areas that allow students to apply the valuable learning tools from Nurse Logic. Features embedded in the Learning System tutorial such as hint buttons, a talking glossary, and a critical thinking guide help students gain an understanding of...
Students have an opportunity to take the course specific non-proctored or practice tests as many times as they wish during the semester prior to taking the course specific proctored assessment assigned in the respective course. Feedback about the test results is provided to the students as part of the overall ATI program. This feedback is in the form of a detailed report of the individual performance on the designated test and provides scores for mastery of nursing content areas, nursing process, critical thinking phases, therapeutic interventions, communication skills and cognitive levels. Students are able to complete a focused review for the items they need to improve on. These tools help the student close any learning gaps discovered.

The following policy describes the use of the (ATI) Comprehensive Assessment and Review Program. This policy has been developed to facilitate the assessment of students and establish a review and remediation process to enhance success in the program and on NCLEX after graduation.

1. Admission-- The ATI Test of Essential Academic Skills (ATI-TEAS) is used as a component of the admission process.

2. Nursing Program Success Plan
   a. Students must complete the ATI assessments (non-proctored and proctored) as assigned per course on the day scheduled. See table below.
   b. Prior to taking each proctored assessment, students are required to complete the ATI Practice A assessment with a raw score of 90% or higher prior to the specified proctored assessment.
   c. Admission to the proctored assessment is contingent on the completion of Practice Assessment A.
   d. Students who have not achieved a raw score of 90% or higher on the Practice A will not be allowed to take the proctored assessment.
   e. The student will receive 0 points for the proctored ATI. The student will need to schedule to take the proctored assessment in the Assessment Center 24 hours within the date of return to class, excluding weekends.
   f. At the end of NURS 195 (Level I) students will take the PN Comprehensive Predictor exam.
   g. At the end of NURS 299 (Level II) students will attend a mandatory Live Review with ATI faculty. This is a three day Comprehensive RN-NCLEX review.
   h. Prior to the Live Review, students will take their first proctored RN Comprehensive Predictor exam. After the Live Review, students will take their second proctored RN Comprehensive Predictor exam. The second Comprehensive Predictor will be worth 30% of the final grade.
   i. The ATI Comprehensive Predictor is not the Final Exam per ATI’s policy of not using these tests as high stakes testing

3. Course Credit
   a. The Comprehensive Predictor grade for NURS 195 and NURS 299 will be worth 30% of the final grade.
   b. If a student does not meet the minimum requirements (raw score of 70%) of the PN or the second RN Comprehensive Predictor Exam. They are required to enter a remediation process with the Director of Nursing Education.
   c. Point Allocation for the proctored ATI assessment in selected courses comprise a component of the course grade equivalent to 5%, based on achievement of Proficiency Levels as indicated by ATI.
d. In those courses where there is more than one ATI proctored assessment, each ATI assessment will be worth 5% of the course grade.
### ATI Proctored Tests

<table>
<thead>
<tr>
<th>Course Number</th>
<th>ATI Test</th>
<th>Total # of questions for Practice Test A</th>
<th>Total # of questions for Proctored Assessment*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior to Admission</td>
<td>Test of Essential Academic Skill (TEAS)</td>
<td>N/A</td>
<td>170</td>
</tr>
<tr>
<td>NURS 192</td>
<td>RN Fundamentals</td>
<td>70</td>
<td>70</td>
</tr>
<tr>
<td>NURS 195</td>
<td>RN Maternal Newborn&lt;br&gt;RN Nursing Care of Children&lt;br&gt;PN Comprehensive Predictor</td>
<td>70&lt;br&gt;70&lt;br&gt;180</td>
<td>70&lt;br&gt;70&lt;br&gt;180</td>
</tr>
<tr>
<td>NURS 297</td>
<td>RN Adult Medical Surgical</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>NURS 298</td>
<td>RN Mental Health</td>
<td>70</td>
<td>70</td>
</tr>
<tr>
<td>NURS 299</td>
<td>RN Pharmacology&lt;br&gt;PN Comprehensive Predictor</td>
<td>70&lt;br&gt;180</td>
<td>70&lt;br&gt;180</td>
</tr>
</tbody>
</table>

*All ATI Proctored Assessments include 10 Pretest items that are not included in the students’ scores. The Comprehensive Predictor assessments also include Pretest items (30) which are not included in the students’ scores.

### ATI Proctored Test Remediation Requirements

<table>
<thead>
<tr>
<th>ATI Proctored Test Points vary based on proficiency level</th>
<th>Remediation required</th>
<th>Number of Hand Written Remediation Templates Required + Practice Test B</th>
<th>Number of hours for focused review</th>
<th>Percentage possible (5% of total course grade – if more than one test/course, the total will be 10%).</th>
<th>Remediation percentage awarded</th>
<th>Total possible percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proficiency Level 3 (Proctored Test)</td>
<td>None</td>
<td>N/A</td>
<td>5%</td>
<td>N/A</td>
<td>N/A</td>
<td>5%</td>
</tr>
<tr>
<td>Proficiency Level 2 (Proctored Test)</td>
<td>None</td>
<td>N/A</td>
<td>5%</td>
<td>N/A</td>
<td>N/A</td>
<td>5%</td>
</tr>
<tr>
<td>Proficiency Level 1 (Proctored Test)</td>
<td>Yes</td>
<td>5</td>
<td>1 hour</td>
<td>3%</td>
<td>1%</td>
<td>4%</td>
</tr>
<tr>
<td>Below Proficiency Level 1 (Proctored Test)</td>
<td>Yes</td>
<td>10</td>
<td>2 hours</td>
<td>2%</td>
<td>1%</td>
<td>3%</td>
</tr>
</tbody>
</table>

*Practice assessment A will be assigned to students. Students will need to complete Practice A with a 90% or higher and turn in prior to the proctored assessment for that course.

*** Criteria Referenced Proficiency Levels Guidelines:

Performances on content-specific course mastery assessments are based on Criterion Referenced Proficiency Levels. The Criterion Referenced Proficiency Levels are as follows:

### The student meeting the criterion established for Level 3:
- Is expected to readily meet NCLEX-RN® standards in this content area.
• Should demonstrate a high level of knowledge in this content area that confidently supports academic readiness for subsequent curricular content.
• Should exceed most expectations for performance in this content area.
• Meets benchmark and does not require remediation

The student meeting the criterion established for Level 2:
• Is expected to readily meet NCLEX-RN® standards in this content area.
• Should demonstrate a level of knowledge in this content area that more than adequately supports academic readiness for subsequent curricular content.
• Should exceed minimum expectations for performance in this content area.
• Meets benchmark and does not require remediation.

The student meeting the criterion established for Level 1:
• Is expected to just meet NCLEX-RN® standards in this content area.
• Should demonstrates the minimum level of knowledge in this content area required to support academic readiness for subsequent curricular content.
• Should meet the absolute minimum expectations for performance in this content area.
• Does not meet benchmark and requires focused self-remediation.

Focused self-remediation for course specific proctored assessments:
• Students will complete the active learning/remediation templates found in the ATI books.
  o Active Learning/Remediation (in the form of hand written remediation templates) is a process of reviewing content in an area that was not learned or not fully understood as demonstrated on an assessment.
  o These help the student review important information to be successful in courses and on the NCLEX.
  o The student’s test report, called their individual performance profile, will contain a listing of the topics to review.
  o The test results will help the student complete the hand written remediation templates.
  o The number of hand written templates required is based on the proctored test score.

Online ATI Practice Assessments remediation:
• Students will complete of the Practice B assessment with a raw score of 90% or higher.
• It is strongly recommended that the student
  o Spend one (1) hour in focused review for achieving Proficiency Level 1
  o Spend two (2) hours in focused review for Proficiency Below Level 1
  o Completed the 5 remediation templates for Proficiency Level 1 and
  o Complete the 10 remediation templates for below Proficiency Level 1.

ATI PN and RN Comprehensive Predictor Exam
Students will take the NCLEX-PN Comprehensive Predictor at the end of NURS 195 and the NCLEX-RN Comprehensive Predictor at the end of NURS 299. These are mandatory. Students will be required to achieve a 90% probability of passing the PN and RN Comprehensive Predictor. Students will be required to achieve a raw score of 70% which corresponds closely to a 90% predictability. Students who do not achieve this will be required to complete remediation. Failure to complete remediation will result in an incomplete in the course until the requirements have been met. At the end of 30 days if
the student has not satisfied the remediation plan, the incomplete will be automatically replaced with an F, per DACC policy.

Remediation for PN and/or RN Comprehensive Predictor

The Comprehensive Predictor is an accurate indicator of the student’s success in obtaining licensure when combined with ongoing review between graduations and testing. Therefore the Nursing Program takes the outcome of this Predictor exam very seriously. The exam will serve as the final exam for the course which is worth 30% of the student’s final grade.

Students who do not achieve a 90% probability (raw score of approximately 70% or less) of passing NCLEX on the PN Comprehensive Predictor or RN Comprehensive Predictor will be required to meet with the Director of Nursing and complete a remediation plan. The Director of Nursing will meet with the student to discuss the remediation requirements. The remediation plan template for both the PN Comprehensive Predictor and the RN Comprehensive Predictor is attached to this Handbook. Remediation may occur after the last date of the course. Students who do not complete the remediation will receive an incomplete for the course until the remediation has been completed. Once the remediation has been completed, the grade will be changed from an incomplete to the earned course grade, per DACC policy.
Clinical Evaluation and Measurement

The clinical evaluation tools for each course are based on the course objectives and include behavioral, communication, and psychomotor skills. The student must attain a satisfactory clinical grade by meeting the stated objectives. Further details on the rubric for the clinical component can be found on the clinical evaluation (weekly/summative) tools.

Individual student-faculty meetings may be held weekly in private offices or clinical setting to discuss written anecdotal notes from the student’s previous clinical experience. Students are required to complete a summative self-evaluation at the end of each clinical experience. Faculty then review the student’s self-evaluation, along with the weekly evaluations, for the student’s final clinical evaluation.

Student clinical assignments are assignments used for students to apply the theoretical material to the clinical experience. These clinical assignments are graded and worth a portion of the course grade. Students are expected to achieve a 76% on the clinical assignment. Failure to achieve a 76% will result in a Needs Improvement (NI) and the student resubmitting the clinical assignment until the grade is 76% or above. The initial grade will be the one used for course grade calculations. Failure to resubmit the clinical assignment will result in an Unsatisfactory (U).

Completion of Course Requirements

All required course work is to be completed by the due date assigned by the faculty. Submission and acceptance of late course work will be handled on an individual basis by each faculty member. Any student who has not completed all clinical paperwork or theory requirements by the last day of class before the final testing will receive an incomplete for the course. Students will only be allowed two weeks following the course to remove the incomplete. If the student fails to complete the requirements, the student will fail the course and be dismissed from the program.

Students must pass the clinical component of each nursing course in order to pass the theory component. Denial of access to any clinical facility will stop the student’s progression in all clinical activities and he/she will be dismissed from the program. This includes, but is not limited to, criminal background checks and positive substance abuse screens.

Performance Improvement Plan

The Performance Improvement Plan will be completed by the faculty member or Director of Nursing Education. The faculty member or the Director of Nursing Education will then set up a meeting with the student to clarify the behavior(s) of concern. After the meeting is completed, the student and faculty member will outline the plan for academic success. Both the faculty member and the student will sign the form, one copy will be given to the student and the other copy will be placed in the student’s personal file. At any time, a faculty member or student can request that the Director of Nursing Education be present at the meeting with faculty.
Confidentiality

As part of their affiliation with clinical agencies, students enrolled in clinical courses are required to comply with federal HIPAA regulations, state regulations, and facility policies with regard to privacy of patient information. All patient and clinical agency-related information is considered confidential information. Confidential information may NOT be discussed in any public place – such as the student lounge, the halls of the hospital or school, hospital cafeteria or any similar public place. Any breach of confidentiality will result in an Unsatisfactory (U) under the appropriate clinical outcome.

- Written information, such as care plans, practice nurse’s notes, growth and development papers, etc. pertaining to a patient, or any written information must be guarded as confidential. Any written information should never contain the patient’s name or any other identifying information (including patient initials).
- Do not discuss clinical experiences in any public place. Confidentiality of patients, staff, faculty and students is to be maintained at all times. Patient information or clinical situations should never be discussed in public places or on social networking sites even if the patient is not referred to by name.
- Photocopying or printing of any patient records or removal of patient records from the clinical facility is expressly forbidden.
- Photography of any patient or clinical situation is strictly prohibited.
- Violations of privacy regulations/policies will result in immediate dismissal from the program, and may involve civil and criminal penalties.
- Social Media (for example, Facebook and Twitter) and cell phone guidelines
- Students shall not use online social media to harass, threaten or discriminate against other students, faculty, staff or any member of the public.
- Text, photos, e-mails or videos that are demeaning or insulting to others may not be used and/or posted.
- Clinical affiliation agencies prohibit the use of cell phones and other electronic devices.
- Personal information about students, faculty, staff or clinical sites may not be shared on networking sites without written permission from all parties involved.
- Computers and cell phones are not to be used during class or clinical time for social networking, texting, e-mailing or other recreational use.

Students should be aware that information posted on these sites violate the DACC Student Code of Conduct. Students will be given an Unsatisfactory (U) under Professional Behaviors. Furthermore, such violations can place the student at risk for civil and criminal penalties.
Accidents or Illnesses

All accidents or illnesses which occur during school hours in the classroom or clinical setting must be reported immediately to the instructor in charge of the class. The nursing program follows the campus policy as outlined in the DACC Student Handbook. However, the student is responsible for maintenance of his/her own health needs. Each student should carry their own medical insurance to cover illnesses and accidents. The student is responsible to obtain his/her own medical care at his/her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the facility. It is DACC policy to initiate emergency medical response.

Use and disposal of needles and other sharps are potentially hazardous procedures for health care personnel. Needle stick injuries pose a serious risk for infection with Hepatitis B virus, human immunodeficiency virus (HIV) and many other pathogens. OSHA has set standards to prevent such injuries including, but not limited to, using appropriate puncture-proof disposal containers to dispose of uncapped sharps, never bending or breaking needles before disposal and never recapping used needles.

If a needle stick injury occurs during a clinical rotation, the student MUST report the incident immediately to the supervising clinical faculty who will follow the recommendations set forth by the attending clinical agency.

Medical Conditions

Declaration or disclosure of medical conditions is a voluntary act. Nursing Student with medical conditions will be expected to meet the same conditions and objectives stated in DACC policy. If the student is unable to meet the technical standards that are required of all students, they will be allowed to withdraw and return the following semester based on class and space availability. Withdrawing due to medical conditions will not count towards the number of admissions allowed for the student unless they are failing (course and/or clinical) at the time of the course withdraw. Students who choose to withdraw due to medical conditions must present a physician’s note which outlines the medical necessity to withdraw. Upon returning to the nursing program, students must present a note from their physician noting that they are free from restrictions and able to meet the technical standards of the nursing program.

Students are required to submit disability/accommodation documentation to the Disability Service office, the Nursing Program office, and to their professors. If there are any changes to the disability/accommodation additional documentation must be provided to all parties concerned.
Statement of Academic Integrity

Each student at DACC is expected to exhibit conduct which corresponds with the educational mission of the College. It is the student’s responsibility to become familiar with and adhere to the Student Code of Conduct, as outlined in the DACC Student Handbook, page 76. Students who violate the Student Code of Conduct are subject to disciplinary sanctions, as outlined in the DACC Student Handbook: http://www.dacc.edu/student-handbook.

Activities that violate academic integrity undermine the educational quality and diminish the value of educational achievement. Academic dishonesty may prevent the student from gaining knowledge, skills, or attitudes necessary to provide quality, safe care to patients.

Unprofessional Behaviors

Students are expected to adhere to the DACC Student Code of Conduct as described in the DACC Student Handbook, page 76 and following. In addition Nursing Students are expected behave in a civil manner (see list of incivility behaviors provided earlier in this handbook.) Nursing Students are also expected to behave in a manner that reflects the American Nurses Association (ANA) Code of Nursing Ethics and the National Council of State Boards of Nursing (NCSBN).

Students who have a reasonable suspicion of dishonest, disruptive, or unprofessional behavior in other nursing students should report their observations to the course instructor or to the Director of Nursing. Any student who is with the student who is behaving in a dishonest, disruptive, or unprofessional manner is obliged to remind that student that their behavior is not acceptable. If this is not done, then the student is considered in compliance with the dishonest, disruptive, or unprofessional behavior and will be disciplined with the offending student. The course instructor or Director of Nursing will then proceed to investigate the behavior as the situation warrants, per college policy.

Violations of DACC Code of Conduct policy will be forwarded to the Dean of Student Services. Violations of Nursing Program Policy will be reviewed by the Director of Nursing Education. The student(s) accused of misconduct will be notified by letter. A review panel will be convened to review the student(s) conduct issue. The Review Panel will decide on the level of discipline required, mindful of the students’ rights and in accordance with DACC policy.

Social Media Policy

The DACC Nursing Program follows the NCSBN guidelines on the professional use of social media. The expectation is that while Face Book and other social media outlets are useful means of communication and connection, privacy and confidentiality boundaries must be observed. Inappropriate social media postings will be considered a violation of the Nursing Program Policy and subject to review.

Substance Abuse Policy
Students must adhere to DACC’s drug free policy, [http://www.dacc.edu/student-handbook](http://www.dacc.edu/student-handbook), page 66, and must meet criteria of each clinical site utilized by the program. The nature of substance abuse includes denial and pervasive inability to think and behave logically. Thus, the safety of patients is greatly influenced by the cognition and behavior of the nursing students caring for them.

It is the policy of DACC Department of Nursing that drug screening is done on admission and immediately upon suspicion of substance abuse. Any student with a positive drug screen will be considered ineligible for the program and ultimately dismissed from the program. The test(s) required by the nursing program will be done at a designated health occupation facility and the cost of the test(s) will be at student’s expense. The student must sign a release of information form allowing the results of the test to be released to the Director of Nursing at DACC. Failure to do so, will result in the student’s dismissal from the program.

If a student refuses testing or fails to consent, he/she will be immediately dismissed from the program. Additionally, if a student tests positive at any time for illegal drugs, non-prescribed or non-adherent legal drugs or alcohol, the student will be immediately dismissed from the program.

Faculty will contact the student’s designated emergency contact and the emergency contact will be responsible for taking the student for drug testing and/or drive them home.

The student may gain a second admission in the nursing program if they:

- Have an alcohol/drug assessment at an approved program identified by the Director of Nursing and sign a release of information permit for the Director of Nursing to be sent the results of the assessment.
  - If the student is identified to have a drug/alcohol problem, he/she will be referred for appropriate treatment. The student must present written proof of attending/completing appropriate treatment.
  - Any student that refuses the assessment or does not attend or complete the designated treatment program will not be allowed second admission into the program.

  - **Readmission will only be considered if a treatment program has been successfully completed.**
Dismissal from the Program

A student will be dismissed for the following reasons:

1. Demonstration of conduct not in accordance with the ethical standards of licensed registered nurses during class/clinical/lab instruction. Misconduct related to professional nursing (verbal, non-verbal, electronic communication) including, but is not limited to, academic dishonesty, plagiarism, substance abuse, neglect and/or abuse of clients, bullying, patient abandonment, breeching confidentiality (HIPAA violation) and falsifying records.
2. A grade point average below “C” (76.00%) in the theoretical component of any one nursing course.
3. Two Unsatisfactory ratings on an individual outcome on a formative clinical evaluation.
4. One Unsatisfactory (U) rating on a summative clinical evaluation.
5. Conviction for a felony or misdemeanor during the academic year which would result in the student’s denial to a clinical site.
6. Failure to honestly answer questions on admission/medical forms.
7. Inability to meet criteria of each clinical site utilized by the program, including but not limited to clinical site refusal of student attendance.
8. Administering medications or performing procedures without direct supervision of nursing faculty or registered nursing staff.
9. Failure to attend mandatory clinical orientations, clinical experiences, and any other classes, events, etc. that the student has been notified is mandatory.
10. Failure to comply with plan of action as outlined on the Performance Improvement Plan.
11. Failure to comply with the Substance Abuse Policy outlined in the DACC Nursing Student Handbook, page 66 and following.
12. Sentinel event the student was involved in.

*A sentinel event* is defined by the Joint Commission (2013) as: an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof. Serious injury specifically includes loss of limb or function. The phrase, "or the risk thereof" includes any process variation for which a recurrence would carry a significant chance of a serious adverse outcome. Such events are called "sentinel" because they signal the need for immediate investigation and response.  
(http://www.jointcommission.org/sentinel_event.aspx)
Readmission

If a student requests readmission for any reason, the Admission Selection Committee will make the decision based upon the reason for withdrawal and available space. The process for readmission is as follows:

- Readmission to the nursing program after dropping/withdrawing/and/or failing is not guaranteed.
- Students who are seeking readmission to NURS 192, regardless of the reason for leaving, must reapply to the nursing program and be ranked with all new applicants. No credit/points will be given for previously attending the nursing program. As always, the top ranked candidates will be chosen for admission into the nursing program. Acceptance into these courses is based on number of points, space availability, and approval from the Admission Selection Committee.
- Students reapplying to NURS 194, 195, 296, 297, 298, 299 must meet admission criteria at the time of reapplication. Acceptance into these courses is based on space availability and approval from the Admission Selection Committee.
- The student may be eligible for readmission to the program if the readmission is within one year of the original withdrawal date, after completion of NURS 192, or for the next available time the needed course (s) is offered.
- If a greater period of time has elapsed than one year, the student will be required to reapply and enter the program at the beginning of the course work for the level they are applying to and will need to retake previous nursing course(s) he/she may have previously successfully completed.
- Students seeking readmission must meet admission criteria at the time of reapplication.
- A student may be considered for readmission to the program one time only regardless of the reason for leaving/dismissal. Unless special consideration is provided by the Director of Nursing due to extenuating circumstances.
- The Admission Selection Committee will consider readmission to the program based on the following:
  - Academic standing and continued academic efforts.
  - Withdrawal due to documented medical conditions that have resolved as long as all technical requirements are met.
  - Student behavior and level of professionalism during previous admission.
  - The student folder from the previous admission will be reviewed, including Performance Improvement Plans and other evaluations.
  - The student will be provided with an opportunity to submit an Action Plan for performance improvement.
- LPN Admission into Level II
  - Level II applicants must be working LPN’s with an unencumbered LPN license. (License must be unencumbered for a minimum of 5 years or the duration of having your license if less than 5 years). The work requirement is at least a minimum of 1040 hours in one year.
  - LPNs that are applying for Level II must have their employer submit an Evaluation of Applicant’s Performance and Potential and a Verification of Employment Letter. This letter will be reviewed by the Selection Committee.
- Readmission to Level II
  - LPN’s may apply for one additional readmission as a Level II student.
• Application acceptance is based on space availability, the student meeting admission criteria at the time of reapplication, and Admission Selection Committee approval.
• LPNs that are reapplying for Level II must have their employer submit an Evaluation of Applicant’s Performance and Potential and a Verification of Employment Letter. This letter will be reviewed by the Selection Committee.
• Students readmitted under these criteria will not be eligible for a 3rd admission into the nursing program, regardless of how long they have worked as a LPN.
• These requirements must be met before the student may attend class:
  o All applicants seeking readmission must have had a physical examination and drug screen within the six months prior to the date of readmission.
  o Applicants must also have current immunizations.
  o All applicants must have an American Heart Association BLS (Healthcare Provider) CPR card or American Red Cross CPR card. No other cards are accepted.
• Students who are selected for admission/readmission will attend a mandatory orientation with the Director of Nursing Education as stated in the acceptance letter.
• Readmission following a sentinel event or unethical conduct:
  o Students dismissed from the program following a sentinel event, as defined on page 40, in a clinical or unethical conduct in class, lab or clinical are not automatically eligible for readmission to the program.
  o If a student requests readmission, they must submit their admission application, along with a request for readmission addressing the specific reason for the dismissal and an action plan for remediation to the Director of Nursing.
  o This request will be reviewed by the Admission Selection Committee.
  o The student will be notified of the committee’s decision within 30 days of the application deadline.
  o Students who voluntarily withdraw from the nursing program following a sentinel event are under the same regulations regarding readmission following a sentinel event in a clinical or unethical conduct while enrolled in the nursing program, including conduct outside of classroom/clinical/lab scheduled time.
  o Students who choose to voluntarily withdraw from the program but have still displayed unethical conduct in or outside of class/lab/clinical may not be eligible for readmission.
  o Readmission status will be reviewed by the Admission Selection Committee.
Graduation Requirements

Meeting graduation requirements is each student’s responsibility. Students should check regularly with the college Academic Advising and Counseling office to ensure he/she is fulfilling the requirements. All general education coursework must be completed at the conclusion of nursing coursework or the student will not have met the requirements for the degree and will not be eligible for licensing.

To complete the nursing program at DACC, each student must:

1. Satisfy all admission requirements
2. Successfully complete 69 semester hours according to the nursing curriculum as published in the DACC Catalog
3. Discharge all financial obligations to the college
4. Complete the degree requirements of the college
5. Apply for the degree by completing a graduation application

Students wishing to obtain a Certificate for Level I must have completed all of the course work outlined in the DACC catalog for Level I – including the general education courses. Students missing general education courses will not be eligible to apply for the Certificate.

Commencement

Graduates who have completed the graduation requirements are required to participate in commencement. Commencement is held in the Mary Miller Complex gymnasium in May. Students are seated with the general student population alphabetically by last name.

Pinning Ceremony

A separate nursing pinning ceremony will be held to honor the Level II nursing graduates of the associate degree program. Students who complete Level I will have the option of purchasing an LPN pin through the Nursing Office and participate in the pinning ceremony. Only the students who have completed the program requirements will be allowed to participate in pinning. In order to participate in the nursing pinning ceremony, students are required to participate in commencement. Level I students will receive a Certificate of Program Completion during Commencement. The nursing program will purchase a nursing pin for each ADN graduate.
The following is the organizational chart for the nursing department:

- **Board of Trustees**
  - President, Dr. Stephen Nacco
  - Vice President, Instruction and Student Services, Dave L. Kietzmann
  - Dean, Math, Sciences, & Health Professions, Kathy R. Sturgeon

- **Director, Nursing Education** Mary S. Skinner
  - Office Assistant, Isela Rangel
  - Nursing Instructor, Nicole Carter
  - Lab Instructor, Ericka Johnson
  - Nursing Instructor, Joanna Commons
  - Lab Instructor, Aline Davis
  - Nursing Instructor, Shannon Childers
  - Nursing Instructor, Dianne Managanaro
  - Nursing Instructor, Cathy Jo Sroufek
  - Nursing Instructor, Phyllis Wille
Grievance Policy

When a student of the DACC community experiences a situation or a conflict in which the student thinks his/her rights have not been fully recognized or have been compromised in some manner, the students may resolved the conflict or his/her perceived grievance by following the College’s process for the resolution of grievance. Grievances may be resolved on an informal basis or on a formal basis. The nursing program follows the campus policy as outlined in the DACC Student Handbook. This policy can be found online in the Student handbook at http://www.dacc.edu/assets/pdfs/student-handbook/StuHandbook.pdf

Informal Resolution Process

1. Students are to meet with individual faculty within 10 business days of the situation or conflict to resolve any issues.
2. If the issue is not resolved to the satisfaction of the student at the point of origin within 5 business days, the student may contact and talk with the Director of Nursing.
3. If the issue is not resolved with the Director of Nursing, within 5 business days, the students should meet with the Dean of Math, Sciences, and Health professions.

Students are expected to follow the chain of command: 1) individual faculty, 2) Director of Nursing, 3) Dean of Math, Sciences, and Health Professions, 4) Vice President of Instruction and Student Services, and 5) College President.

Due to the nature or the seriousness of some potential student complaints, such as a complaint of harassment or knowledge of a serious conduct violation, the student is encouraged to bypass step one and immediately contact the Nursing Director. A student submitting complaints of harassment or serious conduct violation should request an appointment immediately with the Nursing Director. The Resolution Process Flow Chart reflects issues that would be of a level of seriousness to warrant this action. This may be found online in the Student Handbook http://www.dacc.edu/assets/pdfs/student-handbook/StuHandbook.pdf

After meeting with the Director and/or Dean, if a student feels their grievance is not resolved to their satisfaction (through the informal process noted above), the student may submit a formal grievance as stated in the DACC Student Handbook.
Reference


Quality and Safety Education for Nurses (QSEN) initiative.
APPENDICES
Performance Improvement Plan

Student Name: ___________________________ Date of Occurrence: __________________

Course: ___________________________ Semester: __________________

A report of a student clinical/classroom/lab occurrence is both a communication and educational tool to provide constructive feedback and remediation. This form will be placed in the student nurse’s file and the student will receive a copy.

<table>
<thead>
<tr>
<th>VIOLATION OF PROFESSIONAL STANDARDS OR UNETHICAL BEHAVIOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disrespectful or judgmental behavior to peers, faculty, patient, staff, visitor, etc.</td>
</tr>
<tr>
<td>Dishonest behavior/Lying</td>
</tr>
<tr>
<td>Withheld the truth/Error of omission</td>
</tr>
<tr>
<td>Demonstrated irresponsible behavior/Does not assume responsibility for own actions</td>
</tr>
<tr>
<td>Lack of professionalism in conduct and appearance</td>
</tr>
<tr>
<td>Incivility behaviors</td>
</tr>
<tr>
<td>Abuse or neglect of patient</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>UNSAFE OCCURRENCE (PATIENT CARE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Failure to gather data before giving care</td>
</tr>
<tr>
<td>Failure to assess all patient(s) completely and document in a timely manner</td>
</tr>
<tr>
<td>Failure to arrive prepared to give patient care</td>
</tr>
<tr>
<td>Failure to report a key assessment or change in patient condition in a prompt manner to: _______ RN _______ Instructor</td>
</tr>
<tr>
<td>Failure to make critical assessments before or after administration of medications, including but not limited to digitalis, anti-hypertensive, anticoagulants, insulin</td>
</tr>
<tr>
<td>Failure to intervene in a potentially life-threatening situation (i.e., obstructed airway, syncope, choking, cardiac arrest, vomiting with potential for aspiration)</td>
</tr>
<tr>
<td>Failure to maintain/create a safe environment</td>
</tr>
<tr>
<td>Failure to remedy an unsafe condition, i.e. side rails down or bed in high position.</td>
</tr>
<tr>
<td>No call light in reach</td>
</tr>
<tr>
<td>Unsafe handling of sharps</td>
</tr>
<tr>
<td>Violation of medical/surgical asepsis</td>
</tr>
<tr>
<td>Violation of standard precautions</td>
</tr>
<tr>
<td>Violation of isolation precautions</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>POLICY VIOLATION (PROGRAM, COLLEGE, HOSPITAL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procedure performed without prior instructor approval or observation</td>
</tr>
<tr>
<td>Failure to verify physician’s orders on patient’s chart prior to doing a procedure</td>
</tr>
<tr>
<td>Equipment operated in a manner that could have harmed patient/staff/visitor</td>
</tr>
<tr>
<td>Remained in facility after instructor had left and entered patient room to give care</td>
</tr>
<tr>
<td>Violation of patient confidentiality</td>
</tr>
<tr>
<td>Complaint of harassment or discrimination and validated</td>
</tr>
<tr>
<td>Bullying</td>
</tr>
<tr>
<td>Inappropriate use of social media</td>
</tr>
<tr>
<td>Sentinel event</td>
</tr>
<tr>
<td>Positive substance abuse screen or impaired behaviors</td>
</tr>
<tr>
<td>Clinical absence/tardiness</td>
</tr>
</tbody>
</table>
## UNSAFE MEDICATION ADMINISTRATION

<table>
<thead>
<tr>
<th>Violation of 7 R’s of Medication Administration: Wrong Patient; Wrong Drug; Wrong Dose; Wrong Route; Wrong Documentation; Wrong Time; Wrong Rationale for Giving Medication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Failure to check patient ID band with medication administration record</td>
</tr>
<tr>
<td>Failure to look up drug in drug handbook or other resource</td>
</tr>
<tr>
<td>Failure to have medication or IV fluid verified by instructor or approved RN prior to patient administration</td>
</tr>
<tr>
<td>Failure to check for patient allergies</td>
</tr>
<tr>
<td>Failure to consult with instructor prior to medication administration</td>
</tr>
</tbody>
</table>

## OTHER

- Unsatisfactory course grade
- Unsatisfactory clinical grade
- Unsatisfactory care plan grade
- Absence/tardiness
- Medical condition preventing clinical/course completion
- Other:  

**Plans for improving performance:**

- [ ] Tutoring center
- [ ] Decrease work hours
- [ ] Join peer study group
- [ ] Change of study habits
- [ ] Meet with Director of Nursing
- [ ] Alteration of clinical habits
- Other:

**Faculty Comments:**

**Student Comments:**

I have read the above statements and have received a copy.

Student’s Signature ____________________________ Date: ____________

Nursing Faculty’s Signature ____________________________ Date: ____________
**Intake Form**

for student Issues & Appointments

Date_________________   Time_________________

<table>
<thead>
<tr>
<th>SECTION A: STUDENT</th>
<th>STUDENT CONTACT INFORMATION Please print.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student concerns are welcome, but please note that DACC policy should be followed.</td>
<td></td>
</tr>
<tr>
<td>Date_________________   Time_________________</td>
<td></td>
</tr>
<tr>
<td>Name_________________</td>
<td></td>
</tr>
<tr>
<td>Address_________________   State_____ Zip_________</td>
<td></td>
</tr>
<tr>
<td>Phone_________________   Cell_________________</td>
<td></td>
</tr>
<tr>
<td>Email_________________</td>
<td></td>
</tr>
</tbody>
</table>

**DACC Student Handbook Resolution Process**
1. Student must first contact and talk with the faculty or staff with whom the student has a conflict.
2. If not resolved, the student may contact the director or dean of the program.
3. If not resolved, the student may contact the Vice President of Instruction.

For complaints of harassment or serious conduct violation, the student is encouraged to bypass step one.

**STUDENT CONCERN**

**COURSE __________________**

**INSTRUCTOR/STAFF __________________**

What is the nature of your concern? Please check the appropriate box.
- □ Course Policy Issues
- □ Curriculum Requirements (Prerequisites, projects, etc.)
- □ Course Grading
- □ Instructional Methodology Ineffective
- □ Conduct Violation _______________________________________
- □ Other _______________________________________________

Please give a brief description of your concern.

What actions have you taken to properly address the concern? Check the appropriate box.
- □ Emailed the instructor.
- □ Discussed the matter with the instructor via a phone conversation.
- □ Requested a meeting with the instructor and discussed concerns.
- □ Requested a meeting with the program director (for Health Profession students only).

□ Yes □ No Have you reviewed your course policy?
□ Yes □ No Are you requesting an appointment with the Director/Dean?
- We are happy to schedule an appointment. Appointments require a 24 hour wait period, except for serious conduct violations appointments

□ Yes □ No Have you reviewed your course policy?

**STUDENT SIGNATURE**

I have read the resolution process as detailed in the student handbook (summarized on the left of this form), and I understand that the Director/Dean may request a copy of the course outline and/or policy for my course or program. Other background information may be requested or accessed to resolve the issue as well.

Signature ____________________________ Date __________________
### SECTION B: OFFICE SPECIALIST

**VERIFICATION** *Review form for completion.*

Recommended
- Set up appointment with instructor/staff.
- Wait for email response/phone call from Dean or Program Director.
- Schedule appointment for [ ] at ______ am/pm.
- Other [ ]

Notes [ ]

### SECTION C: DEAN/DIRECTOR

**RESPONSE**

- Emailed Student
- Phone conversation on [ ] at ______ am/pm
- Scheduled Appointment on [ ] at ______ am/pm

Concern [ ]

Key Issue & Action Desired [ ]

Action [ ]
ATI PN Comprehensive Predictor (CP) /Final Exam

ATI PN-NCLEX Success Plan

Student: ________________________________ Date: _________________________

Preparation for Comprehensive Predictor

☐ Complete the Practice Assessments. Within the Practice Assessment, the student must complete the following modules with a 70% raw score or better. It is strongly recommended that two ATI test modules be reviewed per week.
  ☐ Adult Medical Surgical 20XX
  ☐ Fundamentals 20XX
  ☐ Management 20XX
  ☐ Maternal Newborn 20XX
  ☐ Mental Health 20XX
  ☐ Nursing Care of Children 20XX
  ☐ Pharmacology 20XX
  ☐ Take practice quizzes

☐ May audit the ATI Live Review.

☐ Complete PN Comprehensive Predictor Practice Test A. Achieve a 70% raw score or higher with a maximum of two attempts. (This is your Final Exam)

☐ Focused review on All Proctored Exams. Students should spend a minimum of 1 hour in focused review for Level 1 and minimum of 2 hours for Below Level 1.

☐ Take Proctored PN Comprehensive Predictor A. **Students must achieve 70% raw score.** Less than that will result in meeting with the Director of Nursing Education to develop a **Personalized Remediation Plan.** This test will be **30% of the NURS 195 final grade.**

**Students who scored below 70% raw score on Proctor Comprehensive Predictor are required to complete the Remediation Plan.**
SAMPLE – Personalized Remediation Plan NURS 195

Remediation Description:
Firming up the knowledge gained as Level I nursing students will positively impact student success at Level II, therefore it is necessary to ensure that any knowledge gaps are closed before summer break.

Score between 80-89
☐ Students who received a Predictor score between 80-89 will take the Practice B assessment until they achieve a Predictor Score 90% or greater.

Score between 70-79
☐ Students who received a Predictor score between 70-79 will take the Practice B assessment until they achieve a Predictor Score 90% or greater.
☐ They will also retake the practice tests A & B until they received a score less than 90% until they receive a score of 90% or greater.

Score less than 70%
☐ Students who received a Predictor score less than 70 will take the Practice B assessment until they achieve a Predictor Score 90% or greater.
☐ They will retake the practice tests A & B until they received a score less than 90% until they receive a score of 90% or greater.
☐ They will use their ATI books to complete the focused review in areas where knowledge gaps occur as described in the ATI materials.

The grade for NURS 195 will be entered as an Incomplete until the Remediation plan is completed. Per DACC policy, this can stand for a 30 day period. If you do not complete the remediation by the deadline, it will convert to a failing grade.

Notes: There is a two hour time limit between attempts to allow for proper remediation. Students are expected to review after the first attempt. Students may use the ATI book to look up answers as needed during the review. Students do not need to turn anything in due to online tracking.

Student Initials & Date
____________ I am advised that if I work more than 20 hours a week, I may not be successful with this remediation plan.
____________ I understand that a 90% predictability corresponds to a raw score below 70% on the Comprehensive Predictor. Thus, even if I obtain a 90% predictability, I understand that I will need to continue to study to be prepared for the PN-NCLEX.
____________ I understand that once I successfully complete each and every item in the remediation requirements as stated, my grade for NURS 195 will change from an incomplete (I) to the earned grade.
____________ I understand that if technical difficulty occurs that prevents testing such as internet access that I will need to adjust my schedule to attend the alternate testing date.
____________ The College Policy for incomplete grades will be followed. As a result, all incomplete (I) grades will automatically change to an F after 30 days. No extensions will be granted.
____________ I understand that ATI offers technical support for any questions I may have regarding the software and its operation.
ATI RN Comprehensive Predictor (CP)/Final Exam

**ATI RN NCLEX Success Plan**

Student: ___________________________ Date: ___________________________

**Preparation for Comprehensive Predictor**

- Complete the Practice Assessments. Within the Practice Assessment, the student is recommended to complete the following modules with a 70% raw score or better. It is strongly recommended that two ATI test modules be reviewed per week. This pace will allow the student to complete most of the modules prior to the ATI Live Review.
  - Targeted medical-surgical 20XX: Respiratory
  - Targeted medical-surgical 20XX: Renal
  - Targeted medical-surgical 20XX: Perioperative
  - Targeted medical-surgical 20XX: Neurosensory and musculoskeletal
  - Targeted medical-surgical 20XX: Immune
  - Targeted medical-surgical 20XX: Gastrointestinal
  - Targeted medical-surgical 20XX: Endocrine
  - Targeted medical-surgical 20XX: Fluid, electrolyte, and acid-base imbalance
  - Targeted medical-surgical 20XX: Cardiovascular
  - RN Management Online Practice A
  - RN Management Online Practice B
  - PN Pharmacology Online Practice 2011 B
  - RN Community Health Online Practice A
  - RN Community Health Online Practice B
  - Targeted Maternal Newborn 20XX
  - RN Leadership Online Practice A

- Attend ATI NCLEX Live Review TBD.

- Complete Comprehensive Predictor Practice Test A. *Achieve a 70% raw score or higher with a maximum of two attempts.* (This is the Final Exam)

- Complete the focused review for All Proctored Exams. Students should spend a minimum of 1 hour in focused review for Level 1 and minimum of 2 hours for Below Level 1.

- Take Proctored Comprehensive Predictor. *Students must achieve 70% raw score.* Less than that will result in meeting with the Director of Nursing Education to develop a Personalized Remediation Plan. This will be 30% of the NURS 299 final grade.

**Students who scored below 70% raw score on Proctor Comprehensive Predictor are required to complete the Remediation Plan.**
SAMPLE – Personalized Remediation Plan NURS 299

☐ Complete focused review for each proctored examination if student scored Level 1 or below Level 1.
   Focused review constitutes reviewing every item missed on the proctored exam. Students do not need to turn in anything as this can be monitored online.
   ☐ All Proctored exam that you scored Level I or Below Level I

☐ Complete focused review for proctored Comprehensive Predictor. Focused review constitutes reviewing every item missed on the proctored exam. Students need to spend minimum of 2 hours in focused review.

☐ Take the Comprehensive Predictor practice B and score a 70% raw score or higher with a maximum of two attempts.

☐ Retake the proctored Comprehensive Predictor and achieve a raw score of 70%. Retakes will be taken in the Assessment Center.

Student Initials & Date
______________________ I am advised that if I work more than 20 hours a week, I may not be successful with this remediation plan.
______________________ I understand that a 90% predictability corresponds to a raw score below 70% on the Comprehensive Predictor. Thus, even if I obtain a 90% predictability, I understand that I will need to continue to study to be prepared for the NCLEX.
______________________ I understand that once I successfully complete each and every item in the remediation requirements as stated, my grade for NURS 299 will change from an incomplete (I) to the earned grade. At least 14 days must be between retake attempts. Due to this policy and limited proctor’s availability, retakes will only be offered (dates TBD.)
______________________ I understand that if technical difficulty occurs that prevents testing such internet access, that I will need to adjust my schedule to attend the alternate testing date.
______________________ The College Policy for incomplete grades will be followed. As a result, all incomplete (I) grades will automatically change to an F after 30 days. No extensions will be granted.
______________________ I understand that if I do not meet the conditions of this remediation plan, including the deadlines, time constraints, and 70% raw score for each practice assessment and CP, that I will receive failing grade in NURS299.
______________________ I understand that ATI offers technical support for any questions I may have regarding the software and its operation.

I hereby acknowledge that I have been notified of the remediation plan deadline and requirements as describe in this document, as well as given an opportunity to ask questions.

_____________________________ Student Signature

I hereby extend this remediation and will assess completion of the remediation according to the policy herein described.

_____________________________ ☐ Met with student. ________________________ ☐ Met with student.

Director of Nursing  Dean of Math, Sciences & Health Professions
Student Signature Page / Agreements

This Student Handbook is a dynamic document that will be revised as needed. Students will be notified of changes and updates to this Handbook.

Directions: Please read, check the box, and sign your name and date at the bottom:

☐ I agree to maintain confidentiality regarding all aspects of clinical situations.

☐ I hereby authorize DACC to release requested clinical requirements to agencies as required.

☐ I understand and agree to comply with the policies and regulations as stated in the DACC Nursing Handbook, course syllabus, college catalog and clinical facilities.

☐ I understand I should have health insurance, and I understand that it is my responsibility to obtain my own medical care at my own expense for any injuries or illnesses sustained as a direct or indirect result of my affiliation with the facility.

☐ I understand working more than 20 hours a week may hinder my success in the nursing program.

My signature (below) acknowledges my receipt of the Handbook for Nursing Students and the understanding that I am held accountable for knowing and abiding by the policies of the Associate Degree Nursing Program at DACC, as a student in the program.

Student Name (print): __________________________________________________________

Student Signature: ___________________________ Date:____________________

Please print this page and submit a signed copy to the nursing office. The signed copy of this form is maintained in all student files kept in the nursing office.