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| Roanoke-Chowan Community College Associate Degree Nursing Student Handbook of Policies and Procedures  *N.C.A.D.N. Conceptual Curriculum* |
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**Student Handbook**

Approved by BOT January 29, 2013

In addition to the policies and schedules of Roanoke-Chowan Community College, nursing students follow the student guidelines of the Nursing Department. This Nursing Student Handbook supersedes all previous handbooks and is printed to provide the student with information about the College and the Nursing program.

The policies presented in this edition of the Nursing Student Handbook are not to be regarded as an irrevocable contract between Roanoke-Chowan Community College and students. The Nursing Department reserves the right to change any policies or schedules at any time.

Revised: *5/2014, 2/27/2015, 4/2016, 5/2017, 4/2018, 6/2019, 4/2020, 7/2021,* ***8/2022***

The Department of Nursing Student Handbook (also known as the *Roanoke-Chowan Community College Associate Degree Nursing Student Handbook of Policies and Procedures)* is a reference guide for students, faculty and staff of Roanoke-Chowan Community College (R-CCC) and The Department of Nursing and serves as a supplement to the R-CCC Catalog & Student Handbook. The content herein is subject to change with any revisions in laws, statutes or policies governing the College.

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**1.0 Associate Degree Nursing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1.1 General Information**

In addition to the policies of Roanoke-Chowan Community College, nursing students follow the student policies of the Nursing Department. These policies have been developed by the Nursing Department administration and faculty in an effort to establish professional attitudes and conduct in the student. Each student is responsible for being aware of and abiding by the policies at all times.

**1.2 SACSCOC Accreditation Information**

Roanoke-Chowan Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award associate degrees, diplomas, and certificates.

Questions about the accreditation of Roanoke-Chowan Community College may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, GA 30033-4097, by calling 404-679-4500, or by using information available on [SACSCOC’s website](https://sacscoc.org/) ([www.sacscoc.org](https://sacscoc.org/)).

Inquiries regarding the programs and services of Roanoke-Chowan Community College should be directed to the College; the Commission on Colleges should be contacted only for questions relating to the College’s accreditation.



**1.3 North Carolina Board of Nursing**

The North Carolina Board of Nursing (NCBON) approves the Associate Degree Nursing program.

Mission:

Protect the public by regulating the practice of nursing.

Vision:

Exemplary nursing care for all.

Values:

* Professionalism
* Accountability
* Commitment
* Equity

*Last Changed 5-Apr-2018*

DUTIES and RESPONSIBILITIES:

In addition to issuing, renewing and reinstating nursing licenses for Registered Nurses and Licensed Practical Nurses, Board responsibilities include:

* Approving and monitoring the state’s nursing education programs which lead to initial licensure throughout the state;
* Interpreting the practice of nursing in North Carolina based on the Nursing Practice Act;
* Investigating complaints against licensed nurses and taking appropriate actions when deemed necessary;
* Administering the Nurse Licensure Compact;
* Maintaining the Nurse Aide II Registry;
* Regulating the practice of Nurse Practitioners and Nurse Midwives.

*Last Changed 14-Jul-2017*

|  |  |
| --- | --- |
| **NCBON**  4516 Lake Boone Trail  Raleigh, NC 27607  Post Office Box 2129  Raleigh, NC 27602-2129  Phone: 919-782-3211  Fax: 919-781-9461 |  |

**2.0 College Mission\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2.1 Introduction**

Roanoke-Chowan Community College (R-CCC) Nursing Faculty has prepared this student handbook to inform the Associate Degree Nursing students about policies, procedures and guidelines specific to the Associate Degree Nursing program. This manual serves as a supplement to the college catalog. Each student is responsible for reviewing and following the policies and procedures detailed in this manual.

**2.2 Mission, Vision, and Values of Roanoke-Chowan Community College**

Mission:

Roanoke-Chowan Community College, a member of the North Carolina Community College System and located in Hertford County, is a public, two-year institution of higher education offering associate degrees, diplomas, certificates, college and career readiness, and customized business and industry training in a variety of delivery modes promoting public service, transfer, and workforce development for a diverse student body, leading them to contribute to the vitality of an increasingly global community.

Vision:

Roanoke-Chowan Community College will be a world-class educational institution positively changing the lives of those served.

Values:

R-CCC employees value student success, high quality instruction and service, innovation, access, social awareness, fairness, respect, accountability, equity, and community development.



**2.3 Purpose of the Associate Degree Nursing Program**

The Associate Degree Nursing Program accepts the purposes of the community college and sees its primary goal as creating an opportunity to prepare selected students to qualify as contributing members of the health care team:

a. Graduates of the associate degree in nursing (RN level) will be well prepared for entry-level positions in a variety of health care settings.

b. The majority of Associate Degree Nursing program graduates will find employment in the Roanoke-Chowan and surrounding service areas.

**3.0 Organizational Structure\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

President

Vice President of Instruction & Student Services

Administrative Assistant

Associate Dean,

Instruction

Division Director

Health Sciences/Allied Health

Administrative

Assistant

Lead Faculty, Health Sciences

Director

Associate Degree Nursing

Full – Time Faculty

Adjunct

Faculty

**4.0 Associate Degree Nursing Mission\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**4.1 Mission**

The Associate Degree Nursing Program supports the mission of the North Carolina Community College System and the mission of Roanoke-Chowan Community College. The faculty is committed to providing accessible high quality nursing education to meet the diverse and changing health-care needs of the service area and to promoting the development of qualified students prepared for the professional role of registered nurse at the entry level. Graduates of this program meet the education requirements to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN). The philosophy of the Associate Degree Nursing Program is derived from statements about the health, quality of life, achievement of potential, the individual, environment, health, nursing, the practice, and education of the Associate Degree Nurse. Within this mission, the goal of nursing faculty is to promote the highest quality of nursing care to the individual, families and significant persons, and the community. The aim is to facilitate optimum health, quality of life and achievement of potential for the individual.

**4.2 The Associate Degree Nurse**

The graduate of the Associate Degree Nursing Program at Roanoke-Chowan Community College is prepared to meet the educational competencies defined by the National League for Nursing and the Nurse Practice Act of North Carolina. The practice of nursing is directed toward meeting the health care needs of individuals throughout their lifespan. The ADN prepared nurses’ role is characterized by evidence-based clinical practice with the provision of care for individuals and families in structured settings. The ADN graduate demonstrates the competencies identified by the National League of Nursing (2020) and the Institute of Medicine (2016) to provide nursing care.

**4.3 Associate Degree Nursing Education**

Nursing Education at the associate degree level, in the North Carolina Community College System, is a process that facilitates changes in behavior, the acquisition of knowledge, skills, and attitudes necessary to function in the role of the entry-level nurse. The curriculum is conceptually based and founded on principles of adult and collaborative learning. “Thinking deeply with factual knowledge and concepts to communicate ideas and solve problems, transferring knowledge across distinct global contexts and situations, and seeing patterns and connections between concepts, ideas and situations are at the heart of concept-based teaching and learning” (Erickson, 2012).

It incorporates evidence-based nursing theory and practice, general education, and the sciences in an environment conducive to learning. The conceptual design defines the essential elements as the environment, quality of life, achievement of potential, and health. The organizing framework contains content related to the individual, the health care system and nursing.

The Associate Degree Nursing Program at Roanoke-Chowan Community College provides an education that is flexible, progressive, and sensitive to the changing needs of the individual, significant support person(s), and community. Through these educational experiences, students will have the opportunity to develop critical thinking and problem-solving skills.

The Associate Degree Nursing Curriculum is based on a variety of learning theories. Learning is about making connections. Neurologists and cognitive scientists agree that humans build their minds by “constructing” mental structures and “hands-on” concrete application that connects and organizes information (Barkley, Cross & Major, 2014).

Learning is a continuous process that results in a change of behavior and occurs when the individual is challenged and motivated to enhance personal knowledge. Teaching and learning is an interactive process between teacher and learner. The responsibility of the faculty of Roanoke-Chowan Community College Associate Degree Nursing Program is to facilitate the student’s understanding and ability to meet the competencies for nursing practice through the design and evaluation of learning experiences. The nursing student is responsible for actively participating in learning experiences and developing the knowledge, skills, and attitudes necessary to provide quality individual centered nursing care.

**4.4 Conceptual Framework**

The conceptual model provides a framework to prepare learners for new instruction and motivates by making a meaningful connection for the learner. The learner must attain mastery of each part of the framework; the individual, the healthcare system and nursing in order to understand the complete curriculum (Knowles, 2015). The domains of the individual, the healthcare system, and nursing provide the conceptual framework guiding the Associate Degree Nursing Curriculum. Concepts are organized within each of these domains and learning occurs from simple to complex.

**4.5 Definitions:**

***Individual***

The faculty of Roanoke-Chowan Community College believe that each individual is a complex, multidimensional, unique, and significant being possessing inherent value and worth, and a member of a family, community, and culturally diverse society. All individuals have dynamic bio-physical, psychological, socio-cultural, spiritual, and developmental needs that contribute to health, quality of life, and achievement of potential. Adaption to the environment requires the individual to change throughout the lifespan. Each individual has a right to healthcare and to information that will assist him or her to participate actively in his or her health care in order to achieve the highest level of wellness possible. All individuals should be cared for, respected, nurtured, understood, and assisted. In order to provide and manage care, nurses must view the individual at the center of any nursing activity.

***Healthcare System***

According to von Bertalanffy (1969), an older but relevant resource, a system consists of the coming together of parts; the power comes from the energy of the interconnection and the way the parts come together. The community healthcare system is a macrosystem and consists of a variety of parts or microsystems. Clinics, hospitals, pharmacies, laboratories, long-term care and Internet sites are microsystems that are connected by patients and information to improve health (Institute of Medicine, 2016).

***Nursing***

Nursing is a science and the art of integrating and assimilating knowledge and skills derived from biological, sociological, and behavioral sciences and information technology to deliver client-centered, culturally competent, holistic care. Through caring, empathy, ethics, and the development of a therapeutic relationship with the individual and significant support person(s), the nurse integrates the art of nursing with the scientific foundation for nursing practice that utilizes the nursing process. Incorporating documented best practice, the nurse functions autonomously and collaboratively with the interdisciplinary team to assist individuals to reach their maximum health potential through assurance of quality client outcomes, promotion of wellness, prevention of illness, and restoration of health or assistance in achieving a dignified death.

***Environment***

The individual is in constant interaction with a changing environment that consists of both internal and external forces that varies throughout the lifespan and has the potential to cause stress in the individual. The nurse can assist the individual to alter aspects of the environment and to utilize his/her innate and learned coping mechanisms to adapt to these stressors.

***Health***

Health is a dynamic, ever-changing state of mental, physical, and spiritual well-being, which exists on a continuum from optimal wellness to illness and ending in death. The individual’s needs for healthcare are determined by his/her position on the continuum. Each individual’s health is based on his/her cultural perceptions and beliefs of health and illness and the ability to adapt to internal and external environmental forces. The individual is responsible for and capable of identifying, learning, and practicing health behaviors that can promote wellness, prevent illness, restore or maintain wellness, or achieve a dignified death.

***Quality of Life***

Quality of life involves five domains including physical, functional, psychological, social, and spiritual well-being. The individual’s perception of and satisfaction with activities of daily living contributes to their worth, meaning or satisfaction. This empowers the individual to cope successfully with the full range of challenges encountered in the real world (Ignatavicius: Med-Surg Nursing 9th Ed).

***Achievement of Potential***

Achievement of potential is the individual’s growth toward attaining one’s utmost ability and quality of life. It is based on the individual’s choices, perceptions, personal goals, life experiences, and holistic health.

***NLN Core Competencies***

The NLN supports the twenty-one competencies for future practitioners from the Pew Health Commission which are: embrace a personal ethic of social responsibility and service; exhibit ethical behavior in all professional activities; provide evidence-based, clinically competent care; incorporate the multiple determinants of health in clinical care; apply knowledge of the new sciences; demonstrate critical thinking, reflection, and problem-solving skills; understand the role of primary care; rigorously practice preventative health care; integrate population-based care and services into practice; improve access to health care for those with unmet health needs; practice relationship-centered care with individuals and families; provide culturally sensitive care to a diverse society; partner with communities in health care decisions; use communication and information technology effectively and properly; work in interdisciplinary teams; ensure care that balances the individual, professional, system, and societal needs; practice leadership; take responsibility for quality of care and health outcomes at all levels; contribute to continuous improvement of the health care system; advocate for public policy that promotes and protects the health of the public; and, continue to learn and help others learn. (NLN, 2020)

***Institute of Medicine Competencies***

The five core competencies identified by the IOM for healthcare providers are provide patient-centered care, work in interdisciplinary teams, employ evidence-based practice, apply quality improvement, and utilize informatics. (IOM, 2016)

**5.0 Curriculum Outcomes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Program Outcomes**

The ADN graduate will:

1. Practice professional nursing behaviors incorporating personal responsibility and accountability for continued competence.
2. Communicate professionally and effectively with individuals, significant support person(s), and members of the interdisciplinary healthcare team. (GEC # 1 Communication)
3. Integrate knowledge of the holistic needs of the individual to provide an individual-centered assessment.
4. Incorporate informatics to formulate evidence-based clinical judgments and

management decisions. (GEC # 4 Critical Thinking)

1. Implement caring interventions incorporating documented best practices for

individuals in diverse settings.

1. Develop a teaching plan for individuals, and/or the nursing team, incorporating teaching and learning principles.
2. Collaborate with the interdisciplinary healthcare team to advocate for positive

individual and organizational outcomes.

1. Manage health care for the individual using cost effective nursing strategies,

quality improvement processes, and current technologies.

The program outcomes integrate into all nursing courses in the program: NUR 111, NUR 112, NUR 113, NUR 114, NUR 117, NUR 211, NUR 212, and NUR 213.

**6.0 Curriculum\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Associate Degree Nursing**

***Application Dates: November 1-March 1***

**Start Date: Fall Semester—Length of Program: Four Semesters**

**Application Criteria:**

* **3.0 GPA in general education and recommended courses for the program**
* **CPR Healthcare Provider Certification by the American Heart Association (BLS/Health Care Provider Level)**
* **Active North Carolina CNA I Registry Listing**

***Prerequisites***

* **Students must complete ENG 002 Tier 2 and MAT 003 Tier 2 courses with a grade of “P”.**

The Associate Degree Nursing curriculum provides knowledge, skills, and strategies to integrate safety and quality into nursing care, to practice in a dynamic environment, and to meet individual needs, which affect health, quality of life, and achievement of potential.

Course work includes and builds upon the domains of healthcare, nursing practice, and the holistic individual. Content emphasizes the nurse as a member of the interdisciplinary team providing safe, individualized care while employing evidence-based practice, quality improvement, and informatics. Graduates of this program are eligible to apply to take the National Council Licensure Examination (NCLEX-RN). Employment opportunities are vast within the global health care system and may include positions within acute, chronic, extended, industrial, and community health care facilities.

**Course and Hour Requirements**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | Class | Lab | Clinical | Credit Hours |
| BIO 168 | Anatomy & Physiology I | 3 | 3 | 0 | 4 |
| PSY 150 | Introductory Psychology | 3 | 0 | 0 | 3 |
| ENG 111 | Writing and Inquiry | 3 | 0 | 0 | 3 |
| ACA 122 | College Transfer | 0 | 2 | 0 | 1 |
| BIO 169 | Anatomy & Physiology II | 3 | 3 | 0 | 4 |
| PSY 241 | Developmental Psychology | 3 | 0 | 0 | 3 |
| HUM 115 | Critical Thinking | 3 | 0 | 0 | 3 |
| CIS 110 | Introduction to Computers | 2 | 2 | 0 | 3 |
| ENG 112 | Writing/Research Disciplines | 3 | 0 | 0 | 3 |
| Or | |  |  |  |  |
| ENG 114 | Professional Research & Reporting | 3 | 0 | 0 | 3 |

***You must apply for and be formally admitted to the Nursing program to take any NUR courses.***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  | Class | Lab | Clinical | Credit Hours |
| Fall I | NUR 111 | Introduction to Health Concepts | 4 | 6 | 6 | 8 |
| Spring I | NUR 112 | Health – Illness Concepts | 3 | 0 | 6 | 5 |
|  | NUR 113 | Family Health Concepts | 3 | 0 | 6 | 5 |
|  | NUR 117 | Pharmacology | 1 | 3 | 0 | 2 |
| Fall II | NUR 114 | Holistic Health Concepts | 3 | 0 | 6 | 5 |
|  | NUR 211 | Health Care Concepts | 3 | 0 | 6 | 5 |
|  | NUR 212 | Health Systems Concepts | 3 | 0 | 6 | 5 |
| Spring II | NUR 213 | Complex Health Care Concepts | 4 | 3 | 15 | 10 |

**TOTAL CREDITS FOR AAS DEGREE 72**

**7.0 Clinical Facilities\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The Nursing Department has clinical education agreements with the following facilities:

| **ECU Health Roanoke-Chowan**  Ahoskie, NC | **ECU Health Chowan**  Edenton, NC |
| --- | --- |
| **ECU Health Bertie**  Windsor, NC | **Rich Square Health Care Center**  Rich Square, NC |
| **Albemarle Regional Health Services**  Elizabeth City, NC | **Roanoke-Chowan Community Health Ctr.**  Ahoskie, NC |
| **Hertford County Public Schools**  Winton, NC | **Accordius Health**  Ahoskie, NC |
| **ECU Health North Hospital**  Roanoke Rapids, NC | **Gates County Community Center**  Gates, NC |
| **Three Rivers Health & Rehabilitation Ctr.**  Windsor, NC | **Fresenius Kidney Care**  Ahoskie, NC |
| **Gates House Assisted Living and Memory Care**  Gates, NC | |

Other sites include, but are not limited to, various physicians’ offices, outpatient clinics, home health agencies, and geriatric facilities.

**Students’ clearance for clinical rotations at ALL clinical facilities in order to progress in the program is required. Verification is through a Criminal Background Check and Drug Screening.** [**Castle Branch website**](http://www.castlebranch.com/) **{Code RF93}**

**Students and faculty will follow the policies and procedures set forth by each clinical facility during the time the students are performing clinical practice.**

As stated in the clinical education agreements, a clinical facility has the right to refuse clinical practice experience for any student whose clinical performance is unsatisfactory or who is found to be in non-compliance with the personnel policies and procedures of the clinical facility. Students who are denied clinical privileges will be unable to complete clinical practice and will be dismissed from the program for failure to progress.

**8.0 Expenses\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Students should prepare for the following expenses while enrolled in the program:

* Tuition and Fees
* Malpractice Insurance
* Criminal Background Check
* Drug Screening
* Rotation Manager
* Textbooks/Resources
* Kaplan Resources
* Watch with a second hand
* Clinical Uniforms/Shoes
* Clinical/Laboratory Supplies
* Clinical Travel
* Physical Examination including immunizations/titers
* Annual TB Test (Per CDC guidelines [CDC Testing & Diagnosis TB Guidelines](https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm))
* CPR
* NA I Registry
* Pinning Ceremony (varies each year depending on class size, special request, etc.)

**\***This list is not all-inclusive.

**9.0 Admission\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**9.1 Introduction**

The Associate Degree Nursing curriculum prepares individuals with the knowledge and skills necessary to provide nursing care to clients and groups of clients throughout the lifespan in a variety of settings.

Courses will include content related to the nurse’s role as provider of nursing care, as manager of care, as member of the discipline of nursing, and as a member of the interdisciplinary team.

Graduates of the Associate Degree Nursing program are eligible to apply to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN) which is required for practice as a Registered Nurse (RN). Employment opportunities include hospitals, long-term care facilities, clinics, physician’s offices, industry, and community agencies.

Approved by the NC Board of Nursing, the ADN program admits first time nursing students in the fall semester only. A maximum of 60 students may be enrolled in the program, which includes first and second level. To be considered for admission to the program, applicants must meet the admission requirements established by the College. Applicants must also meet those admission requirements established by the ADN program. ADN admission/selection is a competitive process, which is outlined in this document.

Individuals who are interested in the Nursing Program or currently enrolled in pre-nursing courses are strongly encouraged to attend one of four information sessions detailing the admissions process. Two sessions per semester, fall and spring. (Your attendance at one of these sessions equals four (4) points on your admissions ranking worksheet). The nursing faculty will advise each potential applicant about the course requirements for nursing and related courses for earning an Associate Degree in Nursing and the role of the Registrar in determining what credits are awarded on transfer course work. The admission/selection process for the ADN program is composed of three steps. Each step must be completed in sequence. Applications are accepted from interested individuals beginning in November of the year prior to which the person wishes to enter the Nursing Program. Associate degree nursing program applications are available online at [Roanoke-Chowan Community College's website,](http://www.roanokechowan.edu/) as well as the Associate Degree Nursing Student Handbook of Policies and Procedures, Medical Form, Tracking Sheet, and link to Eastern RIBN (partnership with East Carolina University College of Nursing). Applications do not carry over from year to year. A new application must be completed and the admission process followed beginning in November of the year prior to which that individual desires admission into the Nursing Program. Certain courses/classes are requirements for admission into the Nursing Program, Certified Nursing Assistant and CPR.

**9.2 Eastern CCEP Credentialing Checklist**

The elements as specified here on the *Eastern CCEP Clinical Passport* document serve as the minimum requirements for student participation in the clinical setting of the participating agencies. The list represents the highest standards as evaluated by the Eastern CCEP Committee. Note that clinical agency contracts may specify additional requirements based on the areas in which students may be placed or regulations established by that agency or health system. Requirements are subject to change.

<https://www.cdc.gov/vaccines/schedules/index.html>

**Universal Credentialing Requirements (for the PASSPORT)**

|  |  |
| --- | --- |
| **AHA BLS Provider – CPR Training (if applicable)** | Approved course is American Heart Association Basic Life Support Provider course |
| **Professional Liability Insurance** | Per agency contractual agreement requirement  (Minimum of $1 million per incident and $3 million aggregate) |
| **Background Check**   * Social Security Number Trace * NC Statewide Criminal Record Search (7 years) * County Court Criminal Conviction Search (7 years if resided outside of NC) * National Sex Offender Database Search * Office of Inspector General (OIG) * Office of Foreign Assets Control (OFAC) * General Services Administration (GSA)   *Note: The assigned agency does not arrange nor cover the cost of this screening.* | Once per program Admission and Progression  Repeat for:   * Per agency contractual agreement requirement * Readmission * Transfer from one school or from one program to another with same school * Students must notify school if there has been a change in status including charges or convictions within 5 days per academic policy |
| **Drug Screen (urine)**  Once per program admission and progression and/or with cause. Must repeat for readmission of program transfer.  *Note: UNC Hospitals require an \*expanded drug screen (see clinical agreements/contracts for requirements).* | Amphetamine, Methamphetamine, Barbiturates, Benzodiazepines, THC, Cocaine, Opiates, Methadone, Oxycodone, Propoxyphene, PCP, MDMA (Ecstasy)  \*Fentanyl, Methaqualone, Phencyclidine, Marijuana Metabolite, Extended Opiates are defined as codeine, hydrocodone, hydromorphone, morphine, oxycodone, and oxymorphone |
| Required Immunizations: | Current CDC recommendations |
| ***Type:*** | ***Requirement:*** |
| * Measles * Mumps * Rubella * Varicella * Tetanus/Diphtheria/Pertussis (Tdap) | * 2 doses or positive titer * 2 doses or positive titer * 2 doses or positive titer * 2 doses or positive titer * 1 dose Tdap, then Td Booster every 10 yrs. |
| * Hepatitis B (HBV) Series | * Energix-B or Recombivax-B, (3 doses or positive titer) if incomplete series, then * Heplisav – B, (2 doses 4 weeks apart)   *Note: For declination or waiver, a copy must be on file at the school and/or be approved by the facility or agency* |
| * COVID-19 | * Follow academic program policies and the clinical agency requirements |
| * Influenza | * Annual – Fall See Academic/Agency Guidelines   “Optimally, vaccination should occur before onset of influenza activity in the community. Health care providers should offer vaccination by the end of October” on the Influenza Vaccination Information for Health Care Workers’ page.  <https://www.cdc.gov/flu/professionals/healthcareworkers.htm> |
| * Tuberculosis Screening Preplacement   <https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm>   * Baseline Individual TB Risk Assessment including TB Symptom evaluation, and either a 2-step TB skin test (given 1-3 weeks apart) or a TB blood test within 12 months of program admission or readmission. If a student has had a positive TB skin test in the past, such as due to TB exposure/infection or receiving the BCG vaccine, documentation of a chest x-ray for the + test will be required along with the Baseline Individual T Risk Assessment and TB symptom evaluation. * Students are no longer required to get annual TB skin test unless there is a known exposure or ongoing transmission at a healthcare facility. * Students will receive annual TB education via the Core Orientation | * Baseline Individual TB Risk Assessment * Baseline TB Symptom Assessment * 2-step TB skin test (given 1-3 weeks apart) **OR** TB Blood Test within 12 months of program admission or readmission * Documentation of a chest x-ray is required for a past + PPD or blood test, additional evaluation for a TB disease will be required as deemed necessary from a healthcare provider. * Annual TB education and risk assessment |

**Must complete the Core Orientation and Agency Specific Requirements in addition to the requirements listed here.**

*Official documentation of all requirements must be kept by the school program or by the vendor contracted for electronic documentation.* ***Updated September 22, 2021***

Adopted 03/17; Rev. 10/25/17, 1/22/19, 3/3/2020; 6/03/20; 1/27/21

ECU Health Addendum:

**Tuberculosis Screening**

**Upon Admission, Readmission or Program Transfer**

Baseline TB Risk Assessment and Symptom Screen **AND**

**ONE OF THE FOLLOWING (a or b) within 90 days of the program start date\*\***

1. Two Step TST \*Tests results documented in mm induration

(If a student has documentation of a TST (1 or 2 step) within 12 months, but more than 90 days, before the program start date, students must have a one-step TST done)

**OR**

1. TB IGRA Blood Test

**Past positive (+) TST (or blood test):** must have documentation of negative CXR since date of +TST test; symptom screening to be performed annually by healthcare provider.

**Upon Renewal (Annually)**

* Annual TB education (Core Orientation)
* Symptom and risk assessment – If positive – follow up

Rev. 02/24/21

**\*\**Program Start Date*** *Program Start Date refers to the start date of the semester in which the student begins matriculation in the specific health care program curriculum, not admission to the academic institution.*

**9.3 Admission Requirements {Initial, Transfer, & Readmission if applicable}**

**STEP I: Completion of Minimum Requirements**

|  |  |
| --- | --- |
| A. | **Complete an Application** for Admission to Roanoke-Chowan Community College (R-CCC online by visiting the R-CCC website at [Roanoke-Chowan Community College](http://www.roanokechowan.edu)  **Request and submit official transcripts** from high school or Adult High School Diploma/GED certificate and all colleges/universities attended to Student Development Services, Roanoke-Chowan Community College. Transcripts can be submitted via postal mail (PO Box 1248, Ahoskie, NC 27910) or third party such as Parchment, National Student Clearinghouse, etc. Applicants with a high school diploma equivalency certificate (GED) must submit a copy of the test scores in lieu of a transcript. ***Applicants with a bachelor’s degree are not required to submit high school transcripts.*** Grades less than “C” on related curriculum sequence coursework or less than “B” on nursing course work will not be transferred. |
| B. | **Take the Reinforced Instruction for Student Excellence (RISE)** test for proper course placement. The student’s high school GPA may be used to determine proper placement. Applicants who have taken the Scholastic Aptitude Test (SAT) or American College Testing (ACT) may be exempt from testing. Call the Testing Center at 252-862-1248 to schedule an appointment for testing.  If an applicant is eligible for any exemption from testing, the applicant must secure a waiver form from Director of Advising & Admissions before testing, which must be presented to the test administrator on the day of testing.  Students must meet the following proficiency levels:   |  |  | | --- | --- | | English | ENG 002 Tier 2 | | Math | MAT 003 Tier 2 |   Proficiency in math required as exhibited by high school GPA of 3.0 or higher, MAT 003 with grade of P2, successful completion of MAT 003, or college-level math with a C or better.  Students must complete ENG 002 Tier 2 and MAT 003 Tier 2 courses with a grade of a “P”.  Test scores will be valid for a period of five years. Applicants who have taken the RISE at other institutions may have an official copy of the scores sent to the College’s Testing Center.  SAT or ACT scores will be considered in accordance with R-CCC admissions policy.  ***Additional requirements for International Students:*** *To demonstrate proficiency in the English language, the applicant must take the Test of English as a Foreign Language (TOEFL) and score at least 500 (written test) or 173 (computerized test)* |
| C. | **GPA (Grade point average requirement):** Applicant must have a minimum grade point average (GPA) of **3.0** or higher on the most recent three (3) academic semesters (minimum of 12 college credit hours) of coursework. The GPA calculations will omit grades from transitional/supplemental courses, ACA courses and PE courses. |
| D. | Students must attend one of the scheduled **Information Sessions.** For more information, contact the ADN Program. |
| E. | **Applicant must complete the Associate Degree Nursing (ADN) Program Application** and submit a copy by postal mail, postmarked on or before **March 1, no exceptions granted**. Mail to ATTN: Admissions, Roanoke-Chowan Community College, PO BOX 1248 Ahoskie, NC 27910. Application is available on the college’s website at [Nursing ADN](https://roanokechowan.edu/nursing-adn/). |
| F. | Applicant must be listed as a Certified Nurse Aide with the NC Division of Health Service Regulation Registry at the time of applying. |
| G. | Applicant must submit evidence of cardiopulmonary resuscitation certification (CPR) at the **BLS/Health Care Provider Level from the American Heart Association** at the time of applying. |
| H. | **Completed Health Form:** Submit a completed North Carolina Community College System (NCCCS) Health Examination Form, available online at [Nursing ADN](https://roanokechowan.edu/nursing-adn/) verifying physical and emotional health as evidence of the applicant’s ability to provide safe nursing care to the public (21 NCAC 36.0320). This examination includes a 2-Step TB skin test (chest x-ray if positive TB skin test), Chicken Pox titer (or vaccine), Hepatitis B series (or declination\*), Influenza (flu) and complete immunization records. A physician, nurse practitioner, or physician assistant may complete the health exam. The health exam must be current within 9 months of enrollment in a “NUR” course and be **submitted at the time the application is made to the program**, **no extensions will be granted**. *\*Applicant may sign a declaration form for waiver of Hepatitis B immunization after consultation with the Program Director. Clinical facilities have the right to deny students who do not meet their requirements.*  ***If the Health Examination Form and all other required documents are not submitted, the applicant will forfeit his/her admission into the Nursing Program.*** |
| I. | **Students are required to attend the ADN Pre-Admission Meeting.**  After meeting the minimum PRE-ADMISSION qualifications for admission to the Associate Degree Nursing program and submitting the ADN Nursing application, qualified applicants will receive an email of notice to attend a pre-admission meeting with the nursing faculty. It is the responsibility of the student to notify the nursing department if they have not received an email by the third week of March. The purpose of the pre-admission meeting is to inform prospective nursing applicants about the nursing program and answer questions or concerns of the applicants. During the meeting, applicants may be requested to validate the accuracy of the academic data contained in their file. This academic data will be utilized in the ranking process. ***Applicants failing to report at the scheduled time for the pre-admission meeting will have their names withdrawn from consideration unless they have previously notified the ADN Admissions Specialist, Freeland 129, 252-862-1289****.* It is the applicant’s responsibility to maintain communication with the college via the ADN Admissions Specialist. |
| J. | **Conditional Letter, Permission to take Kaplan Entrance Exam:** After confirmation of the qualifying **3.0 GPA** by the Registrar’s Office, as well as submission of a complete packet, and having all required immunizations the applicant is then eligible to take the Kaplan Entrance Examination for the ADN Program.   1. Applicant will be notified by a letter from the Nursing Department Admissions when to schedule an appointment to take the Kaplan Entrance Test. *Kaplan Entrance Test scores will be valid for a period of one year*. The scores achieved on this test will be used in the admission selection process for the Associate Degree Nursing Program. 2. Applicants will be allowed to *retest one time* during the admissions process for admission into fall semester. |
| K. | **Applicants seeking admission must complete ALL the above minimum admission requirements. A complete packet includes the Nursing Program Application, Health Form, proof of NAI Registry, and CPR certification. Your application will be removed if all of this information is not completed and included at the time of submission. Completion of the minimum admission requirements does not guarantee acceptance into the nursing program.** |

**STEP II: Competitive Criteria for ADN Admission/Selection**

After the applicant has completed the admission requirements outlined in Step I, each applicant will be evaluated utilizing the following criteria.

|  |  |  |
| --- | --- | --- |
| **Assessment Criteria** | | **Maximum Points** |
| **CRITERION 1** | Completed Course Work and GPA | 18 points |
| **CRITERION 2** | Kaplan Entrance Exam Test Score | 50 points |
| **CRITERION 3** | Related Experience and Residency | 6 points |

The points an applicant receives from each of these criteria will be added together. The applicants who receive the highest number of points will be considered for admission to the program. After the criteria have been applied, the date of original application to the ADN program will be utilized to determine priority for admission in circumstances where applicants have achieved the same score. If same postmarked date, the Kaplan Critical Thinking score will be used for consideration.

**Criterion 1**: Completed Course Work (8 points) and GPA (10 points) = TOTAL 18 points

|  |  |  |
| --- | --- | --- |
| **Classes (Credits)** | **Grade** | **Points** |
| BIO 168 (4) |  |  |
| BIO 169 (4) |  |  |

Point System A = 4, B = 3, C = 2

* + - * 1. Completed Coursework (8 points)
        2. Grade-Point Average\* ≥ 3.5 (10 points)

*\*Applicant must have a minimum cumulative (overall) grade point average (GPA) of 3.0 or higher on the most recent three academic semesters (minimum of 12 college credit hours) of coursework. The GPA calculations will omit grades from transitional/supplemental courses, ACA courses, and PE courses.*

**Criterion 2**: Kaplan’s Entrance Test (50 points)

Kaplan’s Admission Test (Maximum of two attempts with highest of two accepted)

* Overall score of 65 or > (50 points)
* Overall score of 55 – 64 (25 points)
* Overall score less than 55 (0 points)

**Criterion 3**: Related Experience/Residency (6 points)

Current CNA II (2 points)

Other allied health certificate/degree/licensure\* (2 points)

Resident of Hertford, Bertie, Northampton or Gates (2 points)

*\*Students will be awarded two (2) points total for an allied health degree/certification/licensure from the following list: LPN, X-ray tech, surgical tech, medication aide, dental hygienist, dental assisting, dialysis tech, phlebotomy, respiratory therapy, medical office, medical assisting, EMT, paramedic, physical therapy assistant, occupational therapy, recreational therapy, speech therapy, pharmacy tech. Other degrees/certificates/licensure will not be considered for ranking purposes.*

***A minimum Competitive Criteria score of 25 points is required to be considered for admission. However, this does not guarantee acceptance into the program.***

**STEP III: Determination of Enrollment Status**

**a. Letter of Acceptance:** Applicants who are selected to enter the Nursing Program will receive a letter of acceptance into the nursing program. The applicant will be assigned one of the following enrollment categories:

Accepted for enrollment

Alternate (Qualified but placed on a waiting list)

Not accepted (Those who do not qualify)

A letter will be sent to each applicant by the postal mail, informing the applicant of the final admission recommendation.

**b. Mandatory Attendance at Orientation Session:** Each student who receives a letter of acceptance will be required to attend the orientation session for the ADN program held annually on campus in August.

**c. Letter of Acknowledgment:** Each student who receives a letter of acceptance will also receive an Acknowledgement Form. The Acknowledgement Form must be signed and returned to the Nursing Department in order to confirm the applicant’s intent to enroll in any NUR course in the fall semester.

**NOTES:**

1. Any applicant not admitted into the program in a particular year would need to reapply for entry into the ADN Program the next year. Students must then adhere to the admission policies that are current for that year.
2. **It is mandatory for applicants to inform Student Services of any changes in their personal information occurring since the date of application in order for corrections to be made on the selection data sheet (phone number, address, etc.) The College will not be responsible for any letters not delivered because of incorrect mailing addresses.**
3. If the applicant’s overall college GPA falls below 3.0, the applicant will forfeit admission to the nursing program.
4. The nursing faculty recommends that all students enrolled in nursing carry private health insurance coverage.
5. The admission procedure for the ADN Program is revised annually. Applicants are advised to go to the college website at [Nursing ADN](https://roanokechowan.edu/nursing-adn/) to read the current admission procedures.
6. Any applicant whose behavior is inconsistent with the North Carolina Nurse Practice Act (NC NPA) during the admissions process may forfeit their right to be admitted into the ADN Program. You may find the NC NPA at [NC Nurse Practice Act](https://www.ncbon.com/laws-rules-nursing-practice-act-nursing-practice-act)
7. Applicants are strongly encouraged to complete related curriculum sequence courses required in the nursing curriculum prior to entering the ADN Program. The related courses for Associate Degree Nursing (A45110) sequence are:

|  |  |
| --- | --- |
| **Fall 1st Year**   * BIO 168 Anatomy & Physiology I\* * PSY 150 General Psychology * ENG 111 Writing & Inquiry\* * ACA 122 College Transfer Success | **Spring 1st Year**   * BIO 169 Anatomy & Physiology II\* * PSY 241 Developmental Psychology |
| **Fall 2nd Year**   * CIS 110 Introduction to Computers | **Spring 2nd Year**   * HUM 115 Critical Thinking\* * ENG 112 Writing/Research in the Disciplines\*   *Or*   * ENG 114 Professional Research & Reporting\* |

**\**Highly recommended for completion prior to entering the ADN Program***

1. Criminal Background Check and Drug Screening

The ADN Program requires a clinical component and a criminal background check with a drug screening is required by most clinical agencies. A student’s criminal record will affect the student’s opportunity for successfully completing the clinical portion of the course and therefore will limit the student’s ability to progress in the program. If a student is unable to attend any clinical site, due to the criminal background check and/or drug screening, the student will be dismissed from the program. For criminal background checks and drug screening, visit the web address: [Castle Branch website](file:///C:\Users\mwarren5623\Downloads\castlebranch.com) Code is RF93.

**9.4 Transfer Students**

Applicants desiring to transfer into Roanoke-Chowan Community College Associate Degree Nursing program must meet the same admission criteria required of all nursing students. The applicant must follow the same procedure required by R-CCC for all transfer students as outlined in the R-CCC catalog. A transfer student is defined as a student who has completed all requirements for progression to the next semester at the college from which they are transferring. Admission for the transfer student is on a “space-available” basis, not to exceed 10% of total program enrollment. Twenty-five percent of credit hours are required for completion at this College for the degree to be conferred.

In addition to the catalog requirements, the student may be requested to provide course outlines for all nursing courses for which the applicant is seeking credit, scores from any standardized test(s) like the Kaplan Entrance Test, taken at former schools, and a letter of recommendation from clinical instructor who most recently supervised applicant. The ADN Program Director along with the Registrar will evaluate the outlines and determine the amount of credit to be awarded. Applicant must complete or receive transfer credit for coursework required in curriculum sequence prior to point of entrance into ‘NUR’ course with a grade of “C” or above in related coursework and an “80” (B) or better in ‘NUR’ courses.

Due to the rapidly changing technology in nursing studies, any student seeking transfer to the ADN program after more than one-year lapse in nursing education will be asked to demonstrate proficiency in core nursing competencies by means of theory (written exam) and clinical (skills) performance evaluations with a score of “80” (B) or better. The nursing faculty will administer the proficiency exam at a scheduled time, to be announced during the application process.

All applicants seeking advanced placement as a transfer student for the fall semester must complete **ALL** of the above admission requirements on or before **March 1**. Applicants seeking advanced placement as a transfer student for the spring semester must complete **ALL** of the above admission requirements on or before **November 1.** Completion of the minimum admission requirements for transfer does not guarantee acceptance into the program. Following completion of the minimum admission requirements for a transfer student, the competitive selection process will be implemented for admission to the ADN program.

Refer to section 9.3 for the checklist for admission to the ADN Program.

**9.5 Readmission**

Students who have interrupted their studies in the ADN program and who wish to continue their academic pursuits are eligible for readmission on a “space available” basis, not to exceed 10% of total program enrollment. **ALL** current minimum admission requirements must be met. If a student is not successful in NUR 111, he/she will need to adhere to the admission guidelines referenced in **section 9.3 Admission Requirements**.

**READMISSION TO ASSOCIATE DEGREE NURSING**

**Effective May 1, 2016**

1. Any student who withdraws or is dismissed from the Associate Degree Nursing program may be readmitted only once based on program faculty recommendations and available space.
2. A student who wishes to re-enter Associate Degree Nursing must submit a written request to the Director. This request for reentry must be received by the end of the next semester following the interruption of studies. The letter must state what interventions have been implemented for success in the program. There is no guarantee of readmission to the Associate Degree Nursing program.
3. Students who return after an absence of one semester or more (except summer) (a) must meet current admissions requirements (**section 9.3 Admission Requirements**), and (b) submit an updated health evaluation.
4. Students submitting for readmissions must complete and score an 80% or higher on a comprehensive theory evaluation which will include content covered in the previous NUR courses where the student met proficiency. This evaluation will be administered by nursing faculty/staff at a scheduled time, to be announced during the readmission process. Achievement of 80% on the comprehensive theory evaluation does not guarantee acceptance.
5. To assure retention of knowledge and skills, students are urged to return to the program at the earliest feasible time. The amount of time which has lapsed between withdrawal from the program and the readmission request must be considered by the program faculty. Nursing faculty may make educational (classroom and clinical) recommendations for any student seeking readmission. Auditing of the previously completed program courses may be recommended by faculty. Additionally, an interview with Admissions Committee may be requested.

Any student who after readmission does not receive a grade of “B” (80%) or better on all curriculum courses will not be eligible to re-enroll in the Associate Degree Nursing program.

The applicant, who has exited the program one time for any reason, since implementation of the Concept-Based Curriculum in fall 2010, will be eligible for only one readmission. Any applicant not enrolled in the nursing program within two years from the time of their withdrawal/dismissal will have to repeat all nursing courses.

**Students called to active duty military service while enrolled in the Nursing program will be readmitted with the same academic status that he or she had when last attended.**

**STEP I: Determination of Enrollment Status**

a. **Readmission Response Form:** Applicants who are selected to enter the Nursing Program will receive a readmission response form into the nursing program.

**Roanoke Chowan Community College**

**Associate Degree Nursing Program**

**Readmission Response Form**

Return this form in the enclosed envelope by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ R-CCC ID and Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accept: \_\_\_\_\_\_\_\_\_\_\_\_ OR Decline: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have met with financial aid (FA) Reason for Declining:

and understand the implications ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

of my FA status regarding readmission, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

even though I may or may not be eligible \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

for FA.

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FA Counselor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Required if accepting readmission status)**

Criminal Background Check and Drug Screening

The ADN Program requires a clinical component and a criminal background check with a drug screening is required by most clinical agencies. A student’s criminal record will impact the student’s opportunity to successfully complete the clinical portion of the course and therefore will limit the student’s ability to progress in the program. If a student is unable to attend any clinical site, due to the criminal background check and/or drug screening, the student will be dismissed from the program. For criminal background checks and drug screening, visit the web address: [Castle Branch website](http://www.castlebranch.com/) Code is RF93.

**10.0 Progression\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**10.1 Evaluation and Guidance**

Student evaluation begins prior to admission when the application to enter College, the admission test scores, and the high school and college transcripts of the applicant are reviewed by the admissions committee.

A planned program for regular evaluation of each student’s progress is instituted at the beginning of the academic year. Students are required to participate actively in the process of evaluation. Specific evaluation processes are outlined in each course syllabus.

Provision for student guidance is made in the area of academic advising. A faculty advisor is designated for each student upon entrance to the program. Office hours of the nursing faculty will be posted each semester on their office doors. Appointments may be scheduled within these office hours. Students are encouraged to meet with their advisors soon after admission and then on a regular basis for academic advising. Counseling is available through Student Support Services.

**10.2 Academic Progression**

Academic progression in nursing includes successful completion of the course or didactic requirements and demonstrated competence on all assigned nursing laboratory and clinical requirements. A nursing course is comprised of three components of study, the classroom, clinical and laboratory experiences as indicated in the course syllabus.

To **demonstrate attainment of course objectives for any NUR course the student must:**

A. **Achieve an overall course grade of 80% (B) and successfully pass all clinical/lab requirements**.

B. **Have Unit Test Average of 80% (B)** or higher without the addition of any collaborative points or rounding of grades to take the final exam. Grades from assignments, pop quizzes, etc. will be added only after the student’s calculated test average totals 80% (B) or higher **without** the addition of any collaborative points or rounding of grades.

* In the event the student does not achieve an 80%-unit test average, the student will be allowed to drop if prior to the 60% drop date. If beyond the 60% drop date, student will receive a grade of (C).

C. **Pass the Final Exam** with a grade of 80% (B) or higher without rounding the grade for successful “Pass” of the course. In the event the student does not achieve an 80% on the final exam, the student will be allowed to drop if prior to the 60% drop date. If beyond the 60% drop date, student will receive a grade of (C).

D. **Satisfactorily complete and meet** course, laboratory, clinical practice and/or program objectives and requirements. (This includes clinical performance evaluations, competence verifications, skills checkoffs, clinical papers, care plans, concept maps, logs, NCLEX preparation, assignments and other course work as assigned).

Students progressing in The Department of Nursing must:

1. **Class**: Receive a grade of “80” (B) or above in each nursing course and “C” or better in pre-requisite, and co-requisite course regardless of the semester enrolled as stipulated by the corresponding grading scale. Should a student make a grade below “80” (B) in nursing or below “C” in nursing-related sequence course(s), he/she will be dismissed from the nursing program. (See ADN Performance Evaluation Procedure) Fractions of a point at a level of 0.5 or greater will not be rounded up to the next whole number. (Ex.79.5 does not round to 80 it remains at 79).

Course prerequisites for NUR prefix courses as well as other course requirements are defined in the curricular section of the College catalog and the ADN Policy Manual. Students must successfully complete these prerequisites prior to enrolling in subsequent course offerings. Enrolled students must take NUR prefix courses in sequence.

* **Satisfactorily complete and meet** course, laboratory, clinical practice and/or program objectives and requirements. (This includes clinical performance evaluations, competence verifications, skills checkoffs, clinical papers, care plans, concept maps, NCLEX preparation, Kaplan assignments and other course work as assigned). Students will be allowed two attempts to successfully return various skills in the lab. The second attempt at skills return will not be allowed until the student documents practice with a classmate who has successfully completed the return. After two unsuccessful skills checkoffs the student will be dismissed from the nursing program.
* **Kaplan,** students will be required, as part of the course requirements to utilize these resources each semester. Inability to master this content will result in a student being placed on a Performance Improvement Plan (PIP).
* **Prepare for class.** Using the "Flipped Class and/or Jump Start" methodology the student’s preparation will be measured or tested during each class session. The primary purpose of Flipping the Classroom "Jump Starts" is to promote active learning, engagement and content retention.
* Through **active learning**, the student is expected to read, complete assignments, view lectures, listen to podcasts, and review prepared interactive media etc. prior to class.
* The student may also be directed to participate in online peer to peer or peer to faculty discussion forums. The student or student groups may be randomly assigned and/or selected to actively flip and jump start a class session. If assigned, the student or student group is expected to lead the class in a discussion, presentation, EBP literature review etc. about the topic.
* Any student scoring less than 80% on unit tests in NUR courses will be required to complete remediation of the content taught in that unit within one week of the test date. Remediation is MANDATORY not optional.

2. **Clinical and Lab**: Satisfactorily meet and complete ALL clinical and laboratory requirements and competencies to successfully complete the course. *(See Clinical/Laboratory Evaluation Requirement Section.)*

3. **Overall Attainment of Course and Program Objectives:** The student must demonstrate attainment and/or mastery of **ALL** courses and/or program objectives and student learning outcomes to successfully complete the course.

Each student will be required to demonstrate **Math Proficiency** by scoring a minimum of “90" on math proficiency tests for NUR 111 and NUR 213. Three attempts are allowed in each course. Inability to master this content with a score of “90" will result in a grade of “C” for the NUR course in which the student is enrolled. The student will be required to exit the program at that point. ***Any student who is placed on a Performance Improvement Plan (PIP) more than twice will be required to exit the program immediately.***

The curriculum is designed so that each semester’s requirements must be met before proceeding into the next semester. A student receiving an incomplete in a prerequisite course will be allowed only until the end of the add period of the following semester to remove the incomplete. If this is not done, the student will automatically be dropped from the course(s) including NUR courses in which he/she is currently enrolled.

If physical or mental impairments exist or arise which may interfere with the performance of classroom, laboratory, and/or clinical activities, the student will be referred to a physician. A letter of treatment or medical clearance will be required before the student may progress further in the program. The student, program faculty, and R-CCC Disabilities Services staff will jointly decide upon an individual plan of progression, including any applicable reasonable accommodations. Physical and/or mental impairments that do not respond to treatment within a reasonable period or reasonable accommodations may result in dismissal from the program. At any time, a faculty member may remove a student from clinical practice if the student demonstrates any behavior, which conflicts with safe patient care. Please refer to the Essential Functions (Section 13. 1) to determine the skills and abilities necessary to function as a nursing student.

Students entering the Nursing program must hold a current CPR Healthcare Provider Certification by the AHA and Nurse Aide I registry; both must remain current throughout enrollment in the program. The student is responsible for maintaining certification.

**10.3 Grading System**

Refer to individual course syllabus for grading and testing policies.

**10.4 Retention Plan**

Early Alert Program

**MANDATORY** remediation for test scores less than 80%.

**10.5 Withdrawal**

Students who withdraw or drop all courses from the college before the 60% point of the term must complete the appropriate form and submit it to the Registrar’s Office. **Students receiving financial aid are held responsible for repayment of aid.**

**If beyond the 60% drop date, student will receive a grade of (C).**

All other withdraws after the 60% point will be deemed as a grade of “WP” or “WF”. In the event a student must withdraw beyond the 60 percent point because of extraordinary circumstances beyond the student’s control, the student may petition the Dean of Student Development Services for a “W”. Once a grade has been recorded, petitions will only be considered during the semester immediately after the grade was posted. The final decision will be submitted from the Vice President of Instruction and Student Services’ Office. Students officially registered for courses may not withdraw merely by non-attendance. No drops for any reason will be approved two weeks prior to the end of the semester. (See current R-CCC catalog.)

Nursing: Students are expected to attend all classes, labs, and clinical assignments on time. Students who are absent more than eight percent (8%) of instructional course hours in a semester will be dismissed from the program. Clinical absences will not be accepted. Any missed clinical will have to be made up hour for hour within one week of absence.

**10.6 Good Academic Standing**

Good academic standing is defined as a student who is currently enrolled in the Nursing program, passing curriculum related courses with a “C” or better and nursing courses with an “80” (B) or better, and not on academic or clinical probation or suspension.

**11.0 Attendance\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**11.1 Class/Lab Attendance**

Students are **required** to attend class, lab, and clinical in each nursing course and remain for the entire session. Attendance will be monitored at any time during the class period. Students will be unofficially dropped when their absences meet eight percent (8%) of the total course hours. (Refer to Course Syllabus for total course hours.)

Tardiness is a disturbance to your fellow classmates and faculty. Therefore, students will be allowed to enter class/lab **only** at the designated break times. Each occasion of tardiness (class or lab) will equal one hour’s absence and will be applied to the 8% rule for contact hours of a course. Students are not expected to notify their instructor if they are going to be late for class or lab.

**It is the student’s responsibility to obtain assignments and materials missed during any absence. Refer to testing policy regarding missing test.**

**Course**  **8% of Total Course Hours**

NUR 111 20.5

NUR 112 11.5

NUR 113 11.5

NUR 114 11.5

NUR 117 5.12

NUR 211 11.5

NUR 212 11.5

NUR 213 28.2

Students are expected to take all tests on the day they are scheduled. Students must contact the instructor regarding their absence prior to the scheduled test time. **The student is expected to take a make-up test on the next day returning to school, unless instructed otherwise.** Failure to take the test on the first day back will result in a test grade of “0”. Although the make-up test will cover the same content, it will not necessarily include the same questions in the same format.

**11.2 Clinical Attendance**

Students are required to attend all clinical and lab experiences. **Policies relative to clinical and lab experiences are enforced for all alternative activities.**

The first week of each semester may have an altered schedule from your registered schedule. It is the student’s responsibility to check their nursing course calendar and/or Moodle prior to the first day of class to verify beginning schedules and responsibilities.

The Clinical Instructor will notify the Program Director on a weekly basis of any student receiving an “Unmet” in the clinical arena. Depending on the circumstances, the Clinical Instructor, the Program Director, and the student may meet to discuss those factors leading to the “Unmet”. Clinical performance is evaluated upon clearly defined objectives and competencies. A student that is repeatedly absent will not be able to meet the stated weekly objectives/competencies.

* Any clinical absence will result in a “U” for the clinical day and/or week. In the event a student will be late for clinical, the student must notify the unit at the clinical agency and/or the current assigned clinical instructor, per his/her instructions, at least fifteen (15) minutes prior to the scheduled time to begin clinical.
* A “No Call” or “No Show” will result in a “U” for the clinical day and/or week. In addition, the student will be placed on Clinical Probation in the form of a Personal Improvement Plan (PIP).
* Weekly clinical attendance is required of this program. All clinical absences will count toward the eight percent (8%) course attendance policy if time is not made-up hour for hour within one week of absence. **Clinical makeup days are not inherent in the clinical schedule.**

Students are not allowed to leave the clinical area prior to the scheduled departure time for any reason under any circumstances except illness. Failure to leave the clinical area without direct permission from the clinical instructor will result in an automatic clinical attendance probation and/or immediate dismissal from the nursing program. Departure from the clinical area that in any way may affect patient safety will result in an immediate dismissal from the nursing program.

**11.3 Clinical Tardiness**

Clinical tardiness is unacceptable and will not be tolerated on an ongoing basis. However, the clinical instructors recognize that extenuating circumstances may arise to make a student late. In the event of extreme circumstances in which the student will be late for clinical, the student must notify the unit at the clinical agency and the current assigned clinical instructor, per his/her instructions, at least 15 minutes prior to the scheduled time to begin clinical. Students with excused tardies that are up to late 15 minutes will be able to complete the clinical day; beyond 15 minutes, completion of the clinical day will be at the instructor’s discretion. The first clinical tardy will result in a verbal warning along with documentation on the Clinical Anecdotal form, the second clinical tardy will place the student on clinical attendance probation, and/or dependent on circumstances, dismissal from the program.

**11.4 Clinical Attendance Probation**

Refer to Clinical Attendance, Clinical Tardiness and Clinical Probation/Dismissal

**11.5 Illness During Clinical Attendance**

If a student becomes ill during clinical practice, the student should notify his/her clinical instructor and proceed as directed. Students will not be treated in the clinical area. All costs involved in medical treatment are the responsibility of the student.

**11.6 Inclement Weather**

The program follows the schedule of the College during times of inclement weather. Announcements will be made on the radio and television as to the closing of the College; however, students should exercise personal judgment concerning highway conditions regardless of college announcements, particularly those commuting to outlying areas for clinical practice. Students should notify the clinical instructor and clinical facility of their absence during times of inclement weather. Campus hours are designated as Monday through Friday, 0800-2200 and administrative office hours 0800-1700. If the campus is on a 2-hour delay, and it is a class day; report to campus at 1000. If the campus delay occurs during a clinical and/or simulation day, you are to report to the assigned clinical site or the assigned simulation site at 1000.

When time is missed due to inclement weather, alternate activities will be implemented to prevent students from falling behind in content.

**12.0 EVALUATION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**12.1 Class/Lab Evaluation**

Students will be provided the opportunity to evaluate each nursing class and class instructor periodically throughout the semester.

**12.2 Clinical/Lab Evaluation**

Students will be allowed two attempts to successfully return various skills in the lab. The second attempt at skills return will not be allowed until the student documents practice with a classmate who has successfully completed the return. After two unsuccessful skills checkoffs the student will be withdrawn from the nursing program.

A clinical evaluation of **S** (satisfactory) or **U** (unsatisfactory) may be earned. A **satisfactory** evaluation indicates that the student has met all clinical objectives as outlined in each individual course **and** has completed all additional clinical activities. For example: Home Health, Community Service, Role Modeling, Simulation, etc.

A clinical evaluation of unsatisfactory may be given **at any point** during a semester for any of the reasons outlined below. This list should not be considered inclusive. The student who is unable to meet the clinical objectives as outlined in the individual course, who uses unsafe methods of delivering patient care, who shows inadequate preparation in caring for patients, or who shows unprofessional conduct in the clinical area may receive an unsatisfactory clinical

evaluation. The unsatisfactory evaluation may also be given for repeated failure to submit satisfactory written assignments by designated date, uncorrected clinical probation, and/or absences or tardies as outlined in the section on clinical attendance. **A final clinical evaluation of U results in immediate withdrawal from the program and a grade of “F” in the course (see progression policy).**

**12.3 Clinical Probation/Dismissal**

In the clinical areas, the clinical instructors use their professional judgment in determining if a student is incapable of performing patient care or presents a threat to the health and safety of the patients. A student may be placed on clinical probation or dismissed from the program for reasons, which include, but **are not** limited to the following:

* Less than adequate preparation for clinical assignment(s)
* “No Call” or “No Show” for clinical
* Unprepared for medication administration, medication errors, and medication administration without instructor approval
* Performance of any procedure without securing appropriate supervision designated by the instructor
* Unprofessional behavior and/or appearance
* Performance (verbal or written) that threatens the health and safety of the patient, student, peers, clinical staff, and instructor
* Unsatisfactory clinical practice
* Texting during clinical time/patient care
* Utilizing clinical computers to access social networks
* Falsification of information
* Excessive tardiness/absences as outlined in the section on attendance
* Violation of College’s Student Code of Conduct Policy
* Leaving clinical setting without instructor permission

The faculty member, along with the Course Lead will recommend a student for clinical probation. A written performance improvement plan, outlining the unsatisfactory/ inappropriate behaviors, strategies/methods for correction, and a recommended time frame for the probationary period will be devised. This plan will then be submitted to the ADN Program Director for review, consultation, and recommendation. A conference will then be held with the student, faculty, and Program Director to address the terms of the clinical probation and plan. All parties will be asked to sign the plan indicating it has been reviewed. The student's signature indicates an understanding that violation of the agreement will result in further action, up to and/or including dismissal from the program.

Uncorrected clinical probation will result in an **unsatisfactory** clinical evaluation for the course and the student will earn a grade of 'F' and immediate dismissal from the program (Refer to Readmission Procedure).

***A student that is dismissed from the program may request a hearing. Refer to Section 20.1 and 20.2***

**13.0 CLINICAL GUIDELINES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**13.1 Essential Functions**

Physical Requirements: Must be physically able to operate a variety of types of equipment including computer, calculator, nursing, other medical equipment, etc. Must be physically able to exert up to twenty-five pounds of force occasionally and/or frequently lift, carry, push, pull, or otherwise move objects. Must be able to lift and/or carry weights up to fifty pounds. Physical demands are in excess of sedentary work, including walking, running, standing, stooping, reaching, crouching, etc. for extended periods of time. Additional requirements include the ability to perceive attributes of objects such as size, shape, temperature, or texture by means of receptors in skin, particularly those of the fingertips. Students must also possess refined auditory and visual discrimination.

Data Conception: Requires the ability to compare and/or judge the readily observable functional, structural, or compositional characteristics (whether similar to or divergent from obvious standards) of data, people, or objects.

Interpersonal Communication: Requires the ability of speaking and/or signaling people to convey or exchange information, including the ability to receive information and instructions from instructors, patients, physicians, and other health care providers and provide feedback to same.

Language Ability: Requires the ability to read and comprehend a variety of documents, reports, and books such as medical charts, various medical texts, etc. Additionally, it requires the ability to prepare various documents and reports such as patient reports, etc., using proper format, punctuation, spelling and grammar. Finally, it requires the ability to communicate with instructors, patients, physicians, other health care practitioners, etc. with poise, voice control, and confidence.

Intelligence: Requires the ability to use critical thinking skills and problem-solving skills in order to complete tasks accurately and within assigned time frames. Furthermore, it requires the ability to apply principles of logical or scientific thinking to a wide range of intellectual and practical problems, to deal with nonverbal symbolism in its most difficult phases, and to comprehend the most abstract classes of concepts.

Verbal Aptitude: Requires the ability to record and deliver information and to follow verbal and written instructions. Additional requirements include communicating with others via effective verbal communication and integrating multiple abstract concepts and express them in a comprehensive and concise manner plus possessing knowledge of medical terminology and symbolism.

Numerical Aptitude: Requires the ability to utilize mathematical formulas; add, subtract, multiply, and divide numbers; determine percentages and decimals; determine time and weight; apply algebraic, geometric, and trigonometric principles; and utilize descriptive statistics. Additional requirements include the ability to utilize metric systems on a regular basis.

Form/Spatial Aptitude: Requires the ability to inspect items for proper length, width, shape, and depth.

Motor Coordination: Requires fine psychomotor coordination of hands and eyes in utilizing automated equipment, etc.

Manual Dexterity: Requires the ability to grasp, handle, hold, cut, push, pull, and feel plus manipulate a variety of control knobs, switches, etc.

Color Discrimination: Requires the ability to differentiate colors, shades, and tones of color.

Interpersonal Temperament: Requires the ability to deal with people beyond receiving instructions also adapt to performing under high stress when confronted with an emergency and when exposed to blood deep cuts, severe burn, open wounds, amputated body parts, death, etc.

Physical Communication: Requires the ability to talk and hear in addition to understanding various types of nonverbal communication.

Personal Traits: Requires the ability to build constructive and cooperative working relationships with others and maintain them over time and to develop specific goals and priorities to organize and accomplish work. Must demonstrate professionalism, show the ability to work alone or within a team, demonstrate integrity and sincerity, and show an attitude of caring and sensitivity. Requirements also include demonstrating neatness and good hygiene plus a positive attitude when receiving constructive criticism.

Travel: Requires the ability to travel to and from the College campus, clinical facilities, and other assigned locations off campus.

The student must be able to perform the Essential Functions, with or without reasonable accommodations. Please notify Director of Admissions/Student Advisement at 252-862-1225 or talk to your instructors privately if you have a need for a disability-related accommodation. It is the student’s responsibility to request reasonable accommodations if needed.

**13.2 Professional Guidelines**

The following are professional guidelines that all students are expected to follow at all times during clinical practice. The student will:

* Comply with all policies of the College, Department, and clinical facilities, state and federal laws, and the Patient’s Bill of Rights.
* Follow the Department dress code.
* Keep patient information confidential. Discussion of patient information will take place only in clinical conferences or in private conversations with clinical instructors. Failure to comply with agency confidentiality policy will result in immediate dismissal.
* Be punctual in arriving to the classroom, lab, and clinical facility and report to the clinical instructor when leaving the clinical area.
* Report patient situations accurately, regardless of reflection upon self. If the situation requires an incident report, the student will complete the report according to the clinical facility’s policy.
* Ask for supervision and assistance when needed and as directed.
* Utilize time efficiently and constructively.
* Demonstrate self-confidence in administering patient care.
* Complete all written work on time.
* Interact professionally, courteously, and respectfully with college faculty, clinical instructors, and members of the health care team, patients, and peers.
* Address all clinical instructors, members of the health care team, patients, and peers with their appropriate title (Dr., Mr., Mrs., Ms., Miss, and the surname unless otherwise directed).
* Performs self-evaluation of attainment of clinical practice objectives.
* Administers IV push medications at the discretion of and in the physical presence of their instructor.
* Avoid the use of tobacco products.
* Avoid the use of profane or obscene language and unprofessional behaviors.
* Avoid chewing gum.
* Avoid using cell phones, texting, and accessing social networking sites.
* Maintains a reliable means of communication and transportation, valid telephone number, and email address on file in nursing department and in Moodle.
* Check Moodle and email accounts daily Monday-Friday during each semester enrolled.
* Blogging, posting personal status updates or engaging in online activities is not permitted during your clinical hours unless intended for appropriate clinical and research purposes.

**13.3 Student Appearance**

Students are representatives of the College, Nursing Program, and nursing profession. Students are expected to dress and conduct themselves in a manner which will reflect dignity of the profession and be good examples of cleanliness and health.

The purpose of these guidelines is to define the image of professionalism and to promote student and patient safety, comfort, and professional impression. This policy balances the expectations of professionalism with student desires for comfort and individual expression.

Students will comply with these guidelines, which are minimum standards for professional dress and appearance appropriate for today’s quality healthcare workplace environment. Students will also adhere to dress standards established by the clinical facilities and Department as appropriate for the job duties and profession. Faculty and clinical instructors reserve the right to determine at its discretion what is and is not appropriate workplace attire and to address issues as they arise.

Name badges (and identification badges, if required by a clinical facility) are essential to dress as they identify students to patients, patient’s family members, visitors, and members of the healthcare team. Students are required to wear their badges at all times while in clinical practice. Badges must be worn above the waist and displayed so that the information noted on the badge is always visible (not covered or reversed). Badges should not be covered with pins, ornaments, stickers, or any other objects. Clinical instructors may prohibit a student from participating in clinical practice without their badge(s).

Personal hygiene is critical to the professional appearance and perception of a healthcare professional. Particular attention should be given to skin, fingernails, hair, bathing, proper oral hygiene, and use of deodorant as needed. Students must keep their hair clean, well groomed, and away from the face in an orderly fashion that does not present a safety hazard. Beards, mustaches, and sideburns are to be neatly trimmed and groomed. The use of excessive makeup and strong fragrances should be avoided. Offensive or inappropriate tattoos must be covered. Artificial nails are not permitted. For the purpose of this policy, inappropriate means any tattoo deemed by faculty to be inconsistent with the standards of a professional quality health care program.

Student uniforms should only be worn while performing clinical practice and while traveling to and from the clinical facility. The uniform may not be worn at any other time except while on the College campus. The student uniform shall consist of a uniform pantsuit (as specified by faculty). Females may choose to wear a uniform dress (as specified by faculty), which shall be no shorter than mid-knee. All students are required to wear a white lab jacket during any clinical activity not requiring a uniform. All uniforms should be clean, fit properly, be in good repair, and pressed or ironed as needed. Students must wear appropriate undergarments to avoid an unprofessional appearance. Leather (other than shoes) and sheer garments should be avoided.

Low heeled white leather shoes, without laces are required of all students. Shoes should be clean, in good repair, and coordinated with the dress attire. Open toed shoes, casual footwear, and beach footwear is not permitted. Dark socks are required to be worn with uniform pants. White color hosiery is required to be worn with uniform dresses. Uniforms should not be worn outside the clinical arena, e.g., shopping, restaurants, etc. Nail polish is not to be worn in the clinical arena.

Jewelry and accessories should be kept to a minimum. Excessive jewelry and accessories can create an unsafe environment and distractions. Jewelry and accessories that are distracting in size and number are to be avoided. Only one (1) pair of stud earrings in earlobes is allowed. Offensive jewelry and accessories are not permitted. Facial, tongue, and other visible body piercings, except for earrings are not permitted. Fashion headwear should be avoided.

Students should not wear sunglasses or hats inside clinical facilities unless for medical reasons. The use of cell phones, smart watches, earphones, headphones, IPODS, etc. is not permitted in the clinical areas. Electronic devices containing reference software are allowed only in the conference rooms of the clinical agency.

**13.4 Impaired Thinking**

Impaired thinking constitutes a risk to patient safety. Impaired thinking is evidenced by an inability to make appropriate judgments and carry out functions in relation to the delivery of patient care. Impaired thinking may be the result of fatigue, anxiety, sleep deprivation, medication use, illegal drug use, alcohol use, etc.

Any faculty member, clinical instructor, **or** representative of the health care agency who determines that a student is exhibiting evidence of impaired thinking will ask the student to leave the clinical area. The student may be given a clinical absence and/or unsatisfactory clinical grade depending on the situation, placed on clinical probation and/or dismissed from the program.

**13.5 Student Health Reporting Policy**

All students must notify the clinical instructor of any and all contracted diseases or health problems that might or could jeopardize the health of others.

**13.6 Infectious Disease Policy**

**It is essential that all students carry health insurance, which will cover health care expenses**

**incurred in treatment following exposure to infectious diseases.**

Because of the nature of the health care profession, students participating in required clinical education experiences will find themselves at risk for exposure to infectious diseases. Even though the risk is extremely small, it cannot be completely eliminated. However, it can be minimized by careful and consistent technique and the implementation of universal precautions in the care of all health care consumers. “Universal precautions” (i.e. gloves and safety glasses, gowns, hand washing, and masks where appropriate) will be implemented in the care of all patients. Because of the nature of the student patient relationship, the patient must also be protected from a student caregiver that may transmit infectious diseases.

Infection Control means preventing illnesses from happening or spreading in a health care setting to patients, employees, visitors, etc. For patients, infections can cause an increase in pain, length of stay in the hospital, and medical cost.

Infections can make students sick enough to miss school or spread the infection to family members. Infections usually occur in healthcare facilities for two reasons. First, many sick people are treated in close quarters and second, procedures performed on patients may increase the risk of infection (such as surgery, insertion of a urinary catheter, insertion of IV’s, etc.).

Nosocomial or Healthcare Acquired Infection (HAI)means "taking place in a hospital". This is an infection a patient acquires after they come into the hospital. According to the CDC (CDC, 2020), nearly 2 million people in the United States acquire an infection after admission to a hospital. Of these, 100,000 die each year.

You must have six factors present for an infection to develop: microorganism or "germ" that can cause disease; a person who carries the germ; a way out of the carrier (person) such as sneezing or coughing; a method of travel such as through the air, direct contact (touching), etc.; a way into another person such as breathing or skin puncture (cut or scratch); and a susceptible person (someone who doesn't have any resistance to fight off an infection). Infection Control aims at removing one of these six factors. When one of these is taken away, an infection does not occur. Newborns, elderly, and surgical patients have a greater chance of getting an infection.

Hand washing is the single most important way to stop the spread of infection. You should always wash your hands:

* Before and after your work shift.
* Before and after every procedure with a patient.
* Before and after direct contact with every patient.
* After handling contaminated items such as bedpans, etc. or after contact with blood or any bodily fluid.
* After using the restroom, blowing or wiping your nose, covering a sneeze, etc.
* Before and after eating, drinking, handling food, or smoking.
* After handling paper goods such as patient charts, files, books, or newspapers.
* After removing gloves.
* Whenever hands are visibly soiled.
* After using keyboards, tools, faxes, or phones.
* After contact with a patient’s intact skin (i.e., when taking a pulse or blood pressure or lifting a patient).
* After contact with body fluids or excretions, mucous membranes, non-intact skin, and wound dressings.
* If moving from a contaminated body site to a clean body site during patient care.

Seven steps to good hand washing are:

* Wet hands.
* Apply soap - do this after wetting hands because soap applied to dry hands can cause irritation.
* Scrub hands - scrub for at least 15 seconds, paying close attention to between fingers, back of hands, under nails or jewelry, and wrists.
* Rinse hands well - hands not well rinsed become irritated and chapped.
* Dry hands - with clean, dry paper towel.
* Turn faucet off with towel - remember, the faucet handles are considered dirty.
* Dispose of towel.

Jewelry harbors organisms so wear as little as possible. Good hand care is vital. Painted nails are not allowed in the clinical setting. Keep nails and cuticles clean and neat so that organisms cannot get into them. No artificial nails should be worn in clinical areas. Use hand lotion provided by the hospital.

The CDC recommends the use of alcohol based waterless hand wash unless your hands are visibly soiled. Alcohol based hand rubs kill 99.9% of all common germs. You should use soap and water if your hands are visibly soiled.

Precaution should be taken when removing soiled gloves. Steps to removing gloves properly are:

* Make sure the glove’s outer surface never touches your skin.
* Grasp the outside of the glove near the wrist.
* Pull down until the glove comes off inside out.
* Cup this glove in the palm of your gloved hand. Then, insert 2 fingers of your bare hand inside the cuff of the remaining glove.
* Pull down so this glove also comes off inside out – with the first glove tucked inside.
* Wash hands.

**13.6.1 Universal Precautions (also referred to as Standard Precautions)**

Examples of some viruses that can be transmitted by blood or body fluids are Hepatitis B (HBV), Hepatitis C (HCV), syphilis, and Human Immunodeficiency Virus (HIV). HIV is the virus that causes AIDS. Often one does not know that a patient has one of these diseases, because many times they do not look sick. You can protect yourself from exposure to these diseases by following special precautions known as Universal Precautions. Universal Precautions are designed to reduce the risk of transmission of bloodborne pathogens and pathogens from moist body substances and **applies to all patients regardless of their diagnosis or presumed infectious state.**

**13.6.2 Transmission Based Precautions:**

In addition to Universal Precautions, students use transmission-based precautions for patients who have certain highly contagious illnesses or are suspected of having such illnesses. These precautions include Airborne Precautions for infectious dust particles or small-particle droplets; Droplet Precautions for infectious large-particle droplets (such as from sneezing or coughing); and Contact Precautions (skin-to-skin contact or contact with a contaminated object).

Airborne Precautions are required for patients known or suspected to be infected by airborne organisms. Examples include tuberculosis and varicella (chickenpox – which also requires Contact Precautions because it can be spread both through the air and by contact).

These patients require negative pressure rooms, and their door must remain closed at all times. Avoid transporting the patient unless absolutely necessary. When transporting is necessary, apply a regular surgical mask on the patient.

Droplet Precautions are required for patients known or suspected to be infected by organisms that travel in droplets. These organisms travel short distances (usually within three (3) feet). They cause infection when they land in a susceptible person’s eyes, nose, or mouth.

Examples include influenza, rubella, pertussis, and certain pneumonias (hemophilus influenza, meningococcal, mycoplasma, and streptococcus - group A).

Keep a three (3) foot distance between the patient and other patients and visitors. Wear a regular surgical mask when working within three (3) feet of the patient. Avoid transporting the patient unless absolutely necessary. When transporting is necessary, apply a regular surgical mask on the patient.

Contact Precautions are required for patients known or suspected to be infected by organisms that travel by direct contact. This is the most common form of transmission and can occur from skin-to-skin or through objects such as medical instruments (i.e., blood pressure cuffs, stethoscopes, etc.). Examples include MRSA, VRE, Rotavirus, Clostridium Difficile, Scabies, and Varicella (also requires Airborne Precautions)

Wear gloves when entering the room. Avoid touching any surface that might be contaminated when leaving the room. Use noncritical equipment (touches only intact skin) for one patient only if possible. If such equipment must be shared, clean and disinfect it thoroughly between patients.

**13.6.3 Bloodborne Diseases**

Bloodborne diseases are spread by contact with infected blood and other infectious body fluids. Infections are caused by microscopic organisms (pathogens) and can be present long before the infected person shows any signs of the disease. These organisms may be present in blood and serum, body fluids (such as semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, amniotic fluid, pericardial fluid, peritoneal fluid, and anybody contaminated with blood), saliva containing blood, unfixed tissue or body organs other than intact skin, organ cultures, culture media, or similar solutions.

Bloodborne organisms may enter the body in a variety of ways including: through open cuts, nicks, skin abrasions, dermatitis, and acne, as well as the mucous membranes of the mouth, eyes, or nose; by touching an object soiled with infectious material and then indirectly transferring the infectious material to the mouth, eyes, nose, or open skin lesion; and an accidental injury that results in a puncture or cut of the skin by a sharp object soiled with infectious material (example: needle, knife, broken glass, dental wires, etc.).

Precautions should be taken when handling items contaminated with blood or body fluids. An item is considered to be contaminated if it is, or is suspected of being, soiled with blood or other infectious materials. Surfaces such as walls, floors, counters, and furniture that are contaminated with infectious material are a major danger for spreading diseases such as hepatitis B. The hepatitis B virus can survive on surfaces, dried and at room temperature, for at least one week. Surfaces and objects can be soiled by infectious material such as serum or plasma without visible signs. This is why we use standard housekeeping procedures for cleaning all equipment and work surfaces as they become contaminated.

Students should protect themselves by acting as if every patient they come in contact with has a Bloodborne disease. Remember, 2/3 of infected people either do not have signs or have signs that can be mistaken for flu.

Students can reduce their risk of infection by completing mandatory infection control educational requirements such as obtaining immunizations (i.e., Hepatitis B, flu vaccine). The Hepatitis B vaccine is 85 – 97% effective. Students do not have to accept the vaccine; however, if they choose NOT to accept it, they must sign a written statement saying that it is their decision to refuse the vaccine. (The hepatitis B vaccine [set of 3 doses/shots] does not protect against other bloodborne hepatitis viruses.) Hepatitis B vaccine is used to immunize people of all ages against infection caused by all subtypes of the hepatitis B virus. There is no danger of getting Hepatitis B from the vaccine because no human substances are used to make it. Other mandatory infection control educational requirements include having a health screen performed and following important work practice controls. These include proper hand washing; not eating, drinking, smoking, applying cosmetics or lip balms or handling contact lenses where exposure to blood or other potentially infectious material is likely; not keeping food or drinks in refrigerators or on shelves or countertops where blood or other potentially infectious material may be present; using appropriate personal protection equipment (PPE) when doing mouth-to-mouth resuscitation/CPR and handling needles and sharps. PPE is equipment that protects you from contact with potentially infectious materials (examples of PPE include gloves, masks, protective eye wear, lab coats, resuscitation devices, etc.)

PPE is effective only under normal conditions of use. When selecting and using PPE remember it must be used each time a task is done, it must be appropriate for the task, it must fit properly, and when removed, it must be placed in the appropriate place or container for washing, decontamination, or disposal.

All areas or items with the Biohazard symbol or the word “Biohazard” indicate that infectious materials are present and universal precautions must be used. The color red is used for biohazard (i.e., red sharps containers). Non-contaminated items, such as computer paper and pizza boxes, should never be placed in biohazard containers.

**13.6.4 Infection Control Exposure Protocol**

Any student who has an exposure to blood or body fluids of a patient should (1) wash or irrigate exposed areas immediately with soap and water and (2) report the incident immediately to the clinical instructor. Significant exposure includes percutaneous injury with a contaminated sharp object (needle, lancet, broken slide, etc.) and exposure of mucous membranes or open skin lesions to blood or body fluid of a patient. It will be the student’s responsibility to advise his/her clinical instructor immediately when an exposure has occurred and complete the following steps:

1. Student should complete an incident report form according to the guidelines of the clinical facility in which the exposure occurred.
2. Notify the clinical instructor immediately.
3. The clinical instructor will notify infection control staff at the clinical facility that will assess the situation and make appropriate recommendations, including any required testing and/or medical treatment. Student must comply with all recommendations.
4. The clinical instructor must fill out a report and forward to Security and Business Office verifying that an exposure has occurred. The report should document if medical intervention is warranted. This report must be submitted within 24 hours of date of incident if medical intervention is needed.
5. Student should then report to Student Services to fill out necessary paperwork.

**13.6.5 Reporting an Incident**

A student involved in an incident (accident) during class, clinical practice, or traveling to and from class or a clinical facility should complete the following steps:

1. If the incident occurred at a clinical facility, an incident report form must be completed according to the guidelines of the clinical facility in which the incident occurred.
2. Notify the clinical instructor within one hour of the incident.
3. The clinical instructor must fill out a report and forward to Security and Business Office verifying that an incident has occurred. The report should document if medical intervention is warranted. This report must be submitted within 24 hours of date of incident if medical intervention is needed.
4. Student should then report to Business Office to fill out necessary paperwork for insurance carrier.
5. Students must submit claims for injury covered under the accident insurance provisions immediately, but in no instance later than 60 days, to expect coverage.

**There are treatment options shown to prevent health care workers from having a conversion to HIV+ following an exposure to HIV. This treatment may prevent the student from getting sick. Students must receive treatment within two hours of exposure.**

**13.7 TB Control Policies (TCP)**

The TCP is designed to provide students with information, guidelines, and policy designed to prevent exposure to the tuberculosis (TB) bacteria.

TB is an infectious disease of the lungs and other organs caused by the bacterium Mycobacterium tuberculosis. The disease has long been and still is a major cause of disability and premature death throughout most of the world. TB is carried in airborne particles, known as droplet nuclei, which can be generated when persons sneeze, cough, speak or sing. The particles are so small (1-5 microns) that normal air currents keep them airborne and can spread them throughout a room or building. Infection occurs when a susceptible person inhales droplet nuclei containing TB and the bacterium becomes established in the alveoli of the lungs. Two to ten weeks after initial infection, the immune response usually limits further multiplication and spread of the TB bacterium. For a small proportion of newly infected persons (usually <1%), initial infection rapidly progresses to clinical illness. However, for another group (approximately 5%-10%), illness develops after an interval of months, years, or decades when the bacteria begin to replicate and produce disease. The risk of progression to active disease is markedly increased for persons with HIV infection and other individuals with weakened resistance to illness or disease.

The hazards associated with TB infection have increased with the development of multiple drug resistant strains of TB (MDRTB). There are many strains of MDRTB present in the population today, with many of these being resistant to up to six of the standard antibiotics normally used to treat the disease. With the delay of effective drug therapy, patients remain in an infectious state for longer periods of time, thereby increasing the risk of infection to those around them. Cases of TB contracted in an occupational setting have been reported, and it is anticipated that the likelihood of fatalities from occupationally acquired TB will increase.

The probability that a person exposed to TB will become infected depends upon the concentration of infectious droplet nuclei in the air and a number of patient, environmental, and work practices influencing transmission of the disease.

Immunosuppression, homelessness, overcrowding, malnutrition and lack of medical care are the most common factors increasing the risk for contracting TB. Groups known to have a higher incidence of TB include current or past prison inmates, alcoholics, intravenous (IV) drug users, the elderly, foreign-born persons from areas of the world with a high prevalence of TB (i.e., Asia, Africa, the Caribbean, and Latin America), and persons living in the same household as members of these groups.

In the healthcare setting, risks of transmission of TB are related to the area of the facility and type of procedures performed. Risks may be higher in areas where patients with TB are provided care before diagnosis (i.e., clinical waiting areas, emergency rooms, sites at which clinical diagnostic procedures are performed, and areas populated by large numbers of people in high-risk groups, such as clinics for HIV positive persons or IV drug users). High hazard procedures in a healthcare setting which may generate airborne respiratory secretions include aerosolized pentamidine treatments, bronchoscopy, sputum induction, suction procedures, autopsies, open abscess irrigation, and dental work.

Healthcare workers should be particularly alert to the need for preventing TB transmission in healthcare settings in which persons with HIV infections receive care, especially if cough-inducing procedures, such as sputum induction and aerosolized pentamidine treatments, are being performed.

TB can be both symptomatic and non-symptomatic. With all forms of the disease, there may be symptoms of chronic infection, loss of appetite, night sweats, weight loss, fatigue, and low-grade fever. Pulmonary TB is the most common form of the disease, accounting for 83% of the cases reported in the United States in 1985. The most common symptom is a chronic cough, usually productive of mucoid or mucopurulent sputum. A dull aching in the chest is sometimes reported. Occasionally, pulmonary TB can present as an acute respiratory illness with symptoms resembling those of influenza or pneumonia. Miliary TB is generally not infectious through the airborne route if it has not spread to the lungs. It is more likely to be transmitted via surface contact. Symptoms of this illness include fever and multiple lesions in many organs of the body.

TB meningitis, which often accompanies Miliary TB, can result in symptoms such as headache, abnormal behavior, clouded consciousness, or convulsions. There are a number of other types of TB disease including lymph node, pleural, and bone and joint disease. TB can spread throughout the body and involve many organs and systems of the body.

All nursing students are required to undergo a two-step standard tuberculin (PPD) skin test, except for those previously documented as having a positive PPD skin test. The standard tuberculin test is administered by the Mantoux technique, whereby 0.1 ml. of the test material is injected under the skin of the forearm by needle and syringe. The test material is a purified protein derivative (PPD) of old tuberculin. Injection at the proper depth produces a discrete pale elevation of the skin approximately 6-10mm in diameter. The test is usually read 48-72 after injection. An area of induration 10mm or more in diameter is considered a positive reaction. There are additional criteria when less than 10mm elevation is considered positive. **THE TEST MUST BE PLACED AND INTERPRETED ONLY BY AN EXPERIENCED HEALTH PROFESSIONAL. NO STUDENT MAY INTERPRET THEIR OWN PPD SKIN TEST.** A distinction must be made between an individual who has been exposed to TB and demonstrates a positive PPD screening test but has no signs of active disease, and the individual who is PPD positive with active disease. The former is not considered infectious unless symptoms develop, while the latter is considered infectious.

Those students previously documented as having a positive PPD skin test will be considered by a physician for a chest x-ray. They should be educated in signs and symptoms of TB and instructed to report to their physician and notify their Clinical Instructor if any symptoms are noted.

All previously PPD negative students should have, at a minimum, annual PPD skin testing. Those students previously documented as PPD positive should be considered by a physician annually for a chest x-ray and symptom check.

**13.7.1 TB Exposure**

All nursing students are at risk for exposure to TB. However, to minimize the risk of exposure to TB in the clinical setting, patients must be isolated if they are in an active phase of their illness and are infectious and placed on Airborne Precautions. Since transmission of TB is most common via inhalation of aerosolized infectious droplets, an air filtration respirator becomes the primary piece of PPE which must be considered. Air filtration respirators, as the name implies, filter air that reaches the breathing zone of the worker. The Occupational Health and Safety Administration (OSHA) has recommended a number of air filtration respirators for use in the prevention of TB transmission. Three examples of approved TB respirators are the Technol PFR95 Particulate Filter Respirator, the 3M 1860/1860S Health Care N95 Particulate Respirator, and the 3M 8233 N100 Particulate Respirator. All respirators require medical screening and a fit test.

Any student exposed to TB must contact the Clinical Instructor immediately and follow the Infection Control Exposure Protocol.

 If the student with a prior negative PPD skin test is exposed to a patient with TB, a baseline PPD skin test must be done immediately (unless a baseline has been done within the last three months) and again in eight to ten weeks. If a student converts from negative to positive, the student must be evaluated by the Health Department or his/her personal physician. The next step, according to Health Department policy, is an x-ray. If the x-ray is negative and the student is asymptomatic prophylactic medication should be recommended but is not mandatory according to the State. This student would not have TB or be contagious so therefore is not mandated to take medication, it is a recommended choice. Roanoke-Chowan Community College has provided the student with student accident insurance that considers covered charges after the student’s primary insurance has been exhausted.

Students with a prior positive PPD skin test who are exposed to a patient with TB will be counseled regarding symptoms of TB. If they become symptomatic, they should notify the Clinical Instructor immediately and be referred to the Health Department for further evaluation.

Any student who develops symptoms of TB must report this to the Clinical Instructor. It will be the responsibility of the Clinical Instructor to consult with infection control personnel in the clinical facilities to determine the student’s eligibility to participate in clinical experiences when it has been determined that a significant risk of transmission exists. In addition, any clinical facility policy must also be followed in accordance with the contractual agreement between the College and the clinical facility.

**13.8 General Safety Guidelines**

Safety for patients, students, employees, visitors, and property is always the first consideration in healthcare. Key areas of concern are fire safety, hazardous materials and waste management, electrical safety, and magnetic resonance imaging (MRI) safety.

Fire Safety: Three elements required to start a fire are heat, fuel, and oxygen.

Only equipment that is in immediate use is allowed in the hallway. All other equipment is to be stored in a designated storage area. Firewalls separate the building into smoke compartments. Each stairwell is a smoke compartment. Remember smoke kills more people than most fires. Do not use elevator during a fire.

When responding to alarms and drills, remain calm, listen for instructions, and make sure all hallways and means of egress (equipment) are cleared and unobstructed.

To use a fire extinguisher, always remember the acronym PASS:

P – Pull the pin

A – Aim at the base of the fire

S – Squeeze the handle

S – Sweep from side to side

Hazardous Materials and Waste Management: Chemicals are harmful if they enter the body by inhaling, swallowing, or through the skin. Chemical hazards can be:

* Physical – Physical hazards can cause a dangerous situation like a fire or explosion.
* Health – Acute health hazards hurt you rapidly, after a short exposure (i.e., poisoning, and chemical burn). Chronic health hazards harm you more slowly, after a long-term exposure (i.e., cancer and heart damage).

Safety Data Sheets (SDS) and labels are the best sources of information about a chemical’s hazards and how to control them. Each department must maintain a current chemical inventory and an MSDS for each chemical used or stored in their department.

All chemical containers within a department must have a label naming the chemical and an adequate hazard warning when a chemical product is transferred to a second container with proper label attached. Never assume that contents of an unlabeled container are harmless.

Handling chemicals requires the use of personal protective equipment (PPE). All students are required to use appropriate PPE to protect themselves from exposure. If a chemical spill occurs on PPE, remove the equipment immediately. Properly rinse away chemicals spilled on other sources (i.e., floor, equipment, etc.).

Any student who may be exposed to hazardous chemicals should know how to use emergency eyewash equipment. For chemical splashes to the eyes hold both eyelids open and roll the eyeballs so water flows on all surfaces in the folds surrounding the eyeballs. A minimum of 15 minutes is recommended for initial first aid irrigation and dilution of a chemical splash to the eyes, face, and body.

Electrical Safety: One of the main causes of electrical fires and electrical related injuries is due to current overload. All extension cords and appliances that come from the factory with a ground plug that are used in the facility are required to have a continuous ground. This means that the ground prong must be in place. All extension cords used in a wet area are required to have a Ground Fault Circuit Interrupter (GFCI). A GFCI is a supersensitive, rapid action power switch that disconnects a circuit as soon as it detects current leaking to the ground. Electrical panels and equipment are required (OSHA) to have a minimum clearance of thirty-six inches of clearance in front of them. They also require a path of not less than two feet for access and egress.

Report any damaged equipment to your instructor as soon as you identify the hazard. Do not use tools/equipment that has been damaged.

Magnetic Resonance Imaging (MRI) Safety: The magnet is always on in the MRI area. The closer you are to the magnet the stronger the magnetic field/pull becomes. Individuals with pacemakers and certain other metallic implants should not enter the MRI area. Oxygen cylinders and other metallic items should never be carried into the MRI area. **No one shall enter into the MRI area without the technologist present.**

**13.9 Unsafe Practices**

The Health Sciences faculty has both a legal and ethical responsibility to protect the public and health care community from unsafe practices. As a result of this obligation, students may be disciplined and/or dismissed from a program of study for practices which are deemed safety threats. Safety threats are those which threaten or have the potential to threaten the safety of a patient, a patient’s family, another student, a faculty member, another health care provider, or themselves. Any faculty member or clinical staff who determines that a student cannot function at a safe level in clinical practice will notify the student to leave the area immediately and notify the clinical instructor. The faculty member or clinical staff and clinical instructor will discuss the situation and determine an appropriate course of action.

Any student denied clinical privileges by a clinical facility because of unsafe practices will be unable to complete the clinical portion of the program. A student who is unable to complete the clinical portion of a program will not be able to graduate.

**14.0 GRADUATION**

**14.1 Student Responsibility**

Students are responsible for proper completion of the program, familiarity with all requirements of the curriculum, maintaining the grade point average required, knowing their academic standing, and meeting all other degree requirements. Their faculty advisor will counsel them, but the final responsibility remains that of the student.

**14.2 Graduation Requirements**

Upon recommendation of the faculty and the approval of the College’s Board of Trustees, the appropriate degree, diploma, or certificate will be awarded to students successfully completing the course requirements of the program. All students must:

* Complete all required course requirements within established curriculum as prescribed in the catalog of record.
* Earn a minimum of a 2.0 GPA.
* Clear all financial obligations to the College.
* Complete at least 25 percent of credit hours required for the degree, diploma, or certificate at the College.
* Nursing students must have an overall GPA of 2.0 with no grade less than “80” (B) in nursing courses or less than “C” in nursing –related curriculum sequence courses.

**14.3 General Information**

Students are responsible for knowing and meeting graduation requirements. Although a faculty advisor is assigned to each student to advise in planning class schedules each semester, the final responsibility for meeting all graduation requirements rests with students.

Awards are issued only once a year at the May graduation ceremony. Students completing graduation requirements for degrees, diplomas, and certificates at points throughout the academic year must wait until the graduation ceremony following their completion to receive their award.

During the spring semester, prospective graduates will receive notification regarding all pertinent information relative to commencement. All prospective graduates are required to pay a graduation fee. Those who do not wish to participate in the commencement ceremony are still required to pay the graduation fee. The graduation fee includes the printing of the actual diploma and other expenses associated with the graduation exercises. The graduation attire and other accessories should be purchased through the College Bookstore.

Students are eligible to graduate with High Honors and Honors. To be considered a High Honor graduate, the student must have an overall GPA of 4.0 upon completion of any degree or diploma program. To be considered an Honor graduate, the student must have an overall GPA of 3.75 to 3.99 upon completion of any degree or diploma program.

**15.0 LEGAL AND ETHICAL STANDARDS \_\_**

**15.1 Code of Ethics**

See International Council of Nurses (ICN) [ICN Code of Ethics for Nurses 2012](https://www.icn.ch/nursing-policy/regulation-and-education)

See American Nurses Association (ANA) [ANA Code of Ethics](https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/)

***R-CCC Health Sciences & Human Services Code of Ethics***

You have been admitted into a program that requires the utmost commitment to ethics and integrity. Upon completion of the program, you will be a professional charged with enhancing and safeguarding the wellbeing of others—physically, mentally, and emotionally. People’s lives will often be in your hands, as will the welfare and emotional support of their loved ones.

Given the high ethical expectations of health science professionals, the R-CCC Health Sciences and Human Services Division places values like honesty, integrity, and accountability at the center of the program. While graduates must be highly competent and knowledgeable, without the requisite personal qualities of honesty and integrity, you will do a disservice to the profession at best, and at worst, you could endanger lives.

This Code does not attempt to codify every instance of academic dishonesty or unethical behavior. Instead, it provides a framework by which students can evaluate the kinds of decisions they make and assume full responsibility for those decisions.

The program faculty and administration recognize that maintaining the ethical standards of the profession that you have chosen to enter is a joint responsibility. As such, the faculty and administration are committed to the following:

* being as clear as possible about violations,
* providing educational opportunities for students to distinguish resources and appropriate tools,
* staying current with emerging technologies and educational practices in order to anticipate increased risks,
* regularly assessing and evaluating relevant policies, and
* modeling and upholding the values of academic integrity, mutual trust, and respect.

As students, we expect that you will commit to the following:

* being informed of the department and college’s expectations regarding honesty,
* having the courage to ask questions about ethical dilemmas and to share any incidences of violations that come to your attention,
* recognizing that any efforts aimed at reducing your own construction of knowledge are not true learning and are typically an ethical breach,
* respecting yourself, your classmates, faculty, and administration,
* cultivating an environment that stands up against wrongdoing and negative peer pressure,
* modeling and upholding the values of academic integrity and mutual trust,
* and maintaining client confidentiality and refraining from discussing clinical experiences, whether in person or on social media sites.

While the R-CCC Academic Regulations Policy outlines plagiarism clearly, the department provides you with additional details regarding common examples of academic dishonesty. This list is not exhaustive, so an omission from the list does not absolve you of responsibility for unethical conduct. The list is merely provided as an educational tool and resource:

1. Use of text banks. If you have any questions about the nature of *any* electronic resources that you find in the course of your studies (Quizlet, Course Hero, Chegg, Course Archives), please bring those questions to the respective faculty member.
2. Giving, receiving, or obtaining information pertaining to an examination before or during an examination period, unless such action is authorized by the instructor. This includes use of answer keys. *NOTE:* *Anything that gives one student an unfair advantage over another student is wrong!*
3. Accessing tests after the test is administered, whether the test was administered electronically or in paper and pencil version. Test review practices vary between faculty members. Students wanting to review tests should refer to the course syllabus and assigned faculty for the proper process for this review.
4. Submitting an exam about which one has unauthorized information without reporting it to the instructor.
5. Seeing dishonorable conduct and failing to report it.

**15.2 Confidentiality**

Patient information, employee information, and clinical facility information (whether printed, written, spoken, or electronically produced) is confidential. Students may see or hear confidential information on:

* Patients and/or family members, such as patient records, conversations, and financial information.
* Employees, volunteers, other students, contractors, and partners; such as salaries, employment records, and disciplinary actions.
* Business information, such as financial records, reports, memos, contracts, and clinical facility computer programs and technology.
* Third parties, such as vendor contracts.
* Operations improvement, quality assurance, and peer review, such as reports, presentations, and survey results.

Students are obligated to protect and keep confidential information with which they come into contact at the clinical facilities.

* Students should only access patient information, including the clinical facilities’ computer systems, for appropriate purposes such as patient care and records processing.
* Students should not disclose their password used for computer access to another or use another’s password.
* Students should not make unauthorized copies of confidential information.
* Students should not dispose of any confidential information unless instructed to do so. If instructed to do so, students must follow correct departmental procedure for disposal (such as shredding paper before throwing it away).

Any violation of confidentiality or unauthorized computer access may result in revocation of the ability to perform clinical practice, revocation of computer access, and other disciplinary action up to and including dismissal from the program. Federal and state laws also govern unauthorized access and use of confidential information, including access to a computer system for an unauthorized purpose.

**15.3 HIPAA**

Health Insurance Portability and Accountability Act (HIPAA) is an act passed by congress to protect confidentiality of medical records.

HIPAA is a federal law that includes requirements relating to the following areas:

* It provides the “portability” of health care coverage so that individuals can transfer from one health plan to another without exclusions and limitations relating to preexisting conditions.
* It prohibits discrimination relating to health plan eligibility and premiums.
* It establishes increased surveillance and penalties relating to fraud and abuse.
* It includes administrative simplification provisions that establish standards for electronic transmissions of certain health information.

The administrative simplification provisions of HIPAA relate to maintaining privacy and security of individually identifiable health information by prescribing how such information is to be shared, transferred, and stored.

Some agencies that evaluate patient privacy and confidentiality are:

* The Joint Commission (TJC).
* Centers for Medicare and Medicaid Services (CMS) - manages Medicare, Medicaid, and child health insurance program.
* National Committee for Quality Assurance (NCQA).
* Federal and state governments.

Protecting the privacy of patients and patient confidentiality are things completed routinely. It is something taught at all levels of healthcare education and is always an expectation of health sciences students.

You breach confidentiality by talking in public areas (hallways, elevators, cafeteria, classrooms, etc.), giving information about a patient without his/her permission, and accessing information on patients for which you are not providing care. Accessing patient information must be limited to what a student needs to know to complete their assignment.

Clinical sites are involved in many different types of transactions that are or will be subject to HIPAA requirements. They will follow policies and procedures with regard to handling internal administrative functions and relationships with other involved parties in order to achieve HIPAA compliance with regard to various transactions.

Students have an obligation to protect and keep confidential all protected health information. Students must not at any time use, access, or disclose protected health information to any person or entity, internally or externally, except as required and permitted in the course of duties and responsibilities as a student. This obligation extends to any protected health information with which students may come in contact during the course of clinical practice experiences and includes protected health information in oral, written, and electronic form. Students must access patient information, including the clinical facilities’ computer system only for appropriate purposes such as patient care and records processing. Students must not disclose their password used for computer access to another or use another’s password. Students must only access or attempt to access information they are authorized to access.

Unauthorized use or disclosure of protected health information or unauthorized computer access may result in disciplinary action by the clinical facility and/or College, up to and including dismissal from the program. It may also result in the imposition of civil penalties under applicable federal and state law, as well as professional disciplinary action as appropriate.

Students are responsible for reporting to the clinical instructor any known or suspected violation of HIPAA policies, procedures, and requirements.

Students are responsible for completing any HIPAA training required by any clinical facility.

**15.4 Clinical Requirements**

Clinical facilities may require criminal background checks, drug screenings, credit checks, professional license checks, and/or proof of US citizenship prior to or during participation in the clinical portion of a program. Pending the outcome, clinical facilities may deny a student the opportunity to complete the clinical portion of a program. A student who is unable to complete the clinical portion of a program will not be able to graduate.

Criminal background checks, drug screenings, credit checks, professional license checks, and/or proof of US citizenship may also be required after graduation by examination boards, state licensing boards, and employing agencies. Pending the outcome, a graduate may be disqualified from examination eligibility, state licensure, and/or employment.

**15.5 Professional Licensing Examination**

*Per North Carolina Board of Nursing Protocol.*

Upon satisfactory completion of educational requirements and verification by the ADN Program Director, the student is eligible to take the licensing exam. Registration Process for licensure by examination:

1. Submit an application for licensure in North Carolina. The application for licensure by exam for NC is an on-line application and is valid until you are declared eligible and issued an ATT up to a maximum of 1 year.
2. Meet all of the board of nursing’s eligibility requirements to take the NCLEX® examination.
3. Register and pay for the NCLEX® examination with Pearson VUE.
4. Receive eligibility from your board of nursing.
5. Pearson VUE will send an Authorization to Test (ATT) The name (first, middle, and last) on your ATT must match exactly the name on your identification. You must have your ATT document to schedule your exam date time and location. You must take your ATT to the test center on the day of your examination. You will not be admitted to the examination without your ATT. Instructions for scheduling examination will be included with the ATT. An ATT is valid for 180 days. If you miss your appointment, are turned away from the testing center, or the ATT expires, you will have to apply to NCBON to re-establish eligibility.

**15.6 Licensure Eligibility**

In accordance with the provisions of Chapter 150B of the General Statutes, the NC Board of Nursing (GS 90-171.37) may deny licensure, revoke, or suspend a license or invoke disciplinary measures in which the Board determines that the nurse or applicant:

* Has given false information or has withheld material information from the Board in procuring or attempting to procure a license to practice nursing;
* Has been convicted or pleaded guilty or nolo contendere to any crime which indicates that the nurse is unfit or incompetent to practice nursing or that the nurse has deceived or defrauded the public. Conviction shall not automatically bar licensure. The Board of Nursing shall consider factors regarding the conviction (90-171.48).
* Has a mental or physical disability or uses any drugs to a degree that interferes with his or her fitness to practice nursing;
* Engages in conduct that endangers the public health;
* Is unfit or incompetent to practice nursing by reason of deliberate or negligent acts or omissions regardless of whether actual injury to the patient is established;
* Engages in conduct that deceives, defrauds, or harms the public in the course of professional activities or services;
* Has violated any provision of the Nurse Practice Act, G.S. Chapter 90, Section 1, Article 9A
* Has willfully violated any rules enacted by the Board

**15.7 Certification/Licensure Opportunities**

(Prior to completion of associate degree)

NA I Listed-Students satisfactorily completing the second semester of the ADN A45110 program are eligible to apply for NA II listing through the NC Board of Nursing. A current NA I listing is required prior to admission to the ADN program and to obtain a NA II listing.

**16.0 STUDENT CONDUCT**

**16.1 Cheating**

The faculty has the responsibility for seeing that all students receive credit for work in which they have completed. All students are expected to be honest in all dealings with members of the staff and faculty of the College and staff members and patients in all clinical facilities. Students are also expected to report any observed instances of dishonesty to the instructor in charge. **Failure to do so makes the observer as guilty as the one who is cheating.** Students will not receive credit for work which is not their own.

Any faculty who discovers possible cheating or to whom cheating is reported will investigate the matter fully with the test administrator. If after careful consideration of all documented evidence, the test administrator believes cheating has occurred, the document evidence will be presented to the Nursing Department Director who will review the information. If the Nursing Department Director concurs, the student will be presented with a formal letter stating his/her dismissal from the program.

Upon investigating and it is determined that the student did indeed cheat, the student will receive an (F) for the class in which the student was caught cheating. If the student exited other NUR courses with incomplete work, that student will receive a zero (0) for the incomplete assignments and those grades will be calculated in with the rest of the grades for computation of a final grade.

**16.2 Plagiarism**

Plagiarism is the use of someone else’s words, writings, thoughts, or ideas without giving proper credit. Taking a section of a book or a magazine article and copying it essentially word for word without giving proper credit to the author is one example of plagiarism. The faculty who detects plagiarism will review with the student the circumstances which constitute plagiarism. The student will be required to re-submit the work to receive credit and the student’s grade will be adjusted accordingly. A second instance of plagiarism during any time thereafter will be considered cheating and treated as such.

**16.3 Drug/Alcohol Use**

The Associate Degree Nursing program intends to maintain a drug and alcohol-free environment. It is our belief that students impaired by use of mind-altering substances are harmful to themselves, the mission of the College and programs, the safe care of patients, the performance of the student role, and the well-being of fellow students. Under no circumstances will student possession or use of any mind-altering substances be tolerated at the College or any clinical facility.

Mind-altering substance is defined as any chemical, natural or manufactured, which when taken into the body may cause alterations of personality, emotion, cognition, or behavior. Mind-altering substances may also be more commonly referred to as alcohol, drugs, substances, or chemicals. Examples include:

* Use of any illegal drugs.
* Presence of a blood alcohol content.
* Use of non-prescribed controlled drugs.
* Improper or excessive use of prescription or over-the-counter medication, which results in impairment.
* Use of other mind-changing chemicals, which results in impairment.

The following situations may indicate that a student is abusing mind-altering substances and should heighten the awareness of the faculty, clinical instructors, and other students to that possibility:

* Smelling of alcohol.
* Bringing on the premises or being in the possession of alcohol, illegal drugs, or other non-prescribed controlled substances.
* Behaviors associated with the use of mind-altering substances.
* Deteriorating patterns of performance or personal conduct.
* Information from a credible source which indicates a student is abusing mind-altering substances.
* An accident.
* Stealing or diverting medications.
* Conviction of a drug statute.
* Legal charges involving mind-altering substances.

Students enrolled in the ADN program are ethically obligated to report to class, lab, and clinical in sound mind and body. A student who reports to class, lab or clinical impaired in any way by alcohol, over the counter medications, prescription medications, or illegal drugs are in violation of R-CCC policies and the clinical involvement agreement. In addition, violation of the clinical involvement agreement is grounds for immediate dismissal from the nursing program.

**16.4 Professional Activities**

Students will conduct themselves as adults and in a manner, which will always reflect positively upon Roanoke-Chowan Community College and the Nursing Department while attending and/or participating in professional activities.

When the activity involves a professional conference, students must participate in the meetings and workshops, as well as other official conference activities. Students must abide by the rules of the conference, the hotel in which they are a guest, and the program during the course of the conference. Failure to do any of the above may result in a student being asked to leave the conference, appropriate disciplinary action taken by the College, and being denied future conference participation.

**16.5 Laboratory Security**

Equipment and supplies located in the laboratory are property of the College. Removal of the equipment and supplies from the laboratory without direct supervision and instruction by faculty or written consent from the appropriate College representative will be handled in accordance with North Carolina statutes.

**16.6 Electronic Recording Devices**

It is the policy of the Associate Degree Nursing program that no electronic recording devices are used to record classroom or clinical practice experiences. Requests for appropriate accommodations from students with documented disabilities, who have made initial contact through Student Services, will be reviewed on a case-by-case basis.

**16.7 Cell Phones and Other Electronic Devices**

Cell phones and smart watches must be set on silent mode during class and are not permitted during testing. Phone calls and texting during class as well as clinicals are not permitted. The use of cell phones, smart watches, earphones, headphones, IPODs, etc. is not permitted in the clinical areas. Electronic devices containing reference software are allowed only in the conference rooms of the clinical agency.

**16.8 Social Networking and Media Policy**

Students have a responsibility to maintain social networking and media sites (i.e., Facebook, Twitter, You Tube) in a professional manner. Any posts in a social network or media site used in a derogatory manner can be held against the student. Posts that threaten faculty, staff, other students, and/or clinical facility employees may result in disciplinary action including dismissal from the program.

**16.9 Receipt of Gift Policy**

The Associate Degree Nursing program strives to be above reproach in all matters. This includes perceptions of fairness and objectivity. Faculty members in particular must not use their position, authority, or relationship with students to obtain uncompensated labor for their own personal or economic gain. They may not ask students to perform services unrelated to legitimate academic activities unless the student is adequately compensated for such services. Faculty members must not solicit gifts or favors from students. They must not accept gifts or favors where they have reason to believe that such gift or favor is motivated by a desire to secure some academic advantage. Therefore, Associate Degree Nursing faculty must not accept personal gifts beyond the small token of appreciation from students**.** In every circumstance, faculty members should avoid accepting even token gifts from students prior to submission of final grades for those students or completion of supervision.

**16.10 Professional Guidelines**

The following are professional guidelines that all students are expected to follow at all times during class and lab. The student will:

* Comply with all policies of the College and department.
* Follow the College dress code.
* Be punctual in arriving to the classroom and lab.
* Ask for supervision and assistance when needed and as directed.
* Utilize time efficiently and constructively.
* Complete all written work on time.
* Interact professionally, courteously, and respectfully with College faculty and staff.
* Address all faculty and staff with their appropriate title (Dr., Mr., Mrs., Ms., Miss, and the surname unless otherwise directed).
* Avoid the use of tobacco products.
* Avoid the use of profane or obscene language and unprofessional behaviors.
* Avoid chewing gum.
* Avoid using cell phones, texting, and accessing social networking sites.
* Maintains a reliable means of communication and transportation, valid telephone number, and email address on file in nursing department and in Moodle.
* Check Moodle account regularly Monday-Friday during each semester enrolled.
* Blogging, posting personal status updates or engaging in online activities is not permitted during your classroom or lab hours unless intended for appropriate clinical and research purposes.

**17.0 STUDENT INSURANCE**

**17.1 Medical Insurance**

All students are strongly encouraged to carry hospitalization and medical insurance. Accident insurance is available through the College and information regarding this insurance may be obtained from the Student Services Division.

**17.2 Malpractice Insurance (subject to change)**

All health sciences students are required to carry student professional malpractice insurance through Roanoke-Chowan Community College. The College has arranged for a blanket coverage policy through American Casualty Company of Redding Pennsylvania. Some key points of this coverage are:

* Limit of Liability. “Pay up to $1,000,000 for each claim to a total of $5,000,000 in any one year.”
* Methods of Payment. The annual premium will be in addition to tuition to be paid during registration.

This malpractice insurance is mandatory for all students participating in a clinical experience without exception. Students without insurance will not be allowed in the clinical area and will receive an unexcused clinical absence.

**18.0 STUDENT GUIDANCE**

**18.1 Student Transportation and Housing**

Students are responsible for their own transportation to and from the College and all clinical facilities. Student carpools are the responsibility of the individual student and not the responsibility of the College or program. Arrangements for transportation should be made prior to entering the program. Transportation to and from clinical facilities out of the four-county area may be arranged and provided by the College, when possible.

The College does not provide student housing. Living arrangements are also the responsibility of the individual student. All students must keep the College advised of their current address and phone number. For assistance in locating housing, contact the Student Services Division; however, R-CCC assumes no responsibility in any financial arrangement between the student and the landlord.

**18.2 Student Employment**

Employment during the course of study is strongly discouraged. The student who must work in addition to attending College should consider the effect that working may have on the grade point average. No absences or tardiness will be allowed for work conflicts.

If the student is employed by a facility, which is used as a clinical facility by the Associate Degree Nursing program, the student should be aware that the nature of those responsibilities should in no way be related to their responsibilities as a student and the student uniform may never be worn while functioning in roles outside of clinical practice. The employing facility takes full responsibility for the student employee’s actions while working and neither the Associate Degree Nursing programs administration and/or faculty nor Roanoke-Community College will be responsible for any student’s activities while functioning in the role of an employee.

**18.3 Student Health Services**

The College maintains no health care facilities other than first-aid supplies and AED. First aid supplies are available in the Jernigan Building (JER 124), New Student Center (Student Development Services), Young Building (Welding Classroom), Freeland Building (Cosmetology and Nursing Departments), and the Freeman Building (Barbering Classroom and Early College). The responsibility for medical services and associated costs rests with the student.

Emergency facilities are available at Vidant Roanoke Chowan in Ahoskie. Students who do not have a local physician are encouraged to make contact with a physician who will treat them when they are ill prior to entering the program.

**18.4 Reporting an Incident**

A student involved in an incident during class, clinical practice, or traveling to and from class or a clinical facility should complete the following steps:

1. If the incident occurred at a clinical facility, an incident report form must be completed according to the guidelines of the clinical facility in which the incident occurred.
2. Notify the clinical instructor within one hour of the incident.
3. The clinical instructor must fill out a report and forward to Student Services verifying that an incident has occurred. The report should document if medical intervention is warranted. This report must be submitted within 24 hours of date of incident if medical intervention is needed.
4. Student should then report to Student Services to fill out necessary paperwork for insurance carrier within 30 days of the incident.
5. Students must submit claims for injury covered under the accident insurance provisions immediately, but in no instance later than 30 days, in order to expect coverage.

**18.5 Learning Resources**

Nursing students are expected to consistently use outside resources in the learning process. The College has an excellent Library on campus. The Library provides students with current literature via professional journals, audiovisual learning resources, and current editions of the most relevant texts, reference books, and supplementary books. Nursing students should consider learning resources of a clinical nature, which are more than five years old, outdated and not acceptable for use.

**19.0 STUDENT ORGANIZATIONS**

**19.1 Student Government Association**

The purpose of this organization is to promote in each student a personal sense of pride and responsibility in the College and to accept his democratic responsibilities as an American citizen. The Student Government Association (SGA) acts as an intermediary between the student body and the administration of the College, serving as a student forum representing the student’s views to the College’s faculty and administration. It also cooperates with the administration in the coordination and the supervision of student activities. Activities supported by the SGA include multi-cultural activities, school cookouts, athletic events, leadership training and community projects. The activities of the Student Government Association are funded by student activity fees. All students who pay activity fees are members of the SGA.

**19.2 Departmental Organizations**

Class Organization

The class organization should exemplify leadership, professionalism, and be a role model to fellow nursing students. The organization will be responsible for raising funds for meeting community needs, NCLEX review, and class trips. The group should seek guidance from the Faculty Advisor before moving on any actions directly affecting the class. Any student on the organizational team that does not reflect the philosophy of Roanoke-Chowan Community College Associate Degree Nursing will be asked to step down by the Faculty Advisor.

**20.0 STUDENT APPEAL AND GRIEVANCE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**20.1 Appeal Procedure**

Students who question the fairness of disciplinary action taken against them are entitled to due process by submitting a written notice of appeal. Any disciplinary determination resulting in suspension or expulsion from the College may be appealed to the President or designee.

The notice of appeal must be sent to the Office of the President within **ten** working days after receipt of disciplinary action. The appeal must be in writing, sent to the Office of the President by certified mail, return receipt requested.

The appeal may be heard by the Student Conduct and Appeals Committee. The committee shall conduct closed proceedings that guarantee procedural fairness. The committee may recommend that the student be exonerated or disciplined. If discipline is recommended, the committee may advocate an official written reprimand, probation, or one of the following penalties:

1. Suspension from the College for a specified time, not to exceed two semesters, or until a condition is met.
2. Dismissal from the college for an unspecified period of time.
3. Permanent expulsion from the college.

The committee shall present its findings and recommendations to the President of the college within five working days of conclusion of the hearing. The President, after a full and complete review, will notify the student of the results of the hearing. The President’s decision shall be final.

**20.2 Student Grievance Procedure/Due Process**

*Purpose:*

The purpose of the student grievance procedure is to provide a system to channel student complaints against faculty or staff (support and administrative) concerning the following:

1. Alleged discrimination on the basis of age, sex, race, disability or other conditions, preferences or behavior, excluding sexual harassment complaints.
2. Sexual harassment complaints should be directed to the Associate Vice President of Student Services. Copies of the procedure may be obtained from this office.
3. Academic matters, excluding individual grades except where the conditions in item “A” above apply.

*Procedure:*

1. The student must go to the instructor or staff member where the alleged problem originated. An attempt will be made to resolve the matter equitably and informally at this level. The conference must take place within 10 working days of the incident which generated the complaint. The student and instructor are encouraged to seek resolution informally before filing an academic grievance.
2. If the complaint is not resolved at the informal conference with the instructor or staff member, the student should meet with the faculty of staff member’s direct supervisor within 10 working days after meeting with the faculty/staff person with who the grievance is filed. As part of the effort to resolve the issue, the supervisor will consult with the accused and chief administrative office of the division concerned.
3. If the complaint is not resolved at the informal conference with the direct supervisor, the student may file a written grievance. The student must put the grievance in written form, and shall include both a simple, straightforward statement of the grievance, and a short, plain statement of facts that the student believes supports the contention. The written grievance must be presented to the Office of the Associate Vice President of Student Services within 10 workings days after satisfying Step 2. The Office of the Associate Vice President of Student Services will refer the written grievance to the chief administrative officer of the division.
4. The Associate Vice President of Student Services will notify the chairperson of the Student Conduct and Appeals Committee within 10 working days upon notification of the grievance to convene the committee and conduct a hearing. The Committee Chair will convene the Committee within 10 working days upon Associate Vice President of Student Services’ notification. Following hearing procedures, the committee will decide by a majority vote the solution of the grievance and forward a recommendation and findings to the Associate Vice President of Student Services and the Office of the President within 5 working days after the hearing.

The President will review the committee’s findings/recommendations, make a final decision, and notify the student in writing within 10 working days. The President’s decision shall be final.

**21.0 STUDENT AGREEMENTS**

**21.1 Student Policy Agreement *(Sample)***

I have read and received an explanation of and understand the Nursing student policies as outlined in this handbook. I also understand that I must comply with and follow these policies during the period of my enrollment as a Nursing student at Roanoke-Chowan Community College.

**21.2 Reference Agreement *(Sample)***

I grant permission for the Nursing faculty to serve as a reference for me and discuss my academic and clinical progression and standing with any clinical facility, professional organization, or educational institution. Purpose(s) of the reference is:

1. Application for employment.
2. All forms of scholarships or honorary awards.
3. Admission to another educational institution.

Further, I hold Roanoke-Chowan Community College and its officers, faculty, and staff harmless from any discussion of my academic and clinical progression and standing with clinical facilities, professional organizations, and educational institutions.

I understand that I have the right not to consent to the release of my academic and clinical progression and standing. I have the right to receive a copy of any written reference upon request. This consent shall remain in effect until revoked by me, in writing, and delivered to the Nursing Department Director, but that any such revocation shall not affect disclosures previously provided by the Nursing faculty prior to the receipt of any such written revocation.

**21.3 Video Release Statement *(Sample)***

I agree to allow Roanoke-Chowan Community College and/or agent contracted by Roanoke-Chowan Community College to video, photograph, or records my name, likeness, image, biographical information, voice and/or statements.

I agree that such recordings or images may be used in whole or in part for publication, broadcast, multimedia production, Internet distribution, or illustration as deemed appropriate by Roanoke-Chowan Community College. I do not expect to be compensated in any way.

I also release Roanoke-Chowan Community College and its officers, faculty, and staff from any and all claims based on the use of such recordings and agree to hold Roanoke-Chowan Community College harmless from any and all claims by third parties, including any claim based on allegation of copyright infringement from my statements.

| **21.4** | **ECU HEALTH CONFIDENTIALITY AGREEMENT *(Sample)*** |
| --- | --- |

I understand that all patient information, all information regarding employees and contracted personnel, all competitive healthcare information (information not known or readily ascertainable to the public) and all information ECU Health and its subsidiaries (collectively referred to as “ECU Health”) are required by law to keep private (collectively referred to as “confidential information”), in whatsoever form (including but not limited to electronic and/or digital format, printed, written, and/or spoken) is confidential. I agree not to disclose, repeat, reveal or share any confidential information with anyone else unless I receive the express written permission of ECU Health or I am required by state or federal law or permitted by internal ECU Health policy; provided, however, I may disclose private health information for treatment, payment or health care operations and confidential information to others who need to know within ECU Health in accordance with ECU Health policies. I further understand and agree that I will only access such confidential information as reasonably needed for me to perform my job or my contracted responsibilities.

I agree to take all necessary and reasonable steps to prevent and limit the improper or unauthorized disclosure or misuse of confidential information including, but not limited to, keeping confidential information private and out of public viewing; securing or protecting information on my computer when leaving my workstation; copying or downloading data only to secured locations and only when required to perform job duties and not discussing confidential information in public areas.

I agree to abide by all ECU Health policies regarding confidentiality and security of confidential information currently in effect and which may be amended from time to time. I further agree to comply with all applicable state and federal laws governing access to computer systems and protection of confidential information.

I accept complete responsibility for my actions, and I understand that any violation of this Confidentiality Agreement may result in immediate revocation of my access to confidential information, removal from ECU Health premises, disciplinary action up to and including termination of employment, ability to provide services, and/or revocation of my ability to practice at ECU Health. (A member of the Medical Staff is subject to disciplinary action in accordance with Medical Staff Bylaws.)

My signature attests to the fact that I have read, understand and agree to abide by the terms of this Confidentiality Agreement.

Date: \_\_\_/ \_\_/ \_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Witness must be 18 years of age or older*

Approved: 7/13/1998

Revised 10/1998, 5/2006, 1/2012, 6/2022

| **21.5** | **APPENDIX A—CERTIFICATION BY STUDENT *(Sample)*** |
| --- | --- |

I am \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_a student at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_I understand that while I am on the Hospital’s premises, I must follow all of its policies and procedures. I have been informed of these policies and procedures. Any questions I had regarding them have been answered fully.

Infection Control

I do not, to the best of my knowledge, have an infectious disease or a contagious health problem that might or could risk a patient’s or employee’s health at Hospital. I agree to immediately notify Hospital if I contract or become aware that I have an infectious disease or a contagious health problem that might or could put at risk a patient’s or employee’s health at Hospital.

Confidentiality

I understand that all patient health information, including a name of a patient, is confidential under federal and state law. I agree not to repeat or share any patient health information that may be revealed to me, provided, however, that if I am required by law to disclose patient information, I agree to contact Hospital prior to disclosure. I further agree not to access any patient information that I have not previously received permission to access. I agree to safeguard all patient health information and follow the Hospital document destruction policy for any item that contains specific patient identifying information. In the event I accidentally or willfully violate Hospital’s policies or procedures relating to patient confidentiality, I will report such violation as soon as possible and no later than 5 business days after such violation.

Criminal Background

I understand that my criminal background will be checked according to ECU Health policy. Currently, this requires a criminal background check by a Third-Party Vendor before enrollment or admission into any program requiring a clinical education experience. I also understand that, during the term of my clinical experience, I am under a continuing obligation to disclose any felony and/or any misdemeanor offense (excluding a traffic offense); or any changes in my criminal record that may arise or occur after I sign this certification before the next scheduled clinical date.

Liability

In consideration for being permitted to access various clinical settings, I hereby voluntarily waive and release Hospital, its successors, assigns and affiliates and its directors, officers, agents and employees from any liability for any and all claims or causes of action I, my heirs or assigns might now or hereafter have for injury, loss, damages or death arising out of, or as a consequence of, or incident to my presence in the clinical experience. I further agree to hold Hospital harmless from all claims, losses, liability, and demands that I may incur or realize due to my negligence, gross negligence, willful misconduct, or violation of this Agreement.

Miscellaneous

I understand that the privilege of being allowed to participate in the clinical experience depends on my executing and complying with this Agreement. I understand that this privilege may be revoked or modified at any time without cause or prior notice at the Hospital’s sole discretion. By affixing my signature below, I certify that I have read and understood this Agreement and Waiver and Release From. Furthermore, by affixing my signature below, I hereby authorize the Hospital to use or disclose any information furnished by me or my School to any public health or governmental Hospital, in order to comply with any applicable Joint Commission (TJC) standards, or for any internal use of the Hospital (including, its affiliates, subsidiary or parent corporations).

I understand that my clinical education requirements include compliance with policies and procedures for clinical education students as currently posted on Hospital’s website and as updated from time to time, and that I am under a continuing obligation to remain in compliance with the same and to advise Hospital of any changes in my compliance status as such arises. Currently, such compliance includes BLS compliance and compliance with drug screenings. The parties agree to and adopt the terms and conditions of the Uniform Electronic Transactions Act, as adopted in North Carolina General Statues Chapter 66, including but not limited to the previous governing electronic signatures. As such, this Agreement is “signed” if it includes a digital signature, symbol, and/or action that is adopted or performed by either party or party’s Electronic Agent with the present intent to authenticate or manifest assent to the Agreement.

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Student Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness Signature *(Must be 18 years of age or older)* Date

**21.6 Vidant Training for Clinicals**

School: Roanoke-Chowan CC Faculty: ADN Faculty

**Please follow the instructions for completing the required training to attend clinicals:**

1. Go to rotationmanager.com
2. Click **“REGISTER”** at the top of the page.
   1. Fill in the required information (as a **STUDENT**).
   2. Use the dropdown arrow to find “SCHOOL-CAMPUS-DISCIPLINE” **{ROANOKE CHOWAN-AHOSKIE-NURSING}.**
   3. Enter your “EXPECTED GRADUATION DATE” **{MAY 20XX}.**
   4. Leave the “SCHOOL ID” blank.
   5. Supply your current mailing address and phone number.
   6. Supply your school email. If you have used your school email for another discipline, please use your personal (a professional sounding) email.
   7. Create and remember your password. ADN Faculty and Staff will **NOT** access to your password.
   8. Supply your debit/credit card information for payment. **[Registration is not complete until the payment is made and cleared]**
   9. Click the box beside **“I AGREE to the LICENSE AGREEMENT”.**
   10. Click **“AGREE AND REGISTER”.**
   11. You should see the required training items for completion
3. Click every download to change the  to 
   1. This directive includes completing the Core Orientation, EHR Orientation, Safety Culture, & Nova StatStrip trainings for certificates to submit to Staff. **ATTENTION: ONLY LEGAL NAMES ARE ACCEPTED.**
   2. DO NOT PRINT ANY FORMS, THEY WILL BE PROVIDED FOR YOU
4. Do **NOT** upload any documents

**Print Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**21.7 Clinical Involvement Agreement/Controlled Substances *(Sample)***

**Roanoke-Chowan Community College**

**Associate Degree Nursing Program**

As a student enrolled in the Associate Degree Nursing program of Roanoke-Chowan Community College, a program that includes clinical practice involvement, I, the undersigned, understand fully the sensitive nature of such programs and recognize that it is a privilege. I and any student participating in clinical practice should be free from any controlled substances which might impair the abilities of the student to perform his or her duties in such involvement. This is true whether the substances are prescribed or not.

In view of the foregoing, I affirm that I do not currently use any illegal drugs, nor do I abuse alcohol, or prescribed, or non-prescribed medications.

By this authorization, I do hereby release the previously designated doctors, medical personnel, or employees of Roanoke-Chowan Community College and the clinical agency from any and all liabilities arising from the physical examination and test results.

I have read and do freely understand the foregoing and have executed this agreement of my own free will and volition without any compulsion or coercion whatsoever.

**21.8 Confidentiality Agreement *(Sample)***

**Roanoke-Chowan Community College**

**Associate Degree Nursing Program**

In connection with my action as a nursing student at Roanoke-Chowan Community College, I agree to hold all information I may have access to about clients or former clients confidential and will not divulge any information to any unauthorized persons.

I understand that divulging confidential information to unauthorized persons will make me duly liable to civil action and is grounds for immediate dismissal from the nursing program.

**21.9 Release of Personal Information *(Sample)***

ECU Health has adopted a new process for students to gain access to the patients’ electronic health record (EHR). This change requires completion of a spreadsheet which will include personal student information: Roanoke-Chowan Community College student ID number and date of birth. This information is necessary for entrance into ECU Health’s Peoplesoft system. A spreadsheet will need to be completed containing the requested information for each student. The sheet is sent directly to Corporate HR so that confidentiality is maintained. Because of the numbering system a different badge will be required for all other Vidant facilities.

**I grant permission for the Nursing Department of Roanoke-Chowan Community College to release my personal identifiable information including my date of birth and social security number for the purpose of meeting hospital requirements to access patient records.**

**Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Last 4 digits of Social Security #: \_\_\_\_\_\_\_\_\_\_\_\_**

**R-CCC Student ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**21.10** **Performance Improvement Plan *(Sample)***

**Roanoke-Chowan Community College**

**Associate Degree Nursing Program**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Course Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason(s) for Performance Improvement Plan (PIP):**

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**Strategies/Methods for Correction:**

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**Recommended Time Frame PIP:**

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**Student Comments:**

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**Faculty/Director Comments:**

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**ADN Program Director Recommendation:**

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**Signatures:**

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*ADN Program Director Date*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Faculty Date*

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*Student Date*

Revised August, 2008, June 17, 2009, May 12, 2010, August 2012, November 2012, May 2018

**22.0 CHECKLIST FOR APPLYING TO NURSING PROGRAM­­­\_\_\_\_\_\_\_\_\_\_**

**BEFORE applying to the ADN Program, you MUST:**

* **Apply to Roanoke-Chowan Community College.**
* Students must complete ENG 002 Tier 2 and MAT 003 Tier 2 courses with a grade of “P”.
* Possess a cumulative grade point average (GPA) of 3.0 or better on all prior course work, excluding transitional/supplemental courses, ACA courses, and PE courses over the past 3 semesters.

**Application Process:**

|  |  |
| --- | --- |
| \_\_\_\_ A. | **Complete an Application for Admission to Roanoke-Chowan Community College (R-CCC)** online by visiting the R-CCC website at [Roanoke-Chowan Community College](http://www.roanokechowan.edu/).  **Request and submit official transcripts** from high school or Adult High School Diploma/GED certificate and all colleges/universities attended to Student Development Services, Roanoke-Chowan Community College. |
| \_\_\_\_ B. | **GPA (Grade point average requirement):**Applicant must have a minimum grade point average (GPA) of **3.0** or higher on the most recent three (3) academic semesters (minimum of 12 college credit hours) of coursework. The GPA calculations will omit grades from transitional/supplemental courses, ACA courses and PE courses. |
|  | Students must attend one of the scheduled **Information Sessions.** For more information, contact the ADN Program. |
| \_\_\_\_ C. | **Applicant must complete the Associate Degree Nursing (ADN) Program Application** and submit a copy by postal mail postmarked on or before **March 1, no exceptions granted**.  Mail to ATTN: Admissions, Roanoke-Chowan Community College, PO Box 1248, Ahoskie, NC 27910. Application is available on the college’s website at [Nursing ADN](https://roanokechowan.edu/nursing-adn/). **Must include e, f, and g in your application packet.** |
| \_\_\_\_ D. | Applicant must be listed as a Certified Nurse Aid with the NC Division of Health Service Regulation Registry at time of application. |
| \_\_\_\_ E. | Applicant must submit evidence of cardiopulmonary resuscitation certification (CPR) at the BLS/Health Care Provider Level {American Heart Association} at time of application. |
| \_\_\_\_ F. | **Completed Health Form:**Submit a completed North Carolina Community College System (NCCCS) Health Examination Form, available online at [Nursing ADN](https://roanokechowan.edu/nursing-adn/) at time of application. |
| \_\_\_\_ G. | **Students are required to attend the ADN Pre-Admission Meeting.** |
| \_\_\_\_ H. | **Conditional Letter, Permission to take Kaplan Entrance Exam:** After confirmation of the qualifying **3.0 GPA** by the Registrar’s Office, as well as submission of a complete packet, and having all required immunizations the applicant is then eligible to take the Kaplan Entrance Examination for the ADN Program. |
| \_\_\_\_ I. | **Applicants seeking admission must complete ALL of the above minimum admission requirements. A complete packet includes the Nursing Program Application, Health Form, proof of NAI Registry, and CPR certification. Your application will be removed if all of this information is not completed and included at the time of submission. Completion of the minimum admission requirements does not guarantee acceptance into the nursing program.** |

**Criminal Background Check:**

Prior to attending clinical, you must complete a Criminal Background Check with a drug screening. You will receive further instructions regarding this process once admitted to the nursing program. Please review your criminal status before applying to the ADN program.

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