



METROPOLITAN
COMMUNITY COLLEGE

Student Handbook Nursing Programs 2022/2023

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Dear Student:

Welcome to the Nursing Program.

The Student Handbook is designed to provide information about your program and how to achieve success in your learning experiences.

We warmly welcome all students seeking careers in nursing, whether your goal is a Practical Nursing Certificate from the Practical Nursing Program or an Associate Degree in Applied Science in Nursing. The Nursing Programs are among a variety of health career and certificate programs available to MCC students and are integral to the College, reflecting its philosophy and objectives.

The Nursing Program faculty are dedicated to serving students and assisting each to reach his/her potential by fostering the desire for continuing education throughout life and developing a spirit of inquiry and creativity. The Nursing Programs are committed to improving health care in the community and working for the betterment of the nursing profession.

Best wishes for success in your pursuit of a career in nursing.

The Faculty, Coordinators and the Director of the Associate Degree and Practical Nursing Programs.

INTRODUCTION/HISTORY OF THE NURSING PROGRAMS

Metropolitan Community College (MCC) is the oldest institution of higher learning in the Kansas City metropolitan area. It was founded in 1915 as the Kansas City Polytechnic Institute. It was accredited by North Central Association of Colleges and Schools in 1918 and in 1919 became the Junior College of Kansas City. MCC is also the largest college in the metropolitan area. The college has five campuses: MCC–Penn Valley, MCC-Blue River, MCC-Longview, MCC-Online and MCC-Maple Woods. The Administrative Center and Broadway Plaza house the administration of the MCC system and sits adjacent to the Penn Valley campus. The Health Science Institute is part of the Penn Valley campus.

The Practical Nursing Program (PN) originated under the sponsorship of the Kansas City, Missouri School District. The Kansas City, Missouri Board of Education Program of Practical Nursing was established in 1949 and was approved by the Missouri State Board of Nursing in November 1954. The Jennie Lund School of Practical Nursing was established July 1, 1966, through the Independence School District and was named for Jennie Lund, one of the first Practical Nurses in the Independence, Missouri area. The Jennie Lund School of Practical Nursing became a satellite of the Kansas City, Missouri Board of Education Program of Practical Nursing on July 1, 1988. In March 1990, a cooperative agreement with Penn Valley Community College was established to offer college credit hours for the total program. On June 30, 1993, the Kansas City, Missouri School District relinquished sponsorship of the program, and on July 1, 1993, the program became the Penn Valley Community College. The Practical Nursing Program has full approval from the Missouri State Board of Nursing.

The Associate Degree Nursing Program (ADN) was established August 1, 1966. The ADN Program has an average enrollment of 128 students per academic year. The program is fully approved by the Missouri State Board of Nursing and accredited by the NLNAC. The initial accreditation was January 1972 with the last accreditation occurring in spring 2014 by ACEN (formerly NLNAC) with full approval granted.

MCC's Nursing Division is recognized as one of the most technologically advanced nursing programs in the area. Several area-nursing programs utilize the Virtual Hospital suites, located on the first floor of the Health Science Institute. The Virtual Hospital suite simulates an actual hospital clinical environment for the use of nursing and allied health students through six learning areas that closely mimic hospital departments to develop and practice skills in electronic medical record systems and medication carts, along with fifteen incredibly life-like, computer-operated human patient simulators that mimic a wide variety of medical scenarios, including trauma, shock and cardiac arrest. Because of the progressive nature of the program, the ADN program was selected as one (1) of ten (10) nursing programs across the country to participate in a simulation study sponsored by the National Council of State Boards of Nursing (NCSBN). The inclusion in this study recognizes the nursing program as a leader in providing quality education and will help to standardize simulation in schools across the country.

MCC MISSION

MCC Mission

MCC's Board of Trustees affirms its commitment to MCC's mission to provide access to educational opportunities in a supportive and caring environment that values diverse constituencies by:

“Preparing students, Serving communities, Creating opportunities for all.”

Board Policy 7.30020 BP Non-Discrimination

PHILOSOPHY OF THE NURSING PROGRAM

Individual

The individual is a unique human organism who comes from a culturally diverse background with biological, psychological, social, and spiritual needs. The individual has an inherent knowledge, will, and strength that enable the person to achieve the tasks of the developmental stages and attain life goals. Needs in the biological, psychological, social, or spiritual dimension may affect the health of the individual.

Health

Health is a state of wholeness or integrity of the person and is defined by the individual. We believe health is a multi-dimensional, dynamic, fluid state in which the individual may be at any point from independence to peaceful death. Health is the responsibility of a total society and all its members.

Environment

The environment encompasses the person, the family, and the community. Impacting the individual within the environment are the internal and external forces that affect the needs of that individual. Internal and external forces within the environment are considered by the nurse when assisting with the individual's needs.

Nursing

Nursing is a profession that focuses on the care of individuals, families, and communities. Nursing is primarily assisting the individual, ill or well, in the performance of those activities contributing to independence, maintenance, or restoration of health or a peaceful death. The nurse, as a professional, utilizes critical thinking and the nursing process to render care. Communication is essential to the individual/nurse relationship. The nurse is cognizant of legal/ethical issues when assisting the individual. Both the nurse and the individual are affected by internal and external forces, which are dynamic.

Education

Education is an ongoing, lifelong, dynamic process of socialization resulting in increased knowledge and behavioral change in which the learner must be an active participant.

Nursing Education

Nursing education integrates the science and art of nursing with knowledge from the humanities and the biological, physical, and behavioral sciences to provide the foundation for clinical application of nursing care. Utilization of basic core knowledge permits entry and exit at different points of the nursing education continuum.

Associate Degree Nursing Education

Associate degree nursing education prepares the graduate to assume the roles of provider, manager, and member of the discipline. The associate degree nurse is able to select from a variety of nursing interventions to meet complex needs of clients who have common, recurrent problems with predictable outcomes. The graduates of the Associate Degree Nursing Program are provided an educational foundation for further study at the baccalaureate level.

Practical Nursing Education

Practical nursing education utilizes the basic core knowledge and competencies common to all levels of nursing practice to prepare graduates who can focus on direct client care using standard nursing interventions in stable situations. Graduates function as members of the health team, performing nursing actions commensurate with their education and demonstrated competencies. The graduates of the Practical Nursing Program are provided an educational foundation for further study at the associate degree level.

Learners

Learners come from diverse social and cultural backgrounds and bring a multitude of educational, work, and life experiences to the nursing program. Each student is respected as a unique individual. The faculty acknowledges individual differences when planning the educational program. Teaching is an interactive process by which the individual is motivated and assisted to learn. The faculty, as facilitators, promote a sense of inquiry and the desire for continued learning. We believe learning is observable, progressing from simple to complex, common to uncommon, and normal to abnormal. The process of learning contributes to the individual's ability to attain educational goals. The faculty is committed to educational mobility that provides learners with opportunities to meet their individual educational needs and goals. The nursing faculty shares the responsibility for the total educational curriculum and for ongoing evaluation of the program to determine its adequacy in meeting the changing health care needs of the community.

THE MISSION STATEMENT OF THE DIVISION OF NURSING

The Nursing Division is committed to providing quality Associate Degree Nursing and Practical Nursing Programs in an academic setting. The nursing programs provide an environment conducive to learning that fosters intellectual inquiry, is supportive of the individual learner, values diversity, encourages commitment to lifelong learning, and provides for the development of the individual student.

PURPOSE STATEMENTS OF THE DIVISION OF NURSING

1. Provide a learning environment with appropriate organizational structure and resources to fulfill the mission of MCC.
2. Attract and retain qualified traditional and non-traditional students from culturally diverse populations for completion of the Practical Nursing Certificate or the Associate Degree in Applied Science in Nursing.
3. Provide an environment that supports and enhances the educational program while fulling the individual student's learning needs.
4. Provide the student with the opportunity to develop new knowledge and skills through educational access by articulation among multiple levels of nursing education.
5. Provide an environment that holds students to be accountable for personal and professional growth through active participation in professional organizations and community activities.

CONCEPTUAL FRAMEWORK

The environment is the realm in which the interaction between the nurse and the individual occurs. The environment is dynamic and ever changing. Nursing is cognizant of the environment and the impact it has on the relationship between the nurse and the individual.

Nursing utilizes the skills of critical thinking, the nursing process, and the knowledge of legal/ethical issues to deliver care to an individual in a professional manner. The link between the nurse and the individual is communication.

The individual brings to the relationship basic needs: biological, psychological, social, and spiritual. Nursing must individualize care to meet those basic needs, incorporating the individual's cultural background and developmental stage. Nursing, within the environment in which the relationship is operating, utilizes the individual's own knowledge, strength, and will to assist the individual to independence, restoration, maintenance, or peaceful death.

Internal and external forces are present in all aspects of the relationship, arising from the environment or being inherent in the nurse or the individual. These forces influence the relationship and the interaction with the environment.

METROPOLITAN COMMUNITY COLLEGE-NURSING DIVISION CURRICULUM MODEL



PROGRAM OUTCOMES

The nursing program strives to provide the following as its program outcomes.

1. Therapeutically communicate with diverse populations to meet the developmental needs throughout the lifespan.
2. Demonstrate professional behavior in all interactions with clients to produce quality care by way of the nursing process.
3. Meet the basic needs within the environment while respecting the legal/ethical issues of the clients within their community.

OBJECTIVES OF THE PRACTICAL NURSING (PN) PROGRAM

LEVEL 1 First Semester

1. Identify the principles of growth and development in providing age-appropriate nursing care.
2. Recognize cultural and ethnic differences when planning care.
3. Demonstrate basic client care organized according to Maslow's hierarchy of needs throughout the health-illness continuum.
4. Describe the impact of the environment in providing care throughout the health-illness continuum.
5. State the role of the practical nurse in the health care delivery system.
6. Explain the nursing process as a framework for data collection, diagnosis, planning, implementation, and evaluation in providing client care.
7. Apply basic concepts of scientific knowledge to provide the rationale for nursing actions.
8. Utilize verbal and written skills to communicate pertinent information.
9. Discuss legal/ethical guidelines in the provision of basic nursing care.

LEVEL 2 Second and Third Semesters

1. Apply the principles of growth and development when providing age-appropriate nursing care.
2. Use cultural and ethnic data when planning nursing care.
3. Organize client-centered care according to Maslow's hierarchy of needs throughout the health-illness continuum.
4. Differentiate between internal and external environmental factors that impact the provision of care throughout the health-illness continuum.
5. Demonstrate responsibility and accountability for continued development as a professional person.

6. Analyze the effectiveness of the nursing process in the delivery of health care to clients/families throughout the life cycle.
7. Relate the principles of the arts and sciences to the provision of nursing care.
8. Demonstrate therapeutic communication techniques when interacting with clients/families and the multidisciplinary health care team.
9. Integrate ethical and legal standards into the practice of nursing.

OBJECTIVES OF THE ASSOCIATE DEGREE NURSING (ADN) PROGRAM

LEVEL I 100 Level Courses

Upon completion of Level I, the student will:

1. Recognize the significance of principles of growth and development in providing age-appropriate nursing care;
2. Respect cultural and ethnic differences when planning care;
3. Provide basic client care organized according to Maslow's hierarchy of needs throughout the health-illness continuum;
4. Identify the impact of the environment in providing care throughout the wellness-illness continuum;
5. Describe the role of the Associate Degree Nurse in the health care delivery system;
6. Utilize the nursing process as a framework for data collection, assessment, diagnosis, planning, implementation, and evaluation in providing client care;
7. Utilize basic concepts of scientific knowledge to provide rationale for nursing actions;
8. Utilize verbal and written skills to communicate pertinent information; and
9. Discuss legal/ethical guidelines in the provision of basic nursing care.

LEVEL II 200 Level Courses

Upon completion of Level II, the student will:

1. Analyze concepts and principles of growth and development when providing age-appropriate nursing care;
2. Integrate cultural and ethnic data when planning nursing care;
3. Prioritize client-centered care according to identified basic needs;
4. Analyze the impact of internal and external environmental factors on the provision of care throughout the wellness-illness continuum;
5. Demonstrate responsibility and accountability for continued development as a professional person;
6. Evaluate the effectiveness of the nursing process in the delivery of health care to clients/families throughout the life cycle;
7. Integrate principles from an expanding body of knowledge to assist individuals in promotion, maintenance, and restoration of optimal health and independence whenever possible or a peaceful death;
8. Demonstrate therapeutic communication techniques to establish and maintain relationships with clients/families and the multidisciplinary health care team; and
9. Integrate ethical and legal standards into the practice of nursing.

COURSE DESCRIPTIONS

LEVEL 1 – PRACTICAL NURSING PROGRAM

PNUR 100 – PERSONAL AND VOCATIONAL CONCEPTS

Introduction to the role of the practical nurse.

PNUR 103 – FUNDAMENTALS OF PRACTICAL NURSING

Introduction to the role of the practical nurse in the provision of basic nursing care to diverse populations across the lifespan. Clinical experiences provide knowledge and skills.

PNUR 138 – MEDICAL SURGICAL CARE OF THE ADULT PATIENT I

Introduction to concepts of medical surgical nursing with emphasis on meeting the needs of the whole client. Addressing the following body systems: respiratory, cardiovascular, urinary and renal, integumentary, and reproductive.

PNUR 110- APPLIED PHARMACOLOGY I

Introduction of basic pharmacology information for safe administration of medications by the practical nurse for the following body systems: cardiovascular, respiratory, reproductive, and immune.

LEVEL 2 – PRACTICAL NURSING PROGRAM

PNUR 128 – MENTAL HEALTH NURSING

Introduces the role of the practical nurse in caring for patients with mental illness including treatment addressing psychosocial needs.

PNUR 132 – THE CHILDBEARING FAMILY

The course is an introduction to maternity and pediatric nursing. Prenatal development, prenatal care and nursing care during labor and birth with a focus on the family after birth is integrated into the course. Nursing care using basic nursing skills in caring for the term, pre-term and post-term newborn is included in the course and clinical components. Care of the hospitalized pediatric client and health care adaptations for the child and family is taught. Common pediatric disorders, illnesses and diseases are reviewed by body systems. Medication administration and pediatric dosage calculations are incorporated. The clinical component allows the student the opportunity to further develop nursing knowledge using evidence-based practice, assessment skills, self-awareness and demonstrate competency of nursing care.

PNUR 136 – VENOUS ACCESS AND INTRAVENOUS INFUSION

Principles of IV therapy and pharmacology including the initiation, monitoring, regulation, and maintenance of an intravenous access device, site, and flow rate, administration of IV fluids, and administration of IV medications included in the scope

of practice for the practical nurse. Students will be certified in intravenous therapy as allowed by the Missouri Nurse Practice Act.

PNUR 144 – NURSING OF THE ADULT II

Continuation of medical surgical nursing with emphasis on meeting the needs of the whole client and providing the foundation for understanding identified pathophysiological disorders. Addressing the following body system: musculoskeletal, neurovascular, sensory, gastrointestinal, endocrine, and metabolic.

PNUR 146 – LEADERSHIP

Introduces leadership principles needed for the practical nurse to function in an effective manner in any setting.

PNUR 111 -- APPLIED PHARMACOLOGY II

Continuation of basic pharmacology information for safe administration of medication by the practical nurse for the following body systems: central nervous, digestive, endocrine, musculoskeletal, and drugs that affect the general health of the body.

LEVEL 1 – ASSOCIATE DEGREE NURSING PROGRAM

RNUR 115 – PROFESSIONAL TRANSITION

This course facilitates the transition of the Licensed Practical Nurse to the role of Associate Degree Nurse and includes professional and legal/ethical issues. Concepts covered in the course include the nursing process, physical assessment, teaching-learning principles, group dynamics, cultural/ethnic issues and critical thinking. Community health concepts will be introduced and previously learned nursing content.

RNUR 126 – FUNDAMENTALS OF PROFESSIONAL NURSING

This course is taken in the first semester of the associate degree-nursing program. The student will acquire knowledge fundamental to the development of basic skills and attitudes essential for the practice of nursing. The principles of physical, biological, behavioral sciences and nursing theory serve as the foundation. The fundamental principles of health assessment are also a part of this course. This first clinical laboratory course is designed to introduce the student to the role of the professional nurse in meeting basic needs common to all clients. Students are prepared to establish the nurse/client relationship through communication skills. Planned clinical experience is designed to allow the student to utilize the nursing process to deliver safe, individualized nursing care according to legal/ethical guidelines.

RNUR 131 – ESSENTIAL NURSING CONCEPTS

This course must be taken concurrently with Fundamentals of Professional Nursing in the first semester of the program and presents the concepts underlying the nursing curriculum. The course provides a basis for beginning nursing practice, introducing the student to nursing as a profession with its component parts: professionalism, health care delivery systems, the health care team and legal/ethical issues. The student is introduced

to communication theory, the hierarchy of basic needs, developmental theories, the impact of culture and ethnicity on health practices and the nurse-client relationship. Competency in calculation of medication dosages will be required.

RNUR 134 – MENTAL HEALTH NURSING

This course is based on the belief that mental health nursing is an integral part of all nursing. It builds upon the foundation of basic knowledge of human behavior that the student receives from the field of psychology. The student will acquire a basic knowledge of the causes, treatment, and prevention of mental disorders across the lifespan including the impact of environmental forces. Ethical/legal concepts are integrated throughout. Emphasis is placed on application of therapeutic communication techniques, psychiatric assessment skills and the nursing process. The impact of the therapeutic environment upon the treatment of specific psychiatric populations across the lifespan will be presented.

RNUR 138 – NURSING CARE OF WOMEN & NEONATES

This is a sixteen-week nursing course focusing on nursing care of women and neonates. The course is designed to provide a holistic view of women and their health-related self-care practices. While major emphasis is placed upon providing experiences in meeting the basic needs of the family during the childbearing years, women's changing health care requirements throughout their lifetime are also addressed. Communication with women, mothers and significant others is emphasized. Developmental tasks of the neonate, adolescent and adult are identified. The nursing process is utilized in the clinical setting to determine needs and related interventions for childbearing women, neonates and support systems. Emphasis is placed on incorporating teaching-learning needs as part of the plan of care for the culturally diverse family.

RNUR 141 – ADULT NURSING I

Adult Nursing I is the first of three (3) medical-surgical nursing courses and builds upon the basic nursing content and skills learned in Fundamentals of Professional Nursing and Essential Nursing Concepts. Gerontological concepts are presented along with selected medical-surgical problems associated with this population. The nursing process will serve as a framework to integrate the concepts of legal/ethical issues, culture and ethnicity, developmental stages/tasks and communication. Emphasis is placed on identifying physiological and psychological changes of clients aged 65 and older.

LEVEL II – ASSOCIATE DEGREE NURSING PROGRAM

RNUR 234 – CHILD-CENTERED NURSING

This third semester clinical laboratory-nursing course is designed to introduce the student to the role of the professional nurse in promoting health care in children and their families. Nursing care will be provided in primary, secondary and tertiary settings. This course stresses the uniqueness of each child and the family unit. Communication is employed to assist the child and family in health maintenance with the goal of independence and

autonomy of function. The nursing process will be used as the interactive tool linking all aspects of care for culturally diverse clients and their families. Developmental stages/tasks will be stressed in assisting the family unit toward health maintenance.

RNUR 238 – ADULT NURSING II

Adult Nursing II is the second of three (3) medical-surgical nursing courses and is the first with a clinical component. This course allows students to utilize previous nursing concepts as they apply their skills to clients in a variety of secondary and tertiary settings. Students assume professional nursing roles in meeting basic needs by demonstrating skills in communication, critical thinking and the nursing process. Students interact with culturally/ethnically diverse clients and integrate legal/ethical issues into the plan of care. Content regarding medical-surgical disease processes is continued, giving the student the basis of knowledge to assist the client to reach optimal status on the health-illness continuum.

RNUR 244 – ADULT NURSING III

This is the final of three (3) adult nursing courses and is designed to prepare the student to transition to the role of the professional nurse. Students will expand their knowledge of therapeutic communication and skills related to health care technology. Concepts from previous nursing courses are integrated to provide comprehensive nursing care to select adult clients and their families experiencing multisystem failure/trauma. Students use the nursing process to organize and manage care in conjunction with other health team members. Critical thinking, developmental stages, cultural/ethnic diversity and legal/ethical issues are implemented in the care planning process. Clinical laboratory practice occurs in primary, secondary and tertiary settings with diverse client populations. A community health nursing experience is incorporated in theory and clinical practice.

RNUR 230 – LEADERSHIP/MANAGEMENT/TRENDS

This fourth semester course will focus on leadership and management principles necessary for the professional nurse to function in the leader/manager role. Professional responsibilities are delineated. Changes in health care delivery systems are discussed, as well as other issues and trends. Concepts and theories of leadership, management, communication, group process and decision-making care are examined.

NATIONAL FEDERATION OF LPN (NFLPN) NURSING PRACTICE STANDARDS

The National Federation of Licensed Practical Nurses, Inc. (NFLPN) is the official organization of licensed practical/vocational nurses. As such, the organization is responsible for determining the standards of practice and the ethical principles with which the group should perform. The code of ethics, revised in 1979, establishes the responsibilities for conduct in the profession.

Code of Ethics

1. Know the scope of maximum utilization of the LP/VN as specified by the nursing practice act and function within this scope.
2. Safeguard the confidential information acquired from any source about the patient.
3. Provide health care to all patients regardless of race, creed, cultural background, disease or lifestyle.
4. Uphold the highest standards in personal appearance, language, dress, and demeanor.
5. Stay informed about issues affecting the practice of nursing and delivery of health care and, where appropriate, participate in government and policy decisions.
6. Accept the responsibility for safe nursing by keeping oneself mentally and physically fit and educationally prepared to practice.
7. Accept responsibility for membership in NFLPN and participate in its efforts to maintain the established standards of nursing practice and employment policies that lead to quality patient care. The rules and statutes of the Missouri Nursing Practice Act can be found on the website:
Missouri State Board of Nursing website @ <http://pr.mo.gov/nursing-rules-statutes.asp>

AMERICAN NURSES ASSOCIATION PROVISIONS OF THE CODE OF ETHICS FOR NURSES

Nursing is regarded as one of the most ethical of all professions. The concern for the sick, injured, and vulnerable and the social justice in providing care for all individuals and the community are embedded in nursing practice. Nurses act to change those aspects of social structures that detract from the health and well-being of individuals, families, groups, and communities. Nurses are expected to adhere to the ideals and moral norms of the profession and to embrace them as a part of what it means to be a nurse. The ethical tradition of nursing uses self-reflection to monitor the behavior of all members of the profession. A code of ethics makes the goals, values, and obligations of the profession explicit to societal members, both inside and outside the profession.

The following Provisions of the Code of Ethics for Nurses developed by the American Nurses Association (ANA), the official organization representing professional nurses (RNs), serves the following purposes:

- It is a succinct statement of the ethical values, obligations, duties, and professional ideals of nurses individually and collectively.
 - It is the profession's non-negotiable ethical standards.
 - It is an expression of nursing's own understanding of its commitment to society.
1. The nurse practices with compassion and respect for the inherent dignity, worth and unique attributes of every person.
 2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
 3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
 4. The nurse has the authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
 5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
 6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to the provision of safe, quality health care.

7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

From: American Nurses Association (2015) *Code of Ethics for Nurses with Interpretive Statements*. Washington, DC: Author. The ANA Code of Ethics for Nurses can be found on the following link:

<http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics.pdf>

Missouri Nursing Practice Act for Licensed Practical and Professional Nursing

A critical section of the Missouri Nursing Practice Act (§335.011 to §335.096 RSMo 2014) reprinted below has significant relevance to nursing students and their professional development. Students should understand that completion of the program does not guarantee eligibility to take the licensure examination. For a complete copy of The Nursing Practice Act, contact the Academic Affairs Office or access the website of Missouri State Board of Nursing @ <http://pr.mo.gov/nursing-rules-statutes.asp> or the Missouri statutes website @ <http://moga.mo.gov/mostatutes/chapters/chapText335.html>.

Section 335.066 is reprinted here from The Nursing Practice Act:

§335.066 Denial, revocation, or suspension of license, grounds for -

1. The board may refuse to issue or reinstate any certificate of registration or authority, permit or license required pursuant to chapter 335 for one or any combination of causes stated in subsection 2 of this section or the board may, as a condition to issuing or reinstating any such permit or license, require a person to submit himself or herself for identification, intervention, treatment, or rehabilitation by the impaired nurse program as provided in section [335.067](#). The board shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by chapter 621.

2. The board may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of any certificate of registration or authority, permit or license required by sections [335.011](#) to [335.096](#) or any person who has failed to renew or has surrendered his or her certificate of registration or authority, permit or license for any one or any combination of the following causes:

(1) Use or unlawful possession of any controlled substance, as defined in chapter 195, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any profession licensed or regulated by sections [335.011](#) to [335.096](#);

(2) The person has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution pursuant to the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated pursuant to sections [335.011](#) to [335.096](#), for any offense an essential element of which is fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;

(3) Use of fraud, deception, misrepresentation or bribery in securing any certificate of registration or authority, permit or license issued pursuant to sections [335.011](#) to [335.096](#) or in obtaining permission to take any examination given or required pursuant to sections [335.011](#) to [335.096](#);

(4) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation;

(5) Incompetency, gross negligence, or repeated negligence in the performance of the functions or duties of any profession licensed or regulated by chapter 335. For the purposes of this subdivision, "repeated negligence" means the failure, on more than one occasion, to use that degree of skill and learning ordinarily used under the same or similar circumstances by the member of the applicant's or licensee's profession;

(6) Misconduct, fraud, misrepresentation, dishonesty, unethical conduct, or unprofessional conduct in the performance of the functions or duties of any profession licensed or regulated by this chapter, including, but not limited to, the following:

(a) Willfully and continually overcharging or over treating patients; or charging for visits which did not occur unless the services were contracted for in advance, or for services which were not rendered or documented in the patient's records;

(b) Attempting, directly or indirectly, by way of intimidation, coercion or deception, to obtain or retain a patient or discourage the use of a second opinion or consultation;

(c) Willfully and continually performing inappropriate or unnecessary treatment, diagnostic tests, or nursing services;

(d) Delegating professional responsibilities to a person who is not qualified by training, skill, competency, age, experience, or licensure to perform such responsibilities;

(e) Performing nursing services beyond the authorized scope of practice for which the individual is licensed in this state;

(f) Exercising influence within a nurse-patient relationship for purposes of engaging a patient in sexual activity;

(g) Being listed on any state or federal sexual offender registry;

(h) Failure of any applicant or licensee to cooperate with the board during any investigation;

(i) Failure to comply with any subpoena or subpoena duces tecum from the board or an order of the board;

(j) Failure to timely pay license renewal fees specified in this chapter;

(k) Violating a probation agreement, order, or other settlement agreement with this board or any other licensing agency;

(l) Failing to inform the board of the nurse's current residence;

(m) Any other conduct that is unethical or unprofessional involving a minor;

(7) Violation of, or assisting or enabling any person to violate, any provision of sections [335.011](#) to [335.096](#), or of any lawful rule or regulation adopted pursuant to sections [335.011](#) to [335.096](#);

- (8) Impersonation of any person holding a certificate of registration or authority, permit or license or allowing any person to use his or her certificate of registration or authority, permit, license or diploma from any school;
- (9) Disciplinary action against the holder of a license or other right to practice any profession regulated by sections [335.011](#) to [335.096](#) granted by another state, territory, federal agency or country upon grounds for which revocation or suspension is authorized in this state;
- (10) A person is finally adjudged insane or incompetent by a court of competent jurisdiction;
- (11) Assisting or enabling any person to practice or offer to practice any profession licensed or regulated by sections [335.011](#) to [335.096](#) who is not registered and currently eligible to practice pursuant to sections [335.011](#) to [335.096](#);
- (12) Issuance of a certificate of registration or authority, permit or license based upon a material mistake of fact;
- (13) Violation of any professional trust or confidence;
- (14) Use of any advertisement or solicitation which is false, misleading or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed;
- (15) Violation of the drug laws or rules and regulations of this state, any other state or the federal government;
- (16) Placement on an employee disqualification list or other related restriction or finding pertaining to employment within a health-related profession issued by any state or federal government or agency following final disposition by such state or federal government or agency;
- (17) Failure to successfully complete the impaired nurse program;
- (18) Knowingly making or causing to be made a false statement or misrepresentation of a material fact, with intent to defraud, for payment pursuant to the provisions of chapter 208 or chapter 630, or for payment from Title XVIII or Title XIX of the federal Medicare program;
- (19) Failure or refusal to properly guard against contagious, infectious, or communicable diseases or the spread thereof; maintaining an unsanitary office or performing professional services under unsanitary conditions; or failure to report the existence of an unsanitary condition in the office of a physician or in any health care facility to the board, in writing, within thirty days after the discovery thereof;

Source: *§335.066 RSMo 2014.*

CODE OF ACADEMIC AND CLINICAL PROFESSIONAL CONDUCT

As a Metropolitan Community College student in the Nursing Programs, I will:

1. Actively promote and encourage the highest level of legal and ethical principles in academic and clinical situations.
2. Strive for excellence in all aspects of academic and clinical performance.
3. Promote life-long learning and constantly strive to improve the quality of nursing care.
4. Maintain and promote integrity, truthfulness, and honor in the performance of all academic and clinical responsibilities.
5. Treat others with respect in all areas of the clinical and academic setting.
6. Promote an environment in the classroom and clinical setting that facilitates learning.
7. Cooperate with the academic and clinical facility and clinical staff to ensure the highest quality of patient/client care and use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
8. Advocate for the rights of all patients/clients.
9. Provide care to clients in a compassionate, considerate, knowledgeable, safe, and professional manner.
10. Refrain from performing any technique or procedure, including medication administration, for which you were not trained or prepared by education and experience and without faculty or preceptor approval.
11. Accept the ethical, professional, and legal responsibility for my actions.
12. Uphold a professional image and reputation as an MCC-Penn Nursing Student by supporting the mission, vision, and core values of the Nursing Program in postings on social networking sites. Be cognizant that all social networking sites are public domain and be mindful of confidentiality and understand that what you as a student post can have legal, professional and/or employment ramifications.
13. Refrain from misrepresenting your position as a nursing student.
14. Refrain from any action or omission of care on campus or in the clinical setting that creates unnecessary risk of injury to self or others.

15. Hold in confidence any information regarding patient care as designated by HIPAA.
16. Avoid unauthorized duplication of the patient/client's medical record:
 - Don't remove any medical records from the clinical sites
 - All notes and copies of documents made by the student must be shredded before leaving the clinical facilities.
17. Serve all patients/clients impartially and accept no personal compensation from those entrusted to my care as a nursing student.
18. Always communicate academic and clinical information in a truthful and accurate manner.
19. Refuse to engage in unauthorized research.
20. Abstain from the use of alcoholic beverages, narcotics, or illicit/controlled substances in the academic and clinical setting.
21. Cooperate with authorities in the identification of those in violation of the Code of Academic and Clinical Professional Conduct.
22. Uphold school policies and regulations related to this Code of Academic and Clinical Professional Conduct, including the MCC policies, Code of Student Conduct and Student Discrimination and Harassment, which contain student disciplinary and grievance procedures.
23. Maintain compliance on all immunization and other clinical requirements of the placement facility.

STUDENT BEHAVIOR ADDITIONAL GUIDELINES

Nursing students must also follow additional guidelines and procedures specific to the nursing program in order to meet clinical agency policies and to increase the potential for student success on the licensure exam.

1. No smoking is allowed in any MCC building, on college grounds, or in facilities where MCC instruction occurs. Students who violate the no smoking policy will be subject to the Code of Student Conduct. For assistance with smoking cessation, contact The Missouri Tobacco Quit Line, 1-800-784-8669 or www.tobaccofreenurses.org.
2. Eating in classrooms is not permitted; only water in sealed containers may be brought to the classrooms.
3. During clinical hours, students must remain at the clinical facility for the duration of the clinical experience.
4. Disruptive and/or unruly behavior is inconsistent with the college's code of conduct and the dedication to learning that must be present for student success; such behavior will not be tolerated.
5. Cell phones and Smart devices in all educational settings, including, but not limited to, classrooms, clinical, Virtual Hospital, skills labs, and computer labs, are not allowed. The phone is to be left in the student's bag or backpack and accessed only during breaks. The phone must be placed in "Silent" mode in all educational settings as defined above. Texting is not allowed during class or any designated clinical time. Cells phones and pagers are not to be accessed during testing, and all personal items must be placed in a designated area and cannot be accessed until all students complete test. Students are prohibited from posting any kind of patient or organizational information on social networking sites. Examples include, but are not limited to, LinkedIn, Facebook, Twitter, YouTube and Instagram. If violation of this policy occurs, the student will be removed from the program. (Please addendum for St. Joseph Site)
6. Children are not allowed in the HSI building or any clinical site while the nursing student is involved in learning activities.
7. Students will not be allowed to accept visitors to the clinical site during the assigned clinical times.
8. Students are expected to be prepared for class and clinical experiences. Pens, notebooks, textbooks, and assigned objectives are necessary equipment for success

in the classroom. Clinical supplies ensure safe patient care. The student is expected to complete all assignments PRIOR to the time that class or clinical experience starts.

9. Profanity is unprofessional language and will not be tolerated.
10. No illegal/illicit activities.
11. Treat others with respect, regarding the feelings, wishes, and rights of others, accepting people as they are (being polite and kind always), in all areas of the clinical, campus, and academic setting and expect respect in return.
12. Maintain a professional image and reputation as an MCC-Nursing student by supporting the mission, vision, and core values of the Nursing Program. Review your handbook regarding professional image.
13. Maintain OSHA standards in clinical settings.
14. Maintain personal boundaries in all settings related to MCC, which includes self-disclosure that interferes with the learning environment of others in an educational setting.
15. Insubordination will not be allowed in any learning environment within the MCC Nursing Program. Insubordination is defined as: defiance of authority; disrespect or harassment that is directed toward a superior, including, but not limited to staff, instructor, faculty, clinical site, and hospital personnel.
16. Late arrival or early departure from clinical, lecture, or virtual hospital experiences will negatively impact your grade, which will impact your financial aid. (See attendance and tardy policy in this handbook)
17. Students whose questions cannot be satisfied within time constraints set by the faculty in class will be directed to meet with the faculty member privately to preserve the class-learning environment and to support the questioning student.
18. Communication through the use of social media, whether supported by the college or non-affiliated, will be bound by the MCC Code of Student Conduct and MCC Social Media policy if it impacts the learning environment of other students.
19. Student grievance and disciplinary procedures can be found in the Code of Student Conduct, and the Student Discrimination and Harassment policy.

STATEMENT OF SAFE PRACTICE

It is the goal and intent of health care agencies to do all that is reasonable to provide a safe and healthy environment. Active cooperation and commitment at all levels are necessary ingredients in attaining and maintaining this goal.

Safety Philosophy

Safety should always be considered a priority because priorities are shifted around as the institution demands. Rather, safety should be considered a value associated with every one of the activities in a work routine. Regardless of work priorities or employer demands on a particular day, safe practices should occur. Safety should become an aspect of each routine that is never questioned, never compromised.

Excerpt from Collegiate Nurse Educators of Greater Kansas City; Kansas City Area Nurse Executives, Copyright 2014.

The student is accountable to the client, client's family, Division of Nursing, MCC-Penn Valley, MCC Code of Student Conduct, the clinical agency, the State Nurse Practice Act, Code of Ethics, Code of Academic and Clinical Professional Conduct and professional standards of practice.

Society holds nursing students to the same standards of practice as any reasonably prudent professional nurse. Students are granted the privilege of practicing professional nursing under the supervision of a licensed faculty member who is licensed in the state of Missouri.

Students are expected to uphold the duty of care and not expose clients to unnecessary risks. A safe practitioner knows limitations and functions within his/her scope of practice.

Unsafe nursing practice is any act of omission or commission that could lead to harm or jeopardize the safety or well-being of the client. Any practice that does not conform to what a reasonable and prudent nurse in the same situation would do is considered unsafe.

National Patient Safety Goals

Most clinical agencies are under the jurisdiction for safe practice as set forth by their accrediting body, The Joint Commission (TJC), previously known as the Joint Commission of the Accreditation of Hospital Organizations (JCAHO). JCAHO has identified national patient safety goals. It is the student's responsibility to understand how these recommendations are being implemented in clinical settings, as they relate to his/her role as a student. Please, see Joint commission (<https://www.jointcommission.org/>) site for most up to date list.

GRADING

1. The grading policy of the Nursing Program meets the expectations of the State Board of Nursing and is specific to the Nursing Program.

A = 93-100
B = 86-92
C = 80-85
D = 70-79
F = 69 or below

2. Grades will be computed using a point system as outlined in the course syllabus. **No** extra credit points will be given.
3. For courses with both a theory and clinical component, students must achieve a “C” average (80%) in the theory portion and complete the clinical portion of the course with a satisfactory evaluation.
4. Clinical practicum is graded either “satisfactory” or “unsatisfactory.” The student must attain a satisfactory rating on all elements of the clinical evaluation tool.
5. Students will receive an unsatisfactory for the clinical practicum if an unsatisfactory rating is received on any element of the clinical evaluation tool.
6. Students failing (with a “D” or “F”) to achieve a minimum “C” for the theory or a satisfactory for the clinical component must repeat both portions of the course.
7. When a student is unsuccessful (with a “D” or “F”) in a course, that course must be repeated prior to progression to other courses. Re-enrollment for a course being repeated will be on a space available basis. Student must complete failed course before being allowed to move to the next level of courses within the curriculum. Student will also not be allowed to combine any different levels of nursing courses whether a prerequisite is required or not. (Please see addendum for the St. Joseph Site.)
8. A failure in a second course will result in dismissal from the program, and the student will not be eligible for re-admission.
9. **NO extra credit will be offered outside of the grading. No rounding of grades will occur for any test or quiz, including the final grade**

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TESTING

1. Upon arriving to the testing area, all personal belongs including cell phones, watches, coats, and book bags must be placed in the back of the room.
2. Students are expected to take quizzes and tests as scheduled. Students are responsible for contacting the instructor thirty (30) minutes prior to missing a scheduled test. Failure to do so will result in a zero (0) for the test. In case of severe emergency, ie hospitalization or accident, proper documentation may be presented prior to taking the exam.
3. Make-up tests may be constructed in any format, such as written, essay, or oral, and may differ from the originally scheduled exam. Tests are expected to be completed within one (1) week of the date scheduled for test to be taken.
4. Students failing to make up a test as scheduled will receive a zero (0) for the test.
5. The student will have five (5) points deducted from their test score for the first occurrence of a missed exam. For any subsequent absences for exams during the course, the student will not be allowed to take the exam and will be given zero (0) points for the exam.
6. Make-up exams must be taken in the Penn Valley testing center.
7. Students **may not** enter the testing lab starting 10 minutes after the exam begins. There will be a five (5) points penalty for late entry after the test is scheduled to have begun. Example – if a test is scheduled for 8:30, student may not enter after 8:40. Students who enter between 8:31 and 8:40 will be allowed to test with an automatic five (5) point penalty. Any student greater than ten (10) minutes late to the exam will be considered absent for the exam and will need to reschedule a make-up exam in the testing center. All make-up exam policies and notification policies apply, including a deduction of five (5) points.
8. Students late for quizzes will not be allowed to take the quiz.
9. Students will not be allowed to make up any quizzes.
10. The final grade for the course must be an 80% average in total points (including Kaplan points and all other course points).
11. Final grades of less than absolute 80% will not be rounded up. If the average is, 79.9%, the course grade will be a “D.”

12. Students who want to review the quiz or test must make an appointment with the faculty during office hours to meet before the next quiz or test.
13. Students found with cell phones or watches in their possession during an exam will receive a zero for the exam and will be removed from the testing area. (The college district guidelines for cheating will apply).
14. A comprehensive final exam is given in every nursing course. All students must take the final exam, even if their total grade is below 80% passing at the time of the final.

Kaplan - STUDENT ASSESSMENT

Kaplan Nursing has been developing testing products and preparing nursing students to pass NCLEX exams for more than 30 years. Kaplan's focus with preparing students for the NCLEX-RN and NCLEX-PN is on remediation. It is the foundation of success for students. With Kaplan Nursing, students get experience and expertise in assessment testing. Kaplan's first Integrated Testing Program was developed in 1999.

The Kaplan testing Program is comprised of a series of online tests and remediation resources designed to evaluate and enhance the nursing knowledge of students in an undergraduate program leading to RN licensure or PN certification. The tests can be utilized by nursing faculty as end-of-course and end of program or exit evaluation tools. In addition to testing basic nursing content, the tests provided by Kaplan evaluate students' critical thinking skills. The results enable nursing faculty to identify students with knowledge and learning deficits in specific content areas in a timely manner so that early intervention may impact outcomes.

A comprehensive remediation program is the emphasis of the Kaplan product. Remediation is available 24 hours a day, seven days a week, in multiple formats so students can correct knowledge deficits. Students may view the Kaplan website for remediation resources.

The Basics Book

Students receive *The Basics*, a Kaplan resource when they start the Kaplan Program. This 600+ page textbook reviews basic nursing content in an easy-to-understand outline format with tables and graphs. It helps students identify important concepts about specific nursing topics so their textbook reading is targeted and more than just underlining. It also helps students prepare for nursing school tests and Integrated Tests or to remediate knowledge deficits after testing. Students should use the index at the back of the book to look up a specific topic.

1. Students are given *The Basics* at the beginning of freshmen semester. As the number of practice examinations may differ for each course, instructors will assign practice test differently. Some courses may award points for the completion of practice examinations with remediation while others may use a different procedure for use of the Focus Review Practice tests.
2. The student is responsible for reviewing their *Basics* book and completing the Focus Review test as they are assigned by the individual course instructor(s). The Focus Review tests are online. They must be taken as assigned with the expectation to remediate all questions. The student will find that there is information in the Kaplan materials that is not covered in class. Nursing curricula can never hope to cover all disease processes and nursing care, thus the Focus Review tests process mirrors what the student may experience on NCLEX in confronting unknown material.
3. Students must finish any Focus Review tests and remediation that are assigned by

the instructor(s) by the assigned completion date and must print out and turn in results to instructor. Remediation for Integrated Exams must be printed out and turned in to the instructor by the assigned due date. Most Focus Review tests consist of thirty (30) questions. A minimum of 90% must be obtained on each online Focus Review test to take the Integrated Testing. Students are required to take the Focus Review test until the 90% minimum is obtained. If the student fails to complete the Focus Review test at the assigned time, the student will lose the points and will still need to make a 90% on the Focus Review and remediate for the two minutes before taking the integrated test. If the Integrated test needs to be rescheduled, they must reschedule to take the test in the MCC-Penn Valley Testing Center. Five (5) points will be deducted from the student's possible points. Points are given as follows for the Focus Review tests:

ADN Program

5 points	90% on the first or second attempt
5 points	Remediation of all questions for two minutes

PN Program

10 points	90% on the first or second attempt and has remediation of all questions for two minutes
5 points	Below 90% on the second attempt, and has remediation of all questions for two minutes
0 points	Did not have remediation of all questions for two minutes.

4. The number of Focus Review test may vary by course and level, but no more than ten (10) points will be awarded to the student for Focus Review tests. All Focus Review tests assigned by the instructor must be completed for the student to receive points. No partial points will be awarded.
5. All students are required to complete Integrated Testing assigned to a course. Failure to do so will result in missed points for the class.
6. The Integrated Tests are scored by percent correct. Each assigned Integrated Test carries a different threshold. The required threshold will be given by the individual course instructor(s).
7. Remediation for the Integrated Test will consist of reviewing all questions for a minimum of two (2) minutes per question.
8. Points will be awarded for the Integrated Test as follows:
 - Ten (10) points for achievement of the required threshold with remediation of each question for the required time of two (2) minutes.
 - Five (5) points for a score below the threshold with remediation of each question

for the required time of two (2) minutes.

9. Students **may not** enter the testing lab starting 10 minutes after the exam begins. There will be a five (5) points penalty for late entry after the test is scheduled to have begun. If the student is tardy to the test, and not allowed to entry into the testing site they must reschedule to take the test in the MCC-Penn Valley Testing Center. Five (5) points will be deducted from the student's possible points.

KAPLAN FOR SENIOR ADN COURSE (Penn Valley Site)

RNUR 244 Adult Nursing III will have a different requirement for testing and using the Kaplan product as it is designed in the last semester to prepare the student for the NCLEX examination. The following information applies only to RNUR 244 Adult Nursing III:

The senior student will be required to take one (1) Focus Review Test (MCC Med Surg) that has been specifically designed by Kaplan for the comprehensive content being tested at this level. This test will consist of thirty (30) items; students will be required to achieve a score of 90% to earn points for the test. The student is also required to remediate each question for the mandated two (2) minutes. Please refer to # 3 & 4 above.

Ten points will be awarded for the Focused Review Test meeting the requirements in #3 & 4.

Each senior student will be required to take the Integrated Test for RNUR 244. There are two (2) tests, Comprehensive Medical Surgical A & B. Each student will be required to take Comprehensive Medical Surgical Test A. If the required benchmark is not achieved, the student will be required to take Comprehensive Medical Surgical Test B and complete remediation. Points for the Integrated Test will be awarded as follows for a maximum total of ten (10) points:

Ten (10) points for achievement of the required threshold on test A with remediation of each question for the required time of two (2) minutes.

If threshold is not obtained on test A, the student is required to remediate test A for 2 minutes per question to obtain entry into test B.

Seven (7) points for achieving threshold on test B with remediation of each question for the required time of two (2) minutes.

Five (5) points if the threshold is not obtained on tests A or B and remediation of both tests are completed for a minimum of 2 minutes per question.

All senior students are required to complete the Secured Predictor Test (a predictor of NCLEX success). Failure to do so will result in a grade of I (Incomplete) on transcripts until accomplished. Refer to the college policy for incomplete grades.

Each senior student will be required to obtain the required benchmark on the Diagnostic Test prior to taking the Secure Predictor Test. The Diagnostic Test serves as the predictor to determine that the student is ready for the Secured Predictor Test. If a student fails to complete the Diagnostic Exam, they will not be allowed to take the Secured Predictor. Remediation for entry to the Secured Predictor will consist of reviewing all questions on

the assigned Diagnostic Exam for a minimum of two (2) minutes per question regardless of score on Diagnostic Exam.

The Kaplan program for senior students also consist of a live review prior to taking the NCLEX test. This program is a three (3) day live review. It is a requirement for each senior student. The NCLEX-RN Prep Plan will need to be completed per the schedule provided for the student to be successful with the program.

Please see posted Kaplan Study Plan on blackboard for complete instructions on Review process.

KAPLAN FOR SENIOR PN COURSE

PNUR 138 Adult Nursing I and PNUR 144 Adult Nursing II will have a different requirement for testing and using the Kaplan product as it is designed in the last semester to prepare the student for the NCLEX examination. The following information applies only to PNUR 138 Adult Nursing I and PNUR 144 Adult Nursing II:

The senior student will be required to take one (1) Focus Review Test that has been specifically designed by Kaplan for the comprehensive content being tested at this level. This test will consist of sixty (60) items; students will be required to achieve a score of 90% to earn points for the test. The student is also required to remediate each question for the mandated two (2) minutes. Please refer to # 3 & 4 above.

Ten points will be awarded for the Focused Review Test meeting the requirements in #3 & 4.

Each senior student will be required to take the Integrated Test for PNUR 138 and PNUR 144. There are two (2) tests, Comprehensive Medical Surgical A & B. Each student will be required to take Comprehensive Medical Surgical Test A. If the required benchmark is not achieved, the student will be required to take Comprehensive Medical Surgical Test B and complete remediation. Points for the Integrated Test will be awarded as follows for a maximum total of ten (10) points:

Ten (10) points for achievement of the required threshold on test A with remediation of each question for the required time of two (2) minutes.

If threshold is not obtained on test A, the student is required to remediate test A for 2 minutes per question to obtain entry into test B.

Seven (7) points for achieving threshold on test B with remediation of each question for the required time of two (2) minutes.

Five (5) points if the threshold is not obtained on tests A or B and remediation of both tests are completed for a minimum of 2 minutes per question.

All senior students are required to complete the Secured Predictor Test (a predictor of NCLEX success). Failure to do so will result in a grade of I (Incomplete) on transcripts until accomplished. Refer to the college policy for incomplete grades.

Each senior student will be required to obtain the required benchmark on the Diagnostic

Test prior to taking the Secure Predictor Test. The Diagnostic Test serves as the predictor to determine that the student is ready for the Secured Predictor Test. If a student fails to complete the Diagnostic Exam, they will not be allowed to take the Secured Predictor. Remediation for entry to the Secured Predictor will consist of reviewing all questions on the assigned Diagnostic Exam for a minimum of two minutes per question regardless of score on Diagnostic Exam.

The Kaplan program for senior students also consist of a live review prior to taking the NCLEX test. This program is a three day live review. It is a requirement for each senior student. The NCLEX-RN Prep Plan will need to be completed per the schedule provided for the student to be successful with the program

Please see posted Kaplan Study Plan on blackboard for complete instructions on Review process.

EVALUATION/PROGRESSION

1. Written evaluations are done at intervals during clinical and at the end of clinical rotation for all students.
2. To progress to the next semester, the student must have completed all required courses of the curriculum, both nursing and general education, in the current semester with a minimum grade of "C."
3. The program may offer courses over the summer semester. If students sign up for courses over the summer and the course (s) is cancelled, students will be responsible for taking the course the next semester it is offered. The program will not allow any cancelled courses to be combined with the next level courses.

ATTENDANCE

All communication for any attendance, class, simulation, clinical, or instruction must be conducted on your MCC email!!!!

The program coordinator and the director of nursing will review submitted documentation for consideration.

Attendance/Clinical

1. Attendance at all clinical activities, including simulation and orientation to the clinical institution/area, is mandatory. Should an absence be unavoidable, the student will report the absence consistent with the procedure outlined during the clinical site/area orientation. It is the student's responsibility to be aware of the procedure for reporting absences to the clinical instructor and to report the absence prior to its occurrence. Should an absence be unavoidable, the student will be put on probation (written warning). The absence is subject to validation and make-up will entail written and/or clinical assignments at the discretion of the clinical instructor. A second absence will result in an unsatisfactory clinical evaluation and failure of the course.
2. Simulation absence: simulation is a fully immersive experience, it is important that students are on time and present for all portions of a scheduled simulation activity. Failure to be on time will prevent the student from being allowed to participate in the simulation. This will result in a clinical absence for the student and issuance of a clinical probation. The missed time will be made up by either rescheduling of the student's time in simulation or a make-up assignment based on the discretion of the instructor.
3. Absence due to a documented prolonged illness or hospitalization with physician documentation must be reported to the program coordinator and program director for review on an individual basis.
4. Students should also be aware that funding by various agencies may be contingent upon attendance and that students on financial aid may have their eligibility for financial aid impacted by poor attendance.
5. Each clinical day counts as an individual absence. Students must attend the entire clinical session in order for the day to be counted as completed. If a student leaves early, it will be a clinical absence.
6. Student may be asked to travel as far as 60 miles one way for clinical. Once clinical assignments are made, they will not be changed. Students must have their own transportation to successfully complete the program required clinical education.

Tardiness and “No Call, No Show”/Clinical

If the student will be tardy for the clinical experience, the student must notify the instructor prior to the scheduled start time for the clinical activity.

1. A **first tardy** with prior notification to the instructor before the scheduled start of the clinical activity during the same clinical course will result in the student being given a verbal warning and the tardy noted on the clinical evaluation form.
2. A **second tardy** with prior notification to the instructor before the scheduled start of the clinical activity during the same clinical course will result in the student receiving a written warning and clinical probation.
3. A **third tardy** with prior notification to the instructor before the scheduled start of the clinical activity during the same clinical course will result in a failure of the clinical rotation based on unprofessional practice.

If the student fails to notify the instructor prior to the tardy and/or arrives more than fifteen (15) minutes late, the tardy will be considered a “no call, no show” and recorded as an absence, and the student will be placed on probation. The student will be provided an opportunity to make up the absence as determined by, and at the convenience of, the faculty. This is contingent on providing documentation through MCC email. A second offense of “no call, no show” will result in automatic failure of the course.

Classroom Absence

1. A **first absence** from classroom lecture will result in the student receiving a verbal warning, and the absence will be noted in the roster.
2. A **second absence** from classroom lecture will result in the student receiving a written warning and probation.
3. A **third absence** from classroom lecture will result in a failure of the course.

Classroom Tardiness

1. In the event of tardiness to lecture at the beginning of class or following a break, students are asked to refrain from entering the classroom until the next break in lecture without exception. Regular breaks are given throughout each hour of lecture; therefore, students are expected to remain in the classroom for the entire lecture period until a break is given.

2. Should a student need to leave during lecture, please do not return to the classroom until the next break. It is disruptive to the learning process for a student to enter and leave the classroom while lecture is taking place.
3. There are no more than three tardies allowed per course per semester.
 1. The first tardy will result in a verbal warning from instructor.
 2. 2nd tardy will result in a written (email) warning from instructor.
 3. 3rd tardy will result and be equal to one absence in the class.

Inclement Weather for Class and Clinical Students

During inclement weather conditions, students are to be guided by the following:

1. In the event of a campus-wide announcement that school is closed, there will be no classes, and clinical students do not need to attend clinical experiences.
2. If the student arrives at the clinical site, after the campus-wide announcement, the instructors will be notified of the closure and will dismiss the students.
3. If the campus remains open and there is inclement weather, a late start may be implemented at the discretion of the clinical instructor.
4. On Saturday and Sundays, when MCC does not normally close, classes, and (off-site clinical activity) clinical will be cancelled at the discretion of the director of the nursing program and the clinical instructor.

WITHDRAWAL

1. Withdrawal from nursing courses for personal reasons may be made without penalty with director's approval. Student has one (1) semester to re-enroll in the program once they withdraw. Request for re-enrollment into the program must be done in writing if the student plans to return. Re-enrollment will be on a space-available basis. Students who intend to re-enroll (including medical withdrawals) in the program must send a letter of intent to request a seat in any course they have withdrawn from by the third business day after the district official day to withdraw without assessment. All students with a letter of intent will be placed in this order upon space availability: students on medical leave will be placed 1st, students that failed the course will be placed 2nd, students withdrawing without assessment will be placed 3rd first as space availability allows in the class with a current letter of intent. Extension of time will be allowed if space in the class/program is not available. Students on the extension list move ahead of the students that withdrew without assessment the next semester. Letters of intent have to be renewed each semester.
2. If a student does not plan to enroll in a nursing course as scheduled in the curriculum plan, he/she must notify the Program Coordinator as soon as possible indicating in writing the reason for interrupting his/her enrollment. The student must also make a request to the Program Coordinator in writing to enroll the next semester if he/she wishes to be considered for reinstatement. Students who do not enroll as scheduled will be removed from the roster of students eligible for continuation in the Nursing Program.
3. If a student withdraws from the program and does not re-enroll the next semester, the student must reapply for admission to the program.
4. If a student withdraws for health reasons, additional written documentation may be required. Students in this category should seek guidance from the program coordinator.
5. One (1) withdrawal is allowed within the total nursing curriculum. MCC's policy is that the student will receive a "W" designation if the withdrawal occurs before MCC's "last day to withdraw without assessment" or an "F" grade if the student withdraws after that deadline. A second failure of a nursing course, or a second withdrawal from a nursing course will result in dismissal from the Nursing Program and making the student ineligible for re-entry into the program.
6. No more than one (1) nursing course in the total nursing program may be repeated.

RE-ENROLLMENT

For a student who has taken a leave from the program, the following must be satisfied prior to the start of the semester in which the student is returning:

- All other CNE requirements, as applicable.
- Student must maintain compliance during withdrawal period.

PROBATION

1. If the student's academic average falls below 80% (cumulative) at any time during a nursing course, that student is placed on academic probation, or theory probation, referring to the non-clinical section of the course. Satisfactory completion of the course nullifies the probation. In order to continue with the prescribed order of courses in the Nursing Program, the student must complete the course with a "C" or better.
2. Students are expected to follow the Code of Student Conduct as set forth in the academic policies of the Metropolitan Community College and the Nursing Program's Code of Academic and Clinical Professional Conduct and rules for Student Behavior. Non-course related probation may be initiated for lack of compliance with any of those stated standards. Grounds for non-course related probation shall include, but not be limited to, the following:
 - a. disruptive behavior;
 - b. illicit activities; and/or
 - c. dishonest behavior.
3. Clinical probation may be initiated at any time during a course. Grounds for clinical probation for students shall include, but not be limited to, the following:
 - a. insubordination;
 - b. conduct potentially detrimental to the safety of clients, clinical facilities staff, college faculty or staff, or other students;
 - c. unsatisfactory clinical performance as determined by college faculty;
 - d. attendance related, and/or.
 - e. violation of the Code of Student Conduct.
4. A clinical probation notification form will be given to the student for any probation and will define the problem areas to increase student awareness of the problem(s) and to allow the student the opportunity to improve performance in the areas in which he/she is deficient.
5. Once placed on probation, the student will receive a written or email notice addressing the probation and be given an improvement plan indicating the deficiency(ies) needing to be improved. If a second probation is merited for the same clinical deficiency in the same clinical rotation, the student's performance is deemed unsatisfactory and will result in the failure of the clinical portion of the course and the theory portion of the course. The student will no longer be eligible to sit in the course unless an active grievance is in progress. If the student chooses to grieve the failure, an email must be sent within five days of the failure to the program coordinator. While the grievance is in progress, the student must remain in class until the grievance is complete.

6. Once placed on clinical probation, the student remains on clinical probation for the duration of the course. Successful completion of the clinical portion of the course removes the student from clinical probation.
7. Repeated clinical probations throughout the program in multiple courses for the same type of behavior will result in further action (s) by the program director and the dean (s) to determine final disposition, which may include suspension or dismissal from the program.
8. If a student is removed from a clinical facility due to disruptive or unsafe behavior, the student is subject to probation and/or clinical failure. If denied clinical practice privileges by the particular clinical facility, and if it is deemed appropriate to attempt another clinical assignment, the director will attempt to secure substitute clinical placement for any such student. There is no guarantee that the director will be able to secure another clinical site and/or experience.
9. Unsafe practice that has the potential for harm to the patient or others could result in dismissal from clinical. If dismissal occurs, the situation will be reviewed by the director and a decision will be made regarding the student's continued progression in the course.
10. A student reporting to class or clinical whose behavior indicates potential impairment from alcohol and/or drugs will be suspended pending review by the Dean of Student.

DISMISSAL

1. In addition to grounds specified in the Code of Student Conduct, grounds for dismissal shall also include, but not be limited to:
 - a. Failure to provide safe nursing care;
 - b. Failing any second nursing course or a second failure in the same course;
 - c. Failing two (2) nursing courses in a given semester
 - d. Non-course related probation a second time; and/or
 - e. Cheating and/or academic dishonesty
 - f. Failure of both RNUR 126 and RNUR 131 from the ADN program will disqualify admission into the PN program.
 - g. Upon admission into the PN program after two failures in the ADN program, any course failure will result in program dismissal.
 - h. In the PN program, upon failure of a course, remediation is required in order to re-enroll. (Completion date will be assigned by instructor). Failure to complete remediation will result in dismissal from the program.
 - i. Eligibility to enter the PN program after being unsuccessful in the ADN program will be based on application and acceptance to the program.

DRUG FREE WORKPLACE, CAMPUS AND COMMUNITY

Drug Screen Policy

MCC is committed to maintaining high standards in all programs, including its Allied Health and Nursing Education and Practice programs. Safe practice requires efficient, reliable and unimpaired student performance at all times, including in the classroom and clinical settings. Students are required to perform all education related activities in appropriate mental and physical condition. Being under the influence of illegal drugs or alcohol is not only in violation of MCC's Code of Student Conduct, but it also poses serious safety and health risks to the user and to all persons who come in contact with him/her.

As discussed below, clinical affiliation sites may require students to complete drug screening before they will be placed in the clinical setting and some clinical sites may also require drug screening, with or without cause, during the course of the clinical placement.

As provided below, you may also be asked to complete a drug test according to individual program requirements and/or MCC policy. MCC has adopted the Federal Drug-Free Workplace Act of 1988 and Drug-Free Schools and Communities Act Amendments of 1989. The Code of Student Conduct imposes disciplinary sanctions for the use, possession or distribution of alcoholic beverages and the illegal use, possession or distribution of drugs and controlled substances on MCC premises or at any MCC sponsored activity. A positive drug test may cause you to be excluded from all clinical sites and may also preclude taking state licensure examinations.

Clinical Site Testing, Sanctions and Cost

As noted above, in addition to potential sanctions, clinical sites impose their own requirements for drug and alcohol testing. Clinical facilities are, like MCC, committed to providing a safe environment in order to protect their patients, residents, employees and visitors, to provide the highest level of service and to minimize the potential for accidents and injuries. Therefore, many of the clinical contracts between MCC and the hospitals, clinics, and other clinical sites and facilities at which MCC places its students for clinical rotations mandate that MCC nursing students complete and pass a drug screen prior to being admitted into the facility for clinical rotations. Other clinical sites require random drug and/or alcohol screening for nursing students.

Apart from a student's internal due process rights, which, as noted above, address the rights of the student in relation to MCC sanctions, the refusal of a student to submit to a clinical site's initial drug screen or to random testing may result in the student's inability to do or to conclude clinical training at the clinical site. Likewise, a positive test may result in the student's immediate removal from the clinical site.

The cost for a drug screen may be covered by the clinical facility. If not, the student is responsible for the cost.

VIRTUAL HOSPITAL

1. **As a component of clinical experience**, most clinical nursing courses have simulation experiences in the Virtual Hospital at HSI.
2. Each course with simulation assigned schedules its own scenarios, as appropriate to the course.
3. Participation in the Virtual Hospital is required, and the expectations for performance in the Virtual Hospital are the same as for all other clinical experiences, including but not limited to maintaining compliance with immunizations and other CNE requirements.
4. Failure to meet expectations for the Virtual Hospital results in the same consequences as required for any other clinical experience. Feedback from the Virtual Hospital faculty may be included in the clinical evaluation for the course.
5. Requirements and expectations for student participation in the Virtual Hospital:
 - a. Virtual Hospital experiences may have required assignments to be completed prior to the learning activity. This is considered preparation for clinical and is necessary in order for the simulation to be a valuable learning experience.
 - b. Students arriving unprepared for the Virtual Hospital experience or with assignments incomplete will be sent home, placed on probation, and given a make-up assignment that may or may not be completed in the Virtual Hospital.
 - c. All students will be required to sign a Virtual Hospital confidentiality statement prior to participating in simulation scenarios.
 - d. A breach of confidentiality as defined in the statement will result in the student being placed on clinical probation; a second breach of the defined confidentiality will result in clinical failure.
 - e. All students participating in Virtual Hospital activities will follow the Student Dress Code as defined in the Nursing Programs Student Handbook.
 - f. Students are required to bring all tools necessary for a day of patient care; i.e. stethoscope, penlight, etc.
 - g. Arriving for the activities in the Virtual Hospital without appropriate attire or without necessary patient care equipment will result in the student being sent home, being placed on probation, and subject to make-up activities as designated by the instructor.
 - h. A “no call, no show” absence to a Virtual Hospital experience will result in the student being placed on probation and given a make-up assignment, as designated by the faculty. (See Attendance)
 - i. Simulation is a fully immersive experience, it is important that students are on time and present for all portions of a scheduled simulation activity. **Failure to be on time will prevent the student from being allowed to participate in the simulation. This will result in a clinical absence for the student and**

issuance of a clinical probation. The missed time will be made up by either rescheduling of the student's time in simulation or a make-up assignment based on the discretion of the instructor. (See Attendance)

- j. Only bottled water allowed into the Virtual Hospital.
- k. Cell phones in the Virtual Hospital are not allowed. The phone is to be left in the student's bag or backpack and accessed only during breaks. Texting is not allowed during any designated clinical time. Cell phones and pagers are not to be accessed and all personal items must be placed in a designated area and cannot be accessed until clinical experience is completed for the day. Failure to comply will result in the student being placed on clinical probation.
- l. The Virtual Hospital is a clinical setting. Professional behavior is expected from the students participating in the Virtual Hospital. Failure to practice professional behavior during the simulation experience will result in the student being placed on clinical probation.
- m. The student is expected to provide patient care during the simulation as if he/she is a licensed professional caring for the patient.
- n. Standard precautions are used just as they would be in the health care facility.

BASIC LIFE SUPPORT (BLS) CERTIFICATION

Students must obtain Basic Life Support Certification in a course for Health Care Providers from the AHA, to include adult (one- and two-person), infant (one-person), and child (one- and two-person).

Students must remain BLS certified throughout the nursing program. Evidence of current certification for professional/health care providers must be provided at the beginning of each clinical lab course and must be valid. **Only BLS certification with AED from the American Heart Association are acceptable.**

HEALTH DOCUMENTATION

All CNE requirements must be completed prior to enrollment. Student who fail to complete CNE compliance will be sent home from clinicals and place on probation. If a student remains out of compliance prior to the second clinical day, they will receive a clinical failure for the course

All Nursing students are required to provide **up-to-date** official documentation of the following. *Students must maintain complete and current health information on file with online clinical tools. Additionally, students are required to maintain paper copies of their documents in folder and keep on their person.*

1. Chickenpox (varicella) – positive IgG titer or two (2) immunizations
2. TB screening on admission and annual TB testing for those having routine annual Screenings, or a 2-step TB screening on admission and then annual TB testing for those who have never been screened
3. Series of three (3) Hepatitis B vaccinations and positive antibody titer or signed waiver
4. Tetanus-Diphtheria acellular– Pertussis; cannot be over ten (10) years old
5. Measles, Mumps, Rubella – positive IgG titer/s or two (2) immunizations
6. Copy of health insurance card or waiver
7. Color blindness screening information will be given out during CNE requirements.
7. Chest X-ray; on admission, only for those students who have a positive TB test; annual TB assessment
8. Covid vaccination

Students are advised to keep copies of all health information for their personal records. This information is subject to HIPAA regulations.

All immunization and related clinical requirements (including Basic Life Support (BLS), background check and drug screen) must be completed prior to program enrollment and uploaded to and cleared by Clinical Student. Students who fail to complete/maintain compliance will not be permitted to attend clinical(s) (including participation in virtual Hospital, and other clinical related activities such as health for flu clinics, etc.) and will be placed on probation. If a student remains out of compliance prior to the second clinical day, student will receive a clinical failure.

Additionally, students who fail to maintain compliance after completion of their clinical rotation(s), will receive an enrollment hold placed on their student account for the upcoming semester. Since most organizations have an organizational compliance plan and are required to adhere to all federal, state, local laws and regulations, students are responsible for maintaining compliance via Clinical Student or other designated online

tool throughout the duration of the program. In the event the clinical partner is audited or receives an accreditation site visit from a regulating body of authority, MCC and its students must be positioned to respond to all partner requests for information within 24 hours.

HOSPITAL COMPETENCY EXAM

The student will be required to complete the KCANE Hospital Competency Exam each calendar year with a minimum score of 90%, posted on Course Site, the online learning tool available in each nursing class.

MEDICAL EMERGENCIES AT MCC-PENN VALLEY/HSI

1. Notification

NON-EMERGENCIES –

If the injury/illness is non-emergency, not life threatening, but does require prompt medical attention:

- a. Contact the MCC Police Dispatch at 604-1111 and the MCC police will provide assistance.
- b. MCC Police will arrange for the ill/injured party to be transported to the nearest emergency medical facility for treatment, if required, and at the student/visitor's discretion.

EMERGENCIES-

If this is a medical emergency requiring immediate attention, call 911. MCC police department must be notified. Please call Police Dispatch at 816 604-1200.

2. Be prepared to provide

- a. Exact location of injured person
- b. Type of injury or illness

MEDICAL EMERGENCIES AT CLINICAL SITE

Notify clinical instructor. The instructor will follow that facility's emergency situation policy and/or have the student taken to the emergency room. Students are required to either have their own health insurance or a signed waiver stating that they are responsible for any medical costs as a result of any illness or injury incurred at the clinical site. Documentation of the incident for both the college and the clinical facility will be completed.

ILLNESS AND INJURY

The student is responsible for any expenses incurred due to a medical emergency involving illness or injury, including transportation to a medical facility.

GUIDELINES FOR PROTECTING THE HEALTH CARE WORKER

We feel it is of utmost importance to your safety and the safety of your client that you are aware of the following precautions to exercise when dealing with blood and body fluids. As outlined by the Centers for Disease Control, standard precautions should be used in the care of ALL patients, especially including those in emergency care settings in which the risk of blood exposure is increased.

We strongly recommend that you receive the Hepatitis B vaccine, which would be at your own expense.

1. Use Personal Protective Equipment (PPE) as facility protocol.
2. To minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags or other ventilation devices should be available for use in areas in which the need for resuscitation is predictable.
3. Health care workers who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient-care equipment until the condition resolves.
4. Pregnant health care workers are not known to be at greater risk of contracting HIV infection than health care workers who are not pregnant; however, if a health care worker develops HIV infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission. Because of this risk, pregnant health care workers should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission. Implementation of universal blood and body fluid precautions for ALL patients eliminates the need for use of the isolation category of "Blood and Body Fluid Precautions" previously recommended by CDC for patients known or suspected to be infected with blood borne pathogens. Isolation precautions (e.g., enteric, Airborne/AFB) should be used as necessary if associated conditions, such as infectious diarrhea or tuberculosis, are diagnosed or suspected.
5. Must be fit tested at specific clinical sites.

Post-Exposure Procedure (PEP)

Either of the following exposures could put a student at risk of HIV infection if the exposure involves blood, tissue, or other body fluids containing visible blood:

- Percutaneous injury (e.g., a needlestick or cut with a sharp object)
- Contact with mucous membrane or non-intact skin (e.g., exposed skin that is chapped, abraded, or affected by dermatitis)

After occupational HIV exposure, a short-term course of ARV drugs (e.g., one month) may be used to reduce the likelihood of infection. This is referred to as post-exposure prophylaxis (PEP), and is a key part of a comprehensive universal precautions strategy during clinical placements.

In healthcare settings, the occupational risk of becoming HIV-infected due to a needlestick is low (less than 1%). Most cases involve injuries from needles or sharps that have been used on a patient who is HIV-infected. The risk of HIV transmission from exposure to infected fluids or tissues is believed to be lower than from exposure to infected blood.

Guidelines for providing PEP

Healthcare workers shall report occupational exposure to HIV immediately after it occurs. Early rapid testing of the source patient (the patient involved in the incident) can help determine the need for PEP—and may avert the unnecessary use of ARV drugs, which may have adverse side effects. If necessary, **PEP should begin as soon as possible after exposure, ideally within 2 hours**. Currently, there is no single approved PEP regimen; however, dual or triple drug therapy is recommended and believed to be more effective than a single agent.

The treating physician will determine the treatment period (2-4 weeks) and make the drug selection for PEP based on the following factors:

- Type of injury and transmission device
- Source patient's HIV viral load and treatment history
- ARV drugs available

Some healthcare workers taking PEP experience adverse symptoms including nausea, malaise, headache, and anorexia. Pregnant students or women of childbearing age who may become pregnant may receive PEP, but must avoid efavirenz, which has harmful effects on the fetus.

Managing exposure to HIV

Immediate steps:

Any student exposed to blood or body fluids must take the following steps:

- Wash the wound and skin sites exposed to blood and body fluids with soap and water. Wash for at least 5 minutes using ample soap.
- For injuries that break the skin and where bleeding occurs, allow bleeding for a few seconds before washing with soap and water.
- Topical use of antiseptics is optional.
- Do not apply caustic agents, such as bleach, onto the wound or inject antiseptics or disinfectants into the wound.
- Flush mucous membranes, such as eyes, exposed to blood and body fluids with water.
- Immediately inform the clinical supervisor, or person in charge, of the exposure type and the action taken. Call your Clinical Coordinator and/or Program Coordinator to apprise him/her of your situation.

Once informed, the clinical supervisor will:

- Assess the exposure to determine the risk of transmission.
- Call the Clinical Coordinator and/or Program Coordinator to update him/her of the situation so that the following steps can be taken.
 - Inform the patient and student about the exposure and request permission for HIV testing.
 - If there is risk of transmission, follow the written protocol of hospital/facility for rapid testing.
 - If there is not a written protocol, immediately arrange for the patient and student to visit their personal physician or US Healthworks located at 1650 Broadway, KCMO 64108, (816) 842-2020 during business hours.
 - If they do not have a personal physician, do not want to go the US Healthworks, or the exposure occurs after hours, send them to the nearest emergency room after gaining permission of the patient and student.
 - Provide immediate support and information on post-exposure prophylaxis (PEP) to the student.
 - Record the exposure on the appropriate form/s and forward the information to the individual or department assigned to manage such exposures at the site and send a copy to the student's Clinical Coordinator/Program Coordinator.
 - Maintain the confidentiality of all related records.

Please note that the student is responsible for all costs related to post-exposure procedures. The clinical facility may provide the treatment at no cost to the student.

General Guidelines for PEP

- In all cases of exposure, start PEP within 2 hours of the exposure, whether or not patient's HIV status is known.
- PEP is usually discontinued if there is confirmation that the patient's HIV test is negative.
- If the patient is HIV-infected (with a positive test result), continue PEP.
- ARV therapy should be provided according to national or facility protocol. A minimum of two weeks and a maximum of four weeks treatment is recommended. When possible, consultation with a HIV specialist, particularly when exposure to drug resistant HIV may have occurred, is recommended.
- If the student's initial HIV test is positive, counsel the person on the test result and refer to a HIV/AIDS program for care and treatment.

Source: Adapted from CDC. 2001. Updated US public health service guidelines for the management of occupational exposure to HBV, HCV and HIV and recommendations for post exposure prophylaxis. MMWR Morb Mortal Wkly Rep 50(No. RR-11): 1-42. Retrieved 30 July 2004, from <http://www.cdc.gov/mmwr/PDF/rr/rr5011.pdf> and World Health Organization. Post-exposure prophylaxis Retrieved 30 July 2004, from <http://www.who.int/hiv/topics/prophylaxis/en/index.html>

MCC NURSING SKILLS LABORATORY

Experiences are planned to provide for demonstration, practice, and evaluation of specific skills necessary to function in the hospital setting. Selected skills will be evaluated in the Nursing Skills College Lab on a 1:1 basis after the student has had an opportunity to practice. The student will be referred by faculty to the Skills Lab if additional practice is needed for any clinical skill. "Open Laboratory" hours will be posted for practice sessions. Students will sign up for individual evaluation sessions. Students will be required to purchase a practice bag of supplies prior to the start of the semester.

STUDENT DRESS CODE

Category	Requirement
UNIFORM	<ul style="list-style-type: none"> • ADN program - The student uniform is an embroidered Royal blue scrub top and black uniform scrub pants. Students can choose to wear a black skirt. The specific style numbers are given in orientation information. • PN program – The student uniform is an embroidered Caribbean Blue colored scrub top and black uniform scrub pants. Students can choose to wear a black skirt. • The student uniform is to be clean, wrinkle free, and in good repair with appropriate fit. • Plain, solid color white, gray, or black t-shirts or turtlenecks may be worn under the scrub top.
UNDERGARMENTS	Undergarments are required to be worn with the student uniform for both women and men.
HOSE	White or black clean socks may be worn. Female students will wear plain white or neutral colored hose with the dress uniform.
SHOES	<ul style="list-style-type: none"> • All white or all black leather (including soles) nurse's shoes of choice will be worn. No swish, stripes or patterns of any kind allowed. • Shoes must be clean and polished and have clean shoe strings. • Shoes must be in good repair. • Closed toes and heels are required. No crocs are allowed. • No mesh tennis shoes allowed.
NAME BADGE	Students shall wear the MCC photo ID badge. The badge is not to be worn outside the school or clinical sponsored activities. The badge is to be worn on the left front of the uniform. Lost name badges must be replaced immediately.
JEWELRY	<ul style="list-style-type: none"> • Only wedding and engagement rings may be worn with uniforms. No rings with stones may be worn. • One inconspicuous post style earrings, preferably small, may be worn by students with pierced ears. Only one pair of earrings in the ear lobes may be worn. • No facial piercings or gages allowed. • No other jewelry, except a watch with a second hand, is to be worn with the student uniform. Ornamental and Smart watches

Category	Requirement
	are not allowed.
HAIR	<ul style="list-style-type: none"> • Hair may be worn in any manner appropriate for a conservative professional appearance. Hair that is long must be secured and kept off the face and from swinging into the work area when providing care. Bangs that extend beyond the eyebrows and long dangling side curls are not acceptable. Hair color that is not natural to human hair is not acceptable. • Beards and mustaches must be kept trimmed. For clean-shaven men, daily shaving is an essential part of grooming.
NAILS	Nails must be kept clean, short and well groomed. Nails are to be kept short enough so that the client is not exposed to possible injury because of nail length. Acrylic or gel nails or extenders cannot be worn. No polish can be worn.
OTHER DRESS	No head coverings can be worn in the clinical facility unless part of religious/cultural practice.

General Guidelines

All students are expected to be well groomed and have a professional appearance in the clinical area, as well as for classes on campus. Excessive make-up, hairdos, beards, scents (fragrances), and long sculptured nails are inappropriate. Short shorts, midriff tops, mini-skirts, tattered jeans, worn tight-fitting sweat suits, and other inappropriate articles of clothing are not acceptable for school wear. Tattoos and body art must be covered. **All offensive odors, such as cigarette smoke, strong perfumes or colognes, perspiration or body odors, are not acceptable.**

Classroom and Clinical

Failure to comply with above guidelines regarding appearance will result in:

1. 1st offense = Verbal warning
2. 2nd offense = Probation written
3. 3rd offense = Clinical Failure

The general guidelines for student dress may be superseded by guidelines of the clinical facility. If the guidelines of the clinical facility are more stringent than those of the program, the student is expected to adhere to those of the clinical facility.

CLASS ORGANIZATIONS

Each nursing class is responsible for the election of National Student Nurse Association

(NSNA) and curriculum representatives. They help plan a variety of activities for their class. These include fund-raising projects, community service projects and the Pinning Ceremony. The student organization is the school's branch of the NSNA, hereafter called the Penn Valley Student Nurse Association (PVSNA) for the ADN program only.

Organizational Structure

One (1) NSNA representative that coincides with class level for the ADN program only

GRADUATION GUIDELINES

Each student is responsible for knowing the CURRICULUM REQUIREMENTS for completion of the Nursing Program. The RN Core Curriculum is available on the MCC website.

INFORMATION ON LICENSURE

Admission to and graduation from the nursing program does not ensure eligibility for state licensure nor does it guarantee passing the licensure examination.

The State Board of Nursing has the legal duty of determining that each applicant who will practice as a vocational or professional nurse has good moral character as required under §335.066 RSMo 2014.

While a conviction or criminal record is not conclusive of the standard of good moral character, it is a factor that must be considered by the State Board of Nursing when applying for the licensure exam following completion of the educational curriculum. Any candidate for licensure who has ever been charged or convicted of a misdemeanor or a felony will be required to submit documentation of the court proceedings for that charge or conviction to the State Board of Nursing in which licensure is sought.

The reasons that may result in a denial, or revocation, of a professional nursing license can be found in The Nursing Practice Act (§335.011 to §335.355 RSMo 2014.) excerpted of this Handbook or found in its entirety at the Missouri State Board of Nursing website @ <http://pr.mo.gov/nursing-rules-statutes.asp>.

If the student has had a criminal conviction in the past, please contact the Nursing Director for assistance with your application. A conviction may delay or prevent the issuance of a license. The Missouri State Board of Nursing will make the decision whether or not to allow an individual to take the licensure examination. (Questions may be directed to the Missouri State Board of Nursing, 3605 Missouri Boulevard, Jefferson City, Missouri 65102.) Website: <http://pr.mo.gov/nursing.asp>

APPLYING FOR LICENSURE

Upon completion of the program, the graduate is expected to file an application with the Missouri State Board of Nursing or the intended state of initial licensure to write the National Council Licensure Examination for the respective area of nursing practice. After successful completion of the examination, a license will be granted for the graduate to practice in the state of Missouri or the intended state of initial licensure.

Instructions for completing the Missouri State Board of Nursing's "Application for License as a Registered Professional Nurse or Practical Nurse by Examination" will be given during the last semester of the respective program. These completed applications are mailed to Jefferson City, Missouri in February for May or July graduates and in September for December graduates by the Nursing Division office.

PINNING

Definition: The Pinning Ceremony signifies the completion of the nursing program

Responsibility: Program Coordinator, faculty, and administrative staff

Guidelines:

1. Date and site for ceremony to be selected by Program Coordinator, faculty, and administrative staff.
2. Final approval of the Pinning Ceremony date and site by the Nursing Division Administration. The date selected for the Pinning Ceremony will follow final exam dates established for that semester.
3. The Program Coordinator will develop a printed program for the Pinning Ceremony. The final program is to be approved by the Program Director prior to printing. The program should include:
 - a. date, time and location;
 - b. schedule of events;
 - c. speaker(s);
 - d. class members; and
 - e. refreshments and reception information; information about the class.
4. Dress code for the Pinning Ceremony will be as follows:
 - a. white professional nursing uniform (white scrub top and pants. Skirt or dress is acceptable)
5. School pins should be ordered early in the senior semester.
6. Proposed speakers for the event should be notified at least two (2) weeks prior to the event. An honorarium is a nice gesture, plus etiquette rules require thank you cards be sent to those participating in the Pinning Ceremony.
7. Light refreshments proposed in conjunction with the Pinning Ceremony will be planned in advanced by the Nursing Division Administration.

Note: *There are to be no alcohol or drugs/controlled substances on the college premises or at any college sponsored activity.*

8. Printed invitations should be extended to administrators and nursing faculty; the appropriate list may be obtained from the Nursing Division Office. Invitations can be distributed by inter-campus mail through the Nursing Division Office.

ACCREDITATION COMMISSION FOR EDUCATION IN NURSING

MCC-Penn Valley's ADN Nursing Program is fully accredited by the ACCREDITATION COMMISSION FOR EDUCATION IN NURSING, which may be contacted at:

Accreditation Commission for Education in Nursing/ACEN
3390 Peachtree Road NE, Suite 1400, Atlanta, Georgia 30326-1427
Telephone: 404-975-5000
Fax: 404-975-5020
Website: www.acen.org

STATEMENT OF NON-DISCRIMINATION

Metropolitan Community College is committed to a policy of non-discrimination on the basis of race, color, religion, sex, sexual orientation, gender identity, age, birth, ancestry, national origin or disability in admissions, educational programs, services or activities and employment, as specified by federal laws Title VI; Title VII; Title IX, section 504; the Americans with Disabilities Act; and state laws and regulations.

Inquiries concerning compliance may be addressed to MCC's Title IX Coordinators:

<p>MCC District Director of Employee Relations and Training, 3217 Broadway, Kansas City, MO 64111-2429; Telephone: 816.604.1023</p>	<p>MCC-Longview Dean of Student Development, 500 SW Longview Road, Lee's Summit, MO 64081-2015; Telephone: 816.604.2326</p>
<p>MCC-Blue River Dean of Student Development, 20301 E. 78 Highway, Independence, MO 64057-2053; Telephone: 816.604.6620</p>	<p>MCC-Maple Woods Dean of Student Development, 2601 NE Barry Road, Kansas City, MO 64156-1299; Telephone: 816.604.3175</p>
<p>For confidential reporting contact: Director of Student Disability Services 3200 Broadway Kansas City, MO 64111-2429 Telephone: 816.604.1418</p>	<p>MCC-Penn Valley Dean of Student Development, 3201 Southwest Trafficway, Kansas City, MO 64111-2764; Telephone: 816.604.4114</p> <p>Inquiries may also be addressed to: Office for Civil Rights-Kansas City Office U.S. Department of Education One Petticoat Lane 1010 Walnut Street, 3rd floor, Suite 320 Kansas City, MO 64106 Telephone: 816-268-0550</p>

MCC Policies

Non-Discrimination 7.30020 BP
Student Discrimination and Harassment 7.30030 BP
Student Discrimination and Harassment 7.30030 DP

AMERICANS WITH DISABILITIES ACT INFORMATION

Metropolitan Community College (MCC) is committed to ensuring equal access to all qualified students with disabilities in accordance with the Americans with Disabilities Act (ADA). If you have a disability which may impact your ability to access or participate in any aspect of my class, please contact the campus Disability Support Services (DSS) Coordinator, Celia Hancock, at 816-604-4089 or celia.hancock@mccckc.edu. The DSS Coordinator will work with you to determine what disability documentation/information is needed in order to provide accommodations. Accommodations are determined on an individualized basis and may take some time to put in place, so early notification to DSS is helpful. More information is available at mccckc.edu/disability.

Testing Accommodations

DSS collaborates with students and their instructors to offer exam accommodations that ensure equal access. Depending on students' specific needs, exam accommodations can include any of the following:

- Allowing 50% or 100% more time to complete exams
- Testing in a distraction-reduced space
- Taking exams in alternate formats (e.g., digital formats or large print versions)
- Using a reader or scribe to complete exams
- Using assistive technology to complete exams

Students schedule tests with accommodations with the Testing Center. Test scheduling is the responsibility of the student, not the instructor. The Testing Center will need the instructor to provide a copy of the exam in advance to give to the student, along with a copy of the Testing Center Support Request form. Students with test accommodations must take the same exam as the rest of the class. Every effort is made to schedule students to take exams with accommodations on the same day as the class.

The Access Office at each campus location collaborates with faculty, staff, students and the community to promote equal access to all educational programs, classes, activities and services provided within the community college system. Students or college visitors who have a disability as defined by the Americans with Disabilities Act are eligible for services.

To qualify for services, students must identify themselves to the Access Office. Please apply as early as possible prior to the start of each semester so that accommodations can be arranged in a timely manner. If you need accommodations due to any approved disability, contact the access professional at one of the MCC campuses:

MCC-Blue River: (816) 604-6651

MCC-Longview: (816) 604-2254

MCC-Maple Woods: (816) 604-3192

MCC-Penn Valley: (816) 604-4089

MCC Policy: Americans With Disabilities Act 3.25060 BP

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