



School of Practical Nursing Policies & Procedures Manual



BOONE CAREER & TECHNICAL CENTER SCHOOL OF PRACTICAL NURSING

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Introduction

Boone Career and Technical Center (BCTC) School of Practical Nursing opened in July 2022 and offers prospective students in Boone County and surrounding areas the opportunity to receive a high-quality nursing education that will prepare them to be successful nurses. This manual explains policies and procedures specific to the practical nursing program. Please also see the BCTC Adult Student Handbook for general policies that apply to all students at our school.

Boone Career & Technical Center Vision

"Your goals, our mission"

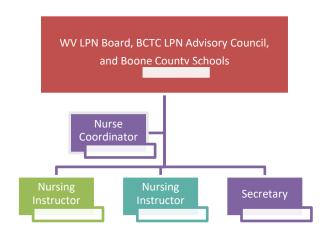
Boone Career & Technical Center Mission Statement

Boone Career and Technical Center enriches lives locally, regionally, and globally by providing occupational education and training for lifelong learning and professional success.

School of Practical Nursing Mission Statement

The BCTC School of Practical Nursing advances health by delivering instruction that prepares graduates to become licensed practical nurses and to provide safe, compassionate, high-quality care to patients.

Organizational Structure



The Boone Career and Technical Center (BCTC) vocational director oversees the faculty and ancillary personnel of the programs offered at BCTC. The School of Practical Nursing is administered in accordance to guidelines from the WV Board of Examiners for Practical Nurses (hereinafter WV LPN Board), the WV Department of Education, AND the Boone County Board of Education.

A practical nursing coordinator oversees the curriculum and the administration of the program and is responsible for ensuring that all learning outcomes required by the WV LPN Board are met. The coordinator maintains the program advisory committee and consults with members from industry to update and maintain the curriculum.

Faculty members direct and supervise the academic and clinical instruction of the students with guidance from the program coordinator. This includes development of course descriptions, objectives, and learning activities. The guidelines followed are developed, in part, with the advice of the program advisory committee, which is comprised of professionals in the clinical affiliates.

School of Practical Nursing Philosophy

BCTC School of Practical Nursing believes that each individual is unique in his or her own right and deserves the highest quality of compassionate health care regardless of age, race, religion, or sexual orientation. Each person's worldview depends on a variety of influences including culture, spirituality, past experiences, and environment. The ultimate aim of the nursing profession is to meet the needs of individual patients in all realms of society.

BCTC School of Practical Nursing believes that practical nursing is a profession with a comprehensive body of knowledge and skills. Practical nurses practice the art and science of nursing, providing compassionate, comprehensive, and competent care to patients of all ages. Practical nurses are essential members of the healthcare team who work under the direct supervision of registered professional nurses to perform their duties. There is a great need for highly qualified nurses in the region and throughout the nation. BCTC School of Practical Nursing was founded to address this nursing shortage.

BCTC School of Practical Nursing believes that practical nursing education should be individualized to each student to promote learning and student success. Clinical training is an integral part of the program, giving students the opportunity to obtain realistic knowledge and experience to guide their learning. Practical nursing students deserve high quality instruction and clinical experiences to prepare them to be successful in the program. The school of practical nursing is committed to promoting student success by guiding students to master the national licensure examination, and to become contributing members of the health care team.

Program Goals and Objectives

The goals of the School of Practical Nursing are to:

- a. Provide a base of theory and practice that is appropriate to develop knowledge and skills as a practical nurse.
- b. Provide a program of practical nursing with ongoing review so that approval guidelines are maintained.
- c. Support the profession by preparing graduates who are competent in the skills of a practical nurse, and as members of the health care team.
- d. Prepare graduates to successfully pass the NCLEX-PN licensure examination.
- e. Produce graduates who comply with the scope of practice for Licensed Practical Nurses.
- f. Produce graduates who serve as competent, compassionate members of the healthcare team.

Terminal Goals

Students have successfully completed the School of Practical Nursing will:

- a. Demonstrate proficiency in all areas of the knowledge and skills required of practical nurses.
- b. Recognize and adhere to infection control and safety policies and procedures.
- c. Practice health promotion and maintenance when providing patient care.
- d. Exhibit the professional attitudes and behaviors that are necessary for gaining and maintaining the confidence of the health care community.
- e. Meet the requirements to take NCLEX Practical Nursing Licensure Examination.

Essential Requirements and Expectations

In addition to the academic requirements of the program, students who are successful in the program and profession must meet the following requirements, with or without reasonable accommodations.

A. Vision

The student must be able to:

- a. Read a patient's identification on an ID bracelet.
- b. Read information found on patient's electronic and/or physical health records.
- c. Read procedures and other necessary information contained in physical or electronic form.

B. Hearing

The student must be able to hear the following:

- a. Patient's speaking
- b. Equipment, alarms, telephone
- c. Co-workers

C. Tactile ability and manipulative skill

The student must be able to:

- a. Perform clinical skills safely and efficiently.
- b. Assess patient response to procedures.
- c. Record all procedures accurately in the patient's health record.

D. Communication

The student must be able to:

- a. Speak and understand English clearly and fluently.
- b. Provide clear verbal directions to patients and coworkers in English.
- c. Follow verbal and written directions in English.

E. Motor Function

The student must be able to:

- Move freely in the clinical areas, patient care areas, elevator, and stairway.
- b. Use both hands simultaneously and demonstrate fine motor skills.
- c. Lift at least 25 pounds.
- d. Reach and bend wherever necessary, up or down, to perform job tasks.

F. Mental and Emotional

The student must be able to:

- a. Be flexible and work in stressful situations while maintaining composure.
- b. Be adaptable to unpleasant situations common in a clinical setting.
- c. Prioritize tasks to ensure completion of assigned work.
- d. Provide service to and interact with patients of diverse age, gender, sexual orientation, race, religion, and nationality.

Admission Criteria

Successful applicants will be notified of admission and must complete the following steps prior to the start of classes.

- 1. Applicants will submit to random drug/alcohol screening as a part of the admission criteria and as part of the entire school year policy. Receipt of positive results shall be grounds for denial of admission and/or dismissal. The applicant and his/her physician must produce documentation of a valid prescription for any substance for which the student tests positive. (Appendix A-1)
- 2. Applicants must pass a physical examination conducted by a physician, nurse practitioner, or physician assistant prior to the beginning of classes. The cost of this exam and any immunizations necessary are the student's responsibility.
- 3. Components of the examination must include:
 - a. Complete physical exam including dental, vision, and hearing screening (Appendix A-2)
 - b. TB Testing: Two-step PPD. Chest X-ray is required if PPD is positive.
 - c. Immunization requirements:
 - i. Hepatitis B vaccination (series of 3 vaccines) AND titer to confirm immunity.
 - ii. MMR vaccination (series of 2) AND titer to confirm immunity.
 - iii. TDAP vaccination within the last 10 years OR TD within the last 2 years
 - iv. Varicella vaccination (series of 2) AND titer to confirm immunity.
 - v. COVID-19 vaccination is recommended.
 - vi. Seasonal influenza vaccination will be required when available.
 - d. Applicants must list all medications being taken on the exam form along with the prescribing physician.
- 4. The student must complete a state and federal criminal history check at the student's expense.
- 5. A copy of the student's health insurance information.
- 6. A \$100 Reservation Fee must be paid to hold the student's place in class.

Admission of Students with Legal Violations

- A. According to Code 30-7A-10 of the WV Legislative Code, the WV Board of Examiners for LPNs shall have the right to refuse to admit an applicant for the licensure examination and shall have the power to revoke or suspend a license to practice practical nursing issued by the board to an individual who is convicted of a felony.
- B. For this reason, each applicant shall submit to a pre-admission criminal history records check. The board will notify the program coordinator of any positive results of these records checks for his/her students (see **Appendix A-9**).

- C. A prior conviction may not affect the applicant's eligibility to enroll in the practical nursing program. The school and the WV Board or Examiners for LPNs will decide each case based on the merits of that case.
- D. Failure to disclose any criminal conviction, guilty plea, or no contest pleas to a felony or misdemeanor on the application for admission to the nursing program, as any other time during the admissions process, or during the program are grounds for dismissal.
- E. The nursing program will submit to the board any documentation that it receives related to the conviction of a crime (see **Appendix A-8**).
- F. Any applicant to the practical nursing program who has ever been convicted, pled guilty, or pled no contest to a felony misdemeanor should alert the board office to discuss the potential impact of these convictions on the student's application and licensure.
- G. Felony and misdemeanor charges or convictions that occur during the nursing program must be reported immediately to the program coordinator and the school administrator with documentation. Documentation must also be submitted to the WV Board of Examiners for LPNs. Exclusion from clinical agencies and experiences and/or dismissal from the nursing program may occur after review of charges or convictions.

Application Process

Applicants must complete an application and meet the qualifications outlined herein.

- 1. Be at least eighteen (18) years of age by the beginning of class.
- 2. Have a high school diploma or hold a GED certificate.
- 3. Attach an official copy of your high school transcript or GED scores. Include transcripts for any college courses that have been taken.
- 4. Register for the TEAS-7 at BCTC. A score of 60% or above is recommended.
- 5. Attach a copy of a current driver's license to the application.
- 6. Submit current immunization records with the application.
- 7. All students must submit two references with address, telephone, and/or email address.
- 8. All applicants will be scheduled for an interview before admission.
- 9. The selection team will meet to score each applicant on the following: entrance examination score, interview score, application, and character references.

Drug or Alcohol Dependence

A student who has completed treatment for drug/alcohol dependency must submit documentation to the program coordinator. Any student who is currently receiving treatment AND has achieved 12 months of documented sobriety may be considered for admission into the nursing program (see Appendix A-1).

Health Insurance

Situations that would require that students seek medical care (ex: needlestick injury) can become quite costly. Therefore, students must carry health insurance, and it is the student's responsibility to obtain this coverage as the career center does not provide this benefit. You will be required to show proof of health insurance upon enrollment.

Liability Insurance

Professional liability insurance is a clinical affiliate and department requirement. The school will provide this insurance as a part of the student's educational experience free of charge.

Access to Health Care Services for Accidents or Injuries

For life-threatening emergencies, contact Emergency 911. During clinical experiences, you may access the emergency room facilities closest to the clinical affiliate that you are attending, if you are not placed in a hospital setting. The student is financially responsible for any costs associated with services provided following injuries on campus or in the clinical facility.

Elective Procedures

Students are prohibited from undergoing elective procedures while enrolled in the practical nursing program. Elective procedures are surgical procedures that are planned for conditions that are not deemed by the patient's health care provider to be life-threatening. Faculty recognizes that some elective procedures are medically necessary. Students may present evidence in these cases and request an exemption to undergo these procedures. Any absences incurred will be subject to the attendance policy.

Chronic Condition and Pregnancy Policy

Students are frequently required to life and/or carry objects of 25 pounds or greater. Items heavier than 50 lbs. must only be transported with the use of carts, hand trucks, or with assistance from another individual. Nursing students must support, lift, and move patients of all heights and weights. This occasionally requires climbing, balancing, stooping, kneeling, crouching, reaching, handling, pushing, and pulling. All extremities must be able to perform full range of motion. Students must be able to complete a 12-hour shift.

There are no "light duty" arrangements that can be made for students. However, instructors will make every effort to accommodate student restrictions when making patient assignments. This includes avoiding assignment of patients with contagious disease to a student who is immunocompromised or pregnant.

Students must notify the program coordinator and instructors immediately of any chronic condition that may require accommodation, including pregnancy. A written release from the health care provider verifying that the student can complete the required clinical rotations must be obtained for the student to remain in the program. (**Appendix B-3**). All absences will be subject to the attendance policy.

Withdrawal from the Program

Students may formally withdraw from the program verbally or in writing. Students will be responsible for the payment of all expenses incurred up to the date of withdrawal from the program. Students who do not formally withdraw from the program will be administratively withdrawn when absences exceed the program requirements. Expenses will continue to accrue until the actual withdrawal date.

Transfer Students

Students who have completed any component of the practical nursing program at another educational institution may apply to the BCTC School of Practical Nursing. To be accepted into the program, students must demonstrate competency by successfully passing content examination and clinical performance assessments for the courses they have completed in another program.

Readmission to the Program

Students who withdraw from the program due to failure of any course must reapply for admittance and meet all admission requirements to be readmitted. Reapplying to the program is considered a second (2nd) admission. Students are allowed no more than two (2) admissions to the program. Students who fail the second, third, or fourth term of the program may reapply to re-enter the program when the course is next offered. Students applying for re-entry must successfully complete the program within three (3) years of the first admission to the program or repeat the entire program. Students requesting re-entry must submit a letter to the LPN Coordinator requesting to return. Students must adhere to all admission requirements (physical examination, background checks, etc.) prior to approval for re-entry into the program.

Advisement Guidelines

Each student in the program will be assigned an advisor. Advisors will meet with students during office hours a minimum of once a month to review academic and clinical performance data and develop strategies for success in the program. Students may schedule an appointment with the advisor during office hours and will be seen within Advisors will be available to students outside of office hours, if necessary, upon student request. Any student may request advisor reassignment by contacting the BCTC administrator.

Student Guidelines

It is your responsibility to become familiar with policies regarding appropriate conduct as well as your rights and responsibilities while you are a student at Boone Career and Technical Center.

- School policies and procedures can be found in the Adult Student Handbook located on the BCTC website: http://www.gobctc.com.
- Policies of Boone County Schools can be found on the Boone County website under Boone County Policies Section: http://www.boonecountyboe.org/pages/Boone County School District.
- Practical nursing students must also follow the policies and procedures of the West Virginia Board
 of Examiners for Licensed Practical Nurses. Visit http://www.lpnboard.state.wv.us/ to review
 policies and procedures for licensed practical nurses and practical nursing students in West
 Virginia.

Grading Procedures

At the beginning of each course in the practical nursing program, students will receive a syllabus that outlines the requirements for passing that course successfully. Grades in each course are weighted, with grades being assigned in the following categories: tests, assignments, skills, participation, and a final exam. All assignments must be turned in at the beginning of class on the date that it is due. Any assignments turned in late will be subject to a grading penalty as outlined in the "Make-up Assignments and Late Work" policy.

Students will be graded daily in the clinical setting using the Clinical Evaluation Tool (**Appendix B-1**). Students will be graded in five (5) main areas and receive a score of satisfactory or unsatisfactory. The objectives that fall under the 5 main areas are defined in the Clinical Objectives Reference Sheets (see Appendix B) and vary for each course and specialty area. If a student scores three (3) or more unsatisfactory grades, they will be placed on probation with a remediation plan established. Students placed on probation will have two (2) clinical days to correct deficiencies. The probation will include a written description of deficiencies and the development of an individualized plan of improvement with the clinical instructor. At the end of the probationary period, the student must have the approval of the LPN coordinator to have probationary status lifted.

BCTC School of Practical Nursing requires a minimum of a "C" average (80%) on all assignments. All assignments are graded. Students must pass all components of the program, including classroom/lab assignments and clinical experiences. Failure to complete all components of a course will result in failure of that course. The BCTC School of Practical Nursing grading procedures adhere to the performance standards as outlined in the West Virginia State Board of Examiners for Licensed Practical Nurses Rule, Policies and Procedures for Development and Maintenance of Educational Programs in Practical Nursing (10 CSR 1).

Grading Scale

94 - 100 = A

86 - 93 = B

80 - 85 = C

70 - 79 = D

0 - 69 = F

Students must score a minimum of a "C" (80% or above) to successfully complete each course and progress to the next course.

HESI Exam and Remediation Policy

PURPOSE:

HESI evaluation data is used to measure student achievement of course outcomes, determine gaps in the curriculum and student achievement, and prepare students to take the NCLEX-PN upon completion of the practical nursing program. HESI exams allow students to:

- 1. Assess knowledge and development in specialty areas.
- 2. Provide information to increase understanding and mastery of nursing content.
- 3. Target knowledge deficits and target remediation to enhance learning.
- 4. Provide a standardized method of measuring student success and predicting success on the NCLEX-PN.
- 5. Gain experience in taking NCLEX-style standardized examinations.

POLICY:

- 1. HESI specialty exams will be administered as the final exam in each nursing course. The conversion score will be used as the grade percentage. The HESI final exam will count as 20% of the total course grade.
- 2. Additional HESI exams may be used throughout the program. Exam scores for these tests will be categorized as a regular exam grade.
- 3. A benchmark score of 850 is the standard for all nursing courses. Students who score below 850 in any category (NOT the overall score) on the HESI exam will be assigned remediation.
- 4. Remediation is required and must be completed within 30 days of the test date. Students will receive participation points for completion.
- 5. HESI exit exams will be used as the final exam grade in the capstone course in the last term of the program.

HESI EXAMS:

- 1. Midterm and Final Exams: when two versions of the HESI exam are available, one version will serve as the mid-term exam and the other as the final exam. When only one version is available it will serve as the final exam and a separate mid-term exam will be administered.
- 2. Midterm and final exams in Fundamentals, Medical-Surgical, Pharmacology, and Maternity/Pediatrics will both be HESI exams.
- 3. Only the final exam will be a HESI exam in Anatomy and Physiology, Geriatrics, Nutrition, and Psychiatric Nursing.
- 4. Other HESI specialty exams will be given periodically throughout the program. These will count as regular exam grades.

EXAM SECURITY AND ACADEMIC INTEGRITY

HESI test items, including the post-exam review with rationale are secure items and must not be copied or shared.

- 1. Student must complete testing and remediation with academic integrity.
- 2. Any notes taken during the exam must be turned in to the proctor at the completion of the exam.
- 3. Students who demonstrate academic dishonesty may be subject to dismissal from the nursing program. (See Academic Integrity Policy in the BCTC Practical Nursing Policy & Procedure Manual).

REMEDIATION

All students are required to remediate the recommended materials following each HESI exam. The requirements are based on the student's individual HESI scores. The program may assign additional learning activities to supplement HESI remediation assignments.

Progression in the Program

Students are required to complete 1,350 hours of academic and clinical training to meet program requirements. An accurate record of the hours completed by the practical nursing student must be kept throughout enrollment in the program. Students will be required to log hours of attendance daily. Students must have proof of the completion of the minimum hours required by the West Virginia Board of Examiners for Licensed Practical Nurses to take the NCLEX-PN licensure examination.

Students must complete each course in the program to be eligible to sit for the NCLEX-PN licensure examination. In addition, the minimum grade requirement is 80% (C). Each course syllabus details requirements for achievement of this grade. If the clinical requirements for the program are not met, an "F" (failure) will be awarded. In this situation, students will not be eligible to complete the program.

Honor Students and Honor Graduates

A student who maintains an overall program average of 3.5 or higher is eligible for induction as a member of the National Technical Honor Society. Honor students who maintain the criteria for membership in NTHS throughout the program are recognized at graduation as an honor graduate. Faculty reserves the right to refuse a student as an honor graduate based upon disciplinary action that has taken place during the year. Honor graduates must be honest, responsible student-citizens who exhibit a commitment to excellence.

Attendance Policy

All absences result in the loss of instructional time. Practical nursing students are expected to attend all classroom and clinical days. Consistent with this belief, the attendance policy for practical nursing students is as follows: (Appendix A-3)

Students accrue eight (8) hours each clinical or classroom/lab day up to 32 hours per week. Students receive points for attendance and performance; therefore, absences will result in a score of zero (0) for that day. Students who are enrolled in the practical nursing courses must adhere to the following attendance policies:

- Students can miss no more than ten (10) days. Clinical absences must not exceed two (2) days in fundamentals and medical-surgical and no more than one (1) day in any specialty area (geriatrics, obstetrics, pediatrics, mental health, and pharmacology).
- After a student has been absent for two (2) days, the student will be given a verbal warning.
- After a student has been absent for four (4) days, the student will receive a written warning.
- After a student has been absent for (6) days, a conference will be held, and the student will be placed on probation.
- When student absences exceed the equivalent of ten (10) days, the student is subject to immediate dismissal from the program.
- Tardiness is unacceptable. A student is considered tardy if more than five (5) minutes late for class or clinical. Tardiness of thirty (30) minutes or more is counted as an absence.
- Students who have two (2) tardy incidents will receive a written warning.
- Three (3) tardy incidents will result in one (1) day's absence on the student's record.
- After five (5) tardy incidents, students are subject to immediate dismissal.
- Students must notify the instructor promptly if an absence or tardy occasion occurs. Failure to notify the instructor (no call/no show) is unacceptable.
- Students who incur a no call/no show absence or tardy occasion will receive a verbal warning AND will receive a "zero" on any assignments that are missed on that day.
- Students who incur a 2nd no call/no show will receive a written warning and a conference will be held.
- Students who incur three (3) no call/no show occasions are subject to immediate dismissal.
- Three (3) days are allowed for the death in the immediate family (parents, spouse, or children). These days are not counted into the absence total for dismissal; however, all assignments must be completed. If clinical hours are missed, these must be made up.
- Make-up days may be scheduled to make up clinical absences incurred due to hospitalization or other extenuating circumstances at the discretion of the program coordinator. No more than two (2) days will be scheduled for clinical absences.

Make-Up Assignments and Late Work

Any assignments that are missed due to absence must be made up at the next class period. Students may be assigned an alternate assignment or a different examination than the original at the instructor's discretion. Students who miss a required pre-test or an exam may report 30 minutes prior to class to complete that assignment. Work that is not submitted on time will be subject to a grading penalty. The student's grade will be dropped one letter grade for each day that the assignment is late. No assignment can be submitted more than two dates late without instructor approval. If a student has previously submitted two (2) late assignments, then any additional assignments will be awarded a zero (0). Make-up assignments are NOT permitted for a no call/no show absence.

Clinical Absences

Clinical training is an essential component of the practical nursing program. Students must strive to be in attendance for all clinical days. Clinical absences will result in a grade of zero (0). In the event of an absence, an alternate assignment may be given to the student at the discretion of the program coordinator. The decision to give an alternate assignment will be based on individual circumstances. Make-up assignments will only be available for an unavoidable absence. The number of make-up assignments for clinical absences is limited to two (2) throughout the program.

Graduation Requirements

Students who earn a diploma for completion of the practical nursing program are eligible to take the National Council Licensure Examination for Practical Nurses (NCLEX-PN).

To graduate, the student must meet the following requirements:

- 1. Satisfactorily complete a minimum of 1,350 hours of curriculum.
- 2. Maintain at least an 80% average in all coursework.
- 3. Maintain at least a 90% attendance rate throughout the program.
- 3. Satisfactorily complete all required clinical objectives.
- 4. Pay all tuition and fees.
- 5. Return any items on loan from the school (i.e., textbooks, reference materials)
- 6. Complete an exit interview and participate in a graduation exercise for the LPN Pinning Ceremony.
- 7. Complete and submit all requirements to take the NCLEX-PN exam. Applicants will apply to take the examination through the WV State Board of Examiners for Licensed Practical Nurses at www.lpnboard.state.wv.us

Academic Integrity

Academic integrity is a hallmark of professionalism. Students must be honest and ethical in submitting their own academic work and report any violations by other students. All nursing students must exhibit academic integrity throughout their enrollment in the BCTC School of Practical Nursing. Academic dishonesty will not be tolerated and will result in the student being disciplined and possibly dismissed from the program. In addition, the actions may be reported to the West Virginia Board of Examiners for Practical Nurses.

Academic dishonesty includes submitting any information or material that is used for academic credit. Submitting work that is not self-created gives that student an unfair advantage over other students in the program. Types of academic dishonesty include plagiarism, cheating, fabrication or falsification, facilitation, and other academic conduct specifically prohibited by the course instructors.

- <u>Plagiarism</u>: submitting work that is the property of another, such as the direct use of another's content or the use of another's words, ideas, or media without complete and accurate acknowledgment
- <u>Cheating</u>: relying on unauthorized resources to gain information for an assignment or examination, such as the use of textbooks without authorization during an examination
- <u>Fabrication</u>: misrepresentation, forgery, or fraud in presenting assignments for academic credit, such as falsifying citations, data, or other records
- <u>Facilitation</u>: providing unauthorized materials or assistance to another student with the intent to commit academic dishonesty
- <u>Collusion</u>: working with another student on an individual assignment without an instructor's permission
- <u>Misrepresentation</u>: giving false information or omitting to provide information with the intent to deceive an instructor for academic credit
- Other prohibited academic conduct: engaging in behavior specifically prohibited by a faculty member in the course syllabus or the student handbook

Examples of academic dishonesty include, but are not limited to:

- Copying another student's work, or allowing another student to copy your own work
- Having someone else create an assignment and submit it as your own work
- Assisting other students to cheat through electronic means or otherwise
- Using written or electronic materials during an assignment or examination that are not permitted
- Falsifying information or misrepresentation of information on a paper, presentation, care plan, clinical document

- Misrepresentating information in order to receive academic credit, such as listing resources in your works cited on a paper you submit that were not actually used in your research, or fabricating the reason for an absence or tardy occurrence
- Using materials such as textbooks, notes, or electronic devices during a test without the instructor's permission
- Submitting work as your own that you have not created
- Failing to participate in group assignments for which you receive academic credit
- Working with another student on an individual assignment
- Looking at another student's test during a written or electronic examination
- Submitting the same assignment for two different grades in different classes of the program, unless the student receives permission from the instructor for academic credit in each class
- Improper electronics use, including unauthorized use of computer/calculator, selling or giving away information stored electronically, sharing test or assignment answers electronically, taking screenshots of any materials presented electronically, or using smartwatches or cell phones, or any other device during an examination
- Purchasing test banks online, in text, or from other students
- Incidents occurring in the clinical setting that compromise the well-being and/or nursing care of
 a client, such as falsifying vital signs, documenting a procedure that was not performed, or
 "pre-charting" these infractions are grounds for immediate dismissal from the program

A formal complaint will be submitted for any student who engages in academic dishonesty. This complaint will be submitted to the LPN coordinator within three (3) academic days following the conduct in question. The student will be receive a copy of the complaint and will be given the opportunity to respond to the charges of misconduct. The student's response must occur within three (3) academic days of receipt of the formal complaint. The complaint and the student's response will be reviewed by the LPN coordinator and the school administrator to determine the outcome. The student will be notified of the outcome in writing within three (3) academic days and will have an additional three (3) academic days to appeal the decision. An application must be made in writing and include supporting documents to establish the grounds for the appeal. Applications of appeal without supporting evidence will not be accepted. Thereafter, the decision of the BCTC School of Practical Nursing will be final.

A finding of academic dishonesty will result in the student being awarded a zero (0) "F" for that assignment. The written complaint will be included in the student's academic record. If a second finding of academic dishonesty occurs, the grade penalty will remain the same and the student will placed on academic probation. A third occurrence of academic dishonesty will result in the student's dismissal from the program and reported to the West Virginia LPN Board. (Appendix A-4)

Student Conduct

- Professional behavior is always expected, including, but not limited to punctuality, attentiveness, patience, respect, and cooperation. As health professionals, nurses must act in the best interests of their patients and respect their dignity. Professional boundaries must be maintained at all times.
- 2. Arrive on time, attend regularly, and stay until the class is dismissed. Students are not permitted to enter class once it is in session unless consent is given by the instructor.
- 3. Respect for the instructors and fellow students is to be demonstrated through behavior, language, tone, and attitude. The student must be able to accept constructive criticism.
- 4. Communication must always be dignified and courteous. Conflicts must be resolved in a professional manner. Avoid disruptive and inappropriate conversations.
- 5. Students will be assigned to patients during clinical rotations and are responsible for reporting information to both clinical site staff members and faculty. Though faculty/staff members are present, the student is ultimately responsible for his/her actions and is expected to utilize critical thinking in all circumstances.
- 6. Maintain strict confidentiality that adheres to HIPAA laws, facility policies, and clinical guidelines. Discussion of facility, patients, and other potentially confidential information should be used for learning purposes only and carried out in private areas. (See **Appendix A-5**)
- 7. Sleeping/lack of attention in class or clinical is not acceptable.
- 8. No headphones or other electronic devices are permitted during lectures unless authorized by the instructor. Headphones are not acceptable during clinical rotations.
- 9. When you are not engaged in a patient or other educational activity, be aware of what you are doing to fill your time. Acceptable activities would include reading procedure manuals for your facility, reading your text, preparing for class, etc. Ask the staff how you can assist them.
- 10. Unacceptable activities include, for example, texting, talking on the phone, watching videos, scrolling through phone, reading leisure magazines, etc.
- 11. Use computers **only** for facility-related activities. Cell phones must be muted and not visible.
- 12. Speaking negatively about, or criticizing, techniques practiced by clinical facility staff will result in a written warning which will become part of the student's record. This may also result in your removal from the facility.
- 13. No gum chewing during clinical rotations. Snacks and drinks may only be consumed during breaks in designated areas.
- 14. Offensive or inappropriate language, behavior, tone, or attitude will not be tolerated. Expect disciplinary action that could include, but is not limited to, dismissal from the classroom for that class period. Further action may be taken if indicated by the seriousness of the behavior, including dismissal from the program.

Professional Boundaries

As health professionals, nurses strive to inspire confidence in their patients and their families and treat all patients and other health care providers professionally. Crossing professional boundaries violates the nurse practice act and can lead to professional discipline and termination from the nursing program. Student nurses must adhere to the following principles when providing patient care:

- Nurses use professional judgment to determine the appropriate boundaries of the therapeutic relationship with each patient. The nurse (not the patient) is responsible for establishing and maintaining boundaries.
- Nurses are responsible for beginning, maintaining, and ending the nurse-patient relationship in a way that ensures that the patient's needs are prioritized.
- Nurses do not enter into a friendship, romantic or sexual relationship with a patient. Avoid any behavior that may be misinterpreted as flirtation. Avoid sexual innuendo or offensive behavior.
- Nurses maintain the same boundaries with the client's family and friends as with the client.
- Nurses help colleagues to maintain professional boundaries and report evidence of boundary violations to the appropriate person.
- At times, a nurse must provide care to patients who are family members or friends. When possible, care of these patients should be transferred to another health care provider.
- Nurses who provide care in a dual role must make it clear to patients when they are acting as a health professional and when they are acting in a personal capacity.
- Nurses disclose a limited amount of information about themselves only if it may help to meet the therapeutic needs of the patient. Nurses must not disclose intimate or personal issues.
- Nurses do not communicate with or regarding patients in ways that may be perceived as demeaning, seductive, insulting, disrespectful, or humiliating.
- Nurses do not engage in any activity that results in inappropriate financial or personal benefit
 to themselves or loss to the client. Inappropriate behavior includes neglect, and/or verbal,
 physical, sexual, emotional, and financial abuse.
- Nurses do not act as representatives for patients under powers of attorney or other representation agreements.
- Nurses must avoid keeping secrets with or for a patient, spending an inappropriate amount of time with a patient, or visiting a patient when off-duty or out of uniform.
- Nurses must avoid taking a patient's side when there is a disagreement between the patient and his or her family members regardless of the situation.
- Nurses must participate as a member of the health care team in providing patient care and guard against the belief that they alone truly understand or can help the patient.
- Nurses must practice self-awareness and recognize any feelings of attraction to a patient. If these feelings are present, the nurse must consult supervisor and request a transfer of care.

Clinical Overview

Clinical rotations are a crucial portion of the learning experience at Boone Career and Technical Center. Practical nursing students will spend many hours in the clinical setting. Our school has contracts with multiple facilities in the area and as a student of the Practical Nursing Program, you are held to the expectations stated within these contracts. Local, state, and federal regulations and accrediting agencies also drive the policies and procedures for much of the program.

The clinical experience policies and procedures in this handbook provide the framework for clinical expectations and the responsibilities of practical nursing students in the program. Each student will be held accountable for adhering to all the policies and procedures of the facilities where he/she is placed for clinical experience. Failure to comply with these standards will result in probationary status and may lead to dismissal from the class or program.

Clinical Readiness

Clinical readiness means that the student has met all the established requirements to enter the clinical facilities without posing a threat to themselves or others. These requirements are outlined in the admission requirements for the practical nursing program. All students entering the nursing program must meet these health and safety requirements to meet the policy requirements of the clinical facilities, the practical nursing program, and the WV LPN Board.

Before entering a clinical facility, the student must complete all necessary HIPAA, CPR, first aid, and infection control training and be fit-tested for N-95 masks. An annual influenza vaccination must be completed prior to the start of clinical rotations in the fall of each year. If the student is unable to take an annual influenza vaccine, they must follow each facility's policy for rendering care to patients without vaccination. The inability to complete clinical assignments will result in failure of the course.

If at any time, there is a change in a student's health status, (i.e., a new diagnosis, injury, pregnancy, or new medication, etc.), the student must inform his/her instructor(s) as soon as possible. A written release from their health care provider stating their complete ability to participate in clinical rotations will be required for the student to continue in the course. Students will not be allowed to attend clinical rotations until the documentation is provided. Any absences incurred will be subject to the attendance policy.

Clinical Experience Policies and Procedures

Students will be held to the highest standards of professionalism while in the clinical setting. Students who are in uniform or representing the practical nursing program in any way are expected to maintain dignity, integrity and behave in a manner that is flattering to the program, the profession, and the individual.

Students will be placed in a variety of clinical facilities during the practical nursing program. Students are expected to attend all orientations, computer and/or equipment training that are required in each clinical facility prior to beginning clinical rotations in that area. Students will complete clinical assignments with a clinical instructor or an agency supervisor supervising all experiences. Students must complete all clinical assignments in the facility in which he or she has been placed. Students may not arrange clinical experiences without the authorization of the clinical coordinator and may not receive remuneration for clinical training.

It is your responsibility to follow all applicable policies and procedures of the clinical facility in which you are placed. The facility has the right to ask for the removal of a student for inappropriate behavior or failure to follow policies and procedures. The school is required, by contract, to respect this request for removal. The student will subsequently be dismissed from the program.

The following is a list of clinical policies:

- 1. Should anything occur during your clinical experience that would require medical attention, you are financially responsible for all associated costs.
- 2. Attendance: The student must follow the procedure for missing a clinical day as outlined in Appendix A-6 of the "Student Clinical Contract". You are required to notify the instructor and/or clinical preceptor whenever you need to leave the clinical facility because of an emergency. Plan to schedule any appointments around your assigned clinical experience. BCTC must conform to the agency's availability in terms of the days and shifts that are available for student placement.
- 3. You are responsible for keeping a record of your attendance both in the classroom and when working with a preceptor. An electronic record of attendance will be used by the faculty to record attendance in the classroom, lab, and clinical rotations. The Specialty Clinical Rotation Time Sheet will be used to record attendance when you are assigned with a preceptor (see **Appendix B-2**).
- 4. Tardiness is not acceptable! Students who report late may be sent home and counted as absent.
- 5. If during inclement weather the Boone County Board of Education cancels school, instructors will notify you of any changes and/or cancelation of clinicals. Clinical days are not automatically canceled.

- 6. As the primary business of the clinical facility is to care for patients, any practice by you in the clinical facility that leads to concerns by a patient or staff with whom you work will be brought to the attention of the clinical supervisor and program director for further action. This may result in your dismissal.
- 7. You are required to record and retain a Master Skill Checklist throughout your tenure in the practical nursing program. It is your responsibility to have an instructor sign off on each skill before you can perform them independently during clinical rotations (see **Appendix B-4**).
- 8. Dress: you are responsible for dressing professionally during your attendance at the clinical site and in the student classroom and laboratory. Guidelines include the following:
 - a) You must report to your clinical area in the BCTC uniform with a nametag. Identification badges are a required part of the uniform (worn above the waist) so that you may be identified by patients and staff as a student. A lab coat must be worn to and from the facility.
 - b) Clothing must be clean, pressed and odor free. Shoes must be clean, waterproof, rubber-soled black shoes that cover the entire foot.
 - c) Students who report to the clinical site in inappropriate attire (as described above) will be sent home and assessed an absent day.
 - d) Students must report with the required clinical equipment: ink pen, sharpie, pen light, bandage scissors, and notepad/clinical paperwork. Students who do not have the required clinical equipment will receive a verbal warning for the first offense. Failure to report without equipment on a second (2nd) occasion will result in a written warning. Thereafter any student who reports without clinical equipment will be sent home and assessed for an absent day.
 - e) You must be groomed so that you are free of all offensive odors. This includes body odor, cologne, and smoke, to name a few. **Daily bathing is required.**
 - f) **Piercings**: no facial piercing or any studs (ex: face, eyebrow, or tongue) or other facial jewelry may be worn **these must be removed.**
 - g) Jewelry: No jewelry, except for a wedding band, medical alert bracelet, watch, and 1 pair of small stud earrings is permitted. Will address any other jewelry issues on a as needed basis.
 - h) Fingernails: **no acrylic nails or nails longer than** %" are permitted. Only clear nail polish is permitted.
 - i) Health care facilities are designated smoke-free environments. Smoking and vaping are prohibited during clinical experience hours—this includes breaks and lunch time.
 - j) Hair: Must be clean, neat, and pulled back away from your face so as not to hang into the patient's space while performing procedures. Long hair must be secured up off the neck. throughout the clinical day. Bangs must not be longer than eyebrows. No excessive accessories permitted. Males: facial hair must be clean and neatly trimmed.
 - k) Tattoos: Must be covered during clinicals. A long-sleeved, solid, black shirt under scrub top is acceptable.

Clinical Evaluations

The clinical instructor and/or clinical site preceptor will complete a clinical evaluation of each student to provide feedback on the student's performance. A clinical evaluation will be performed for each clinical day. The student's program advisor will review clinical performance data with the student and develop a strategy for improvement when necessary. Each component of the clinical evaluation is scored as "satisfactory" or "unsatisfactory." An overall minimum of 80% satisfactory is necessary to receive a grade. Clinical evaluations that are less than 80% satisfactory will receive a "0" for the clinical grade. The clinical evaluation form lists the clinical performance criteria for which each student will receive a grade. (Appendix B-1)

Termination and Removal from Clinical Experiences

The decision to terminate a student will be determined by the LPN coordinator, the instructor, and/or the clinical supervisor. If terminated, you are required to withdraw from the program. A student may only be allowed to reenroll with the authorization of the school administrator and the LPN coordinator.

The following behaviors are grounds for dismissal from the program:

- Non-compliance with policies and procedures of BCTC or the clinical facility
- Perception or proof of alcohol or drug consumption prior to arrival at the clinical facility
- Unsafe practices or overstepping the boundaries of a student**
- Noncompliance with absence notification procedures
- Non-compliance with HIPAA Privacy Standards or Code of Ethics
- Falsification of log sheets
- Performing skills outside the Scope of Practice for LPNs
- Uncooperative or unprofessional behavior as perceived by clinical supervisor or school faculty.
- Absence or tardiness for more than 2 days without proper documentation

^{**}This includes, but is not limited to, the following: a determination that you are not showing a gradual improvement in skill or understanding of the essential knowledge according to the clinical faculty or a determination that your behavior or performance presents a danger to yourself or others.

Grievance Policy

The purpose of the grievance policy is to provide a fair and balanced process to resolve any differences or dispute between a student and a staff or faculty member about BCTC School of Practical Nursing policies or learning activities affecting the student. This may include but is not limited to grading, instructional procedures, class attendance policies, instructional quality, and other situations where the student believes they are being treated unfairly or arbitrarily.

Students who wish to file a complaint regarding discrimination based on race, color, sex, religion, age, sexual orientation, disability, or national origin are to contact the LPN program coordinator about their complaint. A prompt investigation will be conducted for equitable resolution of the complaint.

The procedure for complaints <u>other than</u> discrimination based on race, color, sex, religion, age, sexual or gender orientation, disability, national origin, ethnicity, marital status, or veterans' status:

- The student with a grievance must first discuss the grievance with the staff or faculty member involved. Every reasonable effort should be made by both parties to resolve the matter at this level. The initial conference must occur within ten (10) class days.
- If the student continues to be dissatisfied with the results, he/she may, within five (5) class days after the initial conference, file a written appeal with the BCTC administrator. The administrator may attempt a resolution satisfactory to the parties involved, but if no agreement is reached, he/she will set a date for a meeting of the student with the grievance committee, which is comprised of the administrator, the LPN faculty (coordinator and instructors), and the guidance counselor, to review the complaint.
- Both student and the grievance committee shall have the authority to determine whether an
 academic or other process was fair, prejudicial and/or capricious, and to recommend to the
 administrator a suitable remedy.
- The grievance committee shall follow the following guidelines at its meeting:
 - The administrator shall proctor the meeting and vote only in case of a tie.
 - The student shall have the right to be accompanied by a representative of his/her choice. This representative may consult with, but may not speak on behalf of, the student or otherwise participate directly in the proceedings, unless he or she is given specific permission to do so by the administrator. If the representative is to be an attorney, the student must notify the administrator and the LPN program coordinator of this fact within a minimum of five (5) working days in advance of the committee meeting.
 - Both the student grievant and the faculty or staff member against whom the grievance has been filed may present witnesses or relevant materials during the committee meeting.
 - All parties to the grievance must remain present for the entire meeting.

- The meeting shall be closed to all others.
- The committee shall form its recommendations within five (5) working days of its final session. All recommendations for grievances related to grades, faculty, or academic policy shall be forwarded to the LPN program coordinator. In other matters, the committee may refer its recommendations to the administrator.
- The faculty or staff member receiving the committee recommendation shall, within seven (7) working days after the meeting, prepare a statement of his/her decision on the matter with copies to the student, the faculty, or staff member against whom the grievance was filed.

Tobacco, Drug, Alcohol Policy

Boone Career & Technical Center is a tobacco-free, drug-free, and alcohol-free facility that provides a healthy and productive work environment for our students. It is a violation of school policy to use, possess, sell, convey, distribute, or manufacture these substances on school property or while on school business. "Vaping" and smokeless tobacco use are prohibited at BCTC as specified in the rules and regulations. Violations of this policy are subject to disciplinary action up to and including expulsion from the school and the program.

Weapon-Free Policy

Boone Career & Technical Center maintains a facility safe and free of violence for all faculty and students and prohibits the possession or use of perilous weapons on school property. A license to carry a weapon does not supersede school policy. Any student in violation of this policy will be subject to prompt disciplinary action, up to and including termination or expulsion from the school and the program.

Cell Phone Policy

The School of Practical Nursing is aware that students utilize their personal cellular phones for business purposes. However, cell phones are a distraction in the workplace. To ensure the effectiveness of instruction/hands-on activities, in addition to safety of all individuals; all students are asked to leave cell phones at their desk or out of the working/learning environment. During clinical assignments, cell phones may be carried only if placed in silent mode and may not be used during patient care or other clinical duties. In an emergency or anticipated emergency that requires immediate attention, please inform your supervisor and ask for guidance. Students who violate this policy will be subject to disciplinary actions, up to and including termination.

Computer/Internet Policy

Students in the LPN program will receive a laptop and internet access while enrolled in the program. Voice mail, email, and Internet usage assigned to a student's computer or telephone extensions are solely for the purpose of conducting school business. Internet use, during school time, is authorized to conduct school business only. Laptops must be maintained in good working condition throughout the program. Internet or computer issues are not acceptable as excuses for not completing assignments. Laptops must be updated and fully charged at the beginning of class. Laptops may be plugged in during lunch or break only in designated areas. Cords present a tripping hazard and are prohibited from being extended in pathways. When computers are used for test-taking, no other browsers may be open other than the test window. Instructors must be able to see the student's screen at all times during tests. Privacy filters and dark screens must be disabled when testing.

Social Media Policy

The School of Practical Nursing_recognizes the importance of the Internet in shaping public thinking about the school and our current and potential products, employees, partners, and customers. The school also recognizes the importance of our students joining in and helping shape industry conversation and direction through interaction in social media. Therefore, BCTC is committed to supporting your right to interact knowledgeably and socially in social media.

Guidelines for Interaction about the School of Practical Nursing on the Internet

These guidelines will help students open a respectful, knowledgeable interaction with people on the Internet. They also protect the privacy, confidentiality, and interests of the School of Practical Nursing as well as current and potential products, employees, partners, customers, and competitors.

- If students are developing a Web site or writing a blog that will mention the School of Practical Nursing and/or current and potential products, employees, partners, customers, and competitors, identify that you are a student in the School of Practical Nursing and that the views expressed on the blog or Web site are yours alone and do not represent the views of the school.
- Unless given permission by your supervisor, students are not authorized to speak on behalf of the School of Practical Nursing, or to represent that you do so.
- If you are developing a site or writing a blog that will mention the School of Practical Nursing and/or current and potential products, employees, partners, customers, and competitors, as a courtesy to the school, please let your supervisor know that you are writing them. Your supervisor may choose to visit from time to time to understand your point of view.
- Students may not share information that is confidential and proprietary about the school. This
 includes information about trademarks, upcoming product releases, sales, finances, number of

- products sold, and number of employees, school strategy, and any other information that has not been publicly released by the school.
- Speak respectfully about the School of Practical Nursing and current and potential employees, customers, partners, and competitors. Do not engage in name calling or behavior that will reflect negatively on the reputation of the School of Practical Nursing. Note that the use of copyrighted materials, unfounded or derogatory statements, or misrepresentation is not viewed favorably by the school and can result in disciplinary action up to and including dismissal.
- The School of Practical Nursing encourages employees to write knowledgeably, accurately, and
 using appropriate professionalism. Despite disclaimers, your Web interaction can result in
 members of the public forming opinions about the School of Practical Nursing and its employees,
 partners, and products.
- Honor the privacy rights of current employees by seeking their permission before writing about or displaying internal company happenings that might be a breach of their privacy and confidentiality.

Exposure Control Policy

The purpose of this policy is to safeguard the student and faculty from exposure to blood or body fluids during the performance of procedures while in the LPN Program. If a student is exposed to another person's blood, the student shall flush the area immediately with water and report it to their instructor. If there is significant exposure, current CDC guidelines will be followed at the student's expense. The LPN Instructor will maintain records of incidents of injury to students including, but not limited to, needlesticks. This applies to such incidents that occur on campus and in the clinical facility.

Hepatitis B Vaccination is required to participate in LPN clinical rotations. Students must present proof of complete vaccination and a blood titer to confirm proof of immunity.

Standard Precautions will be observed at BCTC to prevent contact with blood or other potentially infectious material. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Engineering Controls and Work Practice Controls will be utilized to eliminate or minimize exposure to students at BCTC. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized.

Handwashing facilities are available to students who incur exposure to blood or OPIM (other potentially infectious materials). After removal of personal protective gloves, students shall wash

hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water or antiseptic cleanser.

Needles/Other Sharps: Contaminated needles and other contaminated sharps will **NOT** be bent, recapped, removed, sheared, or purposely broken. Activate safety device immediately after needle use. Contaminated sharps are to be placed immediately after use into puncture resistant sharps container, labeled with a biohazard label, and are leak proof.

Work Area Restrictions: In work areas where there is a foreseeable exposure to blood or other potentially infectious material, students are not allowed to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept in areas where blood or other potentially infectious material are present. All procedures will be conducted in a manner which will minimize splashing, spraying, splattering & generation of droplets of blood or other potentially infectious material.

Personal Protective Equipment: Training is provided on the appropriate use of the PPE for tasks or procedures students will perform. PPE will be chosen based on the anticipated exposure to blood or other potentially infectious material. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious material to pass through or reach clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used. All garments which are penetrated by blood shall be removed immediately or as soon as feasible. All used PPE will be removed prior to leaving the work area.

Exposure Incident Protocol

If a student incurs an exposure incident the instructor will complete an Incident Report. All exposure incidents shall be reported, investigated, and documented. The exposure incident shall also be reported to Boone County Board of Education. It is recommended that the student report to the closest emergency department. Current CDC guidelines should be followed at the student's expense. Student health insurance will cover these costs. This applies to such incidents which occur on campus and in the clinical facility.

Workplace Harassment

The BCTC School of Practical Nursing is committed to providing a work environment for all students that is free from sexual harassment and other types of discriminatory harassment. Students are expected to conduct themselves in a professional manner and to show respect for their co-workers.

BCTC property (e.g., telephones, copy machines, facsimile machines, computers, and computer applications such as e-mail and Internet access) may not be used to engage in conduct that violates this policy. School policy against harassment covers students and other individuals who have a relationship with the BCTC which enables the school to exercise some control over the individual's conduct in places and activities that relate to the School of Practical Nursing work (e.g., directors, officers, contractors, vendors, volunteers, etc.).

Prohibition of Sexual Harassment: This policy against sexual harassment prohibits sexual advances or requests for sexual favors or other physical or verbal conduct of a sexual nature, when: (1) submission to such conduct is made an express or implicit condition of employment; (2) submission to or rejection of such conduct is used as a basis for employment decisions affecting the individual who submits to or rejects such conduct; or (3) such conduct has the purpose or effect of unreasonably interfering with a employees work performance or creating an intimidating, hostile, humiliating, or offensive working environment.

While it is not possible to list all the circumstances which would constitute sexual harassment, the following are some examples: (1) unwelcome sexual advances -- whether they involve physical touching or not; (2) requests for sexual favors in exchange for actual or promised benefits such as favorable reviews, promotions, increased benefits, or continuation in the program; or (3) coerced sexual acts.

Depending on the circumstances, the following conduct may also constitute sexual harassment: (1) use of sexual epithets, jokes, written or oral references to sexual conduct, gossip regarding one's sex life; (2) sexually oriented comment on an individual's body, comment about an individual's sexual activity, deficiencies, or prowess; (3) displaying sexually suggestive objects, pictures, cartoons; (4) unwelcome leering, whistling, deliberate brushing against the body in a suggestive manner; (5) sexual gestures or sexually suggestive comments; (6) inquiries into one's sexual experiences; or (7) discussion of one's sexual activities.

While such behavior, depending on the circumstances, may not be severe or pervasive enough to create a sexually hostile work environment, it can nonetheless make co-workers uncomfortable.

Accordingly, such behavior is inappropriate and may result in disciplinary action regardless of whether it is unlawful.

It is also unlawful and expressly against this policy to retaliate against a student for filing a complaint of sexual harassment or for cooperating with an investigation of a complaint of sexual harassment. *Prohibition of Other Types of Discriminatory Harassment*: It is against this policy to engage in verbal or physical conduct that denigrates or shows hostility or aversion toward an individual because of his or her race, color, gender, religion, sexual orientation, age, national origin, disability, or other protected category (or that of the individual's relatives, friends, or associates) that: (1) has the purpose or effect of creating an intimidating, hostile, humiliating, or offensive working environment; (2) has the purpose or effect of unreasonably interfering with an individual's work performance; or (3) otherwise adversely affects an individual's employment opportunities.

Depending on the circumstances, the following conduct may constitute discriminatory harassment: (1) epithets, slurs, negative stereotyping, jokes, or threatening, intimidating, or hostile acts that relate to race, color, gender, religion, sexual orientation, age, national origin, or disability; and (2) written or graphic material that denigrates or shows hostility toward an individual or group because of race, color, gender, religion, sexual orientation, age, national origin, or disability and that is circulated in the workplace, or placed anywhere in school premises such as on a student's desk or workspace or on school equipment or bulletin boards. Other conduct may also constitute discriminatory harassment if it falls within the definition of discriminatory harassment set forth above.

It is against policy to retaliate against a student for filing a complaint of discriminatory harassment or for cooperating in an investigation of a complaint of discriminatory harassment.

Reporting of Harassment: If you believe that you have experienced or witnessed sexual harassment or other discriminatory harassment by any employee, report the incident immediately to your instructor or principal. Possible harassment by others with whom the School of Practical Nursing has a business relationship, including customers and vendors, should also be reported as soon as possible so that appropriate action can be taken.

The BCTC program director will promptly and thoroughly investigate all reports of harassment as discreetly and confidentially as practicable. The investigation would generally include a private interview with the person making a report of harassment. It would also generally be necessary to discuss allegations of harassment with the accused individual and others who may have information relevant to the investigation. The school's goal is to conduct a thorough investigation, to determine whether harassment occurred, and to determine what action to take if it is determined that improper behavior occurred.

If the program director determines that a violation of this policy has occurred, it will take appropriate disciplinary action against the offending party, which can include counseling, warnings, suspensions, and termination. Employees who report violations of this policy and employees who cooperate with investigations into alleged violations of this policy will not be subject to retaliation.

Compliance with this policy is a condition of each student's continuation in the program. Students are encouraged to raise any questions or concerns about this policy or about possible discriminatory harassment with the instructor or principal.

Equal Opportunity Educator

Boone Career and Technical Center School of Practical Nursing is an equal opportunity educator and employer. Accommodation is available upon request for those with documented disabilities. To request disability accommodations, please contact the BCTC administrator or LPN coordinator, 3505 Daniel Boone Pkwy, Suite B, Foster, WV 25081 (304)-369-4585 to discuss their individual needs for accommodations.

Non-Discrimination Notice

NON-DISCRIMINATION NOTICE:

Per Title IX-ADA 504, the Boone Career and Technical Center (BCTC) does not discriminate based on race, color, religion, national origin, gender, sexual orientation, disability, age, or marital status in any of its policies, procedures, or practices as required by Title IX, Section 504, and ADA regulations. For inquiries concerning Title IV, please contact the BSC Safe Schools Director at 304-369-8276. For inquiries concerning 504/ADA, please contact the Director for Exceptional Children at 304-369-8245. Inquiries may also be submitted in writing to Boone County Schools, 69 Avenue B, Madison, WV 25130.

Appendix A

Policies and Agreements

Appendix A-1: DRUG SCREENING GUIDE

1. Rationale

Boone Career & Technical Center has a campus-wide, zero-tolerance policy toward the abuse of all drugs, including alcohol. Under the scope of this guideline, eligibility for participation in the healthcare programs is established by a negative/normal drug screen as noted in the key definitions section.

2. Scope and Mission

It is the mission of BCTC to provide a safe environment for employees, students, and visitors. A safe environment will be attained by the management of situations involving drugs and alcohol regarding individuals who use or misuse any prescriptions or illegal substances.

3. Key Definitions

- <u>Adulteration</u> The process of adding chemical substances to urine to change the result of the drug screens.
- <u>Confirmation Test</u> A test that is performed after a positive result on a screening sample.
- <u>Diluted Sample</u> A sample with a specific gravity below the acceptable level as defined by the laboratory that performs the testing.
- <u>Drug Screen</u> A drug screen is the laboratory testing performed on urine, blood, hair, or saliva/oral fluid samples, to determine the presence or absence of specified drugs or their metabolized traces.
- Health Care Programs All courses, certificate, and degree programs where the student
 must participate as a member of the health/human services care team in an outside agency
 as part of the educational requirement.
- <u>Negative/Normal</u> Results of a drug screen that does not include adulteration of the sample, the presence of illegal substances, alcohol, or the abuse of prescription drugs.
- <u>Positive/Abnormal</u> Results of a drug screen that reveal use of an illegal substance, alcohol
 or a diluted or adulterated sample.
- <u>Prescription</u> A valid prescription issued to the student by a licensed healthcare provider authorized to issue such prescription and used for its intended purpose as prescribed before any expiration date.
- <u>Substance-</u> Any drugs, other substances whether ingested, inhaled, injected
 (subcutaneously, or otherwise) that have known mind altering or function-altering effects.

4. Drug Treatment Programs

Any student on Methadone/Suboxone maintenance shall agree to random drug/alcohol screening at their expense which may be on a more frequent basis than other individuals enrolled in the program. Any drug screening on these individuals, whether at the time of admission or after enrollment in the nursing program, shall specifically test for Methadone/Suboxone and differentiate any positive results for opiates and other substances.

Further, these individuals must have their treating physician submit a written statement to the Program Coordinator on a monthly basis verifying their compliance with treatment and ability to function safely as a practical nursing student. Any individual on Methadone/Suboxone maintenance will provide results of any drug screening conducted by the individual's treating physician to the Coordinator of the PN program. Any evidence of noncompliance with treatment and/or any drug screen that is positive for any substance other

than Methadone/Suboxone for which the individual has no valid prescription and has not declared prior to the drug screen shall be grounds for immediate dismissal from the nursing program.

5. Drug Screening

All LPN students will be tested to verify a negative/normal drug and alcohol screening throughout their enrollment in the program. Testing will occur prior to the student's admission into a healthcare program. Drug screenings must be completed by the agency authorized to conduct screenings for Boone Career & Technical Center. Student's drug screening results will be processed as follows:

- a. <u>Adulterated Sample</u> If a drug screening result is reported as adulterated by the laboratory, the student will not be placed at a clinical site for the healthcare program. If a negative drug screen is a condition of acceptance, the student will not be accepted into the program/course with an adulterated drug screening result.
- b. <u>Dilutes</u> If the drug screening result is reported as diluted, the student will be notified that he/she may be re-tested within 24 hours of notification of the diluted result.
- c. <u>Positive Illegal</u> If a student has a positive drug screen, he/she will not be allowed to participate in any clinically based healthcare program for a period of 24 months. After 24 months, should a student reapply to a clinically based program and re-test positive, that individual shall be permanently barred from all clinically based healthcare programs at Boone Career and Technical Center.
- d. <u>Positive Prescription</u> Students testing positive for a prescription medication must have a valid prescription issued to the student by a licensed healthcare provider. Upon receipt of documentation of the prescription, the student's positive drug screening result will be considered on a case-by-case basis.
- e. <u>Negative/Normal</u> Students whose drug screening result is negative/normal may be subject to retesting if at any time there is reasonable suspicion of substance abuse.

5. Re-Testing

Time Frame – All students will be subject to re-testing prior to the beginning of the student's clinical experience. Students with positive results will not be allowed to continue in the LPN program.

6. Drug Test Failure

If a student fails his/her initial drug test because of a diluted sample, he/she will have the option of retesting within 24 hours of notification of the student. Students will be allowed to re-test one time.

7. Reasonable Suspicion

Any student displaying inappropriate behavior that causes a faculty member, professional preceptor, or administrator to have a reasonable suspicion that the behavior is due to a violation of this guide, will be required to re-test. The professional who observed the behavior is to bring that behavior to the attention of the LPN instructor and nurse coordinator. A consultation will be held with the vocational director who will make the decision regarding re-testing. If the director is not available, it will be left to the discretion of the LPN instructor and nurse coordinator. Such behavior or conduct includes but is not limited to the following:

 Observable phenomena such as direct observation of drug use or physical symptoms or manifestations of being under the influence of a drug.

- Any student exhibiting the above symptoms will be required to submit a health assessment at their expense. The results of the assessment should be reported to the Program Instructor within seven days.
- A student's behavior has caused or contributed to an accident that resulted in injury requiring treatment by a licensed healthcare professional or substantial property damage, or
- A student is convicted by a court of an offense related to use of a drug, alcohol, or controlled substance.

8. Confidentiality

- All test results will be handled on a confidential basis in accordance with all state and federal requirements.
- All students will be required to sign an agreement as requested by the clinical affiliate authorizing the school to release information (i.e., drug screening results) to the clinical agency for the healthcare program.

9. Tested Substances

Drug screening may include but is not limited to testing for the following substances: marijuana, amphetamines, cocaine, opiates, phencyclidine, and/or alcohol.

I understand that as a requirement for enrollment in the LPN program, I must submit to a drug test, which will provide the result of the test to the designated school official. I understand that if the test result is anything other than negative/normal, I will be denied participation in the program pursuant to the Drug Screening Guide.

I further understand that I may be subject to random drug tests while enrolled and additional testing under certain circumstances described in the Guide. A drug test that is anything other than negative /normal or my refusal to submit to drug testing will result in dismissal from the program.

By signing this document, I indicate that I have read, understand, and agree to adhere to the principles outlined in this guide. Further, I understand that a negative/normal drug test is required for admission into the healthcare program. I consent to the release of the drug test results to the designated school official. I also acknowledge that my results may be shared with the clinical agencies where I obtain clinical practice.

Student Signature	Date
LPN Faculty Signature	 Date

Appendix A-2: Health Physical Form Boone Career and Technical Center School of Practical Nursing

Health Physical Examination Form			
Student Name:	Date of Birth:	Date of Exam:	
Address:	Phone Number:	BCTC ID #	
Next of Kin: In case of emergency notify			
Name:	Address:	Relationship:	
Phone (work): Phone (Home): Phone (cell):			

To be completed by a licensed health care provider, such as a physician, certified registered nurse practitioner or physician assistant prior to entering the program. Additional comments may be attached on a separate piece of paper.

	Check if WNL	Abnormality noted and com	ments
General appearance			
Skin			
Eyes and Ears			
Endocrine			
Head and Neck			
Nose, Sinuses, Mouth, Throat & Teeth			
Lungs and Chest			
Heart			
Abdomen			
Neurologic			
Musculoskeletal			
Breasts			
Reproductive			
List any allergies the student has:			None

Do you recommend any limitations to physical activities?	Yes	No
If yes, please explain:		
In your professional opinion, do you think that this student has an	Yes	No
adequate state of physical and mental health to function in a clinical		
nursing program?		
If no, specify your concern(s):		
General Comments:		
*To my knowledge the information supplied on this health form is	s accurate and c	omplete.
, 5		•
Health Cons Browidge Circusture / Data	a a litha Carra Duar :	
Health Care Provider Signature/Date	ealth Care Provi	der Address
Health Care Provider Printed Name	ealth Care Provi	der Phone

4.21.2023

Appendix A-3: ATTENDANCE AGREEMENT

ATTENDANCE POLICY

The mission of Boone Career & Technical Center School of Practical Nursing is to provide the opportunity for all students to be partners in a quality education which fosters the development of the individual talents and promotes emotional and physical well-being. Regular attendance is essential in promoting responsibility and success in the program. Our policy reflects the premise that all absences, whether excused or unexcused, result in the loss of instructional time. Daily teaching and interaction of students and instructors cannot be duplicated. Consistent with this belief, the attendance policy for all LPN students at the Boone Career & Technical Center is as follows:

Students accrue eight (8) hours each clinical or classroom/lab day up to 32 hours per week. Students receive points for attendance and performance; therefore, absences will result in a score of zero (0) for that day. Students who are enrolled in the practical nursing courses must adhere to the following attendance policies:

- Students can miss no more than ten (10) days of class/lab. Clinical absences must not exceed two (2) for fundamentals and medical-surgical nursing, and one (1) for any specialty area (geriatrics, obstetrics, pediatrics, mental health, and pharmacology).
- After a student has been absent from class/lab for two (2) days, the student will be given a verbal warning.
- After a student has been absent from class/lab for four (4) days, the student will be given a
 written warning.
- After a student has been absent from class/lab for (6) days, a conference will be held, and the student will be placed on probation.
- When student absences exceed the equivalent of ten (10) days, the student is subject to immediate dismissal from the program.
- Tardiness is unacceptable in the workplace. A student is considered tardy if more than five (5) minutes late for class or clinical. Tardiness of fifteen (15) minutes or more is counted as an absence.
- Students who have two (2) tardy incidents will receive a written warning.
- Three (3) tardy incidents will result in one (1) day's absence on the student's record.
- After five (5) tardy incidents, students are subject to immediate dismissal.
- Students must notify the instructor promptly if an absence or tardy occasion occurs. Failure to notify the instructor (no call/no show) is unacceptable.
- Students who incur a no call/no show absence or tardy occasion will receive a verbal warning AND will receive a "zero" on any assignments that are missed on that day.
- Students who incur a 2nd no call/no show will receive a written warning and a conference will be held.
- Students who incur three (3) no call/no show occasions are subject to immediate dismissal.

- Three (3) days are allowed for the death in the immediate family (parents, spouse, or children). These days are not counted into the absence total for dismissal; however, all assignments must be completed. If clinical hours are missed, these must be made up.
- Students must make up all content covered during an absence. Make-up work must be submitted by the deadline assigned by the instructor. Make-up tests must be taken on the next class day after an absence.
- Make-up days may be scheduled to make up clinical absences incurred due to hospitalization or other extenuating circumstances at the discretion of the program coordinator. No more than two (2) make-up days will be scheduled for clinical absences.

GENERAL PROVISIONS OF THE AGREEMENT

- A. The education of the students shall be the primary purpose of the educational program.
- B. Students will cooperate with school faculty and peers in completing skill sets. This means that students will rotate in role modeling the health care worker and the patient.
- C. Instructors shall assist students in achieving clinical goals by completing the supervision and evaluation of students and assigning tasks which are consistent with specified objectives.

CONFIDENTIALITY

Medical ethics should guide the conduct of the LPN student. Students shall **NOT**, in any manner, discuss outside of the classroom/clinical setting any procedures, patient identifiers, or private information regarding patients and/or volunteers. No photos shall be taken, and no information is to reach the internet. Any questions or concerns regarding a privacy issue should be directed toward the instructor immediately. Patient's/Volunteers' privacy is a top priority; therefore, ANY violation of the HIPAA Privacy Act of 1996 will result in expulsion of the student from the health science program.

TERMS

The terms of this agreement shall become effective on the student's enrollment and remain in effect for the duration of the school year.

Student Signature	Date
LPN Faculty Signature	Date

Appendix A-4: Academic Integrity Policy

Academic integrity is a hallmark of professionalism. Students must be honest and ethical in submitting their own academic work and report any violations by other students. All nursing students must exhibit academic integrity throughout their enrollment in the BCTC School of Practical Nursing. Academic dishonesty will not be tolerated and will result in the student being disciplined and possibly dismissed from the program. In addition, the actions may be reported to the West Virginia Board of Examiners for Practical Nurses.

Academic dishonesty includes submitting any information or material that is used for academic credit. Submitting work that is not self-created gives that student an unfair advantage over other students in the program. Types of academic dishonesty include plagiarism, cheating, fabrication or falsification, facilitation, and other academic conduct specifically prohibited by the course instructors.

- <u>Plagiarism</u>: submitting work that is the property of another, such as the direct use of another's content or the use of another's words, ideas, or media without complete and accurate acknowledgment
- <u>Cheating</u>: relying on unauthorized resources to gain information for an assignment or examination, such as the use of textbooks without authorization during an examination
- <u>Fabrication</u>: misrepresentation, forgery, or fraud in presenting assignments for academic credit, such as falsifying citations, data, or other records
- <u>Facilitation</u>: providing unauthorized materials or assistance to another student with the intent to commit academic dishonesty
- <u>Collusion</u>: working with another student on an individual assignment without an instructor's permission
- <u>Misrepresentation</u>: giving false information or omitting to provide information with the intent to deceive an instructor for academic credit
- Other prohibited academic conduct: engaging in behavior specifically prohibited by a faculty member in the course syllabus or the student handbook

By signing this document, I indicate that I have read, understand, and agree to adhere to the principles outlined in this handbook. I understand that academic dishonesty will result in disciplinary action and may result in dismissal from the program.

Student Signature	Date
LPN Faculty Signature	 Date

Appendix A-5: Confidentiality and Professional Conduct Statement

It is the obligation of Boone Career and Technical Center School of Practical Nursing to maintain the confidentiality of all patient medical record infromation and to protect the patient's right to privacy. As a student of the school of practical nursing, I understand that I am never to discuss or review for personal purposes, any information from a patient's medical record or information relating to the care and treatment of any and all clients in the clinical setting.

I understand that any violation of an portion of the policies and procedures of the school of practical nursing or the state and federal regulations governing the patient's right to privacy will result in cause for immediate termination as a student of the nursing program.

I understand that I am accountable to the West Virginia State Board of Examiners for Licensed Practical Nurses for adhering to Title 10: Policies Regulating Licensure of the Licensed Practical Nurse (10CSR3) and the Criteria for Determining Scope of Practice for Licensed Nurses and Guidelines for Determining Acts that May be Delegated or Assigned by Licensed Nurses (WV Board of Examiners for Registered Professional Nurses and WV State Board of Examiners for Licensed Practical Nurses).

I understand that my conduct while a student both on and off campus could result in dismissal from the program for irresponsible behaviors. The BCTC School of Practical Nusring strongly supports the standards of the healthcare profession regarding the need for nursing students to be persons of good moral character who demonstrate responsible behaviors. Conduct derogatory to the morals or standing of the school of practical nursing may be reason for dismissal from the program. Examples of unacceptable conduct will include, but are not limited to criminal activities (misdemeanors, felonies, etc.), cheating/dishonesty, substance abuse, harassment, discrimination, or breach of patient confidentiality.

By signing this document, I indicate that I have read, understand, and agree to adhere to the principles outlined in this handbook. I understand that breaches in confidentiality and professional conduct will result in disciplinary action and may result in dismissal from the program.

Student Signature	Date
LPN Faculty Signature	Date

APPENDIX A-6: Student Contract for Clinical Rotations

Student agrees to abide by the following rules and regulations during clinical/ classroom experiences and all other class-related activities:

- 1. Provide proof of vaccination against communicable disease.
- 2. A negative drug screen is required before the student can enter the clinical facility.
- 3. Be punctual for all classes and clinical experiences.
- 4. Notify the clinical instructor immediately if tardy or absent. If during specialty rotation, notify school instructor AND specialty clinical facility of tardiness or absence. Clinical experiences cannot be made up; therefore, absences and tardiness will affect the clinical grade.
- 5. Clinical experiences are a part of the education program, and the student may not receive any type of compensation for services during clinical rotations.
- 6. It is the student's responsibility to know, understand, and adhere to the guidelines and procedures of each clinical site. The student will be courteous, efficient, and accurate in all assigned tasks.
- 7. The student may not go to any clinical training facility except during the specified clinical times without the prior approval of the instructor.
- 8. The student will be supervised by the LPN instructor, or a preceptor assigned by the clinical agency during the clinical assignment. The evaluation will be used to assign a clinical grade. Any concerns regarding the evaluation process will be discussed with the LPN coordinator or instructors.

9. The student will adhere to the following **DRESS CODE**:

- A. The required uniform specified by the clinical program will be worn to ALL clinical facilities.

 The uniform is to be clean and neat.
- B. Student nametag must be worn during ALL clinical times. For liability reasons, the student MAY NOT participate in clinical rotations without wearing a nametag.
- C. Clean waterproof black clinical shoes or sneakers must be worn with the uniform.
- D. Minimal jewelry is to be worn i.e., limit jewelry to a clinical watch with a second hand, post earrings and/or a wedding band.
- E. Hair must be neat and clean. Long hair must be pulled back, secured, and off the collar of uniform. Facial hair must be neatly trimmed so that masks can be worn correctly.
- F. Good personal hygiene is essential. No perfumes or cologne will be worn during clinical rotations. Cosmetics should be used in moderation.
- G. No eating, drinking, chewing gum, or smoking while at the clinical site.
- H. Nails will be clean, neatly trimmed, and manicured. No artificial nails are permitted.

10. The student will adhere to the following **CODE OF CONDUCT**:

- A. Comply with any instruction from the LPN instructor or clinical preceptor immediately and without question while at the clinical setting.
- B. Do not visit other units, nor leave the assigned unit unless authorize to do so.
- C. Do not discuss your private life while in the presence of patients.
- D. Illnesses and conditions that are observed in the clinical setting will not be discussed with or in the presence of patients.

- E. Do ONLY what you are assigned to do. Make sure that you understand the directions before providing patient care.
- F. Perform only those procedures that you can perform safely. Do not perform any task unless you have been authorized to do so by your clinical instructor.
- G. Always ask your instructor if you are unsure about a patient's condition.
- H. NEVER leave a patient unattended until side rails are secure and a call light in reach, and safety measures in place according to that patient's plan of care.
- I. Respect and properly care for all equipment and clinical supplies.
- J. Do not make personal telephone calls or text during clinicals. Cell phones must be silent.
- K. Observe strict infection control measures and follow all facility safety rules.
- L. Use good safety measures, such as picking up items from the floor, cleaning up spills, using good body mechanics.
- M. If an accident occurs while in the clinical area, notify your supervisor and complete an incident form.

11. The student will adhere to the following **CONFIDENTIALITY STATEMENT**:

The undersigned hereby acknowledges his/her responsibility under applicable federal law and the Agreement between Boone Career & Technical Center and the health care facility to keep confidential any information regarding patients, as well as all confidential information of the health care facility. The undersigned agrees, under penalty of law, not to reveal to any person or persons except authorized clinical staff and associated personnel any specific information regarding any patient, and further agrees not to reveal to any third party any confidential information of the health care facility.

12. The student will adhere to the following **CODE OF ETHICS**:

- A. Keep all patient information confidential. Do not discuss patient information with others at home, in school, or anywhere outside the facility.
- B. Respect the rights of peers and professionals. Conduct yourself in a professional manner.
- C. Perform ONLY procedures for which you have been trained and are legally permitted to do.
- D. Treat all patients equally regardless of race, religion, social or economic status, sex, and nationality. Provide care for all individuals to the best of your ability.
- E. Be honest and trustworthy with equipment, money, and time. Report all errors immediately to your supervisor or instructor. Never hide or fail to report any mistakes.
- F. Always maintain a professional attitude, realizing that your behavior and appearance are a reflection on yourself, your school, and the LPN program.
- 13. The student must complete clinical training in each component of nursing to be eligible for licensure.
- 14. Violations of the rules and regulations in this contract may result in termination of the student's clinical rotation. This will result in a grade of "F" for the clinical grade.

15. Student **STATEMENT OF RESPONSIBILITY**:

For and in consideration of the benefit provided the student in the form of experience in evaluation and treatment of patients of the health care facility, the undersigned agrees to be solely responsible for any injury or loss sustained by the student while participating in the BCTC LPN program and the health care facility unless such injury or loss arises solely out of the health care facility's gross negligence or willful misconduct.

Student Name	Birth Date	
Street Address		
City, State, Zip	Phone #	
Emergency Contact	Phone #	
Student Signature	DATE	
LPN Faculty Signature	DATE	

Appendix A-7: Authorization to Release Information – Clinical Affiliates

affiliates upon requrest. I understand that this in requirements set forth by these institutions in re	_, hereby authorize Boone Career and Technical comprehensive health examination, any eck), and drug screen results to any of the clinical formation will be utilized to determine if I meet the lation to being eligible to participate in clinical training of this authorization shall have the same force and
Student Signature	Date
LPN Faculty Signature	 Date

Appendix A-8: Authorization to Release Information – Board of Practical Nursing

I,	e. This authorization includes but is not limited ports or records relating to my physical, mental, me; any medical or hospital bills relating to my to my attendance at any school; employment is; military or government service records; and on Fund, Social Security Administration,
I agree to cooperate fully with the Board of Practical Nuregarding such information with respect to my legal cohave the same force and effect as the original.	
Student Signature	 Date
	 Date

Appendix A-9: Statement of Understanding – Background Check Procedures

I understand that a conviction of felony or misdemeanor requires decomentation with a letter of explanation to the school of practical nursing prior to entering the nursing program.

I understand such disclosure does not guarantee that I will be allowed to enter and complete the nursing program and any admittance will be provisional.

If I am allowed to enter the nursing program, I understand I must also send a copy of the documentation of the felony or misdemeanor (other than parking tickets) with a letter of explanation to the WV State Board of Examiners for Licensed Practical Nurses, 100 Dee Drive, Suite 100, Charleston, WV 25311.

I understand that a copy of the above documentation must be provided to the BCTC School of Practical Nursing at the same time of submission to the WV State Board of Examiners for Licensed Practical Nurses.

I understand that even if I complete the nursing program, the WV State Board of Examiners for Licensed Practical Nurses or any other state board of nursing may or may not allow examination for licensure as a practical nurse.

I acknowledge that I have read and understood the background check procedures required by the School of Practical Nursing. Failure to comply with one or all of the items outlined may result in immediate dismissal from the nursing program.

Student Signature	Date
LPN Faculty Signature	Date

Appendix B

Clinical Forms and Course Objectives

APPENDIX B-1: Clinical Evaluation Tool

Boone Career and Technical Center School of Practical Nursing

Student:	Instructor:
student	IIIStructor.

	PROCEDURE	SATISFACTORY/	UNSATISFACTORY/	NOT
		DATE	DATE	PERFORMED
Α.	Professional Behavior & Accountability			
1.	Uniform & shoes neat and clean			
2.	Wears photo ID badge			
3.	Appropriate grooming and hygiene			
4.	Has necessary supplies (pen, watch,			
	stethoscope)			
5.	Appears alert and interested			
6.	On time to the clinical site. Contacts			
	Instructor per policy when absent or late			
7.	Reports on/off duty to appropriate			
	person.			
8.	Communicate appropriately with patients,			
	staff, and Instructors; manage stressful			
	situations appropriately; actively seek			
	learning opportunities			
9.	Demonstrate professional and ethical			
	behavior; work within current scope of			
	practice; follow specific instructions given			
	by Instructor and staff			
В.	Data Collection & Assessment			
1.	Gather pertinent data from patient's			
	history and physical information on chart			
2.	Identify/report potential hazards for			
	patients and staff including patient			
	symptoms of communicable diseases, and			
	follow standard precautions			
3.	Identify risk factors for disease/illness,			
	complications associated with diagnosis,			
	patient abilities/limitations in self-care,			
	and unhealthy behaviors for preventing			
	complications through patient teaching.			
4.	Gather medication information as			
_	directed by Instructor			
5.	Identify all roles of the nurse and identify/			
	integrate age and developmental stages in			
	providing care throughout the lifespan			

	Identify family roles, dynamics and		
6	stressors for the patient and family		
	members, including		
	spiritual/religious/value system of patient		
	and impact on providing care		
C.	Planning		
1.	Identify, participate, and begin to		
Δ.	prioritize problems based on data		
	collection and patient condition in		
	planning care comprising the physical,		
	psychological, social, cultural, and spiritual		
	needs of the patients; begin to review and		
	revise plan of care as needed		
2.	Develop problem statement/modify plan		
	of care based on data collection, including		
	age-specific and developmental aspects,		
	and anticipation of patient needs based		
	upon patient condition/medical diagnosis		
3.	Identify scope of practice of assistive		
	personnel		
4.	Participate in educational activities/		
	attend multidisciplinary patient care		
	conferences		
	1 1		
D.	Implementation		
D.	(Includes Skills and Documentation)		
D.	(Includes Skills and Documentation) Utilize developed care plans to provide		
	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of		
1.	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations		
	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based		
1.	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care		
1.	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without		
 1. 2. 3. 	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision		
1.	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the		
1. 2. 3.	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration		
1. 2. 3. 4.	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly		
1. 2. 3. 4.	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care		
1. 2. 3. 4.	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care Document correctly, using the		
1. 2. 3. 4. 5. 6.	(Includes Skills and Documentation) Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care Document correctly, using the appropriate facility and school forms		
1. 2. 3. 4.	Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care Document correctly, using the appropriate facility and school forms Notifies Instructor/ staff of changes in		
1. 2. 3. 4. 5. 6.	Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care Document correctly, using the appropriate facility and school forms Notifies Instructor/ staff of changes in patient/resident status		
1. 2. 3. 4. 5. 6.	Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care Document correctly, using the appropriate facility and school forms Notifies Instructor/ staff of changes in patient/resident status Review accuracy of patient/ resident		
1. 2. 3. 4. 5. 6.	Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care Document correctly, using the appropriate facility and school forms Notifies Instructor/ staff of changes in patient/resident status Review accuracy of patient/ resident orders following facility's policies to		
1. 2. 3. 4. 5. 6.	Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care Document correctly, using the appropriate facility and school forms Notifies Instructor/ staff of changes in patient/resident status Review accuracy of patient/ resident orders following facility's policies to prevent treatment error and perform all		
1. 2. 3. 4. 5. 6. 7.	Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care Document correctly, using the appropriate facility and school forms Notifies Instructor/ staff of changes in patient/resident status Review accuracy of patient/ resident orders following facility's policies to prevent treatment error and perform all invasive and non-invasive skills safely		
1. 2. 3. 4. 5. 6.	Utilize developed care plans to provide care for patients experiencing a variety of common health alterations Perform prioritized interventions based on problem statement/plan of care Follows through/ can function without constant supervision Provide practical nursing care for the patient experiencing a health alteration commonly found in the elderly Provide safe, effective care Document correctly, using the appropriate facility and school forms Notifies Instructor/ staff of changes in patient/resident status Review accuracy of patient/ resident orders following facility's policies to prevent treatment error and perform all		

	prevent organism transmission and use of		
	sterile and aseptic technique		
10			
10.	Identify professional limitations and scope		
	of practice and perform all roles of the		
	nurse		
11.	Provide correct body alignment/		
	assistance with ROM exercise/		
	ambulation; provide non-pharmacological		
	management of pain; schedule activities		
	to promote rest; and implement		
	interventions to prevent neurological,		
	cardiovascular, respiratory, endocrine,		
	and urinary complications, reporting		
	complications to the appropriate person		
	as necessary		
12.	Identify legal and ethical issues affecting		
	patient/ family and staff members		
13.	Use effective communication skills with		
	patient, family members, and staff;		
	alternative communication devices/		
	assistive devices for patient and family		
14.	Provide least restrictive environment and		
	follow facility policies regarding initiation,		
	monitoring, and documentation of		
	restraint use		
15.	Provide a safe environment for patient,		
	family members, and staff; recognize		
	safety and environmental hazards; follow		
	procedures for handling biohazardous		
	materials; and assist in facility evacuation		
	policies for internal and external disasters		
16.	Follow plan to assist patient in meeting		
	safety needs related to diagnosis and		
	prescribed treatments including		
	verification of patient identity prior to		
	performing interventions on patient;		
	follow facility policies and inspection of		
	equipment for safety; and provide patient		
	with appropriate methods to signal/call		
	staff members		
17.	Perform age-specific and developmental		
	aspects necessary for care based on		
	patient abilities; identify personal values/		
	beliefs and respect differing personal		
	choices/ lifestyle of patient; and manage		
	patient valuables according to facility		
	policy		
		<u> </u>	

18.	Perform nursing skills safely using			
	appropriate steps as identified in skills			
	checklist; according to facility policy and			
10	procedures			
19.	Use correct medical terminology and			
	approved abbreviations giving an accurate reflection of patient status			
20.	Document accurate focused assessment			
20.	data collection			
E.	Evaluation			
1.	Evaluate nursing interventions and offer			
1.	suggestions for modification of the			
	nursing care plan			
2.	Evaluate methods used to control			
۷.	infectious agents			
3.	Evaluate communication techniques for			
.	patient, family members, staff and			
	understanding of patient confidentiality			
4.	Evaluate components of informed			
	consent, invasive procedures performed			
	for the patient, and potential			
	complications of medical treatments			
Insti	ructor Comments:			
Stuc	ent Comments:			
Stuc	ent Signature:			
5.00	Date:			
			1	
Insti	ructor Signature:			
	Date:			
	L.	1	i .	

Signature does not indicate student's agreement with evaluation. It only indicates that the student has read this evaluation. Instructors will make notations referring to specific instances and dates when objectives were not met.

APPENDIX B-2 BCTC School of Practical Nursing SPECIALITY CLINICAL ROTATION TIME SHEET

Student NAME:	_ Clinical Site:

DATE		Time IN	Time OUT	SIGNATURE/Comments
	Mon.			
	Tues.			
	Wed.			
	Thurs.			
	Fri.			
	Mon.			
	Tues.			
	Wed.			
	Thurs.			
	Fri.			
	Mon.			
	Tues.			
	Wed.			
	Thurs.			
	Fri.			

SUPERVISOR SIGNATURE	DATE

APPENDIX B-3: Student Medical Release Form

Printed Student Name:	
	at the above-named student is fully released for vould limit their capacity to provide care in the healthcare of meet the following requirements for the clinical setting:
items heavier than 50 lbs. with the use of carts, har patients of all heights and weights. The work occas	y objects of 30 pounds or greater. They must transport nd trucks or assistance. They must support, lift, and move ionally requires climbing and/or balancing, stooping, shing, and pulling. All extremities must be able to perform plete an 8-hour shift.
Physician Comments:	
Physician's Signature	Date
Please attach an official script or work release from	m the health care provider's office.
	health and understand that if I am unable to meet the ves the right to dismiss me from the clinical setting.
Patient/Student Signature	Date

Boone Career and Technical Center School of Practical Nursing APPENDIX B-4: Master Skill Checklist

	PROCEDURE	SATISFACTORY/	UNSATISFACTORY/	NOT
		DATE	DATE	PERFORMED
	HYGIENE			
	BED BATH			
	PERINEAL CARE – FEMALE			
	PERINEAL CARE – MALE			
	SHAMPOO			
	SHAVE			
	SHOWER			
	ORAL CARE			
	DENTURE CARE			
	NAIL CARE			
	GROOM HAIR			
	EYE CARE			
	EYE GLASS CARE			
	CATHETER CARE			
	HEARING AID			
	PERSONAL CARE & COMFORT			
	BACK RUB			
	BED MAKING OCCUPIED			
	BED MAKING UNOCCUPIED			
	DRESSING/UNDRESSING			
	INCONTINENCE CARE – BRIEFS			
	NUTRITION			
	SERVING MEAL TRAY			
	REMOVING MEAL TRAY			
	FEEDING A CLIENT			
	ASPIRATION PRECAUTIONS			
	CONTINUOUS FEEDING PUMP			
	BOLUS FEEDING			
	TUBE PLACEMENT VERIFICATION			
	G-TUBE SITE CARE			
	SAFETY			
	VEST RESTRAINT			
	WRIST RESTRAINT			
	BED/CHAIR ALARM/WANDER GUARDS			
	FLUID			
	MEASURING INTAKE AND OUTPUT			
	EMPTYING BEDPAN			
-	ASSIST WITH URINAL/BSC			
	ASSIST WITH OININAL/DSC			1

EMPTY JP/PENROSE DRAIN		
ANTHROPOMETRIC MEASUREMENTS		
HEIGHT		
WEIGHT - WHEELCHAIR SCALE		
WEIGHT - STANDING SCALE		
WEIGHT - BED SCALE		
BODY MASS INDEX		
HEAD CIRCUMFERENCE (INFANT)		
SPECIMEN COLLECTION		
URINE – CLEAN CATCH		
URINE – 24 HOUR		
URINE – VIA CATH PORT		
BLOOD – VENIPUNCTURE		
BLOOD – CAPILLARY PUNCTURE		
BLOOD – POINT-OF-CARE-TESTING		
STOOL		
STOOL HEMOCCULT		
SPUTUM CULTURE		
WOUND CULTURE		
THROAT/NASAL SWAB		
NASOPHARYNGEAL SWAB		
INFECTION CONTROL		
HAND HYGIENE		
GOWN		
GLOVES		
MASK/RESPIRATOR		
GOGGLES/FACESHIELD		
DOUBLE BAGGING		
OPENING STERILE PACKAGING		
PREPARING STERILE FIELD		
ADDING ITEMS TO A STERILE FIELD		
STERILE GLOVING		
WRAPPING FOR AUTOCLAVING		
AUTOCLAVE / STERILIZE INSTRUMENTS		
LIFTING, MOVING, POSITIONING		
SUPINE		
FOWLERS		
SEMI-FOWLERS		
SIDE-LYING		
SIM'S		
PRONE		
LITHOTOMY		
MOVING UP IN BED		
RANGE OF MOTION EXERCISES		
LIFT SHEET		
HEEL PROTECTORS		
HELLINOTECTORS		

SPLINTS/BRACES/PROSTHETIC BRACE		
TRANSFERS		
BED – STRETCHER		
BED – WHEELCHAIR		
WHEELCHAIR - TOILET		
MECHANICAL LIFT		
AMBULATION		
GAIT BELT		
CANE		
WALKER		
CRUTCHES		
VITAL SIGNS		
TEMPERATURE - ORAL		
TEMPERATURE – TYMPANIC		
TEMPERATURE – RECTAL		
TEMPERATURE - AXILLARY		
PULSE – APICAL		
PULSE – RADIAL		
PULSE – DOPPLER		
BLOOD PRESSURE – MANUAL		
BLOOD PRESSURE – AUTOMATED		
RESPIRATIONS		
PULSE OXIMETER		
PAIN ASSESSMENT		
OXYGENATION		
NASAL CANULA		
MASK		
FLOW METER ADJUSTMENTS		
INCENTIVE SPIROMETER		
SUCTIONING – YANKAUER		
SUCTIONING – CATHETER		
SUCTIONING – INLINE		
CHEST PERCUSSION		
TRACHEOSTOMY CARE		
CHEST TUBE CARE		
URINARY		
FOLEY CATHETER INSERTION – MALE		
FOLEY CATHETER INSERTION – FEMALE		
FOLEY CATHETER REMOVAL		
FOLEY CATHETER IRRIGATION		
INTERMITTENT CATHETERIZATION		
APPLY CONDOM CATHETER		
APPLY PUREWICK CATHETER		
GASTROINTESTINAL		
NASOGASTRIC TUBE – INSERTION		
NASOGASTRIC TUBE – REMOVAL		

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Z-TRACK METHOD IM		
SUBCUTANEOUS INJECTION		
INSULIN ADMINISTRATION		
INTRADERMAL INJECTION		
INTRAVENOUS FLUID ADMINISTRATION		
DISCONTINUE IV FLUIDS		
IV PIGGYBACK MED ADMINISTRATION		
IV MAINTENANCE – FLUSH		
OPTHALMIC		
OTIC		
TOPICAL		
INHALANT - INHALER		
INHALANT - AEROSOL		
SUBLINGUAL		
TRANSDERMAL		
RECTAL/ VAGINAL		

Basic Nursing Skills

Standard Category	Specific Objectives
Professional	Attend full clinical day without being tardy or leaving earlier; maintain
Behavior and	professional appearance; bring all necessary equipment.
Accountability	2. Demonstrate professional and ethical behavior; work within current scope of
	practice; follow specific instructions given by instructor and staff.
	3. Communicate appropriately with patients, staff, and instructors; manage
	stressful situations appropriately; actively seek learning opportunities.
	4. On time to the clinical site. Contacts instructor per policy when absent or
	late.
	5. Reports on/off duty to appropriate person.
	6. Communicate appropriately with patients, staff, and instructors; manage
	stressful situations appropriately; actively seek learning opportunities.
	Demonstrate professional and ethical behavior; work within current scope of practice; follow specific instructions given by instructor and staff.
Data Collection and	1. Gather pertinent data from patient's history and physical information in the
Assessment	chart.
	2. Identify/report potential hazards for patients and staff including patient
	symptoms of communicable diseases and follow standard precautions.
	3. Identify risk factors for disease/illness, complications associated with
	diagnosis, patient abilities/limitations in self-care, and unhealthy behaviors
	for preventing complications through patient teaching.
	4. Gather medication information as directed by instructor.
	5. Identify family roles, dynamics and stressors for the patient and family
	members, including spiritual/religious/value system of patient and impact on
	providing care.
	6. Gather medication information as directed by instructor.
Planning	Identify, participate, and begin to prioritize problems based on data
	collection and patient condition in planning care comprising the physical,
	psychological, social, cultural, and spiritual needs of the patient; begin to
	review and revise plan of care as needed.
	Develop problem statement/modify plan of care based on data collection,
	including age-specific and developmental aspects, and anticipation of
	patient needs based upon patient condition/medical diagnosis.
	3. Identify scope of practice of assistive personnel.
	 Participate in educational activities/attend multidisciplinary patient care conferences.
Implementation	Utilize developed care plans to provide care for patients experiencing a
(Includes Skills and	variety of common health alterations.
Documentation)	2. Perform prioritized interventions based on problem statement/plan of care.
	3. Follows through/can function without constant supervision. 4. Provide practical pursing care for the national experiencing health alteration.
	 Provide practical nursing care for the patient experiencing health alteration commonly found in the elderly.
	commonly lound in the elderry.

- 5. Provide safe effective care.
- 6. Document correctly, using the appropriate facility and school forms.
- 7. Notifies instructor/staff of changes in patient/resident status.
- 8. Review accuracy of patient/resident orders following facility's policies to prevent treatment error and perform all invasive and non-invasive skills safely.
- 9. Demonstrate knowledge/correct use of precautionary measures necessary to prevent organism transmission and use of sterile and aseptic technique.
- 10. Identify professional limitations and scope of practice and perform all roles of the nurse.
- 11. Provide correct body alignment/assistance with ROM exercise/ambulation; provide non-pharmacological management of pain; schedule activities to promote rest; and implement interventions to prevent neurological, cardiovascular, respiratory, endocrine, and urinary complications, reporting complications to the appropriate person as necessary.
- 12. Identify legal and ethical issues affecting patient/family and staff members.
- 13. Use effective communication skills with patients, family members, and staff; alternative communication devices/assistive devices for patient and family.
- 14. Provide the least restrictive environment and follow facility policies regarding initiation, monitoring, and documentation of restraint use.
- 15. Provide a safe environment for patients, family members, and staff; recognize safety and environmental hazards; follow procedures for handling biohazardous materials; and assist in facility evacuation policies for internal and external disasters.
- 16. Follow plan to assist patient in meeting safety needs related to diagnosis and prescribed treatments including verification of patient identity prior to performing interventions on patient; follow facility policies and inspection of equipment for safety; and provide patient with appropriate methods to signal/call staff members.
- 17. Perform age-specific and developmental aspects necessary for care based on patient abilities; identify personal values/beliefs and respect differing personal choices/lifestyle of patient; and manage patient valuables according to facility policy.
- 18. Perform nursing skills safely using appropriate steps as identified in skills checklist, according to facility policy and procedures.
- 19. Use correct medical terminology and approved abbreviations giving an accurate reflection of patient status.
- 20. Document accurate focused assessment data collection.

Evaluation

- 1. Evaluate nursing interventions and offer suggestions for modification of the nursing care plan.
- 2. Evaluate methods used to control infectious agents.
- 3. Evaluate communication techniques for patients, family members, staff and understanding of patient confidentiality.
- 4. Evaluate components of informed consent, invasive procedures performed for the patient, and potential complications of medical treatments.

Medical-Surgical Nursing

Standard Category	Specific Objectives
Professional Behavior	Comply with professional standards in appearance, attitude, and behavior
and Accountability	appropriate for the clinical settings.
	2. Has all necessary supplies, e.g. (watch, stethoscope, pen, scissors).
	3. Maintain safe, respectful, and confidential environment for patient, self and
	others.
	4. On time to the clinical site. Contacts instructor per policy when absent or
	late.
	5. Demonstrate professional responsibility and dependability by complying
	with facility and clinical policies.
	6. Communicate appropriately with patients, staff, and instructors; manage
	stressful situations appropriately; actively seek learning opportunities.
	7. Display good judgment, seeking appropriate guidance as needed.
	8. Appropriately respond to direction and constructive feedback.
	9. Demonstrate management and supervisory skills.
	10. Demonstrate resourcefulness, use initiative, and display critical thinking and
	problem-solving skills. 11. Demonstrate professional and ethical behavior; work within current scope
	of practice; follow specific instructions given by instructor and staff.
	12. Constructively use extra time to maximize care, update patient information,
	and identify further learning opportunities.
	13. Effectively and efficiently, manage limited resources and contain costs.
	14. Displays effective time management skills.
Data Collection and	Apply theories of nursing, growth and development, and patient needs to
Assessment	patient situations.
Assessment	Demonstrate basic clinical skills with a multi-patient load.
	3. Utilize information from patient's chart, electronic records, and existing care
	plans.
	4. Collect accurate objective and subjective data and identify deviations from
	normal.
	5. Gather medication information as directed by instructor.
	6. Complete ongoing patient assessment recognizing deviations from baseline.
	7. Interpret accurate objective and subjective data.
Planning	1. Contribute to the plan of care by providing objective, subjective, and
	diagnostic patient data.
	Collaborate with health care team members during patient care.
	3. Determine patient and family understanding of patient rights and treatment
	plan.
	4. Prioritize patient care according to Maslow's Hierarchy of Needs and
	analyze data utilizing critical thinking and creative problem-solving
	techniques.
	5. Modify nursing plan of care according to nursing process.

Implementation	Utilize developed care plans to provide care for clients experiencing a
(Includes skills and	variety of health alterations.
documentation	 Monitor patient, including vitals, visual or auditory cues, intake and output.
documentation	Provide practical nursing care for the client experiencing multiple health
	alterations commonly found in geriatric patients.
	4. Competently execute nursing interventions in an organized, timely, safe,
	and efficient manner.
	5. Adapt nursing care in response to changes in patient condition and based on
	age-appropriateness.
	6. Provide nursing care to the medical-surgical patient.
	7. Administer medications and parenteral therapies accurately and safely,
	using the nine rights of medication administration.
	8. Provide accurate patient and family teaching within your current scope of
	practice.
	9. Document correctly, using the appropriate facility and school forms.
	10. Notify appropriate faculty or staff of significant data, including changes in
	patient condition.
	11. Review accuracy of patient/resident orders following facility's policies to
	prevent treatment error.
	12. Demonstrate knowledge/correct use of precautionary measures necessary
	to prevent organism transmission and use of sterile and aseptic technique.
	13. Identify legal and ethical issues affecting patient/family and staff members.
	14. Proactively manage hazards in the patient's environment.
	15. Use correct medical terminology and approved abbreviations giving an
	accurate reflection of patient status.
	16. Document accurate focused assessment data collection.
	17. Facilitate continuity of care in all documentation and communication.
Evaluation	Accurately document patient care.
	2. Report any variances, incidents, or irregular occurrences.
	3. Evaluate and provide input on the patient's response to nursing care and
	determine if needs have been met.
	4. Provide input on effectiveness of patient and family teaching.
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Clinical Maternal

Standard Category	Specific Objectives
Professional Behavior	1. Maintain a safe, respectful, and confidential environment for patients, self
and Accountability	and others.
	2. Delegate care appropriately.
	 Demonstrate professional responsibility and dependability by complying with facility and clinical policies.
	Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings.
	5. Display good judgment, seeking appropriate guidance as needed.
	6. Appropriately respond to direction and constructive feedback.
	Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.
	Serve as a positive role model, encouraging teamwork and cooperation among health care team members.
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.
	12. Employ appropriate practices to manage stress and to encourage proper self-care.
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.
	14. Effectively and efficiently, manage limited resources and contain costs.15. Actively participate in learning activities, including clinical and educational opportunities.
Data Collection and	Demonstrate clinical skills for maternal and newborn patients.
Assessment	2. Utilize patient's chart, electronic records, and existing care plans.
	3. Interpret accurate objective and subjective data collection.
	4. Contribute to ongoing patient assessment.
	5. Recognize changes in patient status.
Planning	Incorporate patient data in contributing to the plan of care.
	2. Modify nursing plan of care, according to the nursing process.
	3. Prioritize patient care according to Maslow's Hierarchy of Needs, using
	critical thinking and creative problem-solving techniques.

Implementation 1. Execute nursing interventions in an organized, timely, safe, and efficient manner. (Includes skills and 2. Adapt nursing care in response to changes in patient condition and based on documentation age-appropriateness. 3. Perform skills associated with maternal and newborn care. 4. Administer medications accurately and safely, utilizing the Nine Rights of Medication Administration. 5. Perform skills associated with maternal and newborn care. 6. Provide accurate patient and family teaching within your current scope of practice. 7. Facilitate continuity of care in all documentation and communication. 8. Notify appropriate faculty or staff of significant data, including changes in patient condition or staffing. 9. Proactively manage hazards in the patient's environment. **Evaluation** 1. Report on responses to nursing care. 2. Report any variances, incidents, or irregular occurrences. 3. Collaborate with members of the healthcare team to modify plan of care.

Clinical Pediatrics

Standard Category	Specific Objectives
Standard Category Professional Behavior and Accountability	 Specific Objectives Maintain a safe, respectful, and confidential environment for patient, self and others. Delegate care appropriately. Demonstrate professional responsibility and dependability by complying with facility and clinical policies. Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings. Display good judgment, seeking appropriate guidance as needed. Appropriately respond to direction and constructive feedback. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice. Maintain effective communication and interpersonal relationships with
	 Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students. Serve as a positive role model, encouraging teamwork and cooperation among health care team members. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs. Employ appropriate practices to manage stress and to encourage proper self-care. Constructively use time to maximize care, update patient information, and identify further learning opportunities. Effectively and efficiently, manage limited resources and contain costs. Actively participate in learning activities, including clinical and educational opportunities.
Data Collection and Assessment	 Demonstrate clinical skills for pediatric patients. Utilize patient's chart, electronic records, and existing care plans. Interpret accurate objective and subjective data collection. Contribute to ongoing patient assessment. Recognize changes in patient status.
Planning	 Incorporate patient data in contributing to the plan of care. Modify nursing plan of care, according to the nursing process. Prioritize patient care according to Maslow's Hierarchy of Needs, using critical thinking and creative problem-solving techniques.

Implementation (Includes skills and documentation	 Execute nursing interventions in an organized, timely, safe, and efficient manner. Adapt nursing care in response to changes in patient condition and based on age-appropriateness. Administer medications accurately and safely, utilizing the Nine Rights of Medication Administration. Provide accurate patient and family teaching within your current scope of practice. Facilitate continuity of care in all documentation and communication. Notify appropriate faculty or staff of significant data, including changes in patient condition or staffing. Proactively manage hazards in the patient's environment.
Evaluation	 Report on responses to nursing care. Report any variances, incidents, or irregular occurrences. Collaborate with members of the healthcare team to modify plan of care.

Mental Health Clinical

Standard	Specific Objectives
Category	
Professional	1. Maintain a safe, respectful, and confidential environment for patients, self and
Behavior and	others.
Accountability	2. Delegate care appropriately.
	3. Demonstrate professional responsibility and dependability by complying with facility
	and clinical policies.
	 Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings.
	5. Display good judgment, seeking appropriate guidance as needed.
	6. Appropriately respond to direction and constructive feedback.
	7. Demonstrate professional and ethical behavior, functioning within your current
	LPN/LVN student scope of practice.
	8. Maintain effective communication and interpersonal relationships with patients,
	family, facility staff, faculty, and students.
	Serve as a positive role model, encouraging teamwork and cooperation among health care team members.
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.
	 Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.
	12. Employ appropriate practices to manage stress and to encourage proper self-care.
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.
	14. Effectively and efficiently, manage limited resources and contain costs.
	15. Actively participate in learning activities, including clinical and educational opportunities.
	16. Reinforce patient teaching on violence prevention.

Data Collection 1. Demonstrate clinical skills for mental health patients. and Assessment 2. Utilize patient's chart, electronic records, and existing care plans. 3. Interpret accurate objective and subjective data collection. 4. Contribute to ongoing patient mental health assessment. 5. Recognize changes in patient mental health status. 6. Recognize signs and symptoms of acute and chronic mental illness. 7. Identify signs and symptoms of impaired cognition of patient. 8. Identify changes in patient mental status. 9. Monitor patient and family responses to interventions and treatment plans. 10. Monitor patient and family for signs and symptoms of abuse/neglect. 11. Identify patient risk factors for domestic, child, elder abuse/neglect, and sexual 12. Recognize patient and family risks for abuse/neglect. 13. Identify patient signs and symptoms of alcohol/drug dependency, withdrawal, and toxicity. **Planning** 1. Incorporate patient data in contributing to the plan of care. 2. Modify nursing plan of care, according to the nursing process. 3. Prioritize patient care according to Maslow's Hierarchy of Needs, using critical thinking and creative problem-solving techniques. 4. Assist family in planning care for patient with impaired cognition. 5. Assist in planning care for patient with acute or chronic mental illness. Implementation 1. Execute nursing interventions in an organized, timely, safe, and efficient manner. 2. Adapt nursing care in response to changes in patient condition and based on age-(Includes skills appropriateness. and documentation 3. Perform skills associated with the mental health patient. 4. Promote a safe environment for the patient. 5. Reinforce patient and family teaching on substance abuse and coping strategies to help prevent future abusive situations. 6. Support victims/suspected victims of abuse and their families. 7. Document patient substance abuse. Set limits on inappropriate patient behaviors. 8. Encourage patients and family to participate in support groups and counseling. 9. Provide care to patients experiencing alcohol/drug withdrawal or toxicity. 10. Review patient and family reactions to chemical dependency diagnosis. 11. Assist in teaching patient and family about diagnosis and s/sx of mental illness. 12. Recognize cultural issues that could affect patient and family understanding/acceptance of diagnosis.

17. Use crisis intervention techniques as appropriate for patients.

13. Assist patients in developing and using strategies to decrease anxiety. 14. Assist patient with acute or chronic mental illness in self-care activities. 15. Develop and maintain therapeutic relationships with patients and family. 16. Encourage patient and family participation in group/family therapy.

- 18. Use interventions to assist patients in controlling behavior.

	 Use therapeutic interventions to increase patient understanding of own behavior. Orient patient to reality. Proactively manage hazards in the patient's environment. Participate in community meetings. Participate in group therapy sessions for patients with psychosocial disorders. Administer medications accurately and safely, utilizing the Six Rights of Medication Administration. Provide accurate patient and family teaching within your current scope of practice. Facilitate continuity of care in all documentation and communication. Notify appropriate faculty or staff of significant data, including changes in patient
	condition or staffing.
Evaluation	Provide input into the patient's response to interventions, determining if patient needs have been met.
	2. Provide input into the modifications made to nursing plan of care for effectiveness.
	Provide input into the patient and family knowledge obtained from patient teaching sessions.
	4. Monitor patient adherence to treatment plan.
	5. Monitor patient alterations in mood, judgment, cognition, and reasoning.
	6. Monitor patient and family reactions to diagnosis.

Specialties: Emergency Room (Observation Only)

Standard Category	Specific Objectives
Professional Behavior	1. Maintain a safe, respectful, and confidential environment for patient, self and
and Accountability	others.
	2. Delegate care appropriately.
	3. Demonstrate professional responsibility and dependability by complying with facility and clinical policies.
	4. Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings.
	5. Display good judgment, seeking appropriate guidance as needed.
	6. Appropriately respond to direction and constructive feedback.
	7. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.
	9. Serve as a positive role model, encouraging teamwork and cooperation among health care team members.
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.
	12. Employ appropriate practices to manage stress and to encourage proper self-care.
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.
	14. Effectively and efficiently, manage limited resources and contain costs.
	15. Actively participate in learning activities, including clinical and educational opportunities.
Data Collection	Following the completion of this observational experience the student will be able to:
	Describe the purpose and process of triage.
	2. Differentiate between primary and secondary survey.
	3. Identify facts that should be documented during an emergency.
	4. Describe signs and symptoms of fractures and discuss treatment of fractures.
	5. List the recommendations for tetanus prophylaxis.
	6. What is the protocol for patients experiencing chest pain?
	7. Describe normal vital signs for the adult, infant (1-12 mo.), and child.
	8. What is the role of the LPN in the emergency room?9. What information is given to a patient upon discharge from the ER?
	10. Discuss any advanced training required to work in the ER?
	2

This is an observation only rotation. Please have the verification form completed.

Assignment:
Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:
Remember: This is an observational experience only. At no time during this experience should the student administer medications or perform treatments/patient care.

Specialties: Community Health/Clinic (Observation Only)

Standard Category	Specific Objectives
Professional Behavior and Accountability	Maintain a safe, respectful, and confidential environment for patients, self and others.
·	2. Delegate care appropriately.
	3. Demonstrate professional responsibility and dependability by complying with facility and clinical policies.
	4. Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings.
	5. Display good judgment, seeking appropriate guidance as needed.
	6. Appropriately respond to direction and constructive feedback.
	7. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.
	9. Serve as a positive role model, encouraging teamwork and cooperation among health care team members.
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.
	12. Employ appropriate practices to manage stress and to encourage proper selfcare.
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.
	14. Effectively and efficiently, manage limited resources and contain costs.
	15. Actively participate in learning activities, including clinical and educational opportunities.

Data Collection Following the completion of this observational experience the student will be able to: 1. Identify the role of the nurse during prenatal visits. 2. Identify components of routine prenatal visits. 3. Discuss topics that should be included in pre-natal education. 4. Identify the role of the nurse and the nurse practitioner. 5. Identify the preferred schedule for routine well baby exams. 6. Discuss components of the well-baby exams. 7. Discuss educational topics that should be covered with the parent during well baby exams. 8. Identify the role of the nurse in the immunization clinic. 9. Discuss the routine immunization schedule for children. 10. Discuss the role of the LPN in the office. 11. Discuss the variety of patients seen in the office. 12. List specific tasks performed by the nurse to prepare the patient to be seen by the physician/nurse practitioner. 13. Discuss the procedure for documenting both patient visits and telephone calls received in the office. 14. Recognize roles of site-specific health care workers and differentiate how each coordinates individual patient care. **This is an observation only rotation**. Please have the verification form completed. **Assignment:** Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Community Health/Day Care (Observation Only)

Standard Category	Specific Objectives
Professional Behavior	Maintain a safe, respectful, and confidential environment for patient, self and
and Accountability	others.
	2. Delegate care appropriately.
	3. Demonstrate professional responsibility and dependability by complying with facility and clinical policies.
	4. Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings.
	5. Display good judgment, seeking appropriate guidance as needed.
	6. Appropriately respond to direction and constructive feedback.
	7. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.
	9. Serve as a positive role model, encouraging teamwork and cooperation among health care team members.
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.
	12. Employ appropriate practices to manage stress and to encourage proper selfcare.
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.
	14. Effectively and efficiently, manage limited resources and contain costs.
	15. Actively participate in learning activities, including clinical and educational opportunities.

Following the completion of this observational experience the student will be able to:

- 1. State the individual roles of staff members at the center. State the educational requirements for the various staff roles at the center.
- 2. State the ratio of staff per child for each age group at the center.
- 3. Describe precautions implemented at the center to prevent transmission of infection. Include all areas- daycare rooms, kitchen, and bathrooms.
- 4. Know the safety measures the center has in place to protect the privacy of the children and the safety of each child.
- 5. Describe which developmental stage according to the psychosocial theory of Erickson are the children you observed supposed to be mastering.
- Describe which developmental stage according to the cognitive theory of Piaget are the children you observed are supposed to be mastering. List one method of discipline used to resolve conflict specific to each age group that was observed.
- 8. Describe the type of play typical of each age group that was observed.
- 9. Discuss nutritional management of the children at the Daycare & Development Center.
- 10. List guidelines the center used to foster developmental (cognition & language) skills of the age group observed.

This is an observation only rotation. Please have the verification form completed.

Assignment:

Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Home Health/Hospice Experience (Observation Only)

Standard Category	Specific Objectives				
Professional Behavior and Accountability	Maintain a safe, respectful, and confidential environment for patient, self and others.				
,	2. Delegate care appropriately.				
	3. Demonstrate professional responsibility and dependability by complying with facility and clinical policies.				
	4. Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings.				
	5. Display good judgment, seeking appropriate guidance as needed.				
	6. Appropriately respond to direction and constructive feedback.				
	7. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.				
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.				
	9. Serve as a positive role model, encouraging teamwork and cooperation among health care team members.				
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.				
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.				
	12. Employ appropriate practices to manage stress and to encourage proper self-care.				
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.				
	14. Effectively and efficiently, manage limited resources and contain costs.				
	16. Actively participate in learning activities, including clinical and educational opportunities.				

Following the completion of this observational experience the student will be able to:

- 1. Express the facility's primary goal in delivering specialized patient care.
- 2. Differentiate between palliative and curative care.
- 3. Describe auxiliary services organized and offered by hospice agencies.
- 4. Explain the collaboration efforts between the hospice agency and the local community, including volunteer service opportunities.
- 5. Identify the role of the LPN in the hospice facility.
- 6. Discuss the procedure for admitting, evaluating, and providing care for the hospice patient.
- 7. Recognize the stages of grieving experienced by patients with a terminal illness or the families of an expired patient.
- 8. List specific interventions for the relief of pain for hospice patients.
- 9. Explain the role hospice plays in supporting dignity, pain management, quality of life, and emotional stability for patients and families surrounding end-of-life care.
- 10. Discuss components of holistic care.
- 11. List types of insurance approved for the services rendered by hospice care agencies.

This is an observation only rotation. Please have the verification form completed.

Assignment:

Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Outpatient Care (Observation Only)

Standard Category	Specific Objectives		
Professional Behavior and Accountability	 Maintain a safe, respectful, and confidential environment for patient, self and others. Delegate care appropriately. 		
	 Demonstrate professional responsibility and dependability by complying with facility and clinical policies. 		
	 Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings. 		
	5. Display good judgment, seeking appropriate guidance as needed.		
	6. Appropriately respond to direction and constructive feedback.		
	7. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.		
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.		
	 Serve as a positive role model, encouraging teamwork and cooperation among health care team members. 		
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.		
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.		
	12. Employ appropriate practices to manage stress and to encourage proper self-care.		
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.		
	14. Effectively and efficiently, manage limited resources and contain costs.		
	15. Actively participate in learning activities, including clinical and educational opportunities.		

Following the completion of this observational experience the student will be able to:

- 1. Explain criteria classifying this site as an outpatient area.
- 2. List typical outpatient evaluations, procedures, services, treatments, and preventative health measures taken at this facility.
- 3. What is the role of the LPN in the outpatient facility?
- 4. Discuss any advanced training required to work in the outpatient facility.
- 5. Describe the patient clientele associated with this outpatient facility.
- 6. Recognize patient education opportunities for clients of this clinic.
- 7. Identify protocols for greeting, screening, evaluating, treating, scheduling, and dismissing patients from the outpatient area.
- 8. What are the days, hours, and access to care available to the patients of the outpatient facility?
- 9. List common diagnostic tests performed at this site.
- 10. Describe the facility's role in the maintenance of health and wellness for the clients of the outpatient department.

This is an observation only rotation. Please have the verification form completed.

Assignment:

Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Radiology (Observation Only)

Standard Category	Specific Objectives		
Professional Behavior and Accountability	Maintain a safe, respectful, and confidential environment for patient, self and others.		
and Accountability	Delegate care appropriately.		
	 Demonstrate professional responsibility and dependability by complying with facility and clinical policies. 		
	 Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings. 		
	5. Display good judgment, seeking appropriate guidance as needed.		
	6. Appropriately respond to direction and constructive feedback.		
	7. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.		
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.		
	Serve as a positive role model, encouraging teamwork and cooperation among health care team members.		
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.		
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.		
	12. Employ appropriate practices to manage stress and to encourage proper self-care.		
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.		
	14. Effectively and efficiently, manage limited resources and contain costs.		
	15. Actively participate in learning activities, including clinical and educational opportunities.		

Following the completion of this observational experience the student will be able to:

- 1. List the departments in medical imaging and include a brief description of each type of specialized testing procedure.
- 2. Describe the importance of time, distance and shielding in the protection of the health care provider and the patient in radiographic testing procedures.
- 3. Discuss the procedure for documenting the completion of the ordered test and method of transferring/adding the data to the patient's record.
- 4. Recognize roles of site-specific health care workers and differentiate how each coordinates individual patient care.
- 5. Discuss special precautions utilized in obtaining radiographic tests/scans for patients with known communicable diseases.
- 6. Identify specialized equipment utilized for positioning patients for optimal radiographic results.
- 7. Describe the use of passive dosimeters in radiology departments and the method and time frame of measurement required to sustain facility safety standards.
- 8. Discuss methods of communication used by the radiology team members when a patient is in obvious pain/distress.
- 9. List specific tasks completed by radiology technicians. This could include MRI, US, CT, Nuclear Medicine, and Mammography.

This is an observation only rotation. Please have the verification form completed.

Assignment:

Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Endoscopy (Observation Only)

Standard Category	Specific Objectives			
Professional Behavior and Accountability	Maintain a safe, respectful, and confidential environment for patients, self and others.			
	2. Delegate care appropriately.			
	3. Demonstrate professional responsibility and dependability by complying with facility and clinical policies.			
	4. Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings.			
	5. Display good judgment, seeking appropriate guidance as needed.			
	6. Appropriately respond to direction and constructive feedback.			
	7. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.			
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.			
	9. Serve as a positive role model, encouraging teamwork and cooperation among health care team members.			
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.			
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.			
	12. Employ appropriate practices to manage stress and to encourage proper self-care.			
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.			
	14. Effectively and efficiently, manage limited resources and contain costs.			
	15. Actively participate in learning activities, including clinical and educational opportunities.			

Following the completion of this observational experience the student will be able to:

- 1. Identify the role of the LPN in the preparation and execution of the endoscopic procedure.
- 2. Discuss sedation and comfort medications administered in the endoscopic procedure.
- 3. Explain the primary risks associated with the endoscopic procedure.
- 4. Describe essential components of the informed consent form.
- 5. List the pre-procedure steps to prepare a patient for endoscopy.
- 6. Recognize infection prevention measures utilized throughout the procedure.
- 7. What are some significant signs and symptoms indicating the need for an endoscopic procedure?
- 8. Describe any changes in the patient's condition throughout the procedure.
- 9. List specialized equipment utilized to perform an endoscopy.
- 10. Differentiate esophagogastroduodenoscopy (EGD), endoscopic retrograde cholangiopancreatography (ERCP) and colonoscopy, and sigmoidoscopy.
- 11. What diagnostic tests may be used in conjunction with endoscopy to assist in identifying a patient diagnosis or appropriate treatment plan.
- 12. Explain the post-procedure steps including bleeding control, infection control, safety, and restrictions of patient movement.
- 13. What are examples of patient educational needs for the post-procedure individual?

This is an observation only rotation. Please have the verification form completed.

Assignment:

Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Physical/Occupational Therapy (Observation Only)

Standard Category	Specific Objectives			
Professional Behavior and Accountability	 Maintain a safe, respectful, and confidential environment for patient, self and others. Delegate care appropriately. Demonstrate professional responsibility and dependability by complying with facility and clinical policies. Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings. Display good judgment, seeking appropriate guidance as needed. Appropriately respond to direction and constructive feedback. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students. Serve as a positive role model, encouraging teamwork and cooperation among health care team members. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs. Employ appropriate practices to manage stress and to encourage proper self-care. Constructively use time to maximize care, update patient information, and identify further learning opportunities. Effectively and efficiently, manage limited resources and contain costs. Actively participate in learning activities, including clinical and educational opportunities. 			
	 Serve as a positive role model, encouraging teamwork and cooperation among health care team members. Demonstrate resourcefulness, using initiative and displaying good critic thinking and problem-solving skills. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs. Employ appropriate practices to manage stress and to encourage properself-care. Constructively use time to maximize care, update patient information, identify further learning opportunities. Effectively and efficiently, manage limited resources and contain costs. Actively participate in learning activities, including clinical and education. 			

Following the completion of this observational experience the student will be able to:

- 1. Identify the role of the physical/occupational therapist in the interdisciplinary team.
- 2. Describe registration procedures for patients, methods for insurance approval, and therapy related forms.
- 3. Discuss the role communication plays in the physical therapy setting.
- 4. Using patient therapy treatment information, report functional abilities, level of assistance needed and patient treatment compliance for observed clients.
- 5. Use medical terminology related to physical/occupational therapy appropriately.
- 6. Describe at least five different modalities used by physical/occupational therapists.
- 7. Discuss physical therapy aide's role in assisting the patient with therapeutic exercise/treatments.
- 8. Compare the difference between skill and coordination exercises.
- 9. List specialized equipment and tools used in the department and the benefit to the patient for each.
- 10. Describe adaptive strategies utilized by the physical/occupational therapist to accomplish goals for individualized patients.

This is an observation only rotation. Please have the verification form completed.

Assignment:

Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Dialysis (Observation Only)

Professional Behavior and Accountability 1. Maintain a safe, respectful, and confidential environ and others. 2. Delegate care appropriately.	
 Demonstrate professional responsibility and depend with facility and clinical policies. Comply with professional standards in appearance, a appropriate clinical settings. Display good judgment, seeking appropriate guidand. Appropriately respond to direction and constructive. Demonstrate professional and ethical behavior, fund current LPN/LVN student scope of practice. Maintain effective communication and interpersonal patients, family, facility staff, faculty, and students. Serve as a positive role model, encouraging teamwong health care team members. Demonstrate resourcefulness, using initiative and dithinking and problem-solving skills. Demonstrate cultural competency in patient care rephysical, psychosocial, cognitive, and moral needs. Employ appropriate practices to manage stress and self-care. Constructively use time to maximize care, update paidentify further learning opportunities. Effectively and efficiently, manage limited resources for poportunities. Actively participate in learning activities, including clopportunities. 	dability by complying attitude, and behavior ce as needed. e feedback. ctioning within your al relationships with ork and cooperation isplaying good critical elated to patient's to encourage proper atient information, and is and contain costs.

Following the completion of this observational experience the student will be able to:

- 1. Identify the most common disorders associated with the diagnosis of kidney failure.
- 2. Describe types of dialysis and benefits/drawbacks of each.
- 3. Discuss the consequences of uncontrolled hypertension and under controlled diabetes mellitus have on kidney physiology.
- 4. List steps in sterile procedure when accessing a dialysis port, shunt, or peritoneal port.
- 5. Recognize safety measures used to maintain a patent dialysis shunt.
- 6. Describe methods to determine the patency of a dialysis graft and nursing interventions for a suspected blocked dialysis fistula.
- 7. Discuss the role of the LPN in the dialysis unit.
- 8. Identify comfort measures provided to patients with prolonged dialysis treatments.
- 9. List emergency protocols for patients experiencing difficulties with dialysis interventions.
- 10. Identify common dialysis solutions utilized in the treatment facility.
- 11. Describe the expected effect hypertonic and hypotonic solutions have on the dialysis patient.
- 12. Recognize critical laboratory values considered by the dialysis technician or nurse. Identify sharps safety protocols utilized in the unit to prevent needle stick injuries.

This is an observation only rotation. Please have the verification form completed.

Assignment:

Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Cardiac Catheterization (Observation Only)

Standard Category	Specific Objectives			
Professional Behavior and Accountability	 Maintain a safe, respectful, and confidential environment for patient, self and others. Delegate care appropriately. Demonstrate professional responsibility and dependability by complying with facility and clinical policies. Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings. Display good judgment, seeking appropriate guidance as needed. Appropriately respond to direction and constructive feedback. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students. Serve as a positive role model, encouraging teamwork and cooperation among health care team members. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs. Employ appropriate practices to manage stress and to encourage proper self-care. Constructively use time to maximize care, update patient information, and identify further learning opportunities. Effectively and efficiently, manage limited resources and contain costs. Actively participate in learning activities, including clinical and educational opportunities. 			
	 Maintain effective communication and interpersonal relationships wit patients, family, facility staff, faculty, and students. Serve as a positive role model, encouraging teamwork and cooperatio among health care team members. Demonstrate resourcefulness, using initiative and displaying good critithinking and problem-solving skills. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs. Employ appropriate practices to manage stress and to encourage propoself-care. Constructively use time to maximize care, update patient information, identify further learning opportunities. Effectively and efficiently, manage limited resources and contain costs Actively participate in learning activities, including clinical and education 			

Data Collection Following the completion of this observational experience the student will be able to: 1. Identify the role of the LPN in the cardiac catheterization laboratory. 2. Discuss sedation and comfort medications administered in the cardiac catheterization lab. 3. Explain the primary risks associated with the cardiac catheterization 4. Describe essential components of the informed consent form. 5. List the pre-procedure steps to prepare a patient for cardiac catheterization. 6. Recognize infection prevention measures utilized throughout the procedure. 7. What are some significant signs and symptoms indicating the need for a cardiac catheterization procedure? 8. Describe any changes on the patient's 12-Lead EKG pre-operatively and throughout the procedure. 9. List specialized equipment utilized in the cardiac catheterization laboratory. 10. Define atherosclerosis ischemia, angina, infarction, STEMI, percutaneous, transluminal, and endovascular. 11. Differentiate cardiac angiogram, balloon angioplasty, and stents. 12. Recognize the benefits of reperfusion therapy. 13. Explain the post-procedure steps including bleeding control, infection control, safety, and restrictions of patient movement. 14. What are examples of patient educational needs for the post-procedure individual? **This is an observation only rotation**. Please have the verification form completed. **Assignment:** Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Pediatrician/OB Office/ School Nurse (Observation Only)

Standard Category	Specific Objectives
Professional Behavior and Accountability	Maintain a safe, respectful, and confidential environment for patient, self and others.
	2. Delegate care appropriately.
	 Demonstrate professional responsibility and dependability by complying with facility and clinical policies.
	4. Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings.
	5. Display good judgment, seeking appropriate guidance as needed.
	6. Appropriately respond to direction and constructive feedback.
	Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.
	 Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.
	Serve as a positive role model, encouraging teamwork and cooperation among health care team members.
	 Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.
	 Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.
	 Employ appropriate practices to manage stress and to encourage proper self-care.
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.
	14. Effectively and efficiently, manage limited resources and contain costs.
	15. Actively participate in learning activities, including clinical and educational opportunities.

Data Collection Following the completion of this observational experience the student will be able to: 1 Identify the role of the nurse during prenatal visits. 2 Identify components of routine prenatal visits. 3 Discuss topics that should be included in prenatal education. 4 Identify the preferred schedule for routine well baby exams. 5 Discuss components of the well-baby exams. 6 Discuss educational topics that should be covered with the parent during well baby exams. 7 Identify the role of the nurse in the immunization clinic. 9. Discuss the routine immunization schedule for children. 8 Identify the role of the nurse in outpatient obstetric agencies. 9 Identify the components of routine obstetric visits. 10 Discuss topics that should be included in obstetrical education. 11 Identify the role of the nurse in the school system. 12 Identify the components of childhood screenings performed in school. 13 Discuss the roles and responsibilities of school personnel for giving medications at school. 14 Describe the school nurse's role in training students, their caregivers, and school personnel to take care of students. 15 Identify the role of the nurse and the nurse practitioner. 16 List specific tasks performed by the nurse to prepare the patient to be seen by the physician/nurse practitioner. 17 Discuss the procedure for documenting both patient visits and telephone calls received in the office. 18 Recognize roles of site-specific health care workers and differentiate how they coordinate individual patient care. **This is an observation only rotation**. Please have the verification form completed. **Assignment:** Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be

reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Specialties: Intensive Care Unit (Observation Only)

Standard Category	Specific Objectives		
Professional Behavior and Accountability	Maintain a safe, respectful, and confidential environment for patient, self and others.		
	2. Delegate care appropriately.		
	 Demonstrate professional responsibility and dependability by complying with facility and clinical policies. 		
	 Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings. 		
	5. Display good judgment, seeking appropriate guidance as needed.		
	6. Appropriately respond to direction and constructive feedback.		
	7. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.		
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.		
	Serve as a positive role model, encouraging teamwork and cooperation among health care team members.		
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.		
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.		
	12. Employ appropriate practices to manage stress and to encourage proper self-care.		
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.		
	14. Effectively and efficiently, manage limited resources and contain costs.		
	15. Actively participate in learning activities, including clinical and educational opportunities.		

Data Collection Following the completion of this observational experience the student will be able to: 1. Differentiate the levels of care between the medical or surgical nursing floor versus the intensive care unit (ICU). 2. Describe specialized equipment utilized in the ICU setting. 3. Identify the patient to nurse ratio typically found in the ICU. 4. What is the role of the LPN in the ICU? 5. Identify frequent assessments performed by nurses on ICU patients; list the time intervals and purpose of each. 6. What information is given to a floor nurse when transferring down from the ICU? 7. Describe the protocols used by ICU staff for a patient experiencing cardiac/respiratory distress. 8. List ICU visiting hours, restrictions, and family expectations for visits. 9. Discuss the variety of patients admitted to the ICU and the acuity level of each. 10. Describe how ADLs are performed for ICU patients. 11. Recognize educational needs of family members of an ICU patient. **This is an observation only rotation**. Please have the verification form completed. **Assignment:** Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed. Other: Remember: This is an observational experience only. At no time during this

Specialties: Community Service (Observation Only)

Standard Category	Specific Objectives		
Professional Behavior and Accountability	Maintain a safe, respectful, and confidential environment for patient, self and others.		
and Accountability	Delegate care appropriately.		
	 Demonstrate professional responsibility and dependability by complying with facility and clinical policies. 		
	 Comply with professional standards in appearance, attitude, and behavior appropriate clinical settings. 		
	5. Display good judgment, seeking appropriate guidance as needed.		
	6. Appropriately respond to direction and constructive feedback.		
	7. Demonstrate professional and ethical behavior, functioning within your current LPN/LVN student scope of practice.		
	8. Maintain effective communication and interpersonal relationships with patients, family, facility staff, faculty, and students.		
	Serve as a positive role model, encouraging teamwork and cooperation among health care team members.		
	10. Demonstrate resourcefulness, using initiative and displaying good critical thinking and problem-solving skills.		
	11. Demonstrate cultural competency in patient care related to patient's physical, psychosocial, cognitive, and moral needs.		
	12. Employ appropriate practices to manage stress and to encourage proper self-care.		
	13. Constructively use time to maximize care, update patient information, and identify further learning opportunities.		
	14. Effectively and efficiently, manage limited resources and contain costs.		
	15. Actively participate in learning activities, including clinical and educational opportunities.		

Pollowing the completion of this observational experience the student will be able to: Describe the benefits of the non-profit organization in the promotion of health and wellness of the community and/or individual beneficiaries.

- 2. List geographical areas the organization serves.
- 3. Identify methods used to enlist volunteer help for the organization.
- 4. Discuss the organizational structure of the association.
- 5. Describe the process utilized to solve problems that arise to find a positive resolution.
- 6. List contact information for the association.
- 7. Identify organizational partners of the agency that collaborates for a common goal.
- 8. Discuss personal views of the mission, goals, and work of the community agency.
- 9. List two suggestions you have for improvement of the program.

This is an observation only rotation. Please have the verification form completed.

Assignment:

Answer objectives to the clinical setting you are observing. Type answers into a word document for submission. Grammar, spelling, and punctuation will be reflected in your evaluation. Attach this form to the assignment and turn it in to the instructor the day following your clinical experience or as otherwise instructed.

Other:

Handbook Acknowledgement

I acknowledge receipt of the BCTC School of Practical Nursing Policy and Procedures Manual and understand that I am responsible for its content. I have read the handbook and have been given an opportunity to discuss its content and ask questions.

I understand that these policies may change throughout the school year, and I will be made aware of them as they occur. I understand that I am responsible for adhering to the guidelines presented in the most current handbook for each course that I take in the nursing program.

Printed Name		
C:		
Signature	 	
Date		